## Edgar Filing: MAPLES JONATHAN K - Form 4

Form 4	NATHAN K										
September 1											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									PPROVAL 3235-0287		
Check the if no long	ger STATEN	MENT OF	Number: Expires:	January 31, 2005							
subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF Section 16. SECURITIES Form 4 or							Estimated burden hou response	urs per			
obligation may cont <i>See</i> Instru 1(b).	ns Section 170	(a) of the H	Public U	Jtility Hol	ding Co		nge Act of 1934 of 1935 or Sect 940				
(Print or Type F	Responses)										
1. Name and Address of Reporting Person <u>*</u> MAPLES JONATHAN K			2. Issuer Name <b>and</b> Ticker or Trading Symbol VISTEON CORP [VC]				5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (	Middle)	3. Date of Earliest Transaction				(Ch	eck all applicable)			
VISTEON CORPORATION, ONE VILLAGE CENTER DRIVE			(Month/Day/Year) 09/14/2005			Director 10% Owner X Officer (give title Other (specify below) Vice President					
(Street) VAN BUREN			4. If Amendment, Date Original Filed(Month/Day/Year)			<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>					
TOWNSHI							Person				
(City)	(State)	(Zip)	Tab	ole I - Non-J	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)2. Transaction Da (Month/Day/Year		Execution Date, if any		3.4. SecuritiesTransactionAcquired (A) orCodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)		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	or (D) Price	(Instr. 3 and 4)				
Reminder: Rep	ort on a separate line	e for each cla	ass of sec	urities bene	-	-	-				
					inforr requi	nation cont red to resp	spond to the colle tained in this forr ond unless the fo ntly valid OMB co	n are not orm	SEC 1474 (9-02)		

 Table II - 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 of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transact	iorDerivative	Expiration Date	Underlying Securities

number.

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired ( or Dispose (D) (Instr. 3, 4 and 5)	(A) ed of			(Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Stock Units	<u>(1)</u>	09/14/2005		А	15,000		<u>(1)</u>	09/14/2007	Common Stock	15,000

## **Reporting Owners**

Reporting Owner Name / Address		Relation						
	Director	10% Owner	Officer	Other				
MAPLES JONATHAN K								
VISTEON CORPORATION			Vice					
ONE VILLAGE CENTER DRIVE			President					
VAN BUREN TOWNSHIP, MI 48111								
Signatures								
Heidi A. Sepanik, Secretary, Visteon Co Maples	09/16/2005							

\*\*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).

Restricted Stock Units vest to the extent of 50% of the units following the first annivesary of the date of grant and 50% on the second
(1) anniverary of the date of grant. Each Restricted Stock Unit will be converted and distributed to me, without payment, in cash upon vesting and based upon the then current market value of a share of Visteon common stock, subject to tax withholding.

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