Edgar Filing: VISTEON CORP - Form 4

VISTEON CO	ORP										
Form 4											
April 04, 200	6										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								т -	OMB APPROVAL		
	- UNITE	DSIALES						OMB Number:	3235-0287		
	Check this box Washington, D.C. 20549							Expires:	January 31,		
if no longe subject to	er STATI	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF							2005		
Subject to Section 16	ó.	SECURITIES							Estimated average burden hours per		
Form 4 or Form 5									0.5		
obligation							ge Act of 1934,				
may contin	nue. Section I			•	U	pany Act o Act of 19	of 1935 or Section 40	n			
See Instruction 1(b).	ction	50(II)	of the m	vestment	company		-10				
-(-).											
(Print or Type R	esponses)										
1 Name and Ac	ldress of Reporti	ng Derson *	2 I		m: 1 a		5 Palationship o	f Deporting Der	son(s) to		
WOODROW	2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer						
	•	N CORP	[VC]								
(Last)	(First)	(Middle)	3. Date of Earliest Transaction				(Check all applicable)				
()	()	()					X Director	10%	6 Owner		
VISTEON CORPORATION, ONE			03/31/2006			Officer (give title Other (specify below)					
VILLAGE C	ENTER DRI	VE					below)	below)			
(Street)			4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check					
			Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person				
						fore than One Reporting					
TOWNSHIP							Person				
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	ecurities Ac	quired, Disposed o	of. or Beneficial	llv Owned		
1.Title of	2. Transaction l	Date 2A Dee		3.	4. Securit		5. Amount of	6. Ownership	-		
Security	(Month/Day/Ye		on Date, if		onAcquired	(A) or	Securities	Form: Direct	Indirect		
(Instr. 3)		any (Month)	/Day/Year)	Code (Instr. 8)	Disposed		Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		(WOIIIII	Day/Teal)	(111501.0)	(11150. 5,	+ and 5)	Following	(Instr. 4)	(Instr. 4)		
						(A)	Reported				
						or	Transaction(s) (Instr. 3 and 4)				
Common				Code V	Amount	(D) Price					
Stock							15,000	D			
Stoon											

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)	5. Number onof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 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>	03/31/2006		А	4,282	<u>(1)</u>	<u>(1)</u>	Common Stock	4,282	\$ 4.

Reporting Owners

Reporting Owner Name / Address		Relationsh		
	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 Co Woodrow	orporation	, on behalf c	of Kenne	th B. 04/04/2006

**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).
- In general, these Visteon Stock Units will be converted and distributed to me, without payment, in shares of Common Stock or cash, (1) following termination 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.

Woodrow

Date