FORM 4

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

OMB APPROVAL							
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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 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	es)																		
1. Name and Address of Reporting Person * PICHLER JOSEPH A				2. Issuer Name and Ticker or Trading Symbol FEDERATED DEPARTMENT STORES INC /DE/ [FD]									٠,	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_Director Officer (give title below) Other (specify below)						
, (Last)	(First)	(Mic	ddle)	3. Date 05/27/2		est T	Transa	ction	(Mo	onth/Day	//Year)								
,		(Street)			4. If An	endme	nt, I	Oate O	rigina	al Fil	led(Month	n/Day/Yea	ar)		X_Form file	ed by One Repo	Group Filing orting Person One Reporting		••	Line)
(City	·)	(State)	(2	Zip)		Т	abl	le I - N	on-D	Periv	ative So	ecuritie	es Ac	cquir	ed, Dispo	osed of, or l	Beneficially	Own	ned	
(Instr. 3) Date			action Day/Year)	2A. Deemed Execution Date any (Month/Day/Yo		if	if Code (Instr. 8		(A) or Disp (D) (Instr. 3, 4		, 4 and (A) or	posed of and 5) A) or		5. Amount of Securities Beneficially Owned Follo Reported Transaction(s) (Instr. 3 and 4)		ollowing	Forn Dire	nership of Be oct (D) Ovadirect (In	. Nature f Indirect Beneficial Ownership Instr. 4)	
Reminder: indirectly.	Report on a	separate line f	or each cl	ass of secu	urities ber	neficiall	y ov	wned d	P	ly or erso	ons wh	o resp	ond	d to t	not req	uired to re	oformation espond un espond numb	less	/	1474 (9- 02)
			Т	able II - D (e	erivativ										y Owned					
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transactio Date (Month/Day/	Year) Exc	3A. Deemed Execution Da any (Month/Day/	Co	de	on of I	5. Number		r 6. Date Exercis: and Expiration (Month/Day/Ye		on Date	Date A ear) U S		unt of		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	y E S C o n(s) (1	Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					C	ode V	V ((A) (Date Exerc		Expirat Date	ion		Amount or Number of Shares					
Repor	ting O	wners	·		·															
Reporting	Owner Nar	ne / Address	Director	Relatio		cer Ot	her													
PICHLE	R JOSEPH	A	X																	

Signatures

,	/s/Padma Tatta Cariappa, attorney-in-fact for Joseph A. Pichler pursuant to a Power of Attorney	05/27/2003
_	-*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).

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.