FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
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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*						2. Issuer Name and Ticker or Trading Symbol VISTEON CORP [VC]											ationship c all appli Directo			rson(s) to Issuer 10% Owner			
(Last) (First) (Middle) HENRY FORD MUSEUM & GREENFIELD VILLAGE						3. Date of Earliest Transaction (Month/Day/Year) 09/30/2003											Officer below)	(give title		Other (s below)	specify		
20900 OAKWOOD BOULEVARD						4. If Amendment, Date of Original Filed (Month/Day/Year)											6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)													X Form filed by One Reporting Person Form filed by More than One Reporting Person										
(City)	(S	tate)	(Zip)																				
		Tab	le I - Nor	n-Deriv	ative	Se	curitie	s Ac	qu	ired, [Disp	osed (of, o	r Bei	neficia	lly	Owned	I					
Date					action Day/Ye	Executio		a. Deemed recution Date, any lonth/Day/Year)		3. Transac Code (li 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				4 and Secu Bene Own		Amount of curities neficially ned Following		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
							Code V		Amount		(A) or (D)	Price		Reported Transact (Instr. 3	tion(s)			(Instr. 4)					
Common Stock																	5,000			D			
Common Stocl																	12,285				By spouse		
		T	able II - I				urities s, warr									y O	wned		,				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deeme Execution if any (Month/Day	Date,	4. Transactio Code (Inst 8)			tive ties ed	6. Date Exercisa Expiration Date (Month/Day/Year				7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		l Security	De Se	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owner: Form: Direct or Indi (I) (Inst	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Dat Exe	te ercisable		piration ate	Title		Amount or Number of Shares								
DCP Visteon Stock Units	(1)	09/30/2003			A		244			(1)		(1)	Com		244		\$6.64	27,270)	D			
DCP Visteon Stock Units	(2)	09/30/2003			A		2,234			(2)		(2)	Com		2,334		\$6.64	29,605	5	D			

Explanation of Responses:

- 1. These Visteon Stock Units result from automatic reinvestment of cash dividends payable on Visteon Stock Units in my account and were credited to my account by the Company, without payment by me, under the Company's Deferred Compensation Plan for Non-Employee Directors. In general, these Visteon Stock Units will be distributed to me, without payment, in shares of Common Stock, on January 15th of the year following termination of board service, based upon the then current market value of a share of Common Stock.
- 2. In general, these Visteon Stock Units will be converted and distributed to me, without payment, in shares of Common Stock, on January 15th of the year following termination of board service, based upon the then current market value of a share of Common Stock

Remarks:

Heidi A. Diebol-Hoorn, Assistant Secretary, Visteon Corporation, on behalf of Steven K. Hamp

10/02/2003

** 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.