FORM 4

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

OMB APPRO	VAL				
OMB Number:	3235-0287				
Estimated average burden					
nours per response	. 0.5				

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 Typ	e Responses	s)														
1. Name and Address of Reporting Person *- WEATHERUP CRAIG				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				
(Last) (First) (Middle) 10343 EAST PINNACLE PEAK ROAD			3. Date of Earliest Transaction (Month/Day/Year) 05/18/2012								ive title below)		r (specify below)		
(Street) SCOTTSDALE, AZ 85255				4. If Amendment, Date Original Filed(Month/Day/Year)								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)		85255 (State)	(Zip)									_				
(City)		(State)	(Zip)			Table	I - No	on-Deriva	ative S	Securitio	es Acquire	ed, Dispose	ed of, or Be	neficially Owr	ed	
1.Title of Se (Instr. 3)	ecurity	I		2A. Deemed Execution Dany	Date	, if Coo (Ins				5) Reported		t of Securities Ily Owned Following Transaction(s)		Ownership of	Nature f Indirect eneficial	
				(Month/Day/Y	ıy/Ye					(A) or	r	(Instr. 3 and 4)		01 (I	Indirect (I	wnership nstr. 4)
							Code	V A	moun	t (D)	Price			(1	nstr. 4)	
Reminder: R	Report on a se	eparate line for ea	ach class of securiti	ies beneficia	ılly o	wned d	irectl	_								
													on of infor	mation ond unless t		74 (9-02)
													control nu		ile.	
			Table II - I	Danimatima	C	uitiaa A		uad Dian		f ou Do	noficially:	Owned				
				e.g., puts, o								Owneu				
	2.	3A. Deemed	4.					7. Title a			9. Number of		11. Nature			
	Conversion or Exercise		Execution Date ar) any	c, if Transa Code	ction	of Deriva		and Expi (Month/I			Amount Underlyi		Security Security	Derivative Securities	Form of	of Indirect Beneficial
(Price of (Month/Day/Y				Securities		1.5			Securities (Instr. 3 and 4)		Beneficially		Ownershi		
	Derivative Security					Acquired (A) or		(IIIS)			(Instr. 3 a	ana 4)		Owned Following	Security: Direct (D)	(Instr. 4)
	,					Dispos								Reported	or Indirect	t
						of (D) (Instr. 3, 4, and 5)								Transaction(s) (Instr. 4)	(I) (Instr. 4)	
												Amount				
								Date		piration	Title	or Number				
				Code	V	(A)	(D)	Exercisal	ble Da	ate		of Shares				
Restricted	40					. ,	,	(2)		(2)	Commo	an .				
Stock Units	<u>(1)</u>	05/18/2012		A		3,689		<u>(2)</u>		<u>(2)</u>	Stock	1 3 6X9	\$ 0	3,689	D	

Reporting Owners

Donastina Coman Nama / Addings	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
WEATHERUP CRAIG 10343 EAST PINNACLE PEAK ROAD SCOTTSDALE, AZ 85255	X						

Signatures

/s/ Linda J. Balicki, as attorney-in-fact for Craig E. Weatherup pursuant to a Power of Attorney	05/21/2012
**Signature of Reporting Person	Date

Explanation of Responses:

- \star 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) Each restricted stock unit represents the equivalent of one share of the Issuer's common stock.
- (2) The restricted stock units vest on the earlier of one year from the grant date or the date of the Issuer's next annual meeting of shareholders. The vested shares will be automatically deferred and delivered to the reporting person six months after the reporting person's service on the Issuer's Board of Directors ends.

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.