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XOMA Cor Form 4 December 0 FORN Check th if no lor subject to Section Form 4 Form 5 obligation may con <i>See</i> Inst 1(b).	03, 2013 A 4 UNITED S his box his box his box his box sto 16. or Filed purs Section 17(a)	ENT OI suant to S	Wa F CHAN Section 1 Public U	shington NGES IN SECUI	, D.C. 20 BENEF RITIES ne Securi Iding Cor)549 ICIA ties E	LOWN Exchange y Act of	OMMISSION NERSHIP OF Act of 1934, 1935 or Sectior 0	OMB Number: Expires: Estimated a burden hou response	rs per	
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> SCANNON PATRICK J MD PHD								5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (N	liddle)	3. Date c	of Earliest T	ransaction			(Check	k all applicable	e)	
C/O XOMA CORPORATION, 2910 SEVENTH STREET			(Month/Day/Year) 12/02/2013					X Director 10% Owner X Officer (give title Other (specify below) Exec. VP & CSO			
				If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
BERKELE	XY, CA 94710		Filed(Mo	nth/Day/Yea	ir)			Applicable Line) _X_ Form filed by O Form filed by M Person			
(City)	(State) ((Zip)	Tab	le I - Non-l	Derivative	Secur	rities Acqu	iired, Disposed of,	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/D	Date, if	3. Transactic Code (Instr. 8) Code V	4. Securit por Dispos (Instr. 3, 4) Amount	ed of	(D)	 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) 	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Shares	12/02/2013 <u>(1)</u>			М	3,335	А	\$ 1.69	45,352	D		
Common Shares	12/02/2013(1)			S	3,335	D	\$ 6.0001	42,017	D		
Common Shares	12/02/2013 <u>(1)</u>			М	16,665	А	\$ 1.69	58,682	D		
Common Shares	12/02/2013(1)			S	16,665	D	\$ 6.0001	42,017	D		
Common Shares								20,339	Ι	by 401(k)	

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Common Shares	750	Ι	by Daughter
Common Shares	4,053	Ι	by Trust

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 in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Derivative Expiration Date (Month/Day/Year) Acquired (A) or Disposed of D) Instr. 3, 4,		7. Title and Amou Underlying Secur (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Am or Nui of §
Incentive Share Option (right to buy)	\$ 1.69	12/02/2013		М	3,335	10/28/2013	10/27/2021	Common Shares	3,
Non-Qualified Share Option (right to buy)	\$ 1.69	12/02/2013		М	16,665	10/28/2013	10/27/2021	Common Shares	16

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
SCANNON PATRICK J MD PHD C/O XOMA CORPORATION 2910 SEVENTH STREET BERKELEY, CA 94710	Х		Exec. VP & CSO				
Signatures							
By: Russell J. Wood For: Patrick J. Scannon, M.I. Ph.D.			12/03/2013				
<u>**</u> Signature of Reporting Pers		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.

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.