FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C	20549	
vasilligion,	D.C.	20343	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average	burden									
hours por rospons	o: 0.5									

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Bergman Naomi M.				VIS	2. Issuer Name and Ticker or Trading Symbol VISTEON CORP [VC]								(Cł	5. Relationship of Reporting Person(s) to Is (Check all applicable) $\frac{X}{} \text{Director} \qquad \qquad 10\% \text{ Ox}$						
(Last)	(Fi	rst) ((Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/08/2023									Office below	r (give title)		Other (s below)	specify	
VISTEON CORPORATION ONE VILLAGE CENTER DRIVE					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							Lin	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person						
(Street) VAN BU	M	I 4	48111		Dul	0 1	OhE	1(0	·/ T	ranca	octi	on In	dicat	ion			filed by Mor		n One Repo	
(City)		tate) ((Zip)			Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See In														
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date,			·, -	Transaction Disposi Code (Instr. 5)		rities Acquired (A) o ed Of (D) (Instr. 3, 4 a					Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								-	Code	v	Amoun	t (A) or (D)		Price	Transa	action(s) 3 and 4)			(Instr. 4)	
Common Stock															1,000			D		
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. Deem Execution if any (Month/Da	n Date,	Date, Transact				Exp	Date Exer Diration D Onth/Day/	Amount of			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exe	e ercisable	Ex Da	piration te	Title	OI No Of	umber					
Visteon Stock Units	(1)	06/08/2023			A		841			(2)		(1)	Comm Stock		841	\$148.66	841		D	

Explanation of Responses:

- 1. These Restricted Stock Units were credited to my account, without payment by me, under the Company's 2020 Incentive Plan. In general, these Restricted Stock Units will be converted and distributed to me, without payment, in shares of common stock on January 15th of the year following termination of board service, based upon the then current market value of a share of common stock.
- 2. Restricted Stock Units vest on the earlier of the one year anniversary of the date of grant or the next annual meeting of stockholders which is at least 50 weeks after the immediately preceding year's annual meeting

Remarks:

Heidi A. Sepanik, Secretary, Visteon Corporation, on behalf 06/12/2023 of Naomi M. Bergman

** Signature of Reporting Person Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.