FORM	4

Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

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

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#### 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 Pe VAN NESS W DENMAN	2. Issuer Name <b>and</b> Ticker or Trading Symbol XOMA Corp [XOMA]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_Director10% Owner					
(Last) (First) C/O XOMA CORPORATION STREET, SUITE 310	3. Date of Earliest Transaction (Month/Day/Year) 11/15/2018						Officer (give title below)O	ther (specify belo	ow)			
(Street) EMERYVILLE, CA 94608		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				
(City) (State)	(Zip)	]	fable I - No	on-De	erivative S	Securiti	ies Acqu	ired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		3. Transac Code (Instr. 8)	tion	A. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form:	Beneficial		
		(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	or I (I)		Ownershij (Instr. 4)		
Common Shares	11/15/2018		М		4,667	А	\$ 4.03	11,646	D			
Common Shares	11/15/2018		М		3,026	А	\$ 11.20	14,672	D			
Common Shares	11/15/2018		S		5,528 (1)	D	\$ 12.67	9,144	D			
Common Shares								1	Ι	by IRA (2)		
Common Shares						130	Ι	by Trust ( <u>3)</u>				

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 SEC 1474 (9-02) in this form are not required to respond unless the form displays a currently valid OMB control number.

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

(e.g., puts, calls, warrants, options, convertible securities)															
Derivative Security	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code	tion )	of Deri Secu Acq (A) Disp of (I	ivative urities uired or oosed D) tr. 3, 4,	ber 6. Date Exercisable and Expiration Date (Month/Day/Year) ed		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Derivative Security Securities (Instr. 5) Beneficially Owned		Derivative Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)		Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Non- Qualified Share Option (right to buy)	\$ 4.03	11/15/2018		М			4,667	<u>(4)</u>	02/10/2027	Common Shares	4,667	\$ O	3,333	D	
Non- Qualified Share Option (right to buy)	\$ 11.20	11/15/2018		М			3,026	(5)	07/21/2026	Common Shares	3,026	\$ O	0	D	

## **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
VAN NESS W DENMAN C/O XOMA CORPORATION 2200 POWELL STREET, SUITE 310 EMERYVILLE, CA 94608	Х					

# Signatures

/s/ W. Denman Van Ness	11/16/2018
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) Reflects the number of shares sold in connection with the cashless exercise.
- (2) Owned directly through W. D. Van Ness IRA.
- (3) Shares owned directly by The Van Ness 1983 Revocable Trust.
- (4) Shares subject to this option shall vest in equal monthly installments over three years from the grant date.

This option is exercisable in twelve equal monthly installments, beginning one month from the vest start date, which is the same as the grant (5) date.

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.