FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

instruction 1(b).	or Section 30(h) of the Investment Company Act of 193
me and Address of Reporting Person*	2. Issuer Name and Ticker or Trading Symbol

1. Name and Address of Reporting Person* Brown Christopher Michael				ssuer Name and Ticke O Logistics, In		-	_*		ationship of Reportin (all applicable) Director Officer (give title	10% (Owner (specify		
(Last) (First) (Middle) C/O XPO LOGISTICS, INC. FIVE AMERICAN LANE				ate of Earliest Transa 15/2022	action (N	/lonth/	Day/Year)		Chief Accounting Officer				
(Street) GREENWICH (City)	CT (State)	06831 (Zip)	4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)						ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
	Tá	able I - No	n-Derivative	Securities Acq	uired	, Dis	posed of,	or Ben	eficially	Owned			
Date			2. Transaction Date (Month/Day/Yea	Execution Date,		ection (Instr.	4. Securities Disposed Of			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code V		Amount (A) or (D)		Price	Transaction(s) (Instr. 3 and 4)		(1/1301. 4)	
Common Stock, par value \$0.001 per share 03/15			03/15/2022		М		1,871	A	\$0	7,890	D		
Common Stock, par value \$0.001 per share 03/15/					F ⁽¹⁾		868	D ⁽¹⁾	\$70.97	7,022	D		

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)		of		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)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Restricted Stock Unit	(2)	03/15/2022		М			1,871	(3)	(3)	Common Stock, par value \$0.001 per share	1,871	\$0	1,871	D	

Explanation of Responses:

- 1. No shares were sold by the Reporting Person. These shares were withheld by the Issuer to fund tax liability attributable to the vesting and settlement of the Restricted Stock Units ("RSUs") reported on this Form 4. These RSUs vested and were settled as originally scheduled, and there were no related discretionary transactions or open market sales.
- 2. Each 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.
- 3. 50% of these RSUs vest on March 15, 2022 and 50% on March 15, 2023, generally subject to the Reporting Person's continued employment with the Issuer through the applicable vesting date.

Remarks:

/s/ Riina Tohvert, Attorney-in-

** Signature of Reporting Person Date

03/17/2022

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.