## FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

## ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0362							
Estimated average burd	len							
hours per response:	1.0							

Form 3 Holdings Reported.

Instruction 1(b)

Form 4	Transactions R	teported.	File	ed pursuant to or Sectior					ities Excha ompany A								
1. Name and Address of Reporting Person*  BURNS URSULA M			2. Issuer Name <b>and</b> Ticker or Trading Symbol XEROX CORP [ XRX ]						5. Relationship of Reporting Person(s) to (Check all applicable)  X Director 10%					Owner -			
(Last) (First) (Middle) 45 GLOVER AVENUE P.O BOX 4505				3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2015					//Year)	X Officer (give title Other (specify below) below)  Chairman and CEO							
(Street) NORWALK CT 06856-4505 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
		Table	e I - Non-Deriv	ative Sec	uritie	s Ac	quire	ed, Di	sposed	of, o	Benefic	ially	/ Owne	ed			
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)			te, Transact Code (In		4. Securities Acquired (A) or Disp Of (D) (Instr. 3, 4 and 5)		or Disposed	Securitie Benefici Owned a		es Ow ally For at end of (D)		ership n: Direct or ect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Amount		t	(A) or (D)	Price				(Inst		(msu. 4)	
Xerox Stock Fund <sup>(1)</sup>													74,815.386(1)				Owned by Spouse
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. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	of	r osed (r. 3, 4	6. Date Exercisable an Expiration Date (Month/Day/Year)  Date Exercisable Expiration Date Exercisable		tion Date  \( \lambda \) \( \l		Amount of Unities erlying vative urity (Instr. 3 4)	nt :r		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	i lly	10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)

## Explanation of Responses:

1. Balance reflects 4,241.8823 units sold pursuant to Internal Revenue Service's mandatory distribution rules in spouse's 401k account.

Karen Boyle, Attorney in Fact 01/19/2016

\*\* 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.