LEAR CORP Form SC 13G/A February 13, 2007

Page 1 of 12 Pages

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

SCHEDULE 13G

Under the Securities exchange Act of 1934

(AMENDMENT NO.7) \*

LEAR CORP

(NAME OF ISSUER)

COM

(TITLE OF CLASS OF SECURITIES)

521865105

(CUSIP NUMBER)

December 31, 2006

Date of event which requires filing of this Statement)

NOTE: A MAJORITY OF THE SHARES REPORTED IN THIS SCHEDULE 13G ARE HELD BY UNAFFILIATED THIRD-PARTY CLIENT ACCOUNTS MANAGED BY ALLIANCE CAPITAL MANAGEMENT L.P., AS INVESTMENT ADVISER. (ALLIANCE CAPITAL MANAGEMENT L.P. IS A MAJORITY-OWNED SUBSIDIARY OF AXA FINANCIAL, INC.)

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

- X Rule 13d-1(b)
  Rule 13d-1(c)
  Rule 13d-1(d)
- \* The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

The information required in the remainder of this cover page shall not be deemed to be 'filed' for the purpose of Section 18 of the Securities Exchange Act of 1934 ('Act') or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

(CONTINUED ON FOLLOWING PAGE(S))

| CUSIP NO. 521865105 13G   |        | 13G   | Page 2 of 12 Pages |  |
|---|--------|---|--------------------|--|
| 1. NAME OF REPORTING PERS   |        | ION NO. OF ABOVE PERSON                         |                    |  |
| AXA Assurances I.A.   | .R.D.  | Mutuelle  |                    |  |
| 2. CHECK THE APPROPRIATE  | BOX    | IF A MEMBER OF A GROUP *                        | (A) [X]<br>(B) []  |  |
| 3. SEC USE ONLY   |        |   |                    |  |
| 4. CITIZENSHIP OR PLACE ( France  | OF OR  | GANIZATION                                      |                    |  |
| NUMBER OF SHARES<br>BENEFICIALLY  | 5.     | SOLE VOTING POWER                               | 16,383             |  |
| OWNED AS OF<br>December 31, 2006  | 6.     | SHARED VOTING POWER                             | 0                  |  |
|   |        | SOLE DISPOSITIVE POWER                          | 65 <b>,</b> 883    |  |
|   | 8.     | SHARED DISPOSITIVE POWER                        | 0                  |  |
| 9. AGGREGATE AMOUNT BENEF<br>REPORTING PERSON<br>(Not to be construed a |        | LLY OWNED BY EACH<br>admission of beneficial ow | 65,883             |  |
| 10. CHECK BOX IF THE AGGRES *   | EGATE  | AMOUNT IN ROW (9) EXCLUDES                      | CERTAIN            |  |
| 11. PERCENT OF CLASS REPRE  | ESENTI | ED BY AMOUNT IN ROW 9                           | 0.1%               |  |
| 12. TYPE OF REPORTING PERS  | SON *  |   |                    |  |
| IC * SEE 1  | INSTR  | UCTIONS BEFORE FILLING OUT!                     |                    |  |
| CUSIP NO. 521865105   |        | 13G   | Page 3 of 12 Pages |  |
| 1. NAME OF REPORTING PERS   |        | ION NO. OF ABOVE PERSON                         |                    |  |
| AXA Assurances Vie  | Mutu   | elle  |                    |  |
| 2. CHECK THE APPROPRIATE  | BOX    | IF A MEMBER OF A GROUP *                        | (A) [X]<br>(B) []  |  |
| 3. SEC USE ONLY   |        |   |                    |  |
| 4. CITIZENSHIP OR PLACE ( France  | OF OR  | GANIZATION                                      |                    |  |
| BENEFICIALLY  |        | SOLE VOTING POWER                               | 16,383             |  |
| OWNED AS OF   | 6.     | SHARED VOTING POWER                             | 0                  |  |

December 31, 2006

|                        | BY EACH<br>REPORTING  | 7.                         | SOLE DISPOSITIVE POWER       | 65,883             |  |  |
|------------------------|---|----------------------------|------------------------------|--------------------|--|--|
|                        |   | 8.                         | SHARED DISPOSITIVE POWER     | 0                  |  |  |
| 9. AGGREGATE AMOUNT BI |   | FICIALLY OWNED BY EACH     |                              | 65,883             |  |  |
|                        |   | admission of beneficial ow | mership)                     |                    |  |  |
| 10.                    | ). CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES * |                            |                              |                    |  |  |
| 11.                    | PERCENT OF CLASS REPRE  | ESENTE                     | ED BY AMOUNT IN ROW 9        | 0.1%               |  |  |
| 12.                    | TYPE OF REPORTING PERS  | SON *                      |                              |                    |  |  |
|                        | IC<br>* SEE I   | INSTRU                     | JCTIONS BEFORE FILLING OUT!  |                    |  |  |
|                        |   |                            |                              |                    |  |  |
|                        |   |                            |                              |                    |  |  |
| CUSI                   | P NO. 521865105   |                            | 13G                          | Page 4 of 12 Pages |  |  |
|                        |   |                            |                              |                    |  |  |
| 1.                     | NAME OF REPORTING PERS<br>S.S. OR I.R.S. IDENTIF                          |                            | ION NO. OF ABOVE PERSON      |                    |  |  |
|                        | AXA Courtage Assura   | ance N                     | Mutuelle                     |                    |  |  |
| 2.                     | CHECK THE APPROPRIATE   | BOX I                      | IF A MEMBER OF A GROUP *     | (A) [X]<br>(B) []  |  |  |
| 3.                     | SEC USE ONLY  |                            |                              |                    |  |  |
| 4.                     | CITIZENSHIP OR PLACE C  | OF OR                      | GANIZATION                   |                    |  |  |
|                        |   | 5.                         | SOLE VOTING POWER            | 16,383             |  |  |
|                        | BENEFICIALLY OWNED AS OF  | 6.                         | SHARED VOTING POWER          | 0                  |  |  |
| REPORTING              | 7.  | SOLE DISPOSITIVE POWER     | 65,883                       |                    |  |  |
|                        | 8.  | SHARED DISPOSITIVE POWER   | 0                            |                    |  |  |
| 9.                     | AGGREGATE AMOUNT BENEF  | FICIAI                     | LLY OWNED BY EACH            | 65,883             |  |  |
|                        | (Not to be construed a  | as an                      | admission of beneficial ow   | mership)           |  |  |
| 10.                    | CHECK BOX IF THE AGGRE SHARES *   | EGATE                      | AMOUNT IN ROW (9) EXCLUDES   | CERTAIN            |  |  |
| 11.                    | PERCENT OF CLASS REPRE  | ESENTE                     | ED BY AMOUNT IN ROW 9        | 0.1%               |  |  |
| 12.                    | 2. TYPE OF REPORTING PERSON * IC  |                            |                              |                    |  |  |
|                        | + GDD -   |                            | ramiona pepope ellitria ouml |                    |  |  |

 $\star$  SEE INSTRUCTIONS BEFORE FILLING OUT!

| CUSIP NO. 521865105   | 13G  | Page 5 of 12 Pages   |  |  |  |
|---|--|----------------------|--|--|--|
| 1. NAME OF REPORTIN S.S. OR I.R.S. I  | G PERSON<br>DENTIFICATION NO. OF ABOVE PER | SON                  |  |  |  |
| AAA   |  |                      |  |  |  |
| 2. CHECK THE APPROP   | RIATE BOX IF A MEMBER OF A GRO             | UP * (A) [ ] (B) [ ] |  |  |  |
| 3. SEC USE ONLY   |  |                      |  |  |  |
| 4. CITIZENSHIP OR P<br>France   | LACE OF ORGANIZATION                       |                      |  |  |  |
| NUMBER OF SHAR<br>BENEFICIALLY  | ES 5. SOLE VOTING POWER                    | 16,383               |  |  |  |
|   | 6. SHARED VOTING POWE                      | R 0                  |  |  |  |
| December 31, 2<br>BY EACH<br>REPORTING  | 7. SOLE DISPOSITIVE P                      | OWER 65,883          |  |  |  |
|   | 8. SHARED DISPOSITIVE                      | POWER 0              |  |  |  |
| 9. AGGREGATE AMOUNT<br>REPORTING PERSON                                       | BENEFICIALLY OWNED BY EACH                 | 65,883               |  |  |  |
| (Not to be const  | rued as an admission of benefi             | cial ownership)      |  |  |  |
| 10. CHECK BOX IF THE SHARES *   | AGGREGATE AMOUNT IN ROW (9) E              | XCLUDES CERTAIN      |  |  |  |
| 11. PERCENT OF CLASS  | REPRESENTED BY AMOUNT IN ROW               | 9 0.1%               |  |  |  |
| 12. TYPE OF REPORTIN  | G PERSON *                                 |                      |  |  |  |
| * SEE INSTRUCTIONS BEFORE FILLING OUT!  |  |                      |  |  |  |
|   |  |                      |  |  |  |
| CUSIP NO. 521865105   | 13G  | Page 6 of 12 Pages   |  |  |  |
| 1. NAME OF REPORTING PERSON S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON |  |                      |  |  |  |
| AXA Financial   | , Inc. 13-3623351                          |                      |  |  |  |
| 2. CHECK THE APPROP   | RIATE BOX IF A MEMBER OF A GRO             | UP * (A) [ ] (B) [ ] |  |  |  |
| 3. SEC USE ONLY   |  |                      |  |  |  |
| 4. CITIZENSHIP OR PLACE OF ORGANIZATION State of Delaware                     |  |                      |  |  |  |
|   | ES 5. SOLE VOTING POWER                    | 16,383               |  |  |  |
| BENEFICIALLY<br>OWNED AS OF<br>December 31, 2                                 | 6. SHARED VOTING POWE                      | R 0                  |  |  |  |

BY EACH 7. SOLE DISPOSITIVE POWER 65,883 REPORTING

PERSON WITH: 8. SHARED DISPOSITIVE POWER 0

9. AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH 65,883
REPORTING PERSON

(Not to be construed as an admission of beneficial ownership)

- 10. CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES \*
- 11. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 0.1%
- 12. TYPE OF REPORTING PERSON \*  $^{\star}$

\* SEE INSTRUCTIONS BEFORE FILLING OUT!

13G Page 7 of 12 Pages

Item 2(a) and (b)

Name of Person Filing and Address of Principal Business Office:

AXA Assurances I.A.R.D Mutuelle, and AXA Assurances Vie Mutuelle, 26, rue Drouot 75009 Paris, France

AXA Courtage Assurance Mutuelle 26, rue Drouot 75009 Paris, France

as a group (collectively, the 'Mutuelles AXA').

AXA

25, avenue Matignon 75008 Paris, France

AXA Financial, Inc. 1290 Avenue of the Americas New York, New York 10104

(Please contact Dean Dubovy at (212) 314-5528 with any questions.)

|   | Lagar rining. LL/111 OOTI 1 OTITI  | 30 10a/N                |  |  |  |
|---|--|-------------------------|--|--|--|
| Item 2(c)   | 13G<br>Citizenship:<br>Mutuelles AXA and AXA - France<br>AXA Financial, Inc Delaware                           | Page 8 of 12 Pages      |  |  |  |
| Item 2(d)   | Title of Class of Securities:  |                         |  |  |  |
|   | COM  |                         |  |  |  |
| Item 2(e)   | Cusip Number: 521865105  |                         |  |  |  |
| Item 3.   | Type of Reporting Person:  AXA Financial, Inc. as a parent holding com in accordance with 240.13d-1(b)(ii)(G). | pany,                   |  |  |  |
|   | The Mutuelles AXA, as a group, acting as a   | parent holding company. |  |  |  |
|   | AXA as a parent holding company.   |                         |  |  |  |
|   |  |                         |  |  |  |
|   | 13G  | Page 9 of 12 Pages      |  |  |  |
| Item 4. Ownership as of December 31, 2006 (a) Amount Beneficially Owned: 65,883 shares of common stock beneficially owned including:  No. of Shares Subtotals |  |                         |  |  |  |
|   |  |                         |  |  |  |
| AXA   |  | 0                       |  |  |  |
| AXA Entit   | y or Entities  |                         |  |  |  |
|   |  |                         |  |  |  |
| AXA Finan   | cial, Inc.   | 0                       |  |  |  |
| Subsidiar   | ies:   |                         |  |  |  |
| acquired  | ernstein L.P. solely for investment purposes on client discretionary investment accounts:                      |                         |  |  |  |
| Common  | Stock  | 64,583                  |  |  |  |
|   | able Life Insurance Company solely for investment purposes:  | 64,583                  |  |  |  |

Common Stock

1,300

Total 1,300 -----
Total 65,883 ------

Each of the Mutuelles AXA, as a group, and AXA expressly declares that the filing of this Schedule 13G shall not be construed as an admission that it is, for purposes of Section 13(d) of the Exchange Act, the beneficial owner of any securities covered by this Schedule 13G.

Each of the above subsidiaries of AXA Financial, Inc. operates under independent management and makes independent decisions.

(b) Percent of Class: 0.1%

Page 10 of 12 Pages

ITEM 4. Ownership as of

(CONT.)

(c) Deemed Voting Power and Disposition Power:

|   | to have Sole Power to Vote or to Direct | (ii) Deemed to have Shared Power to Vote or to Direct the Vote | to have Sole Power to Dispose or to Direct the | to have Shared Power to Dispose or to Direct the |
|---|---|--|--|--|
| The Mutuelles AXA,                      |   |  |  |  |
| as a group                              | 0                                       | 0  | 0  | 0  |
| AXA                                     | 0                                       | 0  | 0  | 0  |
| AXA Entity or Entities:                 |   |  |  |  |
| AXA Financial, Inc.                     | 0                                       | 0  | 0  | 0  |
| Subsidiaries:                           |   |  |  |  |
| AllianceBernstein                       | 15,083                                  | 0  | 64,583   | 0  |
| AXA Equitable Life<br>Insurance Company | 1,300                                   | 0  | 1,300  | 0  |
| -<br>-                                  | 16,383<br>======                        | 0  | 65,883   | 0  |

Each of the above subsidiaries of AXA Financial, Inc. operates under independent management and makes independent voting and investment decisions.

Page 11 of 12 Pages

Item 5. Ownership of Five Percent or Less of a Class:
 If this statement is being filed to report the fact that as of the date

hereof the reporting person has ceased to be the beneficial owner of more than five percent of the class of securities, check the following.

(X)

Item 6. Ownership of More than Five Percent on behalf of Another Person. N/A

Item 7. Identification and Classification of the Subsidiary which Acquired the Security Being Reporting on by the Parent Holding Company:

This Schedule 13G is being filed by AXA Financial, Inc.; AXA, which owns AXA Financial, Inc.; and the Mutuelles AXA, which as a group control AXA:

- ( ) in the Mutuelles AXAs' capacity, as a group, acting as a parent holding company with respect to the holdings of the following AXA entity or entities:
- ( ) in AXA's capacity as a parent holding company with respect to the holdings of the following AXA entity or entities:
- (X) in AXA Financial, Inc.'s capacity as a parent holding company with respect to the holdings of the following subsidiaries:
- (X) AllianceBernstein L.P. (13-3434400), an investment adviser registered under Section 203 of the Investment Advisers Act of 1940.
- (X) AXA Equitable Life Insurance Company (13-5570651), an insurance company and an investment adviser registered under Section 203 of the Investment Advisers Act of 1940.

Page 12 of 12 Pages

- Item 8. Identification and Classification of Members of the Group. N/A
- Item 9. Notice of Dissolution of Group:

N/A

Item 10. Certification:

By signing below I certify that to the best of my knowledge and belief, the securities referred to above were acquired in the ordinary course of business and were not acquired for the purpose of and do not have the effect of changing or influencing the control of the issuer of such securities and were not acquired in connection with or as a participant in any transaction having such purposes or effect.

Signature

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Date: February 14, 2007 AXA FINANCIAL, INC.\*

/s/ Alvin H. Fenichel

Alvin H. Fenichel Senior Vice President and Controller

<sup>\*</sup>Pursuant to the Joint Filing Agreement with respect to Schedule 13G attached hereto as Exhibit I, among AXA Financial, Inc., AXA Assurances I.A.R.D Mutuelle, AXA Assurances Vie Mutuelle, AXA Courtage Assurance Mutuelle, and AXA, this statement Schedule 13G is filed on behalf of each of them.