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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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burde	en								
hours per response:	0.5								

		of Section So(n) of the investment Company Act of 1940			
1 0	rson*	2. Issuer Name and Ticker or Trading Symbol <u>LEAR CORP /DE/</u> [LEA]		all applicable)	10% Owner
(Last) (First) (Middle) 21557 TELEGRAPH ROAD	3. Date of Earliest Transaction (Month/Day/Year) 11/11/2004		Officer (give title below) VP & Corporate	Other (specify below) Controller	
MI (State)	48034 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	ridual or Joint/Group Fili Form filed by One Re Form filed by More th Person	porting Person
	LLIAM C (First) APH ROAD MI	(First) (Middle) APH ROAD MI 48034	ss of Reporting Person* 2. Issuer Name and Ticker or Trading Symbol LLIAM C 2. Issuer Name and Ticker or Trading Symbol (First) (Middle) APH ROAD 3. Date of Earliest Transaction (Month/Day/Year) MI 48034	ss of Reporting Person* 2. Issuer Name and Ticker or Trading Symbol 5. Relation LLIAM C Image: Constraint of the symbol 5. Relation (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) X APH ROAD 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual Line) MI 48034 X	Sector Reporting Person* 2. Issuer Name and Ticker or Trading Symbol 5. Relationship of Reporting Person* LLIAM C LEAR CORP /DE/ [LEA] 5. Relationship of Reporting Person* (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) 5. Relationship of Reporting Person* APH ROAD 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Fili MI 48034 X Form filed by One Reporting Person

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

Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)						5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1130.4)

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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Restricted Stock Units	(1)	11/11/2004		A		3,000		(2)	(2)	Common Stock	3,000	\$0.00	3,000	D	

Explanation of Responses:

1. 1-for-1

2. The restricted stock units were granted under the Lear Corporation Long-Term Stock Incentive Plan. One-half of the units vest and settle three years from the date of grant, and one-half of the units vest and settle five years from the date of grant.

Remarks:

<u>/s/ Karen Rosbury (as</u> <u>Attorney-In-Fact)</u>

11/12/2004

** 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.