

Xenon Pharmaceuticals Inc.  
 Form 3  
 April 04, 2016

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0104  
 Expires: January 31, 2015  
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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,  
 Section 17(a) of the Public Utility Holding Company Act of 1935 or Section  
 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person * Â WINQUIST RAYMOND (Last) (First) (Middle)	2. Date of Event Requiring Statement (Month/Day/Year) 04/04/2016	3. Issuer Name and Ticker or Trading Symbol Xenon Pharmaceuticals Inc. [XENE]	4. Relationship of Reporting Person(s) to Issuer  (Check all applicable)  <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) Head, Translational Research	5. If Amendment, Date Original Filed(Month/Day/Year)
C/O XENON PHARMACEUTICALS INC.,Â 200 - 3650 GILMORE WAY  (Street)				
BURNABY,Â A1Â V5G 4W8  (City) (State) (Zip)		6. Individual or Joint/Group Filing(Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person		

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
No securities are beneficially owned	0	D <sup>(1)</sup>	Â

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

SEC 1473 (7-02)

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**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security	4. Conversion or Exercise	5. Ownership Form of	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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	(Instr. 4)				Price of Derivative Security	Derivative Security: Direct (D) or Indirect (I) (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
No securities are beneficially owned	⌘ (1)	⌘ (1)	N/A (1)	⌘	\$ 0	D ⌘

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
WINQUIST RAYMOND C/O XENON PHARMACEUTICALS INC. 200 - 3650 GILMORE WAY BURNABY, ⌘ A1⌘ V5G 4W8	⌘	⌘	⌘ Head, Translational Research	⌘

## Signatures

/s/ Joanne Smartt,  
Attorney-in-fact

04/04/2016

\_\_Signature of Reporting Person

Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, *see* Instruction 5(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).

(1) Not applicable

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### Remarks:

Exhibit⌘ Index:⌘ 24.1⌘ Power⌘ of⌘ Attorney

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure.

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