Edgar Filing: XEROX CORP - Form 4

XEROX COL Form 4 July 17, 2007 FORM Check thi if no long subject to Section 14 Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b).	y 4 UNITED ST s box s box s STATEMF 6. r Filed pursu s Section 17(a)	FATES SECUE Was ENT OF CHAN ant to Section 1 of the Public Ut 30(h) of the In	shington, GES IN I SECUR 6(a) of the tility Hold	D.C. 20 BENEFI ITIES Securit ling Con	549 ICIA ies E ipany	LOWI Exchange y Act of	NERSHIP OF e Act of 1934, f 1935 or Section	OMB Number: Expires: Estimated a burden hou response	•	
(Print or Type R	Responses)									
1. Name and A NICHOLAS				Ticker or XRX]	Tradii	ng	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 800 LONG 1 BOX 1600	(First) (Mic	(Month/D					Officer (give title Other (specify below) below)			
			nendment, Date Original onth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
STAMFORI	D 06904						Person	lore than One Re	porting	
(City)	(State) (Z	ip) Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	1	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactio Code (Instr. 8) Code V	(Instr. 3,	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
Common Stock					(2)		106,700	D		
Common Stock							1,400	I	Spouse	
Deferred Stock Units	07/16/2007		A <u>(5)</u>	1,893	А	\$ 19.82	25,052	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control

Edgar Filing: XEROX CORP - Form 4

number.

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. Transactio Code (Instr. 8)	5. Number of onDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amou Underlying Securi (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amo or Nun of S
Stock Options	\$ 10.5					01/01/2004(3)	05/15/2013	Common Stock	5,(
Stock Options	\$ 6.8					01/01/2003(3)	09/09/2012	Common Stock	5,(
Stock Options	\$ 9.25					01/01/2002(3)	08/28/2011	Common Stock	5,0
Stock Options	\$ 27					01/01/2001(3)	05/18/2010	Common Stock	5,0
Stock Options	\$ 32.1563					01/01/1998(4)	05/14/2007	Common Stock	5,(
Stock Options	\$ 54.2188					01/01/1999	05/22/2008	Common Stock	5,0
Stock Options	\$ 60.4375					01/01/2000(3)	05/20/2009	Common Stock	5,(
Deferred Comp.	\$ 0 <u>(1)</u>	07/16/2007		J <u>(2)</u> V	\$ 37,500	08/08/1988 <u>(1)</u>	08/08/1988 <u>(1)</u>	Common Stock	37,

Reporting Owners

Reporting Owner Name / Address

Relationships

10% Owner Officer Other

Director

NICHOLAS NJ JR 800 LONG RIDGE ROAD P. O. BOX 1600 STAMFORD 06904

Signatures

K. Boyle Attorney-In-Fact

07/17/2007

*Signature of Reporting
Person

Date

Explanation of Responses:

- * 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).
- (1) Not Applicable.
- (2) Hypothetical investment of deferred compensation in Xerox Stock Fund under the Xerox Saving Plan.
- (3) Options vest over three years, 33.3% per year beginning in year shown.
- (4) Options vest over three years, 33%, 33%, 34%, beginning in year shown.
- (5) Deferred Stock Units issued as payment of fees under the terms of the 2004 Non-Employee Directors Compensation Plan.

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.