FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGES | S IN BENEFIC | IAL OWNERSHII | Ρ |
|------------------|------------|--------------|---------------|---|

| l | OMB APPROVAL | | | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|--|
| l | OMB Number: | 3235-0287 | | | | | | | | |
| l | Estimated average burden | | | | | | | | | |
| l | 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* ROBERT STEPHEN | | | | | 2. Issuer Name and Ticker or Trading Symbol XEROX CORP [XRX] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|--|----------|--|--|-------------------------|---|--|-------|---|--|-------|-------------------------------|--|---|---|--|----------------------------------|--|--|
| | | | | | | | | | | | | | Directo | r | | 10% Ov | vner | |
| (Last) (First) (Middle) | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/10/2004 | | | | | | | | Officer below) | (give title | | Other (s below) | specify | |
| 800 LON | IG RIDGE | ROAD | | | | | | | | | | | | | | | | |
| P. O. BOX 1600 | | | | 4. | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) | | | | | | | | | | | | | - 1 | | led by One | Repo | rting Persoi | , |
| STAMFORD CT 06904 | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | |
| | | Tal | ble I - No | n-Deriv | vativ | e Se | curit | ies A | cquired | , Dis | sposed of | , or Ben | eficiall | / Owned | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | ear) i | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code | Transaction Disposed Of (I Code (Instr. | | es Acquired Of (D) (Instr. | (A) or . 3, 4 and 5 | Beneficia Owned F | s ally ollowing | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | Reported Transacti (Instr. 3 a | ion(s) | | | (Instr. 4) |
| Common Stock 02/10/2 | | | |)/2004 | | | P | | 5,500 | A | \$14.97 | 2 50, | 000 | | D | | | |
| | | | Table II - | | | | | | | | osed of, convertib | | | Owned | | | | |
| Derivative Conversion Date | | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Day | ned 4. In Date, Tran | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | rative rities iired r osed) | 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. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4) | Own S For Oir Or (I) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | | Date Exercisabl | | Expiration Date | Title | Amount or Number of Shares | | | | | |
| Deferred | \$0(1) | | | | | | | | 08/08/1988 | (1) | 08/08/1988 ⁽¹⁾ | Common | \$0 ⁽¹⁾ | | \$32 500 | (2) | D | |

Explanation of Responses:

- 1. Not Applicable
- 2. Hypothetical investment of deferred compensation in Xerox Stock Fund under the Xerox Saving Plan.

K. W. Fizer, Attorney-In-Fact 02/11/2004

** 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.