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

OMB APPE	ROVAL
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hours per response	0.5

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 Type	e Responses)																
1. Name and Address of Reporting Person *- Varian John				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						
(Last) (First) (Middle) C/O XOMA CORPORATION, 2910 SEVENTH STREET				3. Date of Earliest Transaction (Month/Day/Year) 01/04/2012													
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)							A. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
BERKELE (City)		710 (State)	(Zip)	Table I - Non-Derivative Securities Acqui													
1.Title of Sec	curity		2. Transaction	2A. De	eme		. Tran			Securities Acqu				curities Bene		5.	7. Nature
(Instr. 3) Date		Date (Month/Day/Year	Execution Date, if any (Month/Day/Year)		Date, if ((Instr. 8)		(A)	(A) or Disposed of (D) (Instr. 3, 4 and 5)				g Reported		Ownership of Born: Bornect (D) O	of Indirect Beneficial Ownership	
								V Am	(A) or (D)	Price	'rice				or Indirect I) Instr. 4)	(Instr. 4)	
Reminder: Ro	eport on a se	parate line for each o		- Derivat	tive S	Securities	Acqı	l i a uire	Persons in this fo a current ed, Dispose	who respond rm are not re ly valid OMB	equire conti	d to re	espond ur mber.				1474 (9-02)
1. Title of Derivative Security (Instr. 3) 2. Conversion Date (Month/Day/Year) 3. Transaction Date Execution Date, if any (Month/Day/Year) 3A. Deemed Execution Date, if any (Month/Day/Year)		4. 5. Nun Transaction Code Securi Or Disposition (Instr. 8) (Instr. 8) (Instr. 8) (Instr. 8)		5. Numb Derivativ Securitie Acquired or Dispo	mber of 6. D. Expirities (Mo ired (A) sposed of . 3, 4,		xpiration Date		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s)	Owners Form of Derivat Security Direct (or Indir	Ownersh (Instr. 4)			
				Code	V	(A)	(D)	Ex	ate xercisable	Expiration Date	Title		Amount or Number of Shares		(Instr. 4)	(Instr. 4	
Incentive Share Option (right to buy)	\$ 1.24	01/04/2012		A		330,39	2		(1)	01/04/2022		nmon	330,392	\$ 1.24	330,392	D	
Non- Qualified Share Option (right to buy)	\$ 1.24	01/04/2012		A		44,608			(1)	01/04/2022		imon ares	44,608	\$ 1.24	44,608	D	
Restricted Stock Units	\$ 0	01/04/2012		A		288,50	0		(2)	(2)		imon ares	288,500	\$ 0	301,995	D	

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Varian John C/O XOMA CORPORATION 2910 SEVENTH STREET BERKELEY, CA 94710	X		Director and CEO			

Signatures

By: Christopher J. Margolin For: John Varian	01/06/2

2012

**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) Incentive Stock Option exercisable in conjunction with matching Non-Qualified Stock Option as to forty-eight (48) equal and consecutive monthly installments beginning one month after the date of grant.
- (2) These restricted stock units are scheduled to vest in substantially equal installments annually over three years, with the first installment vesting on November 13, 2012.

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.