## Edgar Filing: VISTEON CORP - Form 4

VISTEON CO	ORP										
Form 4											
April 03, 200	7										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OND	3235-0287		
Check this	s box		Was	hington,	D.C. 205	49		Number:	January 31,		
if no longe	ər.	EMENT O	<b>Г СНАМ</b>	CES IN F	RENEFI		NEDSHID OF	Expires:	2005		
subject to Section 16		STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							Estimated average burden hours per response 0.5		
Form 4 or		SECURITES									
Form 5	Filed p	oursuant to	Section 16	b(a) of the	Securiti	es Exchang	ge Act of 1934,	100001100	0.0		
obligation may contin	<sup>s</sup> Section 1						of 1935 or Section	n			
See Instruc		30(h)	of the Inv	vestment (	Company	Act of 19	40				
1(b).											
(Deint an Tours D											
(Print or Type R	esponses)										
1. Name and Address of Reporting Person       2. Issuer Name and Ticker or Trading       5. Relationship of								f Reporting Per	Reporting Person(s) to		
WOODROW	Symbol				Issuer	1 0					
			•	N CORP	[VC]				、 、		
(Last)	(First)	(Middle)	3 Date of	Earliest Tra	insaction		(Che	ck all applicable	e)		
							X Director	10%	6 Owner		
VISTEON C	03/30/2007			Officer (give title Other (specify below)							
VILLAGE C	ENTER DRI	VE					Delow)	Delow)			
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)				
Form filed by N						One Reporting Person fore than One Reporting					
VAN BURE							Person				
TOWNSHIP											
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	ecurities Ac	quired, Disposed o	of, or Beneficial	lly Owned		
1.Title of	2. Transaction			3.	4. Securit		5. Amount of	6. Ownership	7. Nature of		
Security (Instr. 3)	(Month/Day/Y		on Date, if	Transactic Code	onAcquired Disposed		Securities	Form: Direct (D) or	Indirect Beneficial		
(IIIsu: 5)		any (Month/	/Day/Year)		-		Beneficially Owned	Indirect (I)	Ownership		
		× ×	, ´,		× ,	,	Following	(Instr. 4)	(Instr. 4)		
						(A)	Reported Transaction(s)				
						or	(Instr. 3 and 4)				
Common				Code V	Amount	(D) Price					
Stock							15,000	D			
StovA											

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

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 control number.

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

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

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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)	ionof Derivative Securities		erivative Expiration Date rities (Month/Day/Year) uired or osed of r. 3, 4,				8. Price Deriva Securit (Instr.
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
DCP Visteon Stock Units	<u>(1)</u>	03/30/2007		А	2,326		<u>(1)</u>	<u>(1)</u>	Common Stock	2,326	\$ 8.5

## **Reporting Owners**

Reporting Owner Name / Address		Relationsh	ips				
	Director	10% Owner	Officer	Other			
WOODROW KENNETH VISTEON CORPORATION ONE VILLAGE CENTER DRIVE VAN BUREN TOWNSHIP, MI 48111	Х						
Signatures							
Heidi A. Sepanik, Secretary, Visteon Corporation, on behalf of Kenneth B. Woodrow							

<u>\*\*</u>Signature of Reporting Person

## **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).
- (1) In general, these Visteon Stock Units will be converted and distributed to me, without payment, in shares of Common Stock or cash, following termimation of board service, based upon the then current market value of a share of Common Stock.

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.

Date