FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB APPROVAL									
١	OMB Number:	3235-0287								
	Estimated average burden									
	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).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(b) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
BANDROWCZAK STEVEN JOHN					Xerox Holdings Corp [ XRX ]							(	X Director			10% Owner		vner		
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year)								X	Office	er (give title v)		Other (specify below)			
XEROX HOLDINGS CORPORATION						08/09/2023									C	Chief Executive Officer				
201 MERRITT 7					4. If Amendment, Date of Original Filed (Month/Day/Year)							, I	6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)														X	,					
	NORWALK CT 06851													Form filed by More than One Reporting Person					orting	
(City) (State) (Zip)					Rule	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 satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Table	I - N	lon-Deriva	tive S	ecui	rities	Ac	quired	d, Di	sposed of	f, or E	Benefic	ially	<b>Owr</b>	ned				
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye				ear) Execution		on Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			and 5) Secu Bene Own Follo		icially d	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) or (D)	Price	e Tra		rted saction(s) . 3 and 4)					
Common Stock 08/09/202						23					135,000(1)	D	\$15.5	53 <sup>(2)</sup> 110,557		0,557		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)	ative Conversion Date Execution Date, rity or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expira (Mont	ation [		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersi Form: Direct (E or Indire (I) (Instr.	Ownership	Beneficial Ownership (Instr. 4)		
					Code	Code V (A) (D)				Expiration Date	Title	Amount or Number of Shares	1							

## Explanation of Responses:

- 1. The reported sales of 135,000 shares occurred automatically pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on May 10, 2023.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$15.39 to \$15.7050, inclusive. The reporting person undertakes to provide to Xerox Holdings Corp., any security holder of Xerox Holdings Corp., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth herein.

/s/ Flor Colon as Attorney-in-

<u>Fact</u>

\*\* Signature of Reporting Person

Doto

08/10/2023

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.