## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

|   | OMB APPRO              | OVAL      |  |  |  |  |  |
|---|------------------------|-----------|--|--|--|--|--|
|   | OMB Number:            | 3235-0287 |  |  |  |  |  |
| l | Estimated average burd | en        |  |  |  |  |  |
| l | hours per response:    | 0.5       |  |  |  |  |  |

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

| 1. Name and Address of Reporting Person*  TREADWELL DAVID L                      |   |  |   |         |  |              | 2. Issuer Name <b>and</b> Ticker or Trading Symbol VISTEON CORP [ VC ] |   |  |                     |          |                |   |                                |   |   | of Reporting<br>cable)<br>or<br>(give title | g Pers   | son(s) to Iss                           | ner   |
|--|---|--|---|---------|--|--------------|--|---|--|---------------------|----------|----------------|---|--------------------------------|---|---|---|--|---|---|
| (Last) VISTEO  | ast) (First) (Middle)  ISTEON CORPORATION                             |  |   |         |  |              |  | 3. Date of Earliest Transaction (Month/Day/Year) 06/10/2016 |  |                     |          |                |   |                                |   |   |   |  | Other (s<br>below)                      | вреспу  |
| ONE VII  | LLAGE CE  | 4 15                                       | 4 If Amendment Data of Original Filled (Menth (D. 27) |         |  |              |  |   |  |                     |          |                | 6. Individual or Joint/Group Filing (Check Applicable |                                |   |   |   |  |   |   |
| Street) VAN BUREN TOWNSHIP MI 48111  |   |  |   | . 4. 11 | 4. If Amendment, Date of Original Filed (Month/Day/Year) |              |  |   |  |                     |          |                |   |                                | X Form filed by One Reporting Person Form filed by More than One Reporting Person |   |   |  |   |   |
| (City)   | ity) (State) (Zip)  |  |   |         |  |              |  |   |  |                     |          |                |   |                                |   |   |   |  |   |   |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |   |  |   |         |  |              |  |   |  |                     |          |                |   |                                |   |   |   |  |   |   |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)                    |   |  |   |         |  | Execution Da |  |   | Co   | ansacti<br>ode (Ins |          |                |   |                                | 4 and Securit<br>Benefic<br>Owned   |   | es<br>ally<br>Following                     | Form<br>(D) or   | : Direct<br>r Indirect<br>str. 4)       | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |
|  |   |  |   |         |  | Co           | ode V  | ,   | Amount   | (A) (D)             | or Pi    | rice           | Reporte<br>Transac<br>(Instr. 3                       | tion(s)                        |   |   | (Instr. 4)                                  |  |   |   |
| Common   | Stock   |  |   |         |  |              |  |   |  |                     |          | 2,000          |   |                                | D   |   |   |  |   |   |
|  |   | Т  | able II - I   |         |  |              |  |   |  |                     |          |                | , or Ber<br>ble sec                                   |                                |   | Owned   |   |  |   |   |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                              | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemee<br>Execution I<br>if any<br>(Month/Day     | Date,   | Code (Inst   |              |  |   | 6. Date Exercisab<br>Expiration Date<br>(Month/Day/Year) |                     |          | Amount of      |   | 1 2                            | B. Price of<br>Derivative<br>Gecurity<br>Instr. 5)                                | 9. Number<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | у   | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>t (Instr. 4) |   |
|  |   |  |   |         | Code   | v            | (A)  | (D)   | Date<br>Exerc  | isable              | Ex<br>Da | piration<br>te | Title   | Amo<br>or<br>Num<br>of<br>Shar | ber   |   |   |  |   |   |
| Restricted<br>Stock<br>Units   | (1)   | 06/10/2016                                 |   |         | A  |              | 1,425  |   | (  | 1)                  |          | (1)            | Common<br>Stock                                       | 1,4                            | 25  | \$73.64   | 3,032                                       |  | D                                       |   |

## **Explanation of Responses:**

1. These Restricted Stock Units were credited to my account, without payment by me, under the Company's Non-Employee Director Stock Unit Plan. Each Restricted Stock Unit will be converted and distributed to me, without payment, in stock or cash following the termination of board service and based upon the then current market value of a share of Visteon common stock.

## Remarks:

Heidi A. Sepanik, Secretary, Visteon Corporation, on behalf 06/13/2016 of David L. Treadwell

\*\* Signature of Reporting Person

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.