FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 205

Washington, D.C. 20549	OMB APPROVAL		
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-02	

l	OMB Number:	3235-0287								
l	Estimated average burden									
	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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Harik Mario A						2. Issuer Name and Ticker or Trading Symbol XPO Logistics, Inc. [XPO]									ationship of Reporting Pe call applicable) Director Officer (give title below) Chief Informati		10% Owner Other (specify below)	
	(Last) (First) (Middle) C/O XPO LOGISTICS, INC. 5 GREENWICH OFFICE PARK					3. Date of Earliest Transaction (Month/Day/Year) 09/02/2015												
(Street) GREEN (City)			06831 (Zip)		_ 4. lf	f Ame	endmei	nt, Date o	of Origina	l Filed	(Month/Da	Line	e) X Form t Form t					
		Tab	le I - No	n-Deriv	vative	e Se	curit	ies Ac	quired	, Dis	posed c	of, or Be	neficial	ly Owned	i			
Date			Date	ransaction e nth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Code	Transaction Dispose Code (Instr. 5)		ties Acquire I Of (D) (Ins		Benefic Owned	es ally Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) or (D)	Price	Transac	Reported Transaction(s) (Instr. 3 and 4)				
Common Stock, par value \$0.001 per share 09/02.				2/2015	2015		М		19,00	19,000 A		60,199			D			
Common	Stock, par	value \$0.001 pe	r share	09/02	2/2015	5			F ⁽¹⁾		6,175	5 D	\$34.2	.6 54	54,024 D			
		-	Table II -									, or Ben ble secu		Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transaction Code (Instr. 8)		n of		6. Date E Expiration (Month/E	n Date	of Securities		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	is Billy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares					
Restricted Stock Unit	(2)	09/02/2015			M			19,000	(3)		(4)	Common Stock, par value \$0.001	19,000	\$0	19,000	0	D	

Explanation of Responses:

- 1. 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 on September 2, 2015, 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. The RSUs vested and were settled on September 2, 2015.
- 4. On November 14, 2011, the Reporting Person was granted 95,000 unvested RSUs. The RSUs shall thereafter vest in equal annual installments of 20% each, beginning on September 2, 2012 and continuing on the first, second, third and fourth anniversaries thereof, subject to the Reporting Person's continued employment with the Issuer.

Remarks:

/s/ Gordon E. Devens, Attorney-in-Fact

09/04/2015

** 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.