## FORM 4

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

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

- 1										
	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burden									
	hours per response:	0.5								

	tion 1(b).	ide. See		File							es Exchan			1		Hours	per response.	0.5
					or :	Secti	ion 30(h)	of the I	Investmer	t Con	npany Act	of 1940	)					
1. Name and Address of Reporting Person* Feldman Michael David					2. Issuer Name <b>and</b> Ticker or Trading Symbol XEROX CORP [ XRX ]									5. Relationship of Reporting Person(s) to Iss (Check all applicable) Director 10% On				
(Last) (First) (Middle) 201 MERRITT 7						3. Date of Earliest Transaction (Month/Day/Year) 11/06/2018									X Officer (give title Other (spelow)  Executive Vice President			
(Street) NORWA (City)	ALK CT 06851  (State) (Zip)  4. If Amendment, Date of Original Filed (Month/Day/Year)								·)		6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person							
		Tabl	e I - Nor	n-Deriv	ative	Se	curiti	es Acc	quired,	Dis	posed o	f, or	Bene	ficia	lly Owne	ed		
Date				te onth/Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)			rrities Acquired (A) ed Of (D) (Instr. 3, 4			d Securi Benefi	cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	Amount (A) or (D)		Price	Transa	action(s) 3 and 4)		(111511.4)	
Common Stock 11/06					5/2018		S		3,729	29 D		\$29	29 2,869		D			
		Та	ıble II - C								sed of, onvertib				Owned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution	Date,	4. Transaction Code (Instr. 8)		n of r. Deri Secu Acqu (A) o Disp of (D	ı of		6. Date Exercisable ar Expiration Date (Month/Day/Year)			e and int of rities rlying ative rity (Ins		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amo or Num of Shar	ber				

**Explanation of Responses:** 

/s/ Douglas H. Marshall

11/07/2018

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.