FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* ROBIN SHERRINGTON | | | | | | 2. Issuer Name and Ticker or Trading Symbol Xenon Pharmaceuticals Inc. [XENE] | | | | | | | of Reportin cable) or (give title | g Pers | son(s) to Issu 10% Ow Other (s | ner | |
|--|---|--|--|---|-----------|--|-----|--|--------------------|---|--|---|--|---|--|--|--|
| (Last) (First) (Middle) C/O XENON PHARMACEUTICALS INC | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/17/2015 | | | | | | | Bus. & Corp. D | | below) | . | |
| 200 - 3650 GILMORE WAY | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | |
| (Street) BURNABY A1 | | 1 | V5G 4W8 | _ | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) (State) (Zip) | | | | | | | | | | | | . 5.05.1. | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transat Date (Month/Date) | | | | • | Execution | | | Code (Ins | | | | Benefici | es ally Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | Code V | Amount | (A) oi (D) | Price | Transact (Instr. 3 | ion(s) | | | ,iiisti. 4) | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | |
| 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 | 4. Transactio Code (Instr) 8) | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | | |
| Stock Option (Right to Buy) | \$17.76 | 03/17/2015 | | A | | 35,000 | | (1) | 03/16/2025 | Common Shares | 35,000 | \$0.00 | 35,000 | 0 | D | | |

Explanation of Responses:

 $1.\ Vesting\ 25\%\ on\ January\ 1,\ 2016,\ and\ 75\%\ vesting\ thereafter\ over\ the\ course\ of\ the\ next\ 3\ years,\ in\ equal\ amounts,\ on\ the\ last\ day\ of\ each\ month.$

/s/ Sonia Graham, Attorney-infact

03/19/2015

** 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.