FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
|-------------|------|-------|
| | | |

| Check this box if no longer subject to | STATEMENT |
|--|-----------|
| Section 16. Form 4 or Form 5 | |
| obligations may continue. See | |
| Instruction 1(b). | Filed pur |

OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* Sabol Colin R | | | | | 2. Issuer Name and Ticker or Trading Symbol Xylem Inc. [XYL] | | | | | | | | | | ationship of Reporting P all applicable) Director Officer (give title | | 10% Othe | Owner r (specify | |
|---|--|--|---------------|----------------------------|---|---|-----|------|--------------------------------------|--|--|---|-----------------|----------------------|---|-----------------------|--|---|--|
| (Last) (First) (Middle) 1133 WESTCHESTER AVENUE C/O XYLEM INC. | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/28/2012 | | | | | | | | | Α | belov SV | , | belo Strategy Off | , | |
| (Street) WHITE PLAINS (City) | NY (St | | .0604 Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | . Indiv ine) X | ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| Date | | | | Date (Month/Day/Year) if a | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code | Transaction Disposed Code (Instr. 5) | | ties Acquired (A) I Of (D) (Instr. 3, 4 | | | and Secu | | cially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | Code | v | Amount | | (A) or (D) | Price | | Transa | action(s) 3 and 4) | | (11311. 4) | |
| Common Stock 09/28 | | | | | 8/2012 | | | | F | | 65 ⁽¹⁾ D | | \$25 | .15 | 5 41,795 | | D | | |
| | 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 Date (Month/Day/Year) Derivative Security 3. Transaction Date (Month/Day/Year) | | | if any | | 4. Transaction Code (Instr. 8) | | of | | Expiration | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | ıstr. 3 | | vative surity str. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code V | | (A) | (D) | Date Exercisa | | Expiration Date | Title | or Nui of | mber ares | | | | | |

Explanation of Responses:

1. Reflects the withholding of shares of Common Stock to pay the tax liability incident to the vesting of shares of restricted stock granted on March 5, 2009 under the ITT Corporation 2003 Equity Incentive Plan. Equity awards formerly granted by ITT Corporation were converted into equity awards of Xylem Inc. in connection with the spin-off of Xylem Inc. from ITT Corporation on October 31, 2011.

Remarks:

/s/ Rina E. Teran, Assistant Corporate Secretary of Xylem Inc., by power of attorney for Colin R. Sabol

10/02/2012

** 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.