FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

_			
ashington,	D.C.	20549	

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNEDSHID

OMB APPROVAL								
OMB Number:	3235-0362							
Estimated average h	nurden							

Instruction 1(b).

Form 3	Holdings Repo	rted.	OWNERSHIP									hours per response: 1.				1.0		
_	Transactions R		File	ed pursuant to or Sectior					ities Excha									
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							
(Last) (First) (Middle) OWENS-ILLINOIS, INC. ONE SEAGATE				12/31/20	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2003							X Officer (give title Other (specify below) VP/Gen Counsel-Corp & Asst Sec						
(Street) TOLEDO	OF		33666 Zip)	4. If Amen								Line	S. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tabl	e I - Non-Deriv	ative Sec	uritie	s Ac	quire	ed, Di	sposed	of, or	Benefic	ciall	y Owne	d				
1. Title of Security (Instr. 3) 2. Transaction Date			2A. Deemed Execution Date, if any		3. Transaction Code (Instr.		4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially		s ally	6. Ownership Form: Direct		7. Nature of Indirect Beneficial		
			(Month/Day/Year) 8		8)		Amour	nt	(A) or (D)	Price		Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		(D) or Indirect (I) (Instr. 4)		Ownership (Instr. 4)		
Common Stock 1		12/29/2003		G		ř	1,	000	D	\$0		64,000			D			
Common Stock 12/29/20		12/29/2003	G		ř	1,	000	D	\$0		63,000			D				
Common Stock 12/29/2003			G		1,	000	D	\$0		62,000			D					
Common Stock										26,709.2397			I	401K Plan				
Common	Stock											1,300 I					By Family LLC	
Common Stock										600			I	by Spouse				
		Та	ble II - Derivat (e.g., p	ive Secur uts, calls,									Owned					
1. Title of Derivative Security (Instr. 3)			4. Transaction Code (Instr. 8)	of Deriv	r osed) r. 3, 4	Expir (Mon	te Exercisable and ation Date th/Day/Year) Expiration isable Date		Amo Secu Unde Deriv Secu and					e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		

Explanation of Responses:

Philip McWeeny

02/10/2004

** Signature of Reporting Person Date

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

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.

 $^{^{\}ast}$ 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).