

[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

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

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## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *				2. Is	2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Anderson Scott P					C. H. ROBINSON WORLDWIDE, INC. [ CHRW ]							X_ Director10% Owner					
(Last) (First) (Middle)			3. Г	3. Date of Earliest Transaction (MM/DD/YYYY)							_X_ Officer (give title below) Other (specify below) Interim CEO						
14701 CHARLSON ROAD					12/30/2022												
(Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)							6. Individual or Joint/Group Filing (Check Applicable Line)					
EDEN PRAIRIE, MN 55347 (City) (State) (Zip)													X _ Form filed by One Reporting Person Form filed by More than One Reporting Person				
			able I - N	lon-Deri	ivati	ve Secu	rities A	equir	red, Di	sposed	of,	or Be	neficially Owne	d			
1. Title of Security (Instr. 3)				ate 2A. Deemed Execution Date, if any		3. Trans. Code (Instr. 8)		4. Securities Acquir or Disposed of (D) (Instr. 3, 4 and 5)		Ď)	ed (A)	5. Amount of Securiti Following Reported 7 (Instr. 3 and 4)	ties Beneficially Owned Transaction(s)		Ownership Form: I Direct (D)	Beneficial Ownership	
							Code	V	Amou	int (A) o		Price				(I) (Instr. 4)	(Instr. 4)
Common Stock 1/1/2023				1/2023		A 27305 (1) A \$0.00 27305			D								
	Tab	le II - Deriv	ative Sec	urities I	Bene	ficially	Owned	(e.g.,	, puts,	calls, w	arı	rants,	options, conver	tible secu	ırities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deeme Execution Date, if any	Code		5. Number of Derivative S Acquired (A Disposed of (Instr. 3, 4 a			Date Exercisable I Expiration Date		S	Securities	Underlying Derivativ Security Security		9. Number of derivative Securities Beneficially Owned Following	Ownership Form of	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Dat Exe	e ercisable	Expiration Date	n T	itle	Amount or Number of Shares		Reported Transaction(s) (Instr. 4)	or Indirect	
Phantom Stock (Restricted Stock Units)	(2)	12/30/2022		A		477 (3	0.		(4)	<u>(4)</u>	(	Commo Stock	477	(3)	23672	D	

## **Explanation of Responses:**

- (1) Restricted stock units vest on January 1, 2024.
- (2) Each phantom share/restricted stock unit will be paid in one share of common stock.
- (3) The reporting person was granted 477 restricted stock units at no cost as a quarterly installment of the annual equity-based award provided to each non-employee director.
- (4) The restricted stock units are immediately vested, and following the reporting person's termination of service as a director, become payable in shares of common stock according to the schedule previously chosen by the reporting person.

**Reporting Owners** 

Panarting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Anderson Scott P								
14701 CHARLSON ROAD	X		Interim CEO					
EDEN PRAIRIE, MN 55347								

## **Signatures**

/s/ Jessica Homes, Attorney-in-Fact for Scott P. Anderson

-\*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 control number.