XEROX CORP				
Form 3				
January 05, 2017				
FORM 3	UNITED STATES SECURITIES AND EXCHANGE COMMISSION		OMB APPROVAL	
	Washington, D.C. 20549	OMB Number:	3235-0104	
	INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES	Expires:	January 31, 2005	
			Estimated average burden hours per	

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> Osbourn William F Jr			1 0	2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol XEROX CORP [XRX]				
	(Last)	(First)	(Middle)	01/01/2017	4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)		
45 GLOVER AVENUE, P.O. BOX 4505					(Check all applicable)			× • •	
(Street) NORWALK, CT 06856				Director 10% Owner X Officer Other (give title below) (specify below) Executive Vice President & CFO		: ow)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
	(City)	(State)	(Zip)	Table I - N	Non-Deriva	tive Securiti	es Bei	neficially Owned	
	Fitle of Secur Istr. 4)	ity		2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owner (Instr.	•	
Co	ommon Sto	ock		0		D	Â		
	minder: Repo	-		ach class of securities benefic	ially S	EC 1473 (7-02	.)		
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Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)
		(Instr. 4)	Price of	Derivative	
	Г	Title	Derivative	Security:	
			Security	Direct (D)	

0.5

response...

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Date	Expiration	Amount or	or Indirect
Exercisable	Date	Number of	(I)
		Shares	(Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Osbourn William F Jr 45 GLOVER AVENUE P.O. BOX 4505 NORWALK, CT 06856	Â	Â	Executive Vice President & CFO	Â		
Signatures						
Karen Boyle, Attorney in Fact	01/05	/2017				
<u>**</u> Signature of Reporting Person	D	ate				
Evaloretion of De						

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 5(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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.