FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL OMB Number: 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 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 ]										ck all appli Directo	cable)	g Person(s) to Iss 10% Ov Other (s		vner	
(Last) (First) (Middle) C/O XENON PHARMACEUTICALS INC 200 - 3650 GILMORE WAY						3. Date of Earliest Transaction (Month/Day/Year) 08/18/2015										X below) below)  SVP Bus. & Corp. Development					
(Street) BURNABY A1 V5G 4W8				3	4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)													1 01001	•				
		Tab	le I - No	n-Deriv	ative	Se	curit	ies Ac	qui	ired, I	Dis	osed c	of, or E	ene	ficiall	y Owned	i				
			Date	. Transaction Pate Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		,   1	Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				es ally Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership			
										Code	v	Amount	(A) or (D) Pri		Price		orted isaction(s) tr. 3 and 4)		1	Instr. 4)	
Common Shares			08/18	3/2015	5				M		1,028	3 1	A (	\$4.81	3,	3,085		D			
Common Shares			08/18	3/2015	5				F		434	1	)	\$11(2)	2,	2,651		D			
Common Shares			08/18	3/2015	5				M		2,057	2,057 A		\$4.98	8(1) 4,708			D			
Common	Shares			08/18	3/2015	5				F		868	I		<b>\$11</b> <sup>(2)</sup>	3,	840 D				
		T	able II -							,		sed of onverti	,		•	Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution		4. Transaction Code (Instr. 8)		n of		Expi	6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exe	e rcisable		xpiration ate	Title	or Nu of	nount imber ares						
Stock Option (Right to Buy)	\$4.81 <sup>(1)</sup>	08/18/2015			M			1,028		(3)	08	8/24/2015	Commo Shares		,028	\$0.00	\$0		D		
Stock Option (Right to Buy)	\$4.98 <sup>(1)</sup>	08/18/2015			M			2,057		(4)	08	8/24/2015	Commo		,057	\$0.00	\$0		D		

## **Explanation of Responses:**

- 1. The exercise price was converted from \$6.07 CAD using the closing rate of exchange on the Bank of Canada on the date of grant. The actual exercise price is the Canadian dollar amount regardless of the exchange rate on the day of exercise.
- 2. Represents the closing price of the Company's common shares on August 17, 2015, converted to a Canadian dollar amount for purposes of net settlement calculations.
- 3. The shares subject to the option fully vested on October 1, 2008.
- 4. The shares subject to the option fully vested on January 1, 2009.

/s/ Sonia Graham, Attorney-in-<u>fact</u>

08/20/2015

\*\* 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.