FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHA	NGES IN	BENEFICIA	L OWNERSHIP

	OMB APPRO	VAL
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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* <u>Garcia Christian A</u>					2. Issuer Name and Ticker or Trading Symbol VISTEON CORP [VC]									all appli Direct	cable) or	ng Person(s) to Is:		wner	
(Last) VISTEO	.ast) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 10/01/2017									(give title) & Chief I	Financ	Other (s below)	
		NTER DRIVE																	
(Street) VAN BUREN TOWNSHIP MI 48111				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								i. Indivine)	,					
(City)	(S	tate)	(Zip)																
		Tab	le I - No	n-Deriv	/ative	Sec	uriti	es Ac	quired,	Dis	posed (of, or Be	enefici	ally	Owne	d			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				Execu ay/Year) if any		a. Deemed ecution Date, any onth/Day/Year)		Transaction Disposed Code (Instr.		ities Acquired (A) o d Of (D) (Instr. 3, 4		and 5) Sec Ben Owr		Amount of curities neficially ned Following		: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	e V Amount		(A) or (D)	Price			ted action(s) 3 and 4)			(Instr. 4)
Common Stock 10/01/20				2017 ⁽¹	017(1)		M		438	A	(1)	438			D			
Common	Stock			10/01/2	2017 ⁽²	2)			F		139	D	\$12	4.15	2	299		D	
		Т	able II -									, or Ben ble sec			wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year	n Date,	4. Transacti Code (Ins		on of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly [10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownershi (Instr. 4)
					Code	v	(A)		Date Exercisab		Expiration Date	Title	Amoun or Numbe of Shares						
Restricted Stock	(1)	10/01/2017			M			438	(3)	1	10/01/2019	Common Stock	438		(1)	877		D	

Explanation of Responses:

- 1. Each Restricted Stock Unit, which is the economic equivalent of one share of Visteon common stock, automatically vested on October 1, 2017 and was converted and paid to me in common stock without any election or action on my part. The value of each share was based on the fair market value of Visteon common stock as of September 29, 2017, the next preceding trading day.
- 2. These shares were withheld by Visteon to satisfy income tax withholding obligations arising in connection with the vesting of certain Restricted Stock Units. The value of each share was based on the fair market value of Visteon common stock as of September 29, 2017, the next preceding trading day.
- 3. Restricted Stock Units vest to the extent of 33% of the units granted each year following the first annivesary of the date of grant until the third anniverary of the date of grant. Each Restricted Stock Unit will be converted and distributed to me, without payment, in cash or stock at the election of Visteon, upon vesting and based upon the then current market value of a share of Visteon common stock, subject to tax withholding

Remarks:

Heidi A. Sepanik, Secretary, Visteon Corporation on behalf 10/03/2017 of Christian A. Garcia

** 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.