

Sears Holdings CORP
 Form 3
 April 13, 2005

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
 Expires: January 31, 2005
 Estimated average burden hours per response... 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
 Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person * Â GOOD MARK (Last) (First) (Middle) 3333 BEVERLY ROAD (Street) HOFFMAN ESTATES,Â ILÂ 60179 (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 04/05/2005	3. Issuer Name and Ticker or Trading Symbol Sears Holdings CORP [SHLD]	4. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) Executive Vice President	5. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person
--	--	---	--	--	---

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Shares	6,161	D	Â
Common Shares (401(k) Plan)	1,760	I	401(k) Plan

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
---	---	--	---	---	--

Edgar Filing: Sears Holdings CORP - Form 3

	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Common Share Units	Â (1)	Â (1)	common shares	2,010.6	\$ (1)	D	Â
Common Share Units	Â (2)	Â (2)	common shares	1,564.21	\$ (2)	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
GOOD MARK 3333 BEVERLY ROAD HOFFMAN ESTATES, IL 60179	Â	Â	Â Executive Vice President	Â

Signatures

By: Ellis A. Regenbogen, as Attorney-in-Fact 04/05/2005

Signature of Reporting Person

Date

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 5(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).

These units are held under the Sears, Roebuck and Co., Deferred Compensation Plan, as Amended and Restated to December 13, 2000 (the "Plan"). These units represent salary, annual incentive, long term incentive and/or dividend payments deferred under the Plan. These common share units are to be settled in cash, either in a lump sum or in a series of annual payments, following separation from service.

(2) These units are held in the Sears, Roebuck and Co., Deferred Compensation Plan, as Amended and Restated to December 13, 2000, (the "Plan"). These units represent salary, annual incentive, long term incentive and/or dividend payments deferred under the Plan and are held in the nondiversifiable account of the Plan. These common share units are to be settled in shares of Sears Holdings Corporation common stock following separation from service.

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.