FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

OMB APP	ROVAL							
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hours per response:	0.5							

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													hour	s per res	sponse:	0.5			
1. Name and Address of Reporting Person* Menard Ann C					2. Issuer Name and Ticker or Trading Symbol MACERICH CO [MAC]								eck all applic Directo	able) r	Reporting Person(s) to Is ble)				
(Last) (First) (Middle) 401 WILSHIRE BLVD. SUITE 700						3. Date of Earliest Transaction (Month/Day/Year) 01/01/2022									below)	(give title Other (spec below) Legal Officer/Secretary			
(Street) SANTA MONICA CA 90401						4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)																
		Tab	le I - Nor	n-Deriv	ativ	e Se	ecurities	s Ac	quired,	Dis	osed c	f, or	Bene	eficiall	y Owned				
1. Title of Security (Instr. 3) 2. Trans: Date (Month/I			/Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	((A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
		-	Γable II -				urities ls, warr								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 I if any (Month/Day	Date, T	4. Transaction Code (Instr. 8)		n of E		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Followin Reported Transact (Instr. 4)	e es ally g	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)

Explanation of Responses:

(1)

1. Represents units of limited partnership interest in The Macerich Partnership, L.P. (the "Partnership"), of which the Issuer is the general partner, issued as long term incentive compensation pursuant to the Issuer's equity based compensatory programs. Conditioned upon minimum allocations to the capital accounts of the LTIP Units for federal income tax purposes and time vesting, each LTIP Unit may be converted into a common unit of limited partnership interest in the Partnership (a "Common Unit"). Each Common Unit acquired upon conversion of a LTIP Unit may be presented for redemption, 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 so presented for one share of common stock. The rights to convert LTIP Units to Common Units and redeem Common Units do not have expiration dates.

Date

Exercisable

(1)(2)

(D)

Expiration

(1)

Title

Common Stock

2. LTIP Units vest one-third on December 31, 2022, one-third on December 31, 2023 and one-third on December 31, 2024

Remarks:

LTIP Units

Lisa R. Pena for Ann C. Menard

01/04/2022

106,932

D

** Signature of Reporting Person

Shares

31,828

\$0.00

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).

01/01/2022

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Code

A

(A)

31,828

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.