### Edgar Filing: BORGWARNER INC - Form 4

Form 4											
February 12, 2009 FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL			
	UNITE	) STATES		shington,			NGE (	COMMISSION	OMB Number:	3235-0287	
Check thi if no long subject to Section 1 Form 4 or Form 5	6. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								Expires: Estimated a burden hou response	rs per	
obligation may conti <i>See</i> Instru 1(b).	inue. Section 17	7(a) of the	Public Ut		ling Com	pany	Act of	f 1935 or Sectio	n		
(Print or Type R	Responses)										
1. Name and Address of Reporting Person <u>*</u> Daniel CasaSanta			2. Issuer Name <b>and</b> Ticker or Trading Symbol BORGWARNER INC [BWA]					5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle) 3850 HAMLIN RD.			3. Date of Earliest Transaction (Month/Day/Year) 02/10/2009					(Check all applicable) <u></u> Director <u></u> 10% Owner <u></u> Officer (give title <u></u> Other (specify below) VP, President and GM			
	(Street) 4. If Amendma Filed(Month/Da				-			<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>			
AUBURN H	HILLS, MI 4832	26						Form filed by M Person	More than One Re	eporting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	Securi	ties Acc	uired, Disposed o	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	any		ned n Date, if Day/Year)	3. Transactio Code (Instr. 8)	4. Securities Acquired m(A) or Disposed of (D) (Instr. 3, 4 and 5)			Securities Beneficially Owned Following	5. Ownership Form: Direct D) or Indirect (I) Instr. 4)		
				Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)			
common stock	02/10/2009			А	9,735	А	\$0	16,223	D		
common stock (4)	12/31/2008			Р	228.26	А	\$ 0	1,800	Ι	by 401K plan	

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

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 control number.

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# 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. Transactio Code (Instr. 8)	5. Number 6. Date Exercisable and of Derivative Expiration Date Securities (Month/Day/Year) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. De Se (Ir	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
performance shares	<u>(1)</u>	02/12/2009		А	5,200	(2)	(2)	common stock	<u>(2)</u>	
peformance shares	<u>(1)</u>	02/12/2009		А	4,800	(3)	(3)	common stock	<u>(3)</u>	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
1 0	Director	10% Owner	Officer	Other			
Daniel CasaSanta 3850 HAMLIN RD. AUBURN HILLS, MI 48326			VP, President and GM				
Signatures							
John J. Gasparovic as attorney-in CasaSanta	n-fact fo	r Dan	02/12/2009				

\*\*Signature of Reporting Person

## **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).

Date

- (1) 1-for-1
- (2) The number of performance shares actually earned will depend upon the total shareholder return of the company's common stock compared to a peer group of companies over a period ending 12/31/2009.
- (3) The number of performance shares actually earned will depend upon the total shareholder return of the company's common stock compared to a peer group of companies over a period ending 12/31/2010.
- (4) From 1/1/08 12/31/08 the participant acquired 228.26 shares in the 401K plan.

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.