

[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

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

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 *				2.	2. Issuer Name and Ticker or Trading Symbol						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Peterson Amy C.				В	BeiGene, Ltd. [BGNE]								nicaoic)					
(Last) (First) (Middle)				3.	3. Date of Earliest Transaction (MM/DD/YYYY)							Director 10% Owner						
													X _ Officer (give title below) Other (specify below) CMO, Immuno-oncology					
C/O MOURANT OZANNES					8/22/2017						CMO, Immu	no-oncoi	ogy					
CORPORA	ΓE SERV	TCES,,	94															
SOLARIS A	VENUE																	
(Street)				4.	4. If Amendment, Date Original Filed (MM/DD/YYYY)						6. Individual or Joint/Group Filing (Check Applicable Line)							
CAMANA BAY, GRAND CAYMAN, E9 KY1-1108											_ X _ Form filed by One Reporting Person _ Form filed by More than One Reporting Person							
(C	ity) (Sta	te) (Zi	ip)															
			Tabl	e I - N	on-De	rivati	ive Sec	curities A	cqui	ired, Di	sposed	of, or	Ben	neficially Owne	ed			
1. Title of Security (Instr. 3) 2. Trans. Da			te 2A. Deemed Execution Date, if any		3. Trans. Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			Ownership of Indirect Beneficia	Beneficial			
						Code	V	Amount	(A) or (D)	Price	e					Indirect (Instr. 4)		
Ordinary Shares 8/22/2017			2017	,		F		28185 (1)	D	\$5.3869	<u>(2)</u>	271815		D				
	Tabl	e II - Der	ivativ	e Seci	urities	Bene	ficially	y Owned	(e.g	, puts	, calls,	warra	nts,	options, conve	rtible sec	urities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Trans. Date	3A. D Execu Date,	tion (Instr.		Acqui Dispo				6. Date Exercisable and Expiration Date		Secu Deriv	rities	Underlying Security	8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned	Ownership Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security				Code	v	(A)	(D)	Da Ex	ate cercisable	Expiration Date	Title	Ame	ount or Number of res		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	

Explanation of Responses:

- (1) Represents shares withheld to settle tax liability in connection with the vesting of a restricted share award that was previously granted on August 22, 2016. The share withholding was approved by a committee of non-employee directors in accordance with requirements of Rule 16b-3.
- (2) Calculated based off the closing price of the Company's American Depositary Shares ("ADSs") on the date thereof. Each ADS represents 13 Ordinary Shares.

Reporting Owners

Reporting Owner Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Peterson Amy C.						
C/O MOURANT OZANNES CORPORATE SERVICES,			CMO Immuno anadagy			
94 SOLARIS AVENUE	CIVIO, Illimuno-o		CMO, Immuno-oncology			
CAMANA BAY, GRAND CAYMAN, E9 KY1-1108						

Signatures

/s/ Scott A. Samuels, as Attorney-in-Fact	8/24/2017
** Signature of Reporting Person	Date

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 control number.