FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL        |          |  |  |  |  |  |  |  |  |
|---------------------|----------|--|--|--|--|--|--|--|--|
| OMB Number:         | 3235-028 |  |  |  |  |  |  |  |  |
| Catimated average b | aurdon.  |  |  |  |  |  |  |  |  |

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

37 hours per response: 0.5

| 1 Name or  | nd Addross of   | f Poporting Porces*                        |   |  | 2. Is  | suer   | Name  | and Tic    | cker   | or Tradi    | na S           | vmbol                                       |   |  | 5                                  | Relat   | tionshin                                       | of Reportin  | a Pei  | rson(s) to Is                                       | suer                                  |  |  |
|--|---|--|---|--|--|--|-------|------------|--|-------------|----------------|---|---|--|------------------------------------|---|--|--|--|---|---------------------------------------|--|--|
| Name and Address of Reporting Person*     TREADWELL DAVID L  |   |  |   |  | 2. Issuer Name <b>and</b> Ticker or Trading Symbol VISTEON CORP [ VC ] |  |       |            |  |             |                |   |   |  |                                    | Check   | all appl                                       | icable)  | . J . UI   | . ,   |                                       |  |  |
|  |   |  |   |  |  |  |       |            |  |             |                |   |   |  |                                    | X   | Office   | or<br>r (give title  |  | 10% O<br>Other (                                    |                                       |  |  |
| (Last)   | (F  | irst) (                                    |   | 3. Date of Earliest Transaction (Month/Day/Year) |  |  |       |            |  |             |                |   |   |  |                                    | )   |  | below)   | Specify  |   |                                       |  |  |
| VISTEON CORPORATION  |   |  |   |  | 06/12/2015   |  |       |            |  |             |                |   |   |  |                                    |   |  |  |  |   |                                       |  |  |
| ONE VILLAGE CENTER DRIVE   |   |  |   |  |  |  |       |            |  |             |                |   |   |  |                                    |   |  |  |  |   |                                       |  |  |
|  |   |  |   |  | 4. If  | 4. If Amendment, Date of Original Filed (Month/Day/Year) |       |            |  |             |                |   |   |  |                                    |   |  | 6. Individual or Joint/Group Filing (Check Applicable Line)  |  |   |                                       |  |  |
| (Street)  VAN BU   |   |  |   |  |  |  |       |            |  |             |                |   |   |  | Form filed by One Reporting Person |   |  |  |  |   |                                       |  |  |
| TOWNSHIP MI 48111  |   |  |   |  |  |  |       |            |  |             |                |   |   |  |                                    |   | Form filed by More than One Repo<br>Person     |  |  |   |                                       |  |  |
| (City)   | (S  | itate) (                                   | (Zip)   |  |  |  |       |            |  |             |                |   |   |  |                                    |   |  |  |  |   |                                       |  |  |
|  |   | Tab  | le I - Non  | -Deriva  | ative  | Sec  | uriti | es Ac      | qu   | ired, C     | Disp           | osed  | of, or  | Be                                     | neficia                            | ally (  | Owne   | d  |  |   |                                       |  |  |
| 1. Title of Security (Instr. 3)  2. Transa Date (Month/D   |   |  |   |  | ar) E  | 2A. Deemed<br>Execution Date<br>if any<br>(Month/Day/Ye  |       | ΄ Ι        | 3.<br>Transac<br>Code (Ir<br>8)                                | tion Dispos |                | urities Acquired (A<br>ed Of (D) (Instr. 3, |   |  | nd                                 | 5. Amount of<br>Securities<br>Beneficially<br>Owned Following |  | Forn<br>(D) c  | wnership<br>n: Direct<br>or Indirect<br>nstr. 4)               | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |                                       |  |  |
|  |   |  |   |  |  |  |       |            |  | Code        | v              | Amoun                                       | t   | (A) or<br>(D)                          | Price                              | .   | Reported<br>Transaction(s)<br>(Instr. 3 and 4) |  |  |   | (Instr. 4)                            |  |  |
| Common Stock   |   |  |   |  |  |  |       |            |  |             |                |   |   |  |                                    |   | 2,000  |  |  | D   |                                       |  |  |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |   |  |   |  |  |  |       |            |  |             |                |   |   |  |                                    |   |  |  |  |   |                                       |  |  |
| 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, 1  | 4.<br>Transaction<br>Code (Instr<br>8)                                 |  |       |            | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |             |                |   | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative Secur<br>(Instr. 3 and 4) |  |                                    | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)           |  | 9. Number<br>derivative<br>Securities<br>Beneficiall<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | Ownershi<br>Form:<br>Direct (D)<br>or Indirec<br>(I) (Instr. 4 | Ownership   | Beneficial<br>Ownership<br>(Instr. 4) |  |  |
|  |   |  |   | Code   | Code   | v  |       | Dat<br>Exe | e<br>ercisable   | Ex<br>Da    | piration<br>te | Title                                       |   | Amount<br>or<br>Number<br>of<br>Shares |                                    |   |  |  |  |   |                                       |  |  |
| Restricted<br>Stock  | (1)   | 06/12/2015                                 |   |  | A  |  | 968   |            |  | (1)         |                | (1)   | Comn  |  | 968                                | \$1   | 08.41  | 968  |  | 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 06/16/2015 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.