FORM 4

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

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OMB Number:	3235-0287
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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 Type	Response	s)																	
1. Name and Address of Reporting Person *- KRONICK SUSAN D					2. Issuer Name and Ticker or Trading Symbol FEDERATED DEPARTMENT STORES INC /DE/ [FD]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Other (specify below)					
(Last) (First) (Middle) C/O FEDERATED DEPARTMENT STORES, 7 WEST SEVENTH STREET				3. Date of Earliest Transaction (Month/Day/Year) 03/22/2005										\	ice Chair				
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)									6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting Person Form filed by More than One Reporting Person						
CINCINNATI, OH 45202 (City) (State) (Zip)				Table I - Non-Derivative Securities Acou									lired, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if		(Instr. 8)		_		ired 5 (D) Ov	Amount of S	of Securities Beneficially lowing Reported u(s)		6. Ownership Form:	Beneficial Ownership					
						Code	e V	Am	Amount (A) o		Price				or Indirect (I) (Instr. 4)	(Instr. 4)			
Common Stock 03/22/2005			03/22/2005			M		1,07	75.91	A	\$ 0 22	22,901 (1) (2)			D				
Common Stock 03/22			03/22/2005				F		384		1)	\$ 62.32 22	22,517			D			
Common Stock											1,5	1,550 (3)			I	By 401(K) Plan			
			Table II -				ities Acq	dispuired, D	olays ispose	a cur	rently v	valid OME ficially Ow	respond 3 control n		form				
(Instr. 3) Prio		3. Transaction Date (Month/Day/Year)	Execution Date, if	Transaction Deriva Code Securit (Instr. 8) Acquir			entive tites (Month posed of 3, 4,		Exercisable and tion Date h/Day/Year)		7. Title an of Underly Securities (Instr. 3 an	ying		f 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction	Ownersl Form of Derivati Security Direct (I or Indire	Ownersh (Instr. 4)			
				Code	V	(A)	(D)	Date Exercis	able	Expir Date	ation	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)		
Phantom Stock Units	<u>(4)</u>	03/22/2005		M		1	,075.91	03/22/	2005	03/22	2/2005	Common Stock	1,075.91	\$ 0	0	D			
Reporti	ing O	wners																	
Reporting Owner Name / Address			ess Directo	or 10%		ationsh	nips fficer	Oth	er										
KRONICK S C/O FEDER		D DEPARTMENT	STORES			V	/ice Cha	air											

Signatures

CINCINNATI, OH 45202

/s/Padma Tatta Cariappa, as attorney-in-fact for Susan D. Kronick pursuant to a Power of Attorney	03/24/2005
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).
- This number includes 21.60 shares received March 22, 2005 pursuant to a dividend reinvestment feature of the Issuer's long term incentive plan. The fractional share that remained after (1) adding the 1,075.91 shares, being reported herein, and the aforementioned dividends was .51. This fractional share was paid out in cash pursuant to the Issuer's long term incentive plan and therefore is not reflected in this amount.
- (2) Fractional share of .71 previously reported was paid out in cash pursuant to the Issuer's long term incentive plan.
- Reflects matching contributions under the Issuer's 401(K) plan, derived by dividing the value of undivided interest of the reporting person in the applicable investment fund as of March (3) 22, 2005 by \$61.45, the stock price of such date.

(4) 1-for-1 conversion.

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.