FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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|-------------|------|-------|

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|-----------|------------|---------------|-----------|

| OMB APPRO | DVAL |
|------------------------|-----------|
| OMB Number: | 3235-0287 |
| Estimated average burd | en |
| 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* OHERN THOMAS E | | | | | | 2. Issuer Name and Ticker or Trading Symbol MACERICH CO [MAC] | | | | | | | | | Check a | all app Direc | licable) | 10% | Person(s) to Issuer 10% Owner Other (specify | |
|--|--|------|-----------------------|---------|-----------------------|---|---------|--------------------------------------|---|---|---------|-------|---|---|--|---|---|-----|--|--|
| (Last) (First) (Middle) THE MACERICH COMPANY 401 WILSHIRE BOULEVARD #700 | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/24/2006 | | | | | | | | X Officer (give title Other (specify below) EVP, Treasurer & CFO | | | | | | |
| (Street) SANTA MONICA (City) | | | 0 0401 Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | . Individine) | -/ | | | | | |
| | | Tabl | e I - Nor | ı-Deriv | ative | Se | curitie | s Acc | quired, | Disp | osed o | f, or | Bene | eficia | ally C |)wne | ed | | | |
| 1. Title of Security (Instr. 3) 2. Trans Date (Month/I | | | Day/Year) Exec | | Execution if any | A. Deemed execution Date, fany Month/Day/Year) | | Transaction Disposed Code (Instr. 5) | | ities Acquired (A) d Of (D) (Instr. 3, | | | 4 and Secu Bene | | cially I Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | Code | v | Amount | | (A) or (D) | Price | , la | Transaction(s) (Instr. 3 and 4) | | | (1115411 4) | | | | |
| COMMON STOCK 08/2 | | | | | 08/24/2006 | | | | G | | 1,400 D | | D | \$ | 0 91,359 | | D ⁽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) | 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date Execution Date, if any (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) 4. Transaction Execution Date, if any (Month/Day/Year) (Month/Day/Year) | | | | Expiratio (Month/D | Date Expiration Date Expiration Expiration Date Month/Day/Year) Date Expiration Exercisable Date | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares | | t r | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | |

Explanation of Responses:

1. In addition, 3,895 shares are also held by minor children who share reporting person's household. The reporting person disclaims beneficial ownership of all shares held by his children 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. 788 shares are also held indirectly by the reporting person through the Company's 401(k) Plan.

> Madonna R. Shannon for THOMAS E. O'HERN

08/25/2006

** 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.