**XOMA Corp** Form 5 February 16, 2016

**OMB APPROVAL** FORM 5

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Number: Washington, D.C. 20549 Check this box if no longer subject to Section 16.

Form 4 or Form 5 obligations may continue. See Instruction

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

Reported Form 4

1(b).

Transactions Reported

1. Name and Ad		ing Person *	2. Issuer Name <b>and</b> Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer			
RUDIN FAUL D			Symbol XOMA Corp [XOMA]	(Check all applicable)			
(Last)	(First)	(Middle)	3. Statement for Issuer's Fiscal Year Ended	•			
			(Month/Day/Year)	Director 10% Owner			
			12/31/2015	X Officer (give title Other (specify			
C/O XOMA				below) below) Sr. VP Clinical Dev. & CMO			
CORPORAT SEVENTH S	· ·			Sr. VP Clinical Dev. & CMO			
	(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Reporting			
			Filed(Month/Day/Year)				
			· · · · · · · · · · · · · · · · · · ·	(check applicable line)			

### BERKELEY, CAÂ 94710

\_X\_ Form Filed by One Reporting Person Form Filed by More than One Reporting

OMB

Expires:

response...

Estimated average

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January 31,

2005

1.0

(City)	(State)	(Zip) Tabl	le I - Non-Der	ivative Se	curiti	es Acquir	ed, Disposed of	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securi (A) or D (Instr. 3,	ispose 4 and (A) or	d of (D)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Shares	03/31/2015	Â	J <u>(1)</u>	1,457	A	\$ 3.458	120,924	D	Â
Common Shares	06/30/2015	Â	<u>J(1)</u>	575	A	\$ 3.686	124,377	D	Â
Common Shares	12/31/2015	Â	J(2)	6,541	A	\$ 1.376	13,422	I	by 401(k)

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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 2270 (9-02)

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	e and	8. Price of	
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration D	ate	Amou	nt of	Derivative	
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	•		Securi	ties	(Instr. 5)	
	Derivative				Securities			(Instr.	3 and 4)		
	Security				Acquired						
	•				(A) or						
					Disposed						
					of (D)						
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	Date		Number		
						Lacroisable	Dute		of		
					(A) (D)				Shares		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
RUBIN PAUL D C/O XOMA CORPORATION 2910 SEVENTH STREET BERKELEY, CA 94710	Â	Â	Sr. VP Clinical Dev & CMO	. Â			

## **Signatures**

By: Russell J Wood For: Paul D
Rubin
02/16/2016

\*\*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) Shares acquired through the XOMA 2015 Employee Stock Purchase Plan. Exempt transaction under Section 16b-3(c).
- (2) All shares were acquired during the 2015 fiscal year under the XOMA Corporation Deferred Savings Plan. All shares were acquired in a transaction exempt from Section 16b-3.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.

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