FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	OVAL
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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(h).

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* <u>Alvarez Miguel</u>					2. Issuer Name and Ticker or Trading Symbol OWENS ILLINOIS INC /DE/ [OI]									eck all applic Directo	or		10% Owner		
(Last) ONE MIC	,	First) WENS WAY	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/07/2016]	below)	Officer (give title below) President, O-I Latin			Other (specify below)	
(Street) PERRYSBURG OH 43551				- 4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line) X Form f	Form filed by More than One Reporting					
(City)	(State)	(Zip)											F 61301					
		Tal	ole I - No	n-Deri	ivativ	e Se	curitie	s Ac	quired	, Dis	posed of	f, or Ben	eficiall	y Owned					
			2. Transaction Date (Month/Day/Year)		ar) l	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			Beneficia Owned F	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Direct I Indirect E str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) or (D)	Price	Reported Transact (Instr. 3	ion(s)			(11150.4)		
Common Stock (Direct) 03				03/0	7/201	/2016			A		5,814(1)	A	\$0.000	0 12	344		D		
Common Stock (Direct)			03/0	7/201	/2016			A		975(2)	A	\$0.000	0 13	13,319		D			
Common Stock (Indirect)				671.37		1.37		I 1	3y 401k										
			Table II -								osed of, convertib			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		e Execution D	Date, Transacti Code (Ins					6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)		Date Exercisal	ble	Expiration Date	Title	Amount or Number of Shares						
Stock Option 03/07/2016 \$15.05	\$15.05	03/07/2016			A		17,570		03/07/201	17 ⁽³⁾	03/07/2023	Common Stock (Direct)	17,570	\$0.0000	17,57	70	D		

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. Restricted shares received by the reporting person on March 7, 2016 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 2013-2015 grant period. The restricted stock units did not constitute derivative securities on the date of grant thereof.
- 3. The options vest in four equal annual installments beginning on the first anniversary of the date of grant.

/s/James W. Baehren, attorney-

03/09/2016

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.

 $Persons \ who \ respond \ to \ the \ collection \ of \ information \ contained \ in \ this \ form \ are \ not \ required \ to \ respond \ unless \ the \ form \ displays \ a \ currently \ valid \ OMB \ Number.$