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Form 4 June 15, 2013 FORM Check thi if no long subject to Section 14 Form 4 of Form 5 obligation	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. STATEMENT OF CHANGES IN 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 20(b) of the Investment Company Act of 1940							OMB APPROVAL OMB 3235-0287 Number: January 31, Expires: 2005 Estimated average burden hours per response 0.5				
1(b).												
			2. Issuer Name and Ticker or Trading 5. Relation Symbol Issuer Xenon Pharmaceuticals Inc. [XENE]					Issuer	hip of Reporting Person(s) to			
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/14/2018				-	(Check all applicable) <u>X</u> Director 10% Owner Officer (give title below) Director (specify below)				
				th/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction E (Month/Day/Ye	ar) Executi any		3. Transactic Code (Instr. 8) Code V	4. Securi onAcquirec Disposec (Instr. 3, Amount	l (A) of l of (D 4 and (A) or	9) 5) Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common Shares	06/14/2018			М	8,230	A	\$ 3.7 (1)	20,258	D			
Common Shares	06/14/2018			F	2,856	D	\$ 8.3 (2)	17,402	D			
Common Shares								12,500	Ι	See Note (3)		

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

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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. Transactic Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. H Der Sec (In:
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (Right to Buy)	\$ 3.7 <u>(1)</u>	06/14/2018		М	8,230	<u>(4)</u>	06/26/2018	Common Shares	8,230	

Reporting Owners

Reporting Owner Name / Address		Relationships						
hepotong o whet funct, fruitess	Dire	ector	10% Owner	Officer	Other			
PATOU GARY C/O XENON PHARMACEUTICALS I 200 - 3650 GILMORE WAY BURNABY, A1 V5G 4W8	INC	X						
Signatures								
/s/ Joanne Smartt, Attorney-in-fact	06/15/20	18						
**Signature of Reporting Person	Date							

Explanation of Responses:

- * 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).
- (1) The exercise price was converted to U.S. dollars from \$3.74 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 in U.S. dollars on June 13, 2018, which was converted to a Canadian dollar amount for purposes of net settlement calculations.
- (3) By Gary & Karen Barbara Patou TTEE Patou Family Trust FBO Gary Patou Karen Barbara Patou.

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(4) The shares subject to the option fully vested on May 31, 2011.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.