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MACERICH Form 4	I CO												
December 02	2, 2015												
FORM	Л									OMB A	PPROVAL		
CURITED STATES SECURITIE Washing								NGE C	COMMISSION	OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue Section 17(a) of the Public				NGES IN BENEFICIAL OWNERSHIP SECURITIES 16(a) of the Securities Exchange Act of 193 Utility Holding Company Act of 1935 or Se Investment Company Act of 1940						Estimated average burden hours per response 0.5			
(Print or Type I	Responses)												
ANDERSON DANA K Symbol			Symbol	er Name and Ticker or Trading ERICH CO [MAC]					5. Relationship of Reporting Person(s) to Issuer				
									(Check all applicable)				
	(First) (N ERICH COMPAN BOULEVARD,	JY, 401	3. Date of (Month/E 09/11/2	Day/Yea		ansaction			below)	title 10% below) nairman, Emeri			
SANTA MO	(Street) DNICA, CA 9040	1	4. If Ame Filed(Mon			te Origina	1		6. Individual or Jo Applicable Line) _X_ Form filed by M Form filed by M Person	One Reporting Pe	erson		
(City)	(State)	(Zip)	Tabl	e I - No	on-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	ransaction Date 2A. Deemed			actio 8)	4. Securi n(A) or Di (Instr. 3, Amount	ties A spose	cquired d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. 7. Nature of Ownership Indirect Form: Direct Beneficial (D) or Ownership Indirect (I) (Instr. 4) (Instr. 4)			
Common Stock	09/11/2015			G	·	56	D	\$ 0	118,294	Ι	By Anderson Family Trust		
Common Stock (1)	11/30/2015			A	v	52	A	\$ 66.43 (2)	118,346	Ι	By Anderson Family Trust		
Common Stock	11/30/2015			F		3 (3)	D	\$ 78.15	118,343	Ι	By Anderson		

Family

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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

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)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	5	ate	7. Titl Amou Under Securi (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
ANDERSON DANA K THE MACERICH COMPANY 401 WILSHIRE BOULEVARD, SUITE 700 SANTA MONICA, CA 90401				Vice Chairman, Emeritus			
Signatures							
Thomas J. Leanse for DANA K. ANDERSON	12/02/2	2015					
**Signature of Reporting Person	Date						

Explanation of Responses:

* 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).

The reporting person is voluntarily reporting the acquisition of the issuer's common stock pursuant to the issuer's Employee Stock

- (1) Purchase Plan ("ESPP") for the six month ESPP offering period ended November 30, 2015. This transaction is exempt pursuant to Rule 16b-3(c).
- (2) In accordance with the ESPP, the shares were purchased at a 15% discount from the closing price of the issuer's common stock on November 30, 2015.

Trust

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(3) Represents shares withheld by the issuer to satisfy tax withholding obligations in connection with the reporting person's acquisition of shares pursuant to the ESPP on November 30, 2015.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.