FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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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 Section 30(h) of the Investment Company Act of 1940

					-		()				iipaiiy Act										
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)						
PIMSTONE SIMON N.						The state of the s									X Dire		tor		10% O	wner	
(Last) (First) (Middle)							Date of Earliest Transaction (Month/Day/Year)									Officer (give title below)			Other (specify below)		
C/O XENON PHARMACEUTICALS INC						08/10/2017									President & CEO						
200 - 3650 GILMORE WAY																					
(Street)						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) BURNABY A1 V5G 4W8															X Form filed by One Reporting Person						
																Form filed by More than One Reporting Person				orting	
(City) (State) (Zip)																					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						ar) I	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ities Acquired (A d Of (D) (Instr. 3,			4 and Secu Bend Own		urities neficially		nership : Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	Amount		(A) or (D)	Price	, la	Transa	ction(s) 3 and 4)			(111511.4)					
Common Shares 08/10/							/2017		P		6,000		A	\$2	\$2.9 2		217,847		D		
Common Shares																	16,460		Ι	By Spouse	
		Та	ble II - D (e								sed of, onvertib				y Ow	ned					
1. Title of Derivative Security (Instr. 3)	e Conversion Date Execution Date, or Exercise (Month/Day/Year) if any				4. Transaction Code (Instr. B)		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3			9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	wnership orm: irect (D) r Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or	ount nber res							

Explanation of Responses:

/s/ Joanne Smartt, Attorney-in-08/14/2017

fact

** Signature of Reporting Person

Date

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).

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.