Edgar Filing: JOHNSTON MICHAEL F - Form 4

JOHNSTON	N MICHAEL F										
Form 4											
February 14	4, 2006										
FORM			CECU					OMMERION		PPROVAL	
UNITED STATES S				SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549					OMB Number:	3235-0287	
Check t if no lor subject Section Form 4	to STATE 16.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								January 31, 2005 average rs per 0.5	
Form 5 obligation may con <i>See</i> Inst 1(b).	ons ntinue. Section 1'	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940									
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> JOHNSTON MICHAEL F			2. Issuer Name and Ticker or Trading Symbol VISTEON CORP [VC]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction				(Chec.	к ап аррпсабіе	:)		
	CORPORATIO CENTER DRIV		(Month/I 02/12/2	Day/Year) 2006				X Director X Officer (give below) Chain		Owner er (specify	
				endment, D nth/Day/Yea	ate Origina r)	1		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
VAN BUR TOWNSH	EN IP, MI 48111							Form filed by M Person	lore than One Re	eporting	
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution Date, if		3. Transactio Code (Instr. 8)	4. Securit or(A) or Dis (Instr. 3, 4	sposed	of (D)	Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock (1)	02/12/2006(1)			Code V F	Amount 68,883	(D) D	Price \$ 5.005	(Instr. 3 and 4) 262,988	D		
Common								256 <u>(2)</u>	I	By Company	

Stock

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

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Plan

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships					
hepotong of the function	Director	10% Owner	Officer	Other		
JOHNSTON MICHAEL F VISTEON CORPORATION ONE VILLAGE CENTER DRIVE VAN BUREN TOWNSHIP, MI 48111	Х		Chairman & C.E.O.			

Signatures

Heidi A. Sepanik, Secretary, Visteon Corporation on behalf of Michael F. Johnston	02/14/2006
<u>**Signature of Reporting Person</u>	Date

Explanation of Responses:

- * 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).

The shares were withheld by Visteon to satisfy income tax withholding obligations arising in connection with the vesting of certain shares(1) of restricted common stock. The value of each share was based on the fair market value of Visteon common stock as of February 10, 2006, the next preceding trading day.

(2) These shares, or units representing these shares, were acquired under the Visteon Invesment Plan and reported to me in my most recent plan statement.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.