### FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

Name and Address of Reporting Person*     Montgoris William J  (Last) (First) (Middle)							2. Issuer Name and Ticker or Trading Symbol  MAPLEBY HOLDINGS MERGER Corp  OMX									all app Direct	onship of Reporting Il applicable) Director Officer (give title below)		10% O	wner (specify
C/O OFFICEMAX INCORPORATED						3. Date of Earliest Transaction (Month/Day/Year) 11/05/2013														
263 SHUMAN BLVD.  (Street)						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
NAPERVILLE IL 60563					_										X	X Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
(City) (State) (Zip)																				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D.						ar)	Execution if any	A. Deemed xecution Date, any Month/Day/Year)				ities Acquired (A) d Of (D) (Instr. 3,			4 and Secu		cially I Following	Form	nership : Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
										v	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				( == ,
Common Stock 11/05/					5/2013	/2013					69,10	8	D	(1)		0			D	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date, Transa Code (I			of Derive Security Acquer (A) or Disposof (D) (Instr	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable a Expiration Date (Month/Day/Year)			Amount of Securities Underlying Derivative Security (Instr. and 4)			vative rity 7. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	O Fe Di Oi (I)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	l <sub>v</sub>	(A)	(D)	Date Exercisal		Expiration Date	Title	of Sha	res						

#### **Explanation of Responses:**

1. Disposed of pursuant to a merger agreement between OfficeMax Incorporated (the "Company"), Office Depot, Inc. ("ODP") and their respective subsidiaries, in exchange for 185,901 ODP restricted stock units, on the effective date of the merger (such merger, the "Merger") (in accordance with the exchange ratio set forth in the merger agreement pursuant to which each share of the Company's common stock was exchanged for 2.69 shares of ODP common stock). The closing price of ODP common stock on November 5, 2013 (the effective date of the Merger) was \$5.65 per share.

## Remarks:

In connection with the Merger (defined in the footnotes above), Mapleby Holdings Merger Corporation has become the successor registrant to OfficeMax Incorporated.

/s/ Matthew R. Broad, by POA from Bill Montgoris

11/07/2013

\*\* 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.