FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL												
	OMB Number:	3235-0287											
	Estimated average burden												
-	hours ner resnonse.	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* Wilson Malcolm						2. Issuer Name and Ticker or Trading Symbol GXO Logistics, Inc. [GXO]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last) (First) (Middle) C/O GXO LOGISTICS, INC. TWO AMERICAN LANE							3. Date of Earliest Transaction (Month/Day/Year) 03/10/2023								X Officer (give title Other (specify below) Chief Executive Officer					
(Street) GREEN (City)			06831 (Zip)		- 4. If									ne) <mark>X</mark> F F	idual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date,		Code (Instr.			Beneficial Owned Fo		es ally Following	Form:	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount	(A) or (D) Prid		Tra	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 03/10/					/2023	2023		М		3,503	A	\$)	60,546		D				
Common Stock 03/13/2					/2023	2023			F ⁽¹⁾		1,647	D(1)	\$46	.35	58,899		D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Executior if any (Month/Da	Date,	4. Transa Code (8)		on of		6. Date Exercisa Expiration Date (Month/Day/Yea)	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Prio Deriva Secur (Instr.	ative ity	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisat		Expiration Date	Title	Amoun or Numbe of Shares							
Restricted Stock Units	(2)	03/10/2023			M			3,503	(3)		(3)	Common Stock	3,503	\$()	7,006		D		

- 1. No shares were sold by the Reporting Person. 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 on March 10, 2023, and were settled on March 13, 2023, as originally scheduled, and there were no related discretionary transactions or open market sales.
- 2. Each RSU represents a contingent right to receive, either (i) one share of GXO Logistics, Inc. ("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. The RSUs vest in four equal annual installments on the first, second, third, and fourth anniversaries of the grant date, March 10, 2021, subject to the Reporting Person's continued employment with GXO.

Remarks:

/s/ Karlis P. Kirsis, Attorneyin-Fact

03/14/2023

** Signature of Reporting Person

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.