

(Print or Type Responses)

Neal James R

(Last)

1. Name and Address of Reporting Person*

(Middle)

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

OMB APPROVAL				
OMB Number:	3235-0104			
Estimated average burden				
nours per respons	se 0.5			

INITIAL STATEMENT OF 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

3. Issuer Name and Ticker or Trading Symbol

XOMA Corp [XOMA]

2. Date of Event Requiring Statement (Month/Day/Year)

02/27/2014

(Last) (First) (Middle) C/O XOMA CORPORATION, 2910 SEVENTH STREET (Street) BERKELEY, CA 94710	02/27/	Issuer (CheckDirectorXOfficer (give ti below)		of Reporting Person(s) to c all applicable) itle 10% Owner Other (specify below) ness Development		Filed(Month 6. Individu Applicable Lii X_ Form file	5. If Amendment, Date Original Filed(Month/Day/Year) 6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person	
(City) (State) (Zip)		Table I - Non-Derivative Securities Beneficially Owned						vned
•		Bene	Beneficially Owned (Instr. 4)		3. Ownership Form: Direct (D) or Indirec (I) (Instr. 5)	: Direct r Indirect (Instr. 5)		t Beneficial Ownership
Common Shares		154,	112 (1)		D			
Common Shares		1,47	0		I	by 4	01(k)	
Reminder: Report on a separate line for each c Persons who res unless the form Table II - Deriv	spond to the displays a cu	collection of rrently valid	information OMB contro	contained in I number.				
1. Title of Derivative Security (Instr. 4)	2. Date Exerci Expiration Da (Month/Day/Year)			3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		se F D S	Ownership orm of Oerivative ecurity:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Indi	Oirect (D) or indirect (I) Instr. 5)	
Incentive Share Option (right to buy)	<u>(2)</u>	03/01/2020	Common Shares	1,041	\$ 7.35		D	
Incentive Share Option (right to buy)	11/16/2013	11/16/2019	Common Shares	37,296	\$ 10.72	5	D	
Non-Qualified Share Option (right to buy)	10/27/2013	10/27/2021	Common Shares	9,758	\$ 1.69		D	
Non-Qualified Share Option (right to buy)	(3)	02/28/2023	Common Shares	23,563	\$ 2.715		D	
Non-Qualified Share Option (right to buy)	<u>(4)</u>	07/19/2022	Common Shares	45,751	\$ 3.53		D	
Non-Qualified Share Option (right to buy)	12/01/2013	03/01/2020	Common Shares	15,625	\$ 7.35		D	
Non-Qualified Share Option (right to buy)	<u>(5)</u>	02/27/2024	Common Shares	45,000	\$ 8.91		D	
Non-Qualified Share Option (right to buy)	11/16/2013	11/16/2019	Common Shares	16,037	\$ 10.72	5	D	

Reporting Owners

		Relationships		
Reporting Owner Name / Address	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	03/03/2014
**Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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) Represents shares directly owned by Mr. Neal as of February 27, 2014, the date on which Mr. Neal became a reporting person. These shares consist of (1) 15,334 shares acquired under XOMA's Employee Share Purchase Plan; and (2) 138,778 shares underlying restricted stock units awarded to Mr. Neal through February 27, 2014.
- (2) Incentive Stock Option exercisable in installments of 347 shares per month beginning 1/1/2014 and ending 3/1/2014.
- (3) Exercisable with respect to 1/48th of options in monthly increments beginning 3/28/2013 and ending 2/28/2017.
- (4) Exercisable with respect to 1/48th of options in monthly increments beginning 8/19/2012 and ending 7/19/2016.
- (5) Exercisable with respect to 1/48th of options in monthly increments beginning 3/27/2014 and ending 2/27/2018.

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.