FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-02									
Estimated average burden									
hours per response:	0.5								

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

Name and Address of Reporting Person*     COPPOLA ARTHUR M					2. Issuer Name <b>and</b> Ticker or Trading Symbol  MACERICH CO [ MAC ]										Relationship of Reporting Person(s) to Issuer (Check all applicable)					
			(1.4: -1.11)												Officer (below)	give title		10% Ow Other (sp below)	1	
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)									Chairman & CEO					
THE MACERICH COMPANY 401 WILSHIRE BOULEVARD #700					11/22/2010															
401 WIL	SHIRE BO	ULEVARD #/0	U																	
(Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
SANTA MONICA	, C.	A	90401			X Form filed by One							e Reporting Person							
MONICA	-1												Form filed by More than One Reporting Person							
(City)	(S	itate)	(Zip)																	
		Та	ble I - Non	-Derivat	ive Se	ecur	ities Ac	cqui	ired, D	isp	osed c	of, or	Bene	eficially	Owned					
Dat			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		e,   1	Transaction Dispos			rities Acquired (A) ed Of (D) (Instr. 3, 4		(A) or 3, 4 and 5	Beneficially Owned Following		Form:	Direct Indirect Estr. 4)	. Nature of ndirect Beneficial Ownership		
								Code	,	Amount		(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
COMMON SHARES 11/22				11/22/2	2/2010		$\top$	С		200,000		A	(1)	379,913(2)			D			
			Table II - I	Derivativ (e.g., put											Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y	Code	, Transaction Code (Instr.		Derivative		Date Exer Diration D Donth/Day/	of Securities		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)			
				Code	v	(A) (D)	Date Exe	e ercisable		piration ite	Title	O N	mount r lumber f Shares		Transacti (Instr. 4)	on(s)				
OP Units	(1)	11/22/2010		C <sup>(1)</sup>			200,000	03/3	/15/1995		(1)	Comn		200,000	\$0	1,286,2	260	D		

## **Explanation of Responses:**

- 1. The reporting person redeemed 200,000 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. Units have no
- 2. 488 shares are also held by Mr. Coppola's minor child. The reporting person disclaims beneficial ownership of all shares held by his 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.

Madonna R. Shannon for ARTHUR M. COPPOLA

11/24/2010

\*\* 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.