FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	OVAL						
OMB Number:	3235-0287						
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* MCWEENY PHILIP						2. Issuer Name and Ticker or Trading Symbol OWENS ILLINOIS INC /DE/ [OI]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					
(Last) OWENS	(Fii -ILLINOIS, AGATE	,	Middle)			Date of 27/2		st Trans	action (Month/Day/Year)						X	below) below) VP/Gen Counsel-Corp & Asst Sec				
(Street) TOLEDO OH 43666 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tabl	e I - No	n-Deriv	ative	Se	curitie	es Ac	quired,	Dis	posed o	f, or	Bene	ficia	ally C)wne	ed			
Date				2. Transa Date (Month/E		ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				Securi Benefi Owne	cially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
										v	Amount (A) or (D)		Price			action(s) 3 and 4)		(Instr. 4)		
Common Stock				10/27	10/27/2004				S		600		D	\$18	.43		0	I	by Spouse	
Common Stock																7	2,000	D		
Common	Common Stock															1,941.8043		I	401K Plan	
Common Stock																	1,300	I	By Family LLC	
		Та									sed of, onvertib				y Ow	ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	(Month/Day/Year) if any		n Date,		ransaction Code (Instr.		of		xercis n Date ay/Ye		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		unt		rivative curity	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)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Num of							

Explanation of Responses:

Philip McWeeny

10/28/2004

** 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.