FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
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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

					1						mpany Act			_						
1. Name and Address of Reporting Person* Alvarez Miguel						2. Issuer Name and Ticker or Trading Symbol OWENS ILLINOIS INC /DE/ [OI]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last)	(Fir	- ',	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/07/2017										Offic belo	er (give title w)	Other below	(specify	
ONE MIC	CHAEL OW												President, O-I Latin America							
(Street)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)								
PERRYSBURG OH 43551															X Form filed by One Reporting Person					
(City) (State) (Zip)															Form filed by More than One Reporting Person					
		Tabl	el-	Non-Deriv	ative	Secu	ırities A	\cc	quired,	Dis	sposed of	f, or	Ben	efici	ally	Own	ed			
			2. Transaction Date (Month/Day/	Execut		ition Date,		3. Transact Code (In 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				, 4 and Secu Ben Own			6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)		Price				(Instr. 4)	(Instr. 4)	
Common Stock (Direct) 03/					017				A		10,920(1	1)	A	\$0.0000		24,239		D		
Common Stock (Direct)				03/07/20	017				A		387(2)		A \$0.0		000	24,626		D		
Common Stock (Direct) 03/07/2				03/07/20	17			F		788		D \$19.		9.97	97 23,838		D			
Common Stock (Indirect)																1,	,824.25	I	By 401k	
		Та	ble I	I - Derivat (e.g., pı							osed of, convertib					wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exec if any	Deemed ution Date, y th/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expirati (Month)	on D		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		3	of Deri Secu	rivative curity str. 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)	
					Code	v	(A) (D)		Date Exercis	able	Expiration Date	Title	or Nu of	nount mber ares	1					

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.