FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPRO	VAL
OMB Number:	3235-0287
Estimated average b	urden
nours 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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	Print or Type Responses) . Name and Address of Reporting Person * Connelly Deirdre P				2. Issuer Name and Ticker or Trading Symbol Macy's, Inc. [M]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
C/O GLA	(Last) (First) (Middle) O GLAXOSMITHKLINE, THREE FRANKLIN LAZA, 1600 VINE STREET			3. Date of Earliest Transaction (Month/Day/Year) 06/30/2009							ve title below)		o Owner er (specify belo	w)
(Street) PHILADELPHIA, PA 19102				4. If Amendment, Date Original Filed(Month/Day/Year)					_X_1	6. Individual or Joint/Group Filing(Check Applicable Line) X. Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City		(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1.Title of S (Instr. 3)	•		2A. Deemed Execution Dat) any (Month/Day/Y		r) Coc (Ins	le ((tr. 8)	A) or Disposed (Instr. 3, 4 and 5)			,		Ownership Form:	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder:							form o	ned in this for isplays a curr	rently valid	required d OMB c	d to respo		he	
1. Title of	Conversion or Exercise Price of Derivative	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transact	tion of De See Ac	varran Numberivativ curities quired	contai form c cquired, Disp ts, options, c er 6. Date Exe Expiration (Month/Da	ned in this for isplays a curronsed of, or Ben onvertible securicisable and	rently valid	required d OMB c	d to respo ontrol nur 8. Price of	9. Number o Derivative Securities Beneficially Owned	f 10.	(Instr. 4
Title of Derivative Security	Conversion or Exercise Price of	Date	3A. Deemed Execution Date, if	4. Transact	tion of De) See (A Disorption of (In	varran Numberivativ	contai form c cquired, Disp ts, options, c er 6. Date Exe Expiration e (Month/Day	ned in this for isplays a curronsed of, or Ben onvertible securicisable and	rently valid eficially Overities) 7. Title and Amount of Underlying Securities	required d OMB c	8. Price of Derivative Security	9. Number o Derivative Securities Beneficially	f 10. Ownersh Form of Derivativ Security: Direct (I or Indire	of Indire Benefic Owners (Instr. 4
Title of Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if	4. Transact	tion of Dee See Ace (A Disort of (In 4, 3)	Numberivative curities equired of or sposed (D) str. 3,	contain form of countries to the countries of the countri	ned in this for isplays a current of the current of	rently valid eficially Overities) 7. Title and Amount of Underlying Securities	required d OMB c	8. Price of Derivative Security	9. Number o Derivative Securities Beneficially Owned Following Reported Transaction(f 10. Ownersh Form of Derivativ Security: Direct (I or Indire s) (I)	of Indirection Benefic Owners (Instr. 4

D (1 0 N /41)	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Connelly Deirdre P C/O GLAXOSMITHKLINE THREE FRANKLIN PLAZA, 1600 VINE STREET PHILADELPHIA, PA 19102	X					

Signatures

/s/ Linda J. Balicki, as attorney-in-fact for Deirdre P. Connelly pursuant to a Power of Attorney-in-fact for Deirdre P. Conne	orney	07/02/2009
-*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).
- (1) 1-for-1 conversion.
- (2) The price noted is the average of the value of the stock units granted each month during the quarter for which this report is filed.

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.