FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
l	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* Currarino Moyano Giancarlo (Last) (First) (Middle) ONE MICHAEL OWENS WAY (Street) PERRYSBURG OH 43551 (City) (State) (Zip)							2. Issuer Name and Ticker or Trading Symbol OWENS ILLINOIS INC /DE/ [OI] 3. Date of Earliest Transaction (Month/Day/Year) 03/07/2018 4. If Amendment, Date of Original Filed (Month/Day/Year)								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) below) SVP, Chief Tech & SC Officer 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day						Execution Date,			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4				5) Secu Bene Owne	ficially ed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
							Code	v	Amount	(A (D	or F	rice	Repo Trans (Instr	rted action(s) . 3 and 4)		(Instr. 4)		
Common !	Stock (Dir	2018	018			A		12,472(1	.)	A \$	0.00	00	35,066	D				
Common Stock (Direct) 03/07/20							.018		A		8,751(2)		A \$	0.00	00	43,817	D	
Common Stock (Direct) 03/07/20							018		F		3,837	D \$21		\$21.9	7	39,980	D	
Common Stock (Indirect)															4.	22.3033	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)	ative Conversion or Exercise (Month/Day/Year) 3) Price of Derivative Security Execution Date, if any (Month/Day/Year) 8			4. Transa Code (8)		5. Nu of Deriv Secu Acqu (A) of Dispo of (D) (Instrand 5	rities iired r osed) r. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Date Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares		unt	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

- $1. \ The \ restricted \ stock \ units \ vest \ in \ four \ equal \ annual \ installments \ beginning \ on \ the \ first \ anniversary \ of \ the \ grant \ date.$
- 2. Certain restricted stock units granted for the 2015-2017 grant period vest in the form of common stock based upon the Issuer's performance against certain strategic objective goals. On March 7, 2018, the Compensation Committee of the Issuer's Board of Directors determined that the strategic objective goals had been partially met, resulting in the vesting of these shares.

/s/Mary Beth Wilkinson,

03/09/2018

attorney-in-fact

** 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.