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 per response:								

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See	STATEMENT OF CHANGES IN BENEFICIAL OWI
Instruction 1(b).	Filed pursuant to Section 16(a) of the Securities Exchange Act of 193 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* CENTRELLA DAVID C						2. Issuer Name and Ticker or Trading Symbol ODP Corp [ODP]									5. Relationship of Reporting Person(s) to Issue (Check all applicable) Director Officer (give title Other (spe					
(Last) (First) (Middle) 6600 NORTH MILITARY TRAIL LEGAL DEPARTMENT					3. Date of Earliest Transaction (Month/Day/Year) 04/22/2024										X Officer (give title X Other (speci below) EVP, President of ODP Business / Solutions					
(Street) BOCA RA	et) CA RATON FL 33496				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						
(City)	(St	ate) (2	Zip)		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 intend satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									nded to						
		Table	I - No	on-Deriva	tive S	Secu	rities	Acc	uired	, Dis	sposed of	, or B	enefic	ially	Own	ed				
Date			2. Transact Date (Month/Day	Execu ay/Year) if any		Deemed cution Date, y hth/Day/Year)		3. Transaction Code (Instr. 8) 4. Securitie Disposed O 5)				and Securi Benefi Owned		ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)					Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)	
Common S	Common Stock			04/22/2024					F		700(1)	D	\$49	19.89 6		61,592		D		
Common S	Stock			04/22/2	024				F		945(2)	D	\$49	.89	60	60,647 D				
Common S	Stock			04/23/2	024				A		3,903(3)	A	\$0.0	0000	64,550 D					
Common S	Stock			04/23/2	024				F		1,536(2)	D	\$49	.89	63	63,014 D		D		
		Tal	ble II								osed of, convertib				Owne	d				
1. Title of Derivative Security (Instr. 3) 2. Conversior or Exercise Price of Derivative Security		3. Transaction Date (Month/Day/Year)	Execu if any	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		e Exerc tion D n/Day/		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Der Sec (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y Ow For Oir Or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	\ \ V	(A)	(D)	Date	eahlo	Expiration	Title	or Number of Shares							

Explanation of Responses:

- 1. Shares of common stock withheld by Issuer to satisfy tax withholding obligations on vesting of shares with restrictions from a grant issued on April 22, 2021.
- 2. Shares of common stock withheld by Issuer to satisfy tax withholding obligations on vesting of shares underlying the payout of performance-based stock units.
- 3. These shares represent performance-based restricted stock units that vested on April 22, 2024.

/s/ Sarah E. Hlavinka, Attorney-in-Fact

04/24/2024

** 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.