FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
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**OWNERSHIP** 

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

Name and Address of Reporting Person*     Vallance Robert R						2. Issuer Name and Ticker or Trading Symbol VISTEON CORP [ VC ]								neck all ap Dire	onship of Reporting Pe all applicable) Director Officer (give title		rson(s) to Issuer  10% Owner Other (specify		
(Last) VISTEO ONE VII		3. Date of Earliest Transaction (Month/Day/Year) 03/01/2021									Senior Vice President								
(Street) VAN BUREN TOWNSHIP 48111						4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
(City)	(S	tate) (	(Zip)																
		Tabl	e I - No	n-Deriv	/ative	Sec	uritie	es Ac	quired,	Dis	posed o	of, or Be	neficia	lly Own	ed				
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day					Execution if any		A. Deemed execution Date, any Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3,		5) Secur Benef Owne	5. Amount of Securities Beneficially Owned Following Reported		: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Trans	action(s) 3 and 4)			(Instr. 4)	
Common Stock 03/01/20						)21 <sup>(1)</sup>			M		245	A	(1)		16,419		D		
Common Stock 03/01/20					2021 <sup>(2</sup>	)21 <sup>(2)</sup>		F		107	D	\$129.	98	6,312		D			
		Т	able II -								osed of converti			/ Owne	i				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	n Date,	4. Transa Code ( 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivativ Security (Instr. 5)		e S Illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares						
Restricted Stock Units	(1)	03/01/2021			М			245	(3)	(	03/01/2021	Common Stock	245	(1)	0		D		

## **Explanation of Responses:**

- 1. Each Restricted Stock Unit, which is the economic equivalent of one share of Visteon common stock, automatically vested on March 1, 2021 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 March 1, 2021.
- 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 March 1, 2021.
- 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, 03/03/2021 Visteon Corporation on behalf

\*\* 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.