FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

vvasiliigtori,	D.C.	20343	

	OMB APPROVAL
-1	

OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or Sec	tion 30(h)	of the	Investment	Con	npany Act	of 19	40						
1. Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol Xenon Pharmaceuticals Inc. [XENE]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
MORTIMER IAN						Zenon Frannaceuteus me. [Abith]								Director		10% Ov	·	
(Last)	(F	First)	(Middle)		Date of Earliest Transaction (Month/Day/Year)					_ x	Officer (give title below)			Other (s below)	pecify			
200 - 3650 GILMORE WAY				09/16/2019							PRESIDENT & CFO							
(Street)				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Ind	6. Individual or Joint/Group Filing (Check Applicable Line)						
BURNABY A1											X	Form filed by One Reporting Person			ı			
(City)	(5	State)	(Zip)											Form filed by More than One Reporting Person				ting
(0.13)		,																
		Та	ble I - Non-	Deriva	ative S	ecuritie	s Ac	quired, [Disp	oosed o	of, o	r Bene	ficially	Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D			action 2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.				5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)					
								Code	v	Amount		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				(IIIsu. 4)
			Table II - D (e					uired, Di , options	•		,		•	Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year	Co	insaction de (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Year			7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
							Date		vniration		0	mount r		(Instr. 4)	.,			

(D) Exercisable Date

(1)

Explanation of Responses:

\$9.44

1. Vesting over 36 months, in equal amounts, on the last day of each month.

09/16/2019

Remarks:

Stock Option

(Right to

/s/ Sherry Aulin, Attorney-in-

of Shares

135,000

\$0.00

fact

09/15/2029

Title

Common

** Signature of Reporting Person

Date

135,000

09/18/2019

D

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Code

A

(A)

135,000

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.