SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL						
OMB Number:	3235-0287					
Estimated average burden						

to Sec obligat	this box if no lo tion 16. Form 4 tions may contin tion 1(b).	or Form 5	STA		l pursua	ant to s	Sectio	n 16(a)	of the S	Securi	NEFICIA ties Exchang	e Act of 1		RSHIP	Estim		ber: average burd esponse:	3235-0287 len 0.5
1. Name and Address of Reporting Person* 2. Issue					2. Issuer Name and Ticker or Trading Symbol <u>XPO Logistics, Inc.</u> [XPO]								5. Relationship of Reporting Person(s) to Iss (Check all applicable) Director X 10% Ow			wner		
(====) (3. Date of Earliest Transaction (Month/Day/Year) 03/20/2020								Officer (give title Other (specify below)					
(Street) NEW Y((City)			0014 Zip)		4. If Amendment, Date of Original Filed (Mo					d (Month/Da	ıy/Year)		6. Individual or Joint/Group Filing (Check Application) Form filed by One Reporting Person X Form filed by More than One Reporting Person				son	
		Table	I - No	n-Deriva	ative	Secu	ritie	s Aco	juired	, Dis	posed of	, or Be	nefici	ially Own	ed			
1. Title of	1. Title of Security (Instr. 3) 2. Transac Date (Month/Da		tion 2A. Deemed Execution Date,			3. 4. Securities Acquired (A) (Disposed Of (D) (Instr. 3, 4 5)				nd Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) or (D)	Price	Report Transa (Instr. 3	ction(s)			(Instr. 4)
Common share	ı stock, par v	value \$0.001 per		03/20/2	2020				S		566,986	D	\$42	.78 9,7	75,701		D ⁽¹⁾⁽²⁾	
		Tal	ble II -								osed of, convertib			lly Owned	ł			
1. Title of Derivative Security (Instr. 3)	1. Title of Derivative Security 2. 3. Transaction 3A. Deemed 4. Derivative Security Conversion or Exercise Date Execution Date, (Month/Day/Year) Transaction if any 5.		4. Transa Code	Transaction of Expiration Date Amount of Code (Instr. Derivative (Month/Day/Year) Securities					nd of es ing /e	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	Ownership Form: I Direct (D) (Beneficia Ownershi (Instr. 4)				
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	0 N 0	umber					
		Reporting Person [*] artnership LL	<u>C</u>			_												
	RUCE HOU	(First) SE CAPITAL L EET, 8TH FLOO	LC	ddle)														
(Street)						-												

(City) (State) (Zip) 1. Name and Address of Reporting Person* SPRUCE HOUSE PARTNERSHIP (AI) LP

NY

10014

(Last)	(First)	(Middle)
C/O SPRUC	E HOUSE CAPITAL	LLC

435 HUDSON STREET, 8TH FLOOR

NEW YORK

(Street) NEW YORK	NY	10014
(City)	(State)	(Zip)

1. Name and Address of Reporting Person * Spruce House Partnership (QP) LP

p.		
(Last)	(First)	(Middle)
C/O SPRUCE	HOUSE CAPITA	AL LLC

435 HUDSON ST	REET, 8TH FLOOR						
(Street) NEW YORK	NY	10014					
(City)	(State)	(Zip)					
1. Name and Address <u>Spruce House</u> (
	(First) USE CAPITAL LLC REET, 8TH FLOOR						
(Street) NEW YORK	NY	10014					
(City)	(State)	(Zip)					
1. Name and Address Sternberg Zach							
	(First) INVESTMENT MA REET, 8TH FLOOR	(Middle) NAGEMENT LLC					
(Street) NEW YORK	NY	10014					
(City)	(State)	(Zip)					
	1. Name and Address of Reporting Person [*] Stein Benjamin Forester						
	(First) INVESTMENT MA REET, 8TH FLOOR	(Middle) NAGEMENT LLC					
(Street) NEW YORK	NY	10014					
(City)	(State)	(Zip)					
1. Name and Address of Reporting Person [*] <u>SPRUCE HOUSE INVESTMENT</u> <u>MANAGEMENT LLC</u>							
(Last) 435 HUDSON ST 8TH FLOOR	(First) REET	(Middle)					
(Street) NEW YORK	NY	10014					
(City)	(State)	(Zip)					

Explanation of Responses:

1. As a result of internal restructuring, the reported securities are now held in the account of The Spruce House Partnership LLC (the "Aggregator"), its sole members being The Spruce House Partnership (AI) LP (*f/k/a* The Spruce House Partnership LP) and The Spruce House Partnership (QP) LP (collectively, the "Funds)", each a private investment fund managed by Spruce House Investment Management LLC (the "Investment Manager").

2. The reported securities may be deemed to be beneficially owned by the Investment Manager, the general partner of the Funds, Spruce House Capital LLC (the "General Partner"), and by Zachary Sternberg and Benjamin Stein, managing members of the Investment Manager and the General Partner (the "Managing Members"). Each of the Funds, the Investment Manager, the General Partner and the Managing Members disclaim beneficial ownership of the reported securities held by the Aggregator, except to the extent of his or its pecuniary interest therein. The Aggregator, the Funds, the Investment Manager, the General Partner and the Managing Members (collectively, the "Reporting Persons") affirmatively disclaim being a "group" for purposes of Section 16 of the Securities Exchange Act of 1934, as amended.

The Spruce House Partnership LLC By: /s/ Thomas Walker, Authorized Person	<u>03/24/2020</u>
<u>The Spruce House Partnership</u> (<u>AI</u>) <u>LP By: /s/ Thomas</u> <u>Walker, Authorized Person</u>	<u>03/24/2020</u>
<u>The Spruce House Partnership</u> (<u>QP</u>) <u>LP By: /s/ Thomas</u> <u>Walker, Authorized Person</u>	<u>03/24/2020</u>

<u>Spruce House Capital LLC</u> <u>By: /s/ Thomas Walker,</u> <u>Authorized Person</u>	<u>03/24/2020</u>
<u>Zachary Sternberg By: /s/</u> <u>Thomas Walker, (Attorney-in</u> <u>fact)</u>	<u>03/24/2020</u>
<u>Benjamin Stein By: /s/</u> <u>Thomas Walker, (Attorney-in</u> <u>fact)</u>	<u>03/24/2020</u>
<u>Spruce House Investment</u> <u>Management LLC By: /s/</u> <u>Thomas Walker, Authorized</u> Person	<u>03/24/2020</u>
** 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.