FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| gion, 2.0. 20040 | OMB APPROVAL | | | | |
|---------------------------|--------------|-----------|--|--|--|
| S IN BENEFICIAL OWNERSHIP | OMB Number: | 3235-0287 | | | |

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

| OMB APPROVAL | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|
| OMB Number: 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | |
| hours per response: | 0.5 | | | | | | |

| 1. Name and Address of Reporting Person* COPPOLA ARTHUR M | | | | | 2. Issuer Name and Ticker or Trading Symbol MACERICH CO [MAC] | | | | | | | | 5. (C | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | |
|--|--|------|---------------|---------|---|--|--------|--|-----------------|-------------------|---|----------------|---|---|--------|---|--|--|-------------------------------|
| (Last) (First) (Middle) THE MACERICH COMPANY 401 WILSHIRE BOULEVARD #700 | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/16/2006 | | | | | | | | | X Officer (give titl below) President | | | Othe belov | r (specify v) | |
| (Street) SANTA MONICA (City) | A CA | A 9 | 90401 Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| | | Tabl | e I - No | n-Deriv | ative/ | Sec | uritie | s Ac | quired | l, Dis | sposed o | f, o | r Ber | neficia | lly Ow | ned | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day) | | | | | | Execution Date, | | 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5) | | | | Secur Benet | icially d Following | es Forn ally (D) o following (I) (Ir | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | Code | | | v | Amount | (A) or (D) Pri | | Price | Trans | action(s) 3 and 4) | | | (111311. 4) | | |
| COMMON STOCK 02/16/2 | | | | | /2006 | 2006 | | | G | | 100 | | A | \$0 | 200 | | | | By Daughter ⁽¹⁾ |
| | 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) | Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any | | | | | ransaction of ode (Instr. Derivative | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | f nstr. 3 | 8. Price of Derivativy Security (Instr. 5) | | e s illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercis | able | Expiration Date | Title | or Nu of | ımber | | | | | |

Explanation of Responses:

1. Shares held by minor daughter. 1,300 shares are also held by minor son. The reporting person disclaims beneficial ownership of all shares held by his daughter and son 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. The reporting person also directly holds 961,026 shares.

Madonna R. Shannon for ARTHUR M. COPPOLA

02/27/2006

** 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.