Edgar Filing: OFFICEMAX INC - Form 4

OFFICENANTING

Form 4											
	August 02, 2005								OMB APPROVAL		
	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287		
Check this if no longe subject to Section 16 Form 4 or	s box er 6. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								Expires: Estimated a burden hou response	irs per	
Form 5 obligations may contir <i>See</i> Instruct 1(b).	Section 1	7(a) of the		lity Hold	ing Com	pany	Act o	ge Act of 1934, f 1935 or Sectio 40			
(Print or Type Re	esponses)										
TICKNOR CAROLYN M Symbol				er Name and Ticker or Trading EMAX INC [OMX]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 3. Date of (Month/E) OFFICEMAX 07/29/2 INCORPORATED, 150 PIERCE ROAD				- 005				Officer (give title 10% Owner Officer (give title Other (specify below) below)			
	(Street)	Filed(Month/Day/Year) App					Applicable Line)	Individual or Joint/Group Filing(Check plicable Line) Form filed by One Reporting Person			
ITASCA,, IL	60143							Form filed by M Person			
(City)	(State)	(Zip)	Table	I - Non-Do	erivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction E (Month/Day/Ye	ar) Executio any	emed on Date, if Day/Year)	Code	Disposed (Instr. 3,	(A) o of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
Common Stock	07/29/2005			А	1,516	A	<u>(1)</u>	3,601	D		

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

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 Acquired, Disposed of, or Beneficially Owned

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

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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. Transactic Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
TICKNOR CAROLYN M OFFICEMAX INCORPORATED 150 PIERCE ROAD ITASCA,, IL 60143	Х						
Signatures							
/s/Matthew R. Broad POA for Card Ticknor	08/02/2005						
<u>**</u> 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).

Deletionshin

(1) Granted at no cost to reporting person.

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.

Date