FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| wasnington, | D.C. | 20549 | |
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| STATEMENT OF CHANGES IN BENEFICIAL OWNERS | HIP |
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OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* ROSSITER ROBERT E | | | | 2. Issuer Name and Ticker or Trading Symbol LEAR CORP /DE/ [LEA] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|--|--|------------|-----------------|---|--|--------------|------|--|--------|---|--|---|--|--|--|--|-----|
| <u>KUSSI</u> | IER RUI | BERT E | | - | | | | | , | | | | X Direct | or | | 10% Ow | ner |
| (Last) | (F | irst) | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) | | | | | | X Office below | r (give title) | | Other (s _l below) | pecify | | |
| 21557 TELEGRAPH ROAD | | | 0 | 03/15/2005 | | | | | | | | Chairman & CEO | | | | | |
| (Street) | | | | 4 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | Individual or Joint/Group Filing (Check Applicable ne) | | | | | | |
| SOUTHI | FIELD M | П | 48034 | | | | | | | | | | | • | • | ting Person | |
| (City) | (S | state) | (Zip) | | Form filed by More than One Reporting Person | | | | | | | ng | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Trans: Date (Month/L | | | е | 2A. Deemed Execution Date if any (Month/Day/Yea | | Code (Instr. | | | | Benefic Owned | es ally Following | Form: (D) or | : Direct I r Indirect E str. 4) (| 7. Nature of ndirect Beneficial Ownership | | | |
| | | | | | | | Code | v | Amount | (A) o (D) | Price | Reporte Transac (Instr. 3 | tion(s) | | | nstr. 4) | |
| 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) | Derivative Conversion Date Execution Date Security or Exercise (Month/Day/Year) if any | | Execution Date, | 4. Transaction Code (Instr. 8) | | Derivative | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | | derivativ Securitie Beneficia Owned Followin Reported | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | (A) | (D) | Date Exercisable | | cpiration ate | Title | Amount Number Shares | | (Instr. 4) | | | |
| Restricted Stock Units | (1) | 03/15/2005 | | A | | 24,014.1 | | (2) | | (2) | Common Stock | 24,014 | 1 (3) | 24,01 | 4.1 | D | |

Explanation of Responses:

- 1. Converts into common stock on a 1-for-1 basis
- 2. The restricted stock units were accrued under the Lear Corporation Management Stock Purchase Plan pursuant to a deferred compensation election. Generally, units settle approximately three years from the date of grant; however, a participant may elect to defer settlement of units beyond three years. Mr. Rossiter has not, as of the date of this filing, elected to defer settlement of his 2005 units beyond 2008.
- 3.3393.66 units were credited at a price of \$48.62 per unit and 20620.44 units were credited at a price of \$42.55 per unit

Remarks:

/s/ Karen Rosbury, as attorneyin-fact

03/16/2005

** 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.