FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-028									
Estimated average burden									
hours per response:	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

1. Name and Address of Reporting Person* WILLIAMS DENNIS K						2. Issuer Name and Ticker or Trading Symbol  OWENS ILLINOIS INC /DE/ [ OI ]										olicable)	g Person(s) to I 10% (	ssuer Owner	
(Last) (First) (Middle) ONE MICHAEL OWENS WAY					3. Date of Earliest Transaction (Month/Day/Year) 05/12/2017									Offic belov	er (give title w)	Other below	(specify )		
(Street) PERRYSBURG OH 43551 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line) X	Forn Forn	dual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person			
		Tab	le I - No	n-Deriv	ative	Sec	curitie	s Acc	quired,	Dis	posed o	f, or E	Benef	icially	Owne	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day						Execution Date,			3. Transaction Code (Instr. ) 8) 4. Securities A						Securi Benef	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	or Pi	ice	Transa	action(s) 3 and 4)		(Instr. 4)	
Common Stock (Direct) 05/12/2					2017	1017		A		5,002	P	A \$0.000		40,106		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. Deen Executio if any (Month/D	n Date,	4. Transact Code (In 8)				6. Date Exercisal Expiration Date (Month/Day/Year)		e Amount of		Der Sed (Ins	rice of ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	Amou or Numb of Share	er					

Explanation of Responses:

Remarks:

See Exhibit 24 - Power of Attorney

/s/Mary Beth Wilkinson, attorney-in-fact 05/15/2017

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.