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FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

| OMB Number: | 3235-0287 | | |
|--------------------------|-----------|--|--|
| Estimated average burden | | | |
| hours per response: | 0.5 | | |

| | Tab | ole I - Non-Deriva | tive Securities Acquired, Disposed of, or Benef | icially | Owned | | | |
|--|---------------|--------------------|--|---|--|--|--------------------------|--|
| (City) | (State) | (Zip) | | | 1 013011 | | | |
| BOCA RATON | FL | 33496 | | | Form filed by One Reporting Person Form filed by More than One Report Person | | | |
| (Street) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | |
| LEGAL DEPAR | | _ | | | | | | |
| 6600 NORTH MILITARY TRAIL | | () | 07/06/2021 | | EVP, Chi | nief Technology Officer | | |
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) | | Officer (giv below) | ve title | Other (specify below) | |
| 1. Name and Address of Reporting Person [*] <u>Leeper Terry</u> | | | 2. Issuer Name and Ticker or Trading Symbol ODP Corp [ODP] | | tionship of R all applicabl Director | Reporting Person(s) to Issuer ble) 10% Owner | | |
| Obligations may Instruction 1(b). | continue. See | Filed | pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 | | | hours per respo | onse: 0.5 | |

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Code (Instr. | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | 5. Amount of Securities Beneficially Owned Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | |
|---------------------------------|--|---|--------------|---|---|---------------|---|---|---|------------|
| | | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| Common Stock | 07/06/2021 | | F | | 1,435(1) | D | \$46.2 | 57,970 | D | |
| Common Stock | 07/06/2021 | | F | | 5,358 ⁽¹⁾ | D | \$46.2 | 52,612 | D | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 1. Title of 2. Conversion 3. Transaction 3A. Deemed 5. Number 6. Date Exercisable and 7. Title and 8. Price of 9. Number of 10. 11. Nature Transaction Code (Instr. Ownership Derivative Date Execution Date, Expiration Date (Month/Day/Year) Amount of Derivative derivative of Indirect of (Month/Day/Year) if any (Month/Day/Year) Derivative Security (Instr. 3) or Exercise Price of Security (Instr. 5) Securities Beneficially Beneficial Securities Form: 8) Securities Underlying Direct (D) Ownership Derivative Acquired or Indirect (I) (Instr. 4) Derivative Owned (Instr. 4) (A) or Disposed Security (Instr. 3 and 4) Following Reported Security of (D) (Instr. 3, 4 and 5) Transaction(s) (Instr. 4) Amount or Number Date Expiration of v (D) Title Code (A) Exercisable Date 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 July 6, 2020.

| <u>/s/ N. David Bleisch,</u> |
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| Attorney-in-Fact |
| ** Cignoture of Departing Dereon |

** Signature of Reporting Person Date

07/08/2021

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.