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

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

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 Responses	s)																
1. Name and Address of Reporting Person * RUBIN PAUL D					2. Issuer Name and Ticker or Trading Symbol XOMA LTD /DE/ [XOMA]								5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First) (Middle) C/O XOMA LTD., 2910 SEVENTH STREET					3. Date of Earliest Transaction (Month/Day/Year) 09/30/2011									X Officer (give title below) Other (specify below) VP Clinical Dev. & CMO				
(Street)				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)								6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
BERKEI	LEY, CA 9	4710												FOIII III	ed by More man	One Reporting	reison	
(City)	(State)	(Zip)			Ta	able I -	- Non	ı-De	rivative S	Securit	ies Ac	cquir	ed, Disp	osed of, or I	Beneficially	Owned	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year	Exection (any			(Instr. 8)		tion	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			O)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			Ownership o Form: B	Beneficial
				(Mon	nth/Day/Ye	ear)	Coo	de	V	Amount	(A) or (D)	Prio	ice	or (I)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common	Shares		09/30/2011				M ⁽	<u>1)</u>		1,022	A	\$ 1.66	625	1,022			D	
			Table II		vative Seco			quire	the ed, D	form dis	splays of, or B	a cu	irren icially	tly valid	OMB conf	spond unle trol numbe		
Security	2. Conversion or Exercise Price of Derivative Security	3. Transactio Date (Month/Day/	Execution 1	d Date, if	Code	ion	5.	er ative ities red sed	6. I and (Mo	Date Exer I Expiration onth/Day	cisable on Date	tion	7. Tit: Amou Under Secur (Instr. 4)	le and ant of rlying rities . 3 and Amount or Number of	8. Price of Derivative Security (Instr. 5)	9. Number Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form of Derivat Security Direct (or Indir	Beneficia Ownershi (Instr. 4) D)

Reporting Owners

Ī	D 41 0 N /	Relationships								
	Reporting Owner Name / Address	Director Owner Officer		Officer	Other					
	RUBIN PAUL D C/O XOMA LTD. 2910 SEVENTH STREET BERKELEY, CA 94710			VP Clinical Dev. & CMO						

Signatures

By: Christopher J. Margolin For: Paul Rubin	09/30/2011
**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) Shares acquired through the XOMA Ltd. 1998 Employee Share Purchase Plan (Amended and Restated through May 26, 2011). Exempt transaction under Rule 16b-3(c).

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.