Edgar Filing: LEAR CORP - Form 4

LEAR COF	RP										
Form 4											
November	13, 2006										
FORM	/ / /	~~.~~~~	~~~~			~~~	~~~~~~~~~		PPROVAL		
CURIVI 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check t	nger							Expires:	January 31, 2005		
if no longer subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNED SECURITIES						WNERSHIP OF	Estimated burden hou	average urs per			
Form 4 Form 5 obligati	Filed put						nge Act of 1934,	response	. 0.5		
may con See Inst	ntinue. Section 17(•	•	npany Act ny Act of 1	of 1935 or Sectio 940	on			
1(b).											
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> VANDENBERGHE JAMES H				er Name an	d Ticker or	Trading	5. Relationship of Reporting Person(s) to Issuer				
<i>a</i>)		LEAR	CORP [L	-		(Check all applicable)					
(Last)	(First) (í.		of Earliest T	ransaction		X Director	100	7 Ouron		
21557 TELELGRAPH ROAD 1				Day/Year) 2006			XDirector10% Owner XOfficer (give titleOther (specify below) below) Vice Chairman and CFO				
				endment, D	ate Origina	ıl	6. Individual or Joint/Group Filing(Check				
			Filed(Mo	onth/Day/Yea	r)		Applicable Line)				
SOUTHFI	ELD, MI 48034						_X_ Form filed by Form filed by Person	One Reporting P More than One R			
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	.cquired, Disposed (of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)			3.4. SecuritiesTransactionAcquired (A) orCodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)		(A) or of (D)	Securities Beneficially Owned	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)				
Reminder: Re	port on a separate line	e for each cla	uss of sec	urities bene	ficially ow	ned directly o	or indirectly.				
					Perso	ons who res	pond to the colle	ction of S	SEC 1474		

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	Acquired (or Dispose (D) (Instr. 3, 4, and 5)	d of				
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Appreciation Rights	\$ 31.32	11/09/2006		A		39,375		(1)	(1)	Common Stock	39,375
Restricted Stock Units	<u>(2)</u>	11/09/2006		А		13,126		(3)	(3)	Common Stock	13,126

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
VANDENBERGHE JAMES H 21557 TELELGRAPH ROAD SOUTHFIELD, MI 48034	Х		Vice Chairman and CFO					
Signatures								
/s/ Karen Rosbury, as attorney-in-fact		11/13/2006						

<u>**</u>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).
- (1) The Stock Appreciation Rights (SARs) were granted under the Long-Term Stock Incentive Plan and have a term of seven years from the date of grant. The SARs vest three years from the date of grant.
- (2) 1-for-1
- (3) The restricted stock units were granted under the Lear Corporation Long-Term Stock Incentive Plan. One-half of the units vest and settle two years from the date of grant, and one-half of the units vest and settle four years from the date of grant.

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.