FORM 4

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

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

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

(Print or Ty	pe Response	s)																	
1. Name and Address of Reporting Person *- RUBIN PAUL D				2. Issuer Name and Ticker or Trading Symbol XOMA Corp [XOMA]							5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner							
(Last) (First) (Middle) C/O XOMA CORPORATION, 2910 SEVENTH STREET				3. Date of Earliest Transaction (Month/Day/Year) 10/18/2013								X Officer (give title below) Other (specify below) Sr. VP Clinical Dev. & CMO							
(Street) BERKELEY, CA 94710				4. If Amendment, Date Original Filed(Month/Day/Year) 10/21/2013							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	(City) (State) (Zip)					Table I - Non-Derivative Securities Acqui							quir	ired, Disposed of, or Beneficially Owned					
(Instr. 3) Da			Date			2A. Deemed Execution Date, any		(Instr. 8)		(A) or Disposed of		of (I	E(D) Beneficia Reported		nt of Securities ally Owned Following Transaction(s)		Ownership Form:	Beneficial	
					(Month/Day/Year)			ode	V	Amoun	(A) or t (D)	Pric		(Instr. 3 a	or (I)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common	Shares		10/1	8/2013	(1)			;	S		5,254 (2)	D	\$ 4.70 (3)	06	3,534			D	
Reminder:	Report on a s	separate line f	or each	Table II - 1	Deriva	ative Se	curit	ies Ac	equire	Pers cont the f	ons whained in orm dis	no responding this for this for the splays and the splays are so that the splays are spl	orm a a cur enefic	are irrent	not requ tly valid	ction of inf ired to res OMB cont	ormation spond unle rol numbe	ss	1474 (9-02)
Security	2. Conversion or Exercise Price of Derivative Security	3. Transactic Date (Month/Day/		3A. Deemed Execution Da	4. Transacti Code Year) (Instr. 8)		tion	5.		6. Date Exercisable and Expiration Date (Month/Day/Year)		7 A U S (1	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form o Derivat Securit Direct (or Indir	Ownersh (Instr. 4) D) ect	
						Code	V	(A)	(D)	Date Exer		Expirati Date	ion T	Title	Amount or Number of Shares				

Reporting Owners

	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
RUBIN PAUL D C/O XOMA CORPORATION 2910 SEVENTH STREET BERKELEY, CA 94710			Sr. VP Clinical Dev. & CMO						

Signatures

By: Russell Wood For: Paul D. Rubin	11/01/2013		
**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) This transaction was made pursuant to Rule 10b5-1 trading plan adopted by the reporting person on 3/20/2013.
 - Due to an error in the information that was provided to the reporting person by the issuer, the original Form 4 that was filed on October 21, 2013 neglected to report a sale of
- (2) 5,254 shares of Common Stock on October 18, 2013. This Form 4 amends the original Form 4 by reporting that sale and by adjusting accordingly the shares reported as beneficially owned in Table I, Column 5.
 - This transaction was executed in multiple trades ranging at prices from \$4.65 to \$4.81. The price reported reflects the weighted average sale price. The reporting person
- (3) hereby undertakes to provide upon request to the SEC staff, the Issuer or a security holder of the Issuer full information regarding the number of shares and prices at which the transactions were effected.

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.