FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average b	ourden								
- 1	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

							00(	,												
1. Name and Address of Reporting Person* Blanchett Paul						2. Issuer Name and Ticker or Trading Symbol GXO Logistics, Inc. [ GXO ]									elationship eck all appli Directo	cable) or	g Perso	10% Ov	vner	
(Last)	O LOGIS	(First)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/16/2024								] :	below)	ief Accou	ınting	Other (s below) Officer	specify	
TWO AMERICAN LANE					4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person					
(Street) GREEN	WICH	СТ	06831												_	iled by Mor	•	Ü		
(City) (State) (Zip)					Ru	Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to														
					┛	satisf	y the a	iffirmative	defense	condition	ons of Rule	10b5-1(	c). See	Instruction	on 10.					
		Та	ble I - No	n-Deriv	vative	Sec	urit	ies Ac	quired	, Dis	posed	of, or	Ben	eficial	ly Owne	d				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da						Execution Date,			3. Transaction Code (Instr. 8)  4. Securities Acquired (ADisposed Of (D) (Instr. 3			(A) or 3, 4 and	Benefic Owned	es ially Following	Form:	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A (I	A) or D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Common Stock 03/16/2					5/2024	2024		M		1,000	)	A	\$0	13	13,468		D			
Common Stock 03/18/2				3/2024	/2024					464		D <sup>(1)</sup>	\$49.4	9 13	13,004		D			
			Table II								osed of converti				Owned			,		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security				4. Transa Code ( 8)		n of		6. Date Exercis Expiration Date (Month/Day/Yea		е	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	Owner Form: Direct or Indi (I) (Ins	Ownership	11. Nature of Indirect Beneficial Ownershi (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	1	Amount or Number of Shares						
Restricted Stock	(2)	03/16/2024			M			1,000	(3)		(3)	Comr		1,000	\$0	0		D		

## **Explanation of Responses:**

- 1. No shares were sold by the Reporting Person. These shares were withheld by GXO Logistics, Inc. ("GXO") to fund tax liability attributable to the vesting and settlement of the Restricted Stock Units ("RSUs") reported on this Form 4. These RSUs vested on March 16, 2024 and were settled on March 18, 2024, as originally scheduled, and there were no related discretionary transactions or open market
- 2. Each RSU represents a contingent right to receive, either (i) one share of GXO common stock, par value \$0.01 per share ("GXO Common Stock"), or (ii) a cash payment equal to the fair market value of one share of GXO Common Stock.
- 3. These RSUs vested in four equal annual installments on the first, second, third, and fourth anniversaries of the grant date, March 16, 2020, subject to the Reporting Person's continued employment with GXO.

## Remarks:

/s/ Karlis P. Kirsis, Attorney-

03/19/2024

in-Fact

\*\* 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.