FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-028							
Estimated average k	ourdon							

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

37 hours per response: 0.5

					or S	ection 30((h) of the	Investm	ent C	ompany Act	of 1940						
1. Name and Address of Reporting Person* <u>Leanse Thomas J.</u>				2. Issuer Name and Ticker or Trading Symbol MACERICH CO [MAC]						heck all ap Dire	ctor		10% Ov	vner			
(Last) (First) (Middle) THE MACERICH COMPANY 401 WILSHIRE BLVD., SUITE 700				3. Date of Earliest Transaction (Month/Day/Year) 02/22/2016						X Officer (give title below) Other (specify below) Senior EVP, CLO and Secretary							
(Street) SANTA MONICA (City)			90401 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Lir	ne) X For For	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tab	le I - N	on-Deriv	ative	Securit	ties Ac	quire	d, Di	sposed (of, or Be	neficia	lly Own	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/			Execution Day/Year) if any		ecution Date,	Transaction Disposed Code (Instr.		ties Acquired (A) o		5) Secu Bene Own	5. Amount of Securities Beneficially Owned Following		n: Direct r Indirect sstr. 4)	7. Nature of Indirect Beneficial Ownership			
						Code	v	Amount	(A) or (D)	Price	Tran	eported ransaction(s) nstr. 3 and 4)			(Instr. 4)		
Common Stock 02/22/20				016			С		8,053(1)) A	\$0		8,560		D		
Common Stock 02/22/20				016			S		7,500	D	\$78.89	.8924 1,060 ⁽²⁾⁽³⁾			D		
		Т	able II	- Derivat (e.g., p						posed of converti			y Owne	d			
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, Treecurity or Exercise (Month/Day/Year) if any C		Transac Code (In	tion of Der Sec (A) Dis of (posed D) str. 3, 4	6. Date Expirati (Month/	on Da		7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price Derivativ Security (Instr. 5)	e derivative	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

(1)

1. The reporting person redeemed 8,053 units of limited partnership interest ("Units") of The Macerich Partnership, L.P., of which the issuer is the general partner. Units are redeemable for an equal number of shares of the issuer's common stock or, at the election of the issuer, cash equal to the fair market value of such shares. The issuer elected to redeem the reporting person's Units with common stock. The reporting person also holds 45,553 vested LTIP Units and 8,527 unvested service-based LTIP Units.

Exercisable

12/31/2015

Date

(4)

2. The reporting person also holds 161 shares in a trust for the benefit of one of his children.

02/22/2016

3. In addition, 50 shares are held by his adult child who is currently sharing the reporting person's household. The reporting person disclaims beneficial ownership of all shares held by this child, and this report should not be deemed an admission that the reporting person is the beneficial owner of such shares for purposes of Section 16 or otherwise.

4. None.

OP Units

THOMAS J. LEANSE 02/24/2016

\$0

63,446

D

** Signature of Reporting Person Date

Shares

8,053

Title

Common Stock

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).

Code

C

(A) (D)

8,053

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.