FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHAN	IGES IN B	<b>ENEFICIAL</b>	<b>OWNERSHIP</b>

OWR APPRO	VAL
OMB Number:	3235-0287
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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

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1. Name and Address of Reporting Person*  MORTIMER IAN				2. Issuer Name <b>and</b> Ticker or Trading Symbol Xenon Pharmaceuticals Inc. [XENE]											all app		g Perso	10% C	wner	
(Last) (First) (Middle) C/O XENON PHARMACEUTICALS INC 200 - 3650 GILMORE WAY				3. Date of Earliest Transaction (Month/Day/Year) 06/24/2016										X	belov	cer (give title Other ( w) below)				
(Street) BURNAI (City)			V5G 4W8 (Zip)	3	4. If An	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	,					
		Tab	le I - Noi	n-Deriva	ative S	ecui	ritie	s Acq	uired,	Disp	osed o	f, o	r Ben	efic	ially	Owne	ed			
Date				2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)								ties cially I Following	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)				(111511.4)
Common Stock 06/2				06/24	/2016	2016		P		1,000		A	\$6.15		1,000		D			
Common Stock				06/24/2016					P		1,000		A	\$6.1		1,000		I		By spouse
Common Stock 06/2				06/24	/2016			P		2,000		A	\$6.25		3,000		I		By spouse	
Common Stock 00				06/24	/2016				P		1,300 A		\$	6.3	4,300			I	By spouse	
		Та	able II - I								sed of, onvertib					wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deem Execution if any (Month/Da	Date,	4. Transacti Code (Ins 8)	on of E		i. Date Exercisi expiration Date Month/Day/Yea		•	or		nstr. 3	Deri Sec (Inst	vative deurity Se tr. 5) Be Ow Fo Re	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ow For Dir or I (I) (	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Codo	,   , , ,					Expiration	Title	Numb of								

**Explanation of Responses:** 

/s/ Joanne Smartt, Attorney-in-06/28/2016 <u>fact</u>

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.