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* CASTELLO JOHN L				2. Issuer Name and Ticker or Trading Symbol XOMA LTD /DE/ [XOMA]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) (Middle) C/O XOMA, LTD., 2910 SEVENTH STREET			3. Date of Earliest Transaction (Month/Day/Year) 05/11/2004						X Officer (give title below) Other (specify below) Chairman, CEO & President						
(Street) BERKELEY, CA 94710				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person					
(City		(State)	(Zip)	7	Гable	I - Non	-Der	ivative S	Securities	Acqu	ired, Disp	osed of, or I	Beneficially	Owned	
1.Title of Security 2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)		(Instr. 8)		(A) or Disposed of (D (Instr. 3, 4 and 5)		of (D)	Beneficially Owned Following Reported Transaction(s)			6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	
				(Month/Day/1ea		Code	V	Amour	(A) or (D)	(Instr. 3 and 4)			or Indirect (I) (Instr. 4)		
Common Shares 05/10/200		05/10/2004			G ⁽¹⁾		15,000	0 D	\$ 3.89	45,035		D			
Common Shares											12,229		I	by 401(k)	
Common Shares									13,751		I	by Trust			
Reminder:	Report on a s	separate line fo	r each class of secur				Pers cont the f	ons what ained in orm dis	o respon n this for splays a	rm are curre	not requesting ntly valid	ction of inf uired to res OMB cont	spond unle	ess	C 1474 (9-02)
			(0	Derivative Secur e.g., puts, calls, v							ly Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/	Year) Execution Date any	4. Transaction Code (Instr. 8)	of Deri Secu Acq (A) Disp of (I	ivative urities quired or posed	and Expiration Date (Month/Day/Year) Ar Ur Se		Amo Und Secu (Ins	itle and ount of lerlying urities tr. 3 and	8. Price of Derivative Security (Instr. 5) Beneficia Owned Followin Reported Transact (Instr. 4)		Owners Form of Derivat Securit Direct or India	Beneficia Ownershi y: (Instr. 4)	
				Code V	(A)	(D)	Date Exer	e rcisable	Expiration Date	n Title	Amount or Number of Shares				

Reporting Owners

Ī	D 41 0 N 1	Relationships						
	Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
	CASTELLO JOHN L C/O XOMA, LTD. 2910 SEVENTH STREET BERKELEY, CA 94710	X		Chairman, CEO & President				

Signatures

	John L. Castello	05/11/2004
•	**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).
- Mr. and Mrs. Castello are gifting 5,000 shares each to their son, John L. Castello, Jr., and the Jeffrey Castello Family Education Trust for the benefit of Mr. Castello's
- (1) grandson. They are also gifting 2,500 shares each to their son, Jeffrey Castello, and daughter-in-law. None of the individuals reside with Mr. Castello and Mr. Castello denies any beneficial interest in the shares upon transfer.
- (2) Held indirectly under the XOMA Ltd. Deferred Savings Plan. All shares were acquired in a transaction exempt from Section 16(b).
- (3) Held indirectly under The John L. and Katherine C. Castello Trust.

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.