## Edgar Filing: SCHAFFER CHARLES L - Form 4

SCHAFFER	CHARLES L											
Form 4												
October 02,	2007											
FORM		ст і тес	GECU	DITIES			COMMERIO	Т	PPROVAL			
	UNITED	SIAIES		shington			COMMISSIO	NomB Number:	3235-02			
Check th if no long	aar							Expires:	January 21	31, 005		
subject to Section 1 Form 4 c	or <b>STATEN</b>			SECUI	WNERSHIP OF	Estimated burden hou response	l average ours per					
Form 5 obligatio may con <i>See</i> Instr 1(b).	tinue. Section 17(	a) of the H	Public U	tility Hol	ding Co		nge Act of 1934, of 1935 or Secti 940					
(Print or Type ]	Responses)											
1. Name and Address of Reporting Person <u>*</u> SCHAFFER CHARLES L			2. Issuer Name <b>and</b> Ticker or Trading Symbol VISTEON CORP [VC]				5. Relationship of Reporting Person(s) to Issuer					
( <b>T</b> )							(Check all applicable)					
(Last)	(First) (1	Middle)	3. Date of Earliest Transaction (Month/Day/Year)			l	_X_ Director10% Owner					
VISTEON O		(Month/Day/Tear) 09/28/2007				Officer (give titleOther (specify below) below)						
(Street)			4. If Amendment, Date Original			al	6. Individual or Joint/Group Filing(Check					
VAN BURI	EN P, MI 48111		Filed(Mo	onth/Day/Yea	r)		Applicable Line) _X_ Form filed by Form filed by Person	One Reporting P More than One R				
		(7:)										
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	e Securities A	cquired, Disposed	of, or Beneficia	lly Owned			
1.Title of Security2. Transaction Date (Month/Day/Year)2A. Deeme Execution any (Month/Date)(Instr. 3)any (Month/Date)		Date, if Transaction		Disposed	l (A) or l of (D)	5. Amount of 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)				
				Code V	Amount		(Instr. 3 and 4)					
Reminder: Rep	port on a separate line	for each cla	ass of sec	urities bene	ficially ow	ned directly	or indirectly.					
					inforı requi	mation cont red to resp ays a curre	spond to the colle tained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)			
	Tab	la II - Doriv	ativo Soc	urities A ac	wired Di	sposed of an	Reneficially Owned	1				

- Derivative Securities Acquired, Disposed of, or Beneficially Owned (*e.g.*, puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8. Price
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securities	Deriva
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Securit

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					(Instr.	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
DCP Visteon Stock Units	<u>(1)</u>	09/28/2007		А		4,616		<u>(1)</u>	<u>(1)</u>	Common Stock	4,616	\$ 5.

## **Reporting Owners**

Schaffer

<b>Reporting Owner Name / Address</b>		Relations				
Reporting O when runne / runness	Director	10% Owner	Officer	Other		
SCHAFFER CHARLES L VISTEON CORPORATION ONE VILLAGE CENTER DRIVE VAN BUREN TOWNSHIP, MI 48111	Х					
Signatures						
Heidi A. Sepanik, Secretary, Visteon Co	10/02/200	)7				

\*\*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