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Check this box if no longer subject to Section 16. Check this box								OMB Number: Expires: Estimated a burden hou response	irs per		
1(b).	, ,										
(Print or Type Responses) 1. Name and Address of Reporting Person <u>*</u> Neal James R			2. Issuer Name and Ticker or Trading Symbol XOMA Corp [XOMA]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)					(Check all applicable) Director 10% Owner			
				11/26/2014				Officer (give title _X_ Other (specify below) VP Business Development			
	(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person						
BERKELEY, CA 94710 Form filed by Mo Person											
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Secur	ities Aco	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Y	ear) Executio any	emed on Date, if Day/Year)	3. Transactio Code (Instr. 8) Code V	on(A) or D (D) (Instr. 3,	ispose 4 and (A) or	ed of	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	11/26/2014			S	1,678	D	\$ 5.67	137,760	D		
Common Shares								1,470	Ι	by 401(k)	

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. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Amou Under Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
reporting o when runne (runne so	Director	10% Owner	Officer	Other			
Neal James R C/O XOMA CORPORATION 2910 SEVENTH STREET BERKELEY, CA 94710				VP Business Development			
Signatures							
By: Russell J. Wood For: James R. Neal	5	12/01/2	2014				
**Signature of Reporting Person		Date	;				

**Signature of Reporting Person

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). **

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.