FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

wasinington,	D.C.	20349	

OMB APPROVAL

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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 S	Section	n 30(h) c	of the	Investment	Con	npany Act	of 194	10						
1. Name and Address of Reporting Person* <u>COPPOLA ARTHUR M</u>					2. Issuer Name <b>and</b> Ticker or Trading Symbol  MACERICH CO [ MAC ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
												)	Director	Director			ner		
(Last) (First) (Middle) THE MACERICH COMPANY															Officer (	(give title		Other (s below)	pecify
					3. Date of Earliest Transaction (Month/Day/Year) 01/12/2015								below)	Chairman & CEO					
401 WIL	SHIRE BC	OULEVARD #70	0																
(Street) SANTA MONICA	A C	A	90401		4. If Amendment, Date of Original Filed (Month/Day/Year)					r)	Line	Individual or Joint/Group Filing (Check Applicable e)  X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(5	State)	(Zip)																
		Ta	ble I - Non	-Deriva	tive	Sec	curities	s Ac	quired, [	Disp	oosed o	f, or	Ben	eficially	/ Owned				
Date				Day/Year)   Exe		A. Deemed Execution Date, f any Month/Day/Year)		Transaction Disposed ( Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3, 4				es For ally (D) Following (I) (		rm: Direct or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount		(A) or (D)	Price	Transacti	Reported Fransaction(s) [Instr. 3 and 4)			(Instr. 4)		
			Table II - D						uired, Di s, options						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	Co	Transaction Code (Instr. 8) Secur Acqui or Dis		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		s Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported	lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Co			(A)	(D)	Date		expiration	Title	i	Amount or Number		Transaction(s) (Instr. 4)			

## Explanation of Responses:

(1)

LTIP

1. Represents the vesting of performance-based units of limited partnership interest in The Macerich Partnership, L.P. (the "Partnership"), of which the Issuer is the general partner. These LTIP Units were issued as long-term incentive compensation and vested upon achievement of certain pre-established performance criteria. Conditioned upon minimum allocations to the capital accounts of the LTIP Units for federal income tax purposes, each LTIP Unit may be converted, at the election of the holder, into a common unit of limited partnership interest in the Partnership (the "Common Unit"). Each Common Unit may generally be redeemed, at the election of the holder, for cash equal to the then fair market value of a share of the Issuer's Common Stock, except that the Issuer may, at its election, acquire each Common Unit for one share of Common Stock. The rights to convert LTIP Units into Common Units and redeem Common Units do not have expiration dates.

(1)

Madonna R. Shannon for ARTHUR M. COPPOLA

Commor

Stock

(1)

01/13/2015

288,492

\*\* Signature of Reporting Person

223,311

\$0

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).

01/12/2015

\*\* 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.

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