FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20049

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

	OMB APPRO	VAL
	OMB Number:	3235-0287
l	Estimated average burd	en
l	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 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* COSBY MARK						2. Issuer Name and Ticker or Trading Symbol OFFICE DEPOT INC ODP									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u> </u>	1017 110	11															Direc	ctor	10%	Owner	
(Last) (First) (Middle)					3 D	Date of Earliest Transaction (Month/Day/Year)									X	Office belov	er (give title v)	Other below	(specify)		
(Last)		(First)	(1	wildule)			02/17/2016										Р	resident. N	orth America	1	
6600 NO	RTH MI	LITA	RY TRAIL			02/	02/1//2010									r resident, r torur r interied					
LEGAL 1	DEDART	MEN	JT																		
LLOME	DLITHA	IVILII	11			4 If	4. If Amandment, Date of Original Filed (Month/Day/Mass)								-	6. Individual or Joint/Group Filing (Check Applicable					
						4. "	4. If Amendment, Date of Original Filed (Month/Day/Year)									Line)					
(Street)															-	X	Eorn	n filed by One	e Reporting Per	son	
BOCA R	ATON	FL	3	3496												Λ		•			
																Form filed by More than One Reporting Person					
(City)		(State	e) (2	Zip)																	
						<u></u>	_						_		<u>.</u>						
			Iabi	e I - No	n-Deriv	ative	Sec	uritie	S AC	quirea	, Dis	sposed o	it, o	r Ben	etici	ally (Owne	ea			
1. Title of S	Security (I	nstr. 3	3)		2. Transac	ction	ion 2A. Deemed 3. 4. Securities Acquired (A)									ount of	6. Ownership	7. Nature			
	, ,		•		Date		//Year) Execution Date, if any (Month/Day/Year)			Transaction Code (Instr. 3, 4 a 8)			Of (D)	of (D) (Instr. 3, 4 and					Form: Direct	of Indirect	
					(Month/Da	ay/Year								Benef			(D) or Indirect (I) (Instr. 4)	Beneficial Ownership			
					(months/bay/rear)						Reported		ted	(,,(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Instr. 4)						
									Code	٧	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)					
Common Stock 02/17/2					2016	016			A		171,958 ⁽¹⁾ A		Α	\$0.0	0000 6		01,063	D			
Common Stock										<u> </u>								,	<u> </u>	<u> </u>	
			Та	ble II -	Derivat	ive S	ecuri	ities /	Acqu	ired, [Disp	osed of,	or E	Benef	iciall	y Ov	vned				
					(e.g., pı	uts, c	alls,	warra	ants,	optio	ns, c	onvertib	le s	securi	ities)						
1. Title of	2.	2. 3. Transaction			ned	4.		5. Number		6. Date Exercisable and		isable and	7. Title and			8. Price of		9. Number o	f 10.	11. Nature	
Derivative	Conversi		Date	Executio	n Date,	Transa				Expiration Date Amount of					Derivative		derivative	Ownership	of Indirect		
Security or Exercise (Month/Day/Year) if any (Month/Day (Month/Day				av/Year)	Code (Code (Instr. 3)		Derivative Securities Acquired		Und			Securities Underlying Derivative		Security (Instr. 5)		Securities Beneficially Owned	Form: Direct (D)	Beneficial Ownership		
Derivative			ay, rear,	٥,	or Indirect													(Instr. 4)			
Security					(A) or			Security (Instr.			ıstr. 3	3		Following	(I) (Instr. 4)						
							Disposed of (D)			and 4)					Reported Transaction	(s)					
						(Instr. 3, 4										(Instr. 4)	'				
			L		aı		and 5)							_							
					П	Amoun		ount													
								1 /			-			or							
							Date		Expiration		of	mber			1						
		Code	V	(A)	(D)	Exercis	able	Date	Title		ares										

Explanation of Responses:

1. These shares represent restricted stock units and will be settled in common stock upon vesting on March 4, 2018. The restricted stock units were earned by the Reporting Person after meeting certain performance objectives for the fiscal 2015 performance period.

/s/ Kevin Williams, Attorneyin-Fact

02/19/2016

** 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.