FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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

` .	pe Response	3)														
Name and Address of Reporting Person* Neal James R				2. Issuer Name and Ticker or Trading Symbol XOMA Corp [XOMA]						5	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) 11/24/2014						X Officer (give title below) Other (specify below) VP Business Development						
(Street) BERKELEY, CA 94710			4. If	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					s Acquir	ired, Disposed of, or Beneficially Owned						
(Instr. 3) Date		2. Transaction Date (Month/Day/Ye	Execu any	eemed tion Date, if	if C	(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)		Following	6. Ownership Form:	Beneficial	
					(Month/Day/Year)		Code	V	Amount	(A) or (D)	Price	(Instr. 3	or I		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common	Shares		11/24/2014(1				S		1,032.00	D D	\$ 5.032 (2)	139,43	8		D	
		Common Shares										1,470				by 401(k)
	Shares											1,470			I	69 401(k)
Common		separate line	for each class of s	II - Deriv	vative Secu	ıritie	es Acqu	Per cor the	rsons wh ntained ir form dis	o respo this fo plays a	rm are curren neficiall	he collec not requ itly valid		ormation pond unle rol numbe	SEC ss	,
Common	Report on a s		Table	II - Deriv (e.g.,	vative Secu	ıritie	es Acqu rrants,	Per con the ired,	rsons wh ntained ir e form dis Disposed ons, convert	o respo this fo plays a of, or Ben ible secu	rm are curren neficiall urities)	he collection not requitly valid	ired to res OMB cont	pond unle rol numbe	SEC ss r.	401(k) 1474 (9-02)
Common	Report on a s	3. Transacti Date (Month/Day	Table on 3A. Deer Executio	(I - Deriv (e.g., ned Date, if	vative Secu	s arritie s arri	es Acqu rrants,	Per con the ired, loption 6. and (M	rsons wh ntained ir form dis	o responding this for plays a left, or Bending security of the	rm are current reficially rities) 7. Tit Amo Unde Secur	he collection of requirements of the and the and the and the arriving	ired to res OMB cont	spond unle rol numbe	SEC SS T. Of 10. Owners: Form of Derivati Security Direct (i or Indirect)	11. Nature of Indire Senefici Ownersh (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	11/24/2014

**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) This transaction was made pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on May 13, 2014.
 - This transaction was executed in multiple trades ranging at prices from \$5.00 to \$5.04. The price reported reflects the weighted average sale price. The reporting person
- (2) hereby undertakes to provide upon request to the SEC staff, the Company or a security holder of the Company 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.