DANA CORP Form 4 June 17, 2005

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number:

3235-0287

OMB APPROVAL

January 31, Expires: 2005

0.5

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may continue.

See Instruction

Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

1(b). (Print or Type Responses)

RICHTER ROBERT C Sym			Symbol	2. Issuer Name and Ticker or Trading ymbol 2ANA CORP [DCN]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
(Last) P. O. BOX	(First) 1000	(Middle)	3. Date of (Month/E) 06/15/2	• •	ransaction			DirectorX Officer (give below)	10%	Owner or (specify
TOLEDO, O	(Street) OH 43697			ndment, Da nth/Day/Year	_	1		6. Individual or Jo Applicable Line) _X_ Form filed by O Form filed by N Person	One Reporting Per	rson
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	rities Acq	uired, Disposed of	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Executio any	ned n Date, if Day/Year)	3. Transactic Code (Instr. 8)	4. Securi on(A) or Di (Instr. 3,	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common	06/15/2005			<u>J(1)</u>	542	A	\$ 12.35	91,598.9209	D	
Common	06/15/2005			<u>J(2)</u>	64	A	\$ 12.35	91,662.9209	D	
Common	06/15/2005			J(2)	44	A	\$ 12.35	91,706.9209	D	

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

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number.

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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D	ate	7. Title and Underlying S (Instr. 3 and	Securities	8 II S (
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Addl Compensation Plan Phantom Units	\$ 12.35	06/15/2005		<u>J(3)</u>	260	<u>(4)</u>	<u>(5)</u>	Common	260	

Reporting Owners

Reporting Owner Name / Address	Relationships
Reporting Owner Maine / Address	

Director 10% Owner Officer Other

RICHTER ROBERT C P. O. BOX 1000 TOLEDO, OH 43697

Vice President and Chief Fin. Officer

Signatures

Robert Richter 06/17/2005

**Signature of Reporting Person Date

Explanation of Responses:

- * 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).
- (1) Dividend equivalents credited on restricted shares granted under Dana's Restricted Stock Plan. Exempt from Section 16(b) under Rule 16b-3.
- (2) Dividend equivalents credited on restricted stock units converted from restricted shares under Dana's Restricted Stock Plan. Exempt from Section 16(b) under Rule 16b-3.
- (3) Dividend equivalents credited on units credited under Dana's Additional Compensation Plan. Exempt from Section 16(b) under Rule 16b-3.
- (4) Units credited under Dana's Additional Compensation Plan do not have an exercise date. Participants are entitled to receive distributions of such units either in cash or stock, or in a combination of cash and stock, upon retirement or termination of employment.

(5)

Reporting Owners 2

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Units credited under Dana's Additional Compensation Plan do not have an expiration date. Participants are entitled to receive distributions of such units either in cash or stock, or in a combination of cash and stock, upon retirement or termination of employment.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.