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						

U 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											hours	per res	sponse:	0.5					
1. Name and Address of Reporting Person* <u>Decker Patrick</u>						Issuer Name and Ticker or Trading Symbol Xylem Inc. [XYL]							(Ch	telationship (eck all applic	able)	g Pers	son(s) to Iss		
	(F RNATIONA LEM INC.	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/27/2021								X Officer (give title Other (specify below) President & CEO					
(Street) RYE BR (City)			10573 (Zip)		- 4. I -	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	ndividual or Joint/Group Filing (Check Applicable b) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tab	le I - No	n-Deriv	vativ	e Se	curities	s Ac	quired	, Dis	posed o	f, o	or Ben	eficiall	y Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D			Day/Year) if a		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed O Code (Instr.		es Acquired (A) o Of (D) (Instr. 3, 4 a			Benefici Owned F	es ally Following	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount		(A) or (D)	Price	Transact	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Common	Common Stock 02/27/2021						F		3,135(1)	D	\$102.2	250,680			D			
Common	Stock			03/01	A 14,673 ⁽²⁾ A \$0.00 265,353					,353		D							
		-	Table II -								osed of, convertil				Owned				
1. Title of Derivative Security (Instr. 3)	vative or Exercise (Month/Day/Year) r. 3) Pice of Derivative Security Conversion of Exercise (Month/Day/Year) Price of Derivative Security Execution Date, if any (Month/Day/Year) Resolution Date, if any (Month/Day/Year)		4. Transa Code (8)	Instr.	5. Numl of Derivati Securiti Acquire (A) or Dispose of (D) (I 3, 4 and	ed ed nstr.	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date		or Nun of		Security 14) Amount or Number	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Explanation of Responses:

\$102.23

1. Reflects the withholding of common stock to pay the tax liability incident to the vesting of restricted stock units granted on Feb 27, 2020 under the Xylem 2011 Omnibus Incentive Plan

(A)

64,655

2. Reflects an award of restricted stock units pursuant to the Xylem 2011 Omnibus Incentive Plan, that are scheduled to vest in one third increments on March 1, 2022, March 1, 2023 and March 1, 2024

(D)

3. Reflects an award of non-qualified stock options pursuant to the Xylem 2011 Omnibus Incentive Plan, that are scheduled to vest in one third increments on March 1, 2022, March 1, 2023 and March 1, 2024

(3)

Remarks:

Stock Option

(Right to Buy)

/s/ Kimberly Rehm, by power of attorney for Patrick K. **Decker**

64,655

\$0.00

64,655

03/02/2021

D

Common

03/01/2031

** 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).

03/01/2021

** 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.