Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549	
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STATEMENT OF CHANGES	IN BENEFICIAL

OMB APPROVAL 3235-0287 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

1. Name and Address of Reporting Person* SCRICCO FRANCIS M					2. Issuer Name and Ticker or Trading Symbol VISTEON CORP [VC]										ationship of Reportir all applicable) Director		10% Ov		wner
	(Last) (First) (Middle) VISTEON CORPORATION ONE VILLAGE CENTER					3. Date of Earliest Transaction (Month/Day/Year) 11/04/2021									Officer (give title below)		Other (sp below)		specify
(Street) VAN BU TOWNS (City)	HIP N		18111 Zip)		4. If A							6. Indi Line) X	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Table	I - No	n-Deriva	tive S	Secu	rities	Acc	uired	, Dis	posed of	, or E	Benefi	cially	/ Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				Execution D		ate,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			and Securi Benefi		ties cially I Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D) Pri		е	Transaction(s) (Instr. 3 and 4)				(111501. 4)
Common	Stock		11/04/2021 s 2,000				D	\$1	19.38	3 4,350			D						
		Ta	ble II								osed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		Execution Date, Transaction of		ired r osed : 3, 4	Expiration Date (Month/Day/Year)				7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	or Number of Shares						

Explanation of Responses:

Remarks:

Heidi A. Sepanik, Secretary, Visteon Corporation on behalf 11/08/2021 of Francis M. Scricco

** Signature of Reporting Person Date

OWNERSHIP

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

^{*} 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).