FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

wasnington, L	7.0. 20040		

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burd	len								
hours per response:	0.5								

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					OI .	Secu	011 30(11)	OI LITE	Investment	COII	ірапу Асі	. 01 1940							
1. Name and Address of Reporting Person* <u>Tulsyan Ravi</u>				2. Issuer Name and Ticker or Trading Symbol XPO Logistics, Inc. [XPO]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
														Directo			10% Ov		
														X	below)	(give title		Other (s below)	spеспу
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 09/08/2021								Chief Financial Officer					
C/O XPO LOGISTICS, INC.				05/05/2021															
FIVE AMERICAN LANE																			
					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)														X	Form f	iled by One	Reno	orting Perso	n
GREEN	WICH C	Γ	06831											21		•		•	- 1
,															Persor	n filed by More than One Reporting on			
(City)	(S	tate) ((Zip)																
		Tabl	le I - Non-	Deriv	ative	Se	curitie	s Ac	quired, I	Disp	osed o	of, or Be	nefici	ally	Owned	t			
1. Title of S	Security (Inst	tr. 3)		2. Transa	action		2A. Deem		3.			ities Acquii			5. Amou				7. Nature
Date (Month					Execution Date, Day/Year) if any				Transaction Disposed Of (D) (Instr. 3, 4 Code (Instr. 5)			str. 3, 4 a	ınd	Securitie Benefici				of Indirect Beneficial	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \							(Month/Day/Year)								Following (I) (II		nstr. 4)	Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D) Prid		е	Transaci (Instr. 3	ction(s)			(111301.4)
															<u> </u>	unu 4)			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of	2.	3. Transaction	3A. Deemed		4.						7. Title and		8. Price of		9. Number of		10.	11. Nature	
Derivative				Date, Transaction				Expiration Date Amount of (Month/Day/Year) Securities				Derivative Security		derivative Securities		Ownership Form:	of Indirect Beneficial		
(Instr. 3)	Price of Derivative	, , , , , , , , ,	(Month/Day/		8)	Securities Underlying					(Ir	nstr. 5)	Beneficially Owned Following Reported Transaction(s)		Direct (D) or Indirect	Ownership (Instr. 4)			
	Security					Acquired (A) or Disposed of (D) Derivative Secu (Instr. 3 and 4)										,		(I) (Instr. 4)	(instr. 4)
						(Instr. 3, 4 and 5)								(Instr. 4)					
				F						Т			Amour	nt					
													or Numbe	,					
				,	Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	of Shares						
				\neg						T		Common							
Restricted	(1)	09/08/2021			Α		8,773		(2)		(2)	Stock, par value	8,773	3	\$0	8,773		D	
Stock Unit		03/00/2021			11		0,773				. ,	\$0.001	0,775		Ψυ] 0,773		"	
												per share							

Explanation of Responses:

- 1. Each Restricted Stock Unit ("RSU") represents a contingent right to receive, upon settlement, either (i) one share of Common Stock or (ii) a cash payment equal to the fair market value of one share of Common Stock.
- 2. The RSUs vest in two equal annual installments on the second and third anniversaries of the grant date, generally subject to the Reporting Person's continued employment with the Issuer through the applicable vesting date.

Remarks:

/s/ Riina Tohvert, Attorney-in-

Fact

** Signature of Reporting Person Date

09/10/2021

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.