FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
OMB Number: 3235-010							
Estimated average burden							
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 Addi BONANNI		2. Date of Event Requiring Statement (Month/Day/Year) 04/14/2015 3. Issuer Name and Ticker or Trading Symbol XBiotech Inc. [XBIT]										
	(First) RSIDE DRIVE,	(Middle) BLDG. 4, STE				tionship of Reporting Perso all applicable) Director	n(s) to Issue			If Amendment, Date of Original Filed onth/Day/Year)		
100					Officer (give title below)	Other (spe below)	App		ndividual or Joint/Group Filing (Check plicable Line) X Form filed by One Reporting Person			
(Street) AUSTIN	TX	78744							X		More than One	
(City)	(State)	(Zip)										
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4)			2. Date Exercisable and Expiration Date (Month/Day/Year)		d 3. Title and Amount of Securities Underlying Derivative Security (Ins			4. Convers or Exerc	ise	5. Ownership Form: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
		Date Exercisable	Expiration Date	Title		Amount or Number of Shares	Derivative Security		or Indirect (I) (Instr. 5)			
Stock Option			03/01/2014	02/28/2024		Common Stock	33,333	10		D		
Stock Option		08/24/2014	08/23/2024		Common Stock	33,333	15		D			

Explanation of Responses:

Remarks:

/s/ Fabrizio Bonanni

** Signature of Reporting Person

04/14/2015

Date

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

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.

^{*} If the form is filed by more than one reporting person, see Instruction 5 (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).