FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-028								

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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*						2. Is	Issuer Name and Ticker or Trading Symbol										5. Relationship of Reporting Person(s) to Issuer						
Galindo Sergio B.O.							OWENS ILLINOIS INC /DE/ [OI]											olicable)	3	10% O			
(Last) ONE MIC	(First) (Middle) MICHAEL OWENS WAY						3. Date of Earliest Transaction (Month/Day/Year) 03/07/2017									X	Officer (give title below) President, O-I		Other (s below)		(specify		
(Street) PERRYS (City)		OH State		13551 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individue)	ridual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				on		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																						
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execution Da			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 a			and 5) S		5. Amount of Securities Beneficially Owned Following		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount	(A)	A) or D) Prid		- 1	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Common Stock (Direct) 03/07/2						2017	017		A		10,920 ⁽¹	1) A \$0		\$0.00	000	39,558			D				
Common Stock (Direct) 03/07/2						2017	017			A		1,290(2)	A \$0		\$0.00	000	40,848			D			
Common Stock (Direct) 03/07/20						2017	017		F		1,958	1,958 D \$		\$ <mark>19</mark> .	9.97		38,890		D				
Common Stock (Indirect)																1,477.02			I	By 401k			
	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)	Conversion Date Execution Date, or Exercise (Month/Day/Year) if any				4. Transa Code (I 8)		of of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expirati (Month/	on Da		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares		unt ber	8. Prid Deriva Secur (Instr.	ative ity	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	F C O (I	LO. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Explanation of Responses:

- 1. The shares are subject to restrictions on sale that expire, either (i) as to 25% of the shares on each of the four anniversaries of the date of grant of such shares, or (ii) in their entirety upon the grantee's death or disability prior to a termination of employment.
- 2. Represents shares of common stock received by the reporting person on March 7, 2017 pursuant to action taken on that date by the Company's Compensation Committee determining the number of shares payable to the reporting person under certain restricted stock units granted for the 2014-2016 grant period. The restricted stock units did not constitute derivative securities on the date of grant thereof.

/s/Mary Beth Wilkinson, attorney-in-fact

03/08/2017

** 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.