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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

OMB APPF	B APPROVAL								
OMB Number:	3235-0287								
Estimated average bu	urden								

	hours per response:	0.5
of R	eporting Person(s) to Issuer	

Instruct	tion 1(b).			File							rities Exchan ompany Act		f 1934			<u> </u>					
1. Name and Address of Reporting Person [*] STAFFORD JOHN S III						2. Issuer Name and Ticker or Trading Symbol Xencor Inc [XNCR]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner							
(Last) (First) (Middle) 350 N. ORLEANS STREET						3. Date of Earliest Transaction (Month/Day/Year) 08/10/2017								Officer (give title Other (specify below) below)							
SUITE 2N 4. If An							If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) CHICAC	O IL	(50654-3	1975										Form filed by One Reporting Person X Form filed by More than One Repor Person							
(City)	(St	ate) (Zip)																		
		Tab	le I - N	lon-Deriv	ative	Sec	uritie	es Ac	quire	d, Di	sposed o	f, or E	Benefi	cially	Owne	ed					
1. Title of Security (Instr. 3)			2. Transact Date (Month/Day		Exec if any	A. Deemed xecution Date, any Month/Day/Year)		3. Transaction Code (Instr. 8)						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			
									v	Amount	(A) or (D) Price							(Instr. 4)			
Common Stock			08/10/2			Р		13,000	A	\$21	.22(1)	5,013,000		I		By Ronin Capital, LLC					
Common Stock			08/11/2017					Р		14,000	A	\$21.	.045 ⁽²⁾)45 ⁽²⁾ 5,027,000]	I	By Ronin Capital, LLC			
		Ta	able II								osed of, convertib				wned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any		4. Transaction Code (Instr. 8)		5. Number of		6. Date Exerc Expiration D (Month/Day/		cisable and ate	7. Title and Amount of Securities Underlying Derivative Security (Instr and 4)		8. Pi Deri Seci (Inst		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owne Form Direc or Inc (I) (In	nership m: ect (D) ndirect Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amoun or Numbe of Shares	r							
		Reporting Person*																			
STAFF	ORD JOI	<u>HN S III</u>																			
(Last)		(First)	(M	1iddle)																	

(First) (Last) 350 N. ORLEANS STREET

SUITE 2N

(Street) CHICAGO 60654-1975 IL (City) (State) (Zip) 1. Name and Address of Reporting Person* Ronin Capital, LLC (Last) (First) (Middle) 350 N. ORLEANS STREET SUITE 2N (Street) CHICAGO IL 60654-1975 (City) (State) (Zip)

Explanation of Responses:

1. This transaction was executed in multiple trades at prices ranging from \$21.12 to \$21.32. The price reported above reflects the average purchase price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transactions were effected.

2. This transaction was executed in multiple trades at prices ranging from \$20.89 to \$21.20. The price reported above reflects the average purchase price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transactions were effected.

08/14/2017 /s/ John S. Stafford, III /s/ Agnes Burda, authorized 08/14/2017 <u>signatory</u> Date

** Signature of Reporting Person

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

* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.