FORM 4

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

| OMB | APPROV | AL |
|---------------|-----------|-----------|
| OMB Numbe | r: | 3235-0287 |
| Estimated av | erage bur | den |
| hours per res | sponse | 0.5 |

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

| (Finit of Typ. | e Responses | / | | | | | | | | | | | | | |
|--|---|------|---|-----------------------|-------|---|-------------------------------|--|--|--|---|-------------------------------------|---|---|---|
| 1. Name and Address of Reporting Person* Neal James R | | | 2. Issuer Name and Ticker or Trading Symbol XOMA Corp [XOMA] 3. Date of Earliest Transaction (Month/Day/Year) 12/21/2021 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | _> | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X_ Director 10% Owner X_ Officer (give title below) Other (specify below) CEO 6. Individual or Joint/Group Filing/Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (Last) (First) (Middle) C/O XOMA CORPORATION, 2200 POWELL STREET, SUITE 310 (Street) | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| EMERYVILLE, CA 94608 (City) (State) (Zip) | | | (Zip) | | | | | | - 4 | | | | | | |
| 1.Title of Security (Instr. 3) 2. Transaction Date | | | 2A. Deemed 3. Transac Execution Date, if Code | | | saction 4. | action 4. Securities Acquired | | 5. Amount of Securities Beneficially | | neficially | 6. 7. Nature | | | |
| | | | (Month/Day/Year) | | | (Instr. | | | (A) or Disposed of (D (Instr. 3, 4 and 5) | | (D) Owned Followi Transaction(s) (Instr. 3 and 4) | | | Form: Bo | of Indirect Beneficial Ownership |
| | | | | | | | Code | e V A | mount (A) or (D) | Price | or Indirect (I) | | [Instr. 4) | | |
| Reminder: F | toport on a s | | | | | | | in this f | s who respon orm are not re s a currently v | equired to | respond | unless the | | eu sec | 474 (9-02) |
| | 2. Conversion or Exercise Price of Derivative Security | | Table II - 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transac Code | etion | 5. Numb of Deriva Securitie Acquired or Dispo of (D) | er ative es d (A) | in this f displays aired, Dispo options, con 6. Date Exe Expiration (Month/Da | orm are not rest a currently vessed of, or Bene exertible securing reisable and Date | equired to valid OME ficially Ov | o respond 3 control n vned and Amount lying | unless the umber. 8. Price of | 9. Number of Derivative Securities Beneficially Owned Following | of 10. Ownersh Form of Derivativ Security Direct (I | 11. Natur of Indirec Beneficia Ownersh (Instr. 4) |
| 1. Title of Derivative Security | 2. Conversion or Exercise Price of Derivative | Date | 3A. Deemed Execution Date, if any | 4. Transac Code | etion | 5. Numb of Deriva Securitie Acquired or Dispo | er ative es d (A) esed 4, | in this f displays aired, Dispo options, con 6. Date Exe Expiration (Month/Da | sed of, or Bene evertible security visually and Date y/Year) | ficially Ovities) 7. Title are of Underly Securities | o respond 3 control n vned and Amount lying | 8. Price of Derivative Security | 9. Number of Derivative Securities Beneficially Owned | of 10. Ownersh Form of Derivatin Security Direct (I or Indire | ip of Indired Beneficia Ownersh (Instr. 4) |

Reporting Owners

| | Relationships | | | | |
|---|---------------|--------------|---------|-------|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | |
| Neal James R C/O XOMA CORPORATION 2200 POWELL STREET, SUITE 310 EMERYVILLE, CA 94608 | X | | CEO | | |

Signatures

| /s/ James R. Neal | 12/23/2021 |
|---------------------------------|------------|
| **Signature of Reporting Person | Date |

Explanation of Responses:

 \star 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 subject to this option shall vest in equal monthly installments over three years from the grant 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.