## FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D	D.C. 20549
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5	TATEMENT OF CHANGES IN BENEFICIAL	. OWNERSHIP

	OMB APPRO	DVAL				
	OMB Number:	3235-0287				
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	hours per response:	0.5				

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

1. Name and Address of Reporting Person*  Ronin Trading, LLC					2. Issuer Name <b>and</b> Ticker or Trading Symbol Xencor Inc XNCR									Relationshi eck all app Dired	,	_	(s) to Is		
(Last) 350 N. O	(Fii	rst) (	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/15/2015								Offic belo	er (give title w)		Other (spec below)		
(Street) CHICAG			50654 Zip)		4. If	Ame	ndment	, Date o	f Original	Filed	(Month/Da	ay/Year	)	Line	e) <mark>X</mark> Forn	or Joint/Group on filed by One on filed by Mor on	e Reportir	ng Pers	on
		Tabl	e I - Nor	n-Deriv	ative	Sec	curitie	s Acc	quired,	Dis	posed o	f, or I	3ene	ficial	ly Own	ed			
Date				2. Trans Date (Month/I		ar) E	A. Deemed execution Date, any Month/Day/Year)		Code (	Transaction Disposed Code (Instr. 5)					Secur Benef Owner	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A (D	) or )	Price		action(s) 3 and 4)			(Instr. 4)
Common	Stock			06/15	5/2015	/2015		G	V	90,000 D		\$0.0	7,2	7,217,240					
		Та	ıble II - I								sed of, onvertib				Owned				
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any				Transaction Code (Instr.		of I		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		s. Price of Derivative Security Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Own Forn Direc or In (I) (Ir		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Num of Shar						

**Explanation of Responses:** 

Remarks:

/s/ Agnes Burda, Chief **Compliance Officer** 

06/18/2015

\*\* Signature of Reporting Person

Date

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.