FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
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0.5

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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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>ANDERSON DANA K</u>					2. Issuer Name <b>and</b> Ticker or Trading Symbol  MACERICH CO [ MAC ]							(Che	elationship ock all applic	r 10% Owner				
(Last) (First) (Middle) THE MACERICH COMPANY 401 WILSHIRE BOULEVARD, SUITE 700					3. Date of Earliest Transaction (Month/Day/Year) 10/06/2006							below)		e Other (specify below) nan of the Board				
(Street) SANTA MONICA CA 90401  (City) (State) (Zip)			(Zip)	_	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	Form f Form f Persor	ividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						action 2A. Deemed Execution Date,			tion	4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			) or	5. Amou Securitie Benefici	nt of 6. Ones Formally (D) of ollowing displaying in ones		Direct Indirect Itstr. 4)	7. Nature of Indirect Beneficial Ownership Instr. 4)
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. Deemed Execution Date, if any (Month/Day/Year	Code (	Transaction Code (Instr.		of I		5. Date Exercisable and Expiration Date Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		urity	3. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable		kpiration ate	Title	or	ount mber ıres					
OP Units	(1)	10/06/2006		G		155 <sup>(2)</sup>		03/16/1995		(3)	Common Stock	1	55	\$0	1,135,60	3	I <sup>(4)</sup>	By Trust

## **Explanation of Responses:**

- 1. Redeemable for an equal number of common stock or, at the election of Macerich, cash equal to the fair market value of such shares.
- 2. These securities were transferred from a Grantor Retained Annuity Trust where the reporting person's wife and children are trustees, and that trust now holds 157,029 OP Units. The reporting person disclaims beneficial ownership of the securities held in the trust, and this report should not be deemed an admission that the reporting person is the beneficial owner of such securities for purposes of Section 16 or otherwise.
- 3. None.
- 4. In addition, the reporting person is the beneficial owner of 7,808 shares of common stock of which 6,693 shares are held by the Anderson Family Trust for the benefit of the reporting person and his wife. This amount also includes 1,115 shares which were acquired through the Macerich Employee Stock Purchase Plan and reinvestment program.

Madonna R. Shannon for DANA K. ANDERSON 11/09/2006

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.