#### Edgar Filing: FEDERATED DEPARTMENT STORES INC /DE/ - Form 4

#### FEDERATED DEPARTMENT STORES INC /DE/

Form 4

March 28, 2005

## FORM 4

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

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 OF **SECURITIES** 

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

2. Issuer Name and Ticker or Trading

FEDERATED DEPARTMENT

Symbol

(Print or Type Responses)

1. Name and Address of Reporting Person \*

**GROVE JANET** 

(First) (Middle)

C/O FEDERATED DEPARTMENT STORES INC, 7 WEST SEVENTH

STREET

(City)

1.Title of

Security

(Instr. 3)

Common

Stock

(Last)

(Street)

(State)

03/26/2005

(Month/Day/Year)

2. Transaction Date 2A. Deemed

(Zip)

Execution Date, if

(Month/Day/Year)

CINCINNATI, OH 45202

STORES INC /DE/ [FD]

3. Date of Earliest Transaction

(Month/Day/Year)

03/25/2005

4. If Amendment, Date Original

Filed(Month/Day/Year)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 3. 4. Securities Acquired

Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)

(Instr. 8)

(A)

Code V Amount (D) F

123 D 5. Amount of Securities

Applicable Line)

Issuer

below)

Director

X\_ Officer (give title

Beneficially Owned Following Reported

Indirect (I) (Instr. 4)

(D) or

Form: Direct Indirect Beneficial Ownership (Instr. 4)

6. Ownership 7. Nature of

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

**OMB** 

Number:

Expires:

response...

5. Relationship of Reporting Person(s) to

(Check all applicable)

Vice Chair

6. Individual or Joint/Group Filing(Check

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

below)

10% Owner

Other (specify

Estimated average

burden hours per

Transaction(s) (Instr. 3 and 4)

Price

61 07

D

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

17,632

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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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 of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	e Expiration Date (Month/Day/Year) (A) ed of		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option to Purchase Common Stock	\$ 61.07	03/25/2005		A	32,500	<u>(1)</u>	03/25/2015	Common Stock	32,500

## **Reporting Owners**

Reporting Owner Name / Address		Relationships					
	Director	10% Owner Of	ficer	Other			

GROVE JANET C/O FEDERATED DEPARTMENT STORES INC 7 WEST SEVENTH STREET CINCINNATI, OH 45202

Vice Chair

### **Signatures**

/s/Padma Tatta Cariappa, as attorney-in-fact for Janet Grove pursuant to a Power of Attorney

03/28/2005

\*\*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).

Grant to reporting person of options to purchase 32,500 shares of common stock under the Issuer's 1995 Executive Equity Incentive Plan.

(1) The otions become exercisable in 25 percent increments on March 25, 2006, March 25, 2007, March 25, 2008 and March 25, 2009, respectively.

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.

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