FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|---------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average b | ourden | | | | | | | | |

0.5

hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| | | | | | o. o oo. | | | | | .,, | | | | | | | | |
|---|---|--|---|---|---|--|------|--|----------|---|---|---|--|---|--|---|------------|--|
| Name and Address of Reporting Person* SCHLESINGER LEONARD A | | | | | 2. Issuer Name and Ticker or Trading Symbol LIMITED BRANDS INC [LTD] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
| | | | | - | | | | 12011 | <u> </u> | | | | X Directo | r | | 10% Ow | ner | |
| (Last) | (F | irst) | (Middle) | | Date of Earliest Transaction (Month/Day/Year) | | | | | | | - | X Officer below) | (give title | Other (spec below) | | pecify | |
| THREE LIMITED PARKWAY | | | 0 | 03/31/2005 | | | | | | | | Vice Chairman and COO | | | | | | |
| (Street) | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| COLUM | BUS O | Н | 43230 | | | | | | | | | | | led by One | • | Ü | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | Form filed by More than One Reporting Person | | | | |
| | | Ta | ble I - Non-De | rivati | ve Se | curities | s Ac | quired, I | Disp | osed o | f, or Be | neficial | y Owned | | | | | |
| 1. Title of Security (Instr. 3) 2. Trans. Date (Month/I | | | | • | | 2A. Deemed Execution Date, if any (Month/Day/Year | | r, Transaction Dispose Code (Instr. | | rities Acquired (A) or ed Of (D) (Instr. 3, 4 a | | Beneficia Owned F | s ally ollowing | Form: | Direct I Indirect E tr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | Code | v | Amount | (A) o (D) | r Price | Reported Transact (Instr. 3 a | ion(s) | | 1 | (Instr. 4) | |
| | | | Table II - Deri (e.g | | | | | uired, Di | • | | | - | Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | | |
| | | | | Code | v | (A) | (D) | Date Exercisable | | xpiration ate | Title | Amount or Number of Shares | | (Instr. 4) |)ii(s) | | | |
| Stock Option - Right to Buy | \$24.3 | 03/31/2005 | | A | | 125,000 | | (1) | 03 | 3/31/2015 | Common Stock, \$0.50 par value | 125,000 | \$0 | 125,000 | 0 | D | | |

Explanation of Responses:

1. Option vests 25% per year beginning on the first anniversary of the date of grant.

By: Robert J. Tannous, Attorney-in-Fact 04/01/2005

** Signature of Reporting Person Date

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

- * 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.

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 Number.