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

(Fint of Typ	be Responses)	-																
Name and Address of Reporting Person* Varian John				2. Issuer Name and Ticker or Trading Symbol XOMA Corp [XOMA]							:	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X_ Director 10% Owner							
(Last) (First) (Middle) C/O XOMA CORPORATION, 2910 SEVENTH STREET				3. Date of Earliest Transaction (Month/Day/Year) 09/15/2014								X Officer (give title below) Other (specify below) CEO							
(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)				Table I - Non-Derivative Securities Acqu							ies Acqui	ired, Disposed of, or Beneficially Owned							
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)						(Instr. 8		or Disposed of (D) (Instr. 3, 4 and 5)			D)	Owned Follow Transaction(s)				Form:	p of l Bei	7. Nature of Indirect Beneficial Ownership	
						Code	V	V Amount (D) Price		Price				str. 4)					
Common	Common Shares 09/15/2014 ⁽¹⁾			N			M		10,0	000	A 5	\$ 1.24	335,364			D			
Common Shares 09/15/2014 ⁽¹⁾			09/15/2014 ⁽¹⁾				S		10,0	000		\$ 4.5577 (<u>2)</u>	325,364			D			
Common Shares												15,537			I	by 40	1(k)		
Reminder: F	Report on a se	eparate line for each	n class of securities b	beneficial	ly ov	vned	directly o	r indire	ctly.										
					-		•	in th	his fo	rm a	are not		l to re	espond	unless the	ion contair form	ned SE	C 147	4 (9-02)
			Table II -				ities Acqu varrants,						Owne	ed					
1. Title of Derivative Security (Instr. 3)	Derivative ecurity or Exercise (Month/Day/Year) Date (Month/Day/Year) Execution Date, if Transaction of Derivative (Month/Day/Year) Transaction of Der		perivative arities uired (A) pisposed (D) ar. 3, 4,	ivative Expiration Date (Month/Day/Year) fred (A) posed 3, 4,					. 3 and 4) (Instr. 5) Beneficial Owned Followin Reported Transacti		Derivative Securities Beneficially Owned Following Reported Transaction	Owne Form Derive Secur Direct or Ind (s) (I)	of ative ity: (D) irect	11. Natur of Indirec Beneficia Ownershi (Instr. 4)					
				Code	V	(A)	(D)	Date Exercis			iration	Title		Amount or Number of Shares		(Instr. 4)	(Instr.	4)	
Incentive Share Option (right to buy)	\$ 1.24	09/15/2014		М			10,000	<u>(3</u>	<u>3)</u>	01/0	04/202	2 Comn Shar		10,000	\$ 1.24	160,392	? Б		

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		CEO			

Signatures

By: Russell J. Wood For: John Varian	09/16/2014

**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 Rule 10b5-1 trading plan adopted by the reporting person on 3/20/2013.
- This transaction was executed in multiple trades ranging at prices from \$4.48 to \$4.66. The price reported reflects the weighted average sale price. The reporting person hereby undertakes (2) 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.
- (3) 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.

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.