# FORM 4

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

| OMB APPROVAL       |           |  |  |  |  |
|--------------------|-----------|--|--|--|--|
| OMB Number:        | 3235-0287 |  |  |  |  |
| Estimated average  | burden    |  |  |  |  |
| hours per response | e 0.5     |  |  |  |  |

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<br>FEDERATED DEPARTMENT STORES INC<br>/DE/ [FD] |             |                           |  |   |                       | NC   | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  _X_Director Officer (give title below) Other (specify below) |                                      |   |  |                         |
| 119 EAS  | T COURT     | STREET                                   |                               | 3. Date of Earliest Transaction (Month/Day/Year) 09/30/2006                                 |             |                           |  |   |                       |  |   |                                      |   |  |                         |
| CINCINN  | NATI, OH    | (Street)<br>45202                        |                               | 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 |   |                                      |   |  |                         |
| (City  | 7)          | (State)                                  | (Zip)                         |   |             | Table                     | e I - N  | Non-Deriv   | ative Securit         | ies Acquire  | ed, Dispos  | ed of, or Bo                         | eneficially Ov  | vned   |                         |
| 1.Title of S<br>(Instr. 3)                               | ecurity     |  | Date (Month/Day/Year)         | 2A. Deemo<br>Execution<br>any<br>(Month/Da  | on Date, if |                           |  | 8)  | (A) or Dispose        |  | ed of Beneficially<br>Reported Ti   |                                      | llowing (   | Ownership<br>Form:   | Beneficial<br>Ownership |
|  |             |  |                               |   |             |                           | Code   | e V A   | Amount (A) (D)        |  |   |                                      | (   | I)<br>Instr. 4)  |                         |
| Security (Instr. 3)                                      | Conversion  | 3. Transaction<br>Date<br>(Month/Day/Yea | 3A. Deemed<br>Execution Date, | e.g., puts, calls, ware a series of the code  |             |                           | ants,<br>imber<br>vative<br>rities<br>iired<br>r | ired, Disposed of, or options, convertible 6. Date Exercisable and Expiration Date (Month/Day/Year) |                       |  | and<br>of<br>ing  | Derivative<br>Security<br>(Instr. 5) | 9. Number o<br>Derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported | Ownershi<br>Form of<br>Derivative<br>Security:<br>Direct (D<br>or Indirect | (Instr. 4)              |
|  |             |  |                               |   |             | of (D<br>(Instr<br>4, and | . 3,   |   |                       |  |   |                                      | Transaction(s<br>(Instr. 4)   | (I)<br>(Instr. 4)  |                         |
|  |             |  |                               | Code  | V           | (A)                       | (D)  | Date<br>Exercisab   | Expiration<br>le Date | Title  | Amount<br>or<br>Number<br>of<br>Shares  |                                      |   |  |                         |
| Phantom<br>Stock<br>Units                                | <u>(1)</u>  | 09/30/2006                               |                               | A   |             | 371                       |  | (2)   | (2)                   | Common<br>Stock  | a 371   | \$ 37.09<br>(3)                      | 371   | D  |                         |

#### **Reporting Owners**

| D ( 0 N / 11)   | Relationships |           |         |       |  |  |
|---|---------------|-----------|---------|-------|--|--|
| Reporting Owner Name / Address                                    | Director      | 10% Owner | Officer | Other |  |  |
| PICHLER JOSEPH A<br>119 EAST COURT STREET<br>CINCINNATI, OH 45202 | X             |           |         |       |  |  |

### **Signatures**

| /s/Christopher M. Kelly, as attorney-in-fact for Joseph A. Pichler pursuant to a Power of Attorney | 10/03/2006 |
|--|------------|
| **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) 1-for-1 conversion.
- (2) Units are to be settled in Common Stock upon the reporting person's termination from the Board of Directors.
- (3) The price noted is the average of the value of the stock units granted each month during the quarter for which this report is filed.

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.