## Edgar Filing: Xenon Pharmaceuticals Inc. - Form 4

May 06, 2015								OMB A	APPROVAL
	UNITED	STATES S					COMMISSION	ONIB	3235-0287
Check this box			vva	shington	, D.C. 20	549		Number: Expires:	January 31,
if no longer subject to Section 16. Form 4 or		STATEMENT OF CHANGES IN BENEFICIAL O SECURITIES						Estimated burden ho response.	urs per
Form 5 obligations may continue. <i>See</i> Instruction 1(b).	-	a) of the Pu	ublic U	tility Hol	ding Con		nge Act of 1934, of 1935 or Sectio 940	on	
(Print or Type Respon	ses)								
1. Name and Address TARNOW MICH		5	Symbol	r Name <b>and</b> Pharmace		Trading	5. Relationship o Issuer		
(Last) (F	First) (N			f Earliest T			(Che	ck all applicab	le)
C/O XENON PHARMACEUTI 3650 GILMORE		(	Month/I )5/04/2	Day/Year) 2015			X Director Officer (giv below)		% Owner her (specify
(S BURNABY, A1	treet) V5G 4W8			endment, D nth/Day/Yea	-	1	6. Individual or J Applicable Line) _X_ Form filed by Form filed by Person		Person
(City) (S	state)	(Zip)	Tab	le I - Non-l	Derivative	Securities A	cquired, Disposed o	of, or Beneficia	ally Owned
	nsaction Date h/Day/Year)		Date, if	3. Transactio Code (Instr. 8)	4. Securit: nAcquired Disposed (Instr. 3, 4	(A) or of (D)	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code V	Amount	or (D) Price	(Instr. 3 and 4)		
Reminder: Report on a	a separate line	for each clas	ss of secu	urities bene	ficially own	ned directly of	or indirectly.		
					inforn requir	nation cont ed to respo ys a currer	pond to the colle- ained in this form ond unless the for ntly valid OMB co	are not m	SEC 1474 (9-02)
	Tabl					posed of, or convertible s	Beneficially Owned	L	

1. Title of	2.	3. Transaction Date	3A. Deemed	4. 5. Number	6. Date Exercisable and	7. Title and Amount of	8. I
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction of Derivative	Expiration Date	Underlying Securities	Der

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities (Month/Day/Yea Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		'Year)	(Instr. 3 and 4)		(
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (Right to Buy)	\$ 13.48 (1)	05/04/2015		A	3,086	<u>(1)</u>	05/03/2025	Common Shares	3,086	
Stock Option (Right to Buy)	\$ 13.48 (2)	05/04/2015		А	1,028	(2)	05/03/2025	Common Shares	1,028	

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships					
	Director	10% Owner	Officer	Other		
TARNOW MICHAEL M C/O XENON PHARMACEUTICALS IN 200 - 3650 GILMORE WAY BURNABY, A1 V5G 4W8	NC	X				
Signatures						
/s/ Sonia Graham, Attorney-in-fact	05/06	5/2015				
<u>**</u> Signature of Reporting Person	Da	ate				

## **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).
- One-third of the total shares subject to the Option shall vest on the one year anniversary of the grant date, one-third of the total shares (1) subject to the Option shall vest on the two year anniversary of the grant date, and the balance of the total shares subject to the Option shall
- vest on the three year anniversary of the grant date.
- (2) Options shall vest 100% on the one year anniversary of the grant date.

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.

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