FORM	4
------	---

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

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

### 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 Type Responses)											
1. Name and Address of Reporting Person – BOYLE J DAVID II	]	2. Issuer Name and XOMA LTD /DE			g Symbol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First) C/O XOMA LTD., 2910 SEVENTH S		3. Date of Earliest Transaction (Month/Day/Year) 10/31/2007						X_Officer (give title below)Other (specify below) VP, Finance, and CFO			
(Street) BERKELEY, CA 94710		4. If Amendment, Date Original Filed(Month/Day/Year) 11/02/2007						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) (State)	(Zip)		Table I - No	on-De	erivative	red, Disposed of, or Beneficially Owned					
(Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	(Instr. 8)		4. Securi (A) or D (Instr. 3,	isposed of 4 and 5) (A) or	f (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I)	Beneficial Ownership	
			Code	V	Amount	(D)	Price		(Instr. 4)		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
Derivative Security	Conversion	Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code	tion )	5. Number Derivative Securities Acquired ( or Dispose (D) (Instr. 3, 4 and 5)	A) d of	6. Date Exercisable and 7. Title and Amount Expiration Date of Underlying (Month/Day/Year) Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form of Derivative Security: Direct (D) or Indirect (I)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Incentive Share Option (right to buy)	\$ 3.67	10/31/2007 <u>(1)</u>		А		54,884		(2)	10/31/2017	Common Shares	54,884	\$ 0	54,884	D	
Non- Qualified Share Option (right to buy)	\$ 3.67	10/31/2007 <mark>(1)</mark>		А		595,116		(2)	10/31/2017	Common Shares	595,116	\$ 0	595,116	D	

## **Reporting Owners**

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
BOYLE J DAVID II C/O XOMA LTD. 2910 SEVENTH STREET BERKELEY, CA 94710			VP, Finance, and CFO					

## Signatures

By: Christopher J. Margolin For: J. David Boyle II	05/14/2008
**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) Grant of option was subject to shareholder approval of an increase in shares issuable under the option plan. Increase was approved at Annual Meeting of Shareholders held 05-13-2008.
- (2) Exercisable as to (a) 25% of the option shares upon the first anniversary of the date of grant, and (b) the remaining 75% of the option shares in thirty-six (36) equal and consecutive monthly installments beginning one year and one month after the date of grant.

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.