## FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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hours per response... 0.5

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

	pe Response													
1. Name and Address of Reporting Person* Neal James R			2. Issuer Name and Ticker or Trading Symbol XOMA Corp [XOMA]				:	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)Director10% Owner						
(Last) (First) (Middle) C/O XOMA CORPORATION, 2910 SEVENTH STREET			3. Date of Earliest Transaction (Month/Day/Year) 03/18/2014					X Officer (give title below) Other (specify below)  VP Business Development						
(Street) BERKELEY, CA 94710			4. 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 Acqu				es Acqui	lired, Disposed of, or Beneficially Owned						
(Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if	(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		Following (s)	6. Ownership Form:	Beneficial	
				(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 a	3 and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common	Shares		03/18/2014(1)		S		2,671	D	\$ 6.316 (2)	151,441	51,441		D	
														1
Common	Shares									1,470			Ī	by 401(k)
		separate line fo		Derivative Securi	ties Acquir	Person the	sons wh tained in form dis	o resp n this f splays	orm are a currer	he collec not requ ntly valid		ormation pond unles	SEC	,
Reminder:	Report on a s		Table II -	Derivative Securi	ies Acquii arrants, o	Person the ted, D	sons wh tained in form dis visposed o	o resp n this f splays of, or Be tible sec	orm are a currer eneficiall curities)	he collect not requ ntly valid	ired to res OMB cont	pond unles	SEC	401(k) 1474 (9-02)
Reminder:	Report on a s	3. Transactio Date (Month/Day/	Table II -  n 3A. Deemed Execution Day Year) any	Derivative Securi	cies Acquii arrants, o	red, Dotions 6. Dand (Mc	sons wh tained in form dis	o responding this for Botible sections Date	eneficiall curities) 7. Ti Amo Unde Secu	he collector not requestly valid by Owned the and count of erlying	ired to res OMB cont	spond unles rol number	SEC  10. Ownersi Form of Derivati Security Direct ( or Indire	11. Nature of Indirective Owners! (Instr. 4)

#### **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	03/20/2014

**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) These restricted stock units were granted on February 28, 2013 and are scheduled to vest in substantially equal installments on each of March 18, 2014, March 18, 2015, and March 18, 2016.
- (2) Shares sold on the open market to satisfy the minimum amount of taxes required to be withheld in connection with the vesting of the shares in a non-discretionary transaction pursuant to the reporting person's agreement under the Company's equity incentive plan.

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.