FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
	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* <u>Hayden Michael R</u>						2. Issuer Name and Ticker or Trading Symbol Xenon Pharmaceuticals Inc. [XENE]										ip of Reporting Person(s) to plicable) ctor 10%		rson(s) to Is		
(Last) (First) (Middle) C/O XENON PHARMACEUTICALS INC						3. Date of Earliest Transaction (Month/Day/Year) 08/14/2017										Officer (give title below)		Other (specify below)		
200 - 3650 GILMORE WAY					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	BY A	1 1	/5G 4	W8											Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St	ate) (Zip)																	
		Tabl	e I - N	lon-Deriv	ative	Sec	uritie	s Ac	quire	ed, D	isposed o	f, or E	enefic	ially	Owne	ed				
- must be declarity (mean by		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			Beneficially Owned Following		ties cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	(A) or (D)	Price			ed ction(s) 3 and 4)			(Instr. 4)		
Common Shares 08/				08/14/2	017				P		15,000	A	\$2.74	98(1)	16	161,187		D		
Common Shares														75,886			I	By Wife		
Common Shares														30,348			I	By Genworks Inc. ⁽²⁾		
		Та	ble II								oosed of, convertib				wned					
Derivative Security (Instr. 3) Price of Derivative Security Date (Month/Day/Year) (Month/Day/Year) Execution Date, if any (Month/Day/Year) Month/Day/Year) Execution Date, if any (Month/Day/Year) Execution Date, if any (Month/Day/Year)			4. Transa Code (8)		Str. Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Number of Title Shares		rice of ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	/ E	LO. Ownership Form: Direct (D) Or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Explanation of Responses:

1. The "Amount" and "Price" reported in this Column 4 reflect the aggregate number and weighted-average price, respectively, of shares purchased. These shares were purchased in multiple transactions at prices ranging from \$2.745 to \$2.75, inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the SEC staff, upon request, full information regarding the number of shares purchased at each separate price within the ranges set forth herein.

2. Michael Hayden is the president and principal beneficial shareholder of Genworks Inc.

/s/ Joanne Smartt, Attorney-in**fact**

08/14/2017

Date

** Signature of Reporting Person

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.