

OMB APPROVAL	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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> (Last) (First) (Middle) <u>THE MACERICH COMPANY</u> <u>401 WILSHIRE BOULEVARD, SUITE 700</u> (Street) <u>SANTA MONICA CA 90401</u> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>MACERICH CO [MAC]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) <u>Vice Chairman of the Board</u>
	3. Date of Earliest Transaction (Month/Day/Year) <u>10/02/2007</u>	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	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			

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)	4. Transaction Code (Instr. 8)	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 Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					(A)	(D)	Date Exercisable	Expiration Date						Title
OP Units	(1)	10/02/2007		J ⁽²⁾	8,682		03/16/1995	(3)	Common Stock	8,682	\$0	1,167,611 ⁽⁴⁾	I	By Trust

Explanation of Responses:

- Redeemable for an equal number of common stock, or at the election of Macerich, cash equal to the fair market value of such shares.
- These securities were transferred from a Grantor Retained Annuity Trust ("GRAT") to the Anderson Family Trust for the benefit of the reporting person and his wife. The reporting person's wife and children are the trustees of the GRAT, and the GRAT now holds 125,021 OP Units. In addition, the GRAT is the owner of 76,404 shares of common stock. The reporting person disclaims beneficial ownership of the securities and shares of common stock held in the GRAT, and this report should not be deemed an admission that the reporting person is the beneficial owner of such securities or shares of common stock for purposes of Section 16 or otherwise.
- None.
- In addition, the reporting person is the beneficial owner of 8,148 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 1,455 shares which were acquired through the Macerich Employee Stock Purchase Plan and reinvestment program.

Madonna R. Shannon for
DANA K. ANDERSON 10/04/2007

** 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.