FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

washington, D.C. 20049	OMB APPROVAL				
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235			

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	OMB Number:	3235-0287									
	Estimated average burden										
l	hours per response.	0.5									

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

1. Name and Address of Reporting Person* PARROTT ROY E				2. Issuer Name and Ticker or Trading Symbol LEAR CORP /DE/ [LEA]								Relationship of Reporting Person(s) to Issuer (Check all applicable)							
PARROTT ROT E													X Direct	or		10% Ow	ner		
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 10/29/2004								Officer below)	(give title		Other (s below)	pecify		
21557 TELEGRAPH ROAD																			
					_ 4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street)													Lin	,	El I I O	D			
SOUTHFIELD MI 48034												X Form filed by One Reporting Person Form filed by More than One Reporting							
(City)	(S	tate)	(Zip)											Perso	า				
		Tab	le I - Nor	ı-Deriv	vativ	e Se	curities	Ac	quired, D	isp	osed o	f, or Be	neficia	ly Owne	t				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date,			3. Transaction Code (Instr. 3, 4) 5) 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) 5)					Benefic Owned	es For ally (D) Following (I) (Ownership m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code V	,	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)		
		-	Γable II - I						uired, Dis					Owned	,		·		
1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y		4. Transa				6. Date Exercisable and Expiration Date		7. Title an	d Amount	8. Price of Derivative	9. Number	of	10. Ownership	11. Nature of Indirect		
Security (Instr. 3)	or Exercise Price of Derivative Security			····/ [Code (8)				(Month/Day/				g Security	Security (Instr. 5)	Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		epiration ate	Title	Amount or Number of Shares						
Deferred Stock	(1)	10/29/2004			A		98.223		(2)		(2)	Common Stock	98.223	\$53.45	359.37	9	D		

Explanation of Responses:

- $1. \ Each \ stock \ unit \ is \ equal \ in \ value \ to \ one \ share \ of \ Lear \ Corporation \ common \ stock$
- 2. The deferred stock units were accrued under the Lear Corporation Outside Directors Compensation Plan pursuant to a deferral election and are generally to be paid out in cash upon the earliest of the date elected by Mr. Parrott, the date of Mr. Parrott's retirement as a director of Lear Corporation or the date of a change in control of Lear Corporation. For his 2004 deferred units Mr. Parrott elected January 1, 2005 as his date of payout, and, if this date is the first to occur of the above-described events, all 2004 deferred units held by Mr. Parrott for at least 6 months as of January 1, 2005 will be paid out in cash on or about such date, with the remainder paid out at such later date(s) so as to maintain at least a 6 month holding period for the deferred units.

Remarks:

/s/ Karen M. Rosbury As attorney-in-fact

11/02/2004

** 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.