SEC Form 4	
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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)
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL						
OMB Number:	3235-0287					
Estimated average burde	en					
hours per response:	0.5					

1. Name and Address of Reporting Person* <u>STAFFORD JOHN S III</u>			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) 350 N. ORLE. SUITE 2N	(First) ANS STREET	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 08/15/2016	Officer (give title Other (specify below) below)				
,			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable				
(Street) CHICAGO	IL	60654-1975	_	Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person				
(City)	(State)	(Zip)						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
		1						

4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) 2A. Deemed Execution Date, 3. Transaction Code (Instr. 8) 5. Amount of Securities 6. Ownership Form: Direct 7. Nature of Indirect 1. Title of Security (Instr. 3) 2. Transaction Date Beneficially Owned Following Beneficial Ownership (Instr. 4) (Month/Day/Year) if any (Month/Day/Year) (D) or Indirect (I) (Instr. 4) Reported Transaction(s) (Instr. 3 and 4) (A) or (D) Code v Amount Price By Ronin **\$23.055**⁽¹⁾ 08/15/2016 10,000 Common Stock S D 5,216,740 Ι Capital, LLC

 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. Transa Code (8)				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

1. Name and Address of Reporting Person* STAFFORD JOHN S III

(Last)	(First)	(Middle)							
350 N. ORLEANS STREET									
SUITE 2N									
(Street)									
CHICAGO	IL	60654-1975							
(City)	(State)	(Zip)							
1. Name and Address of Reporting Person*									
<u>Ronin Capital, LLC</u>									
(Last)	(First)	(Middle)							
350 N. ORLEANS STREET									
SUITE 2N									
(Street)									
CHICAGO	н	60654-1975							
	111	00034-137.3							
(City)	(State)	(Zip)							

Explanation of Responses:

1. This transaction was executed in multiple trades at prices ranging from \$22.96 to \$23.15. 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.

/s/ John S. Stafford, III 08/17/2016

<u>/s/ Agnes Burda, authorized</u> <u>signatory</u>

** Signature of Reporting Person

Date

08/17/2016

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.