Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

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)										
1. Name and Address of Reporting Pers BOLLENBACH STEPHEN F	2. Issuer Name a r Macy's, Inc. [M]		Trac	ding Symb	ol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) C/O TIME WARNER INC., ONE WARNER CENTER		3. Date of Earliest 7 06/30/2013	Fransaction	(Moi	nth/Day/Y	ear)		Officer (give title below)	Other (specify be	low)
(Street) NEW YORK, NY 10019	4. If Amendment, I	Date Origina	ıl File	ed(Month/Da	ay/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) (State)	(Zip)	Ta	ble I - Non-	Deri	ivative Se	curities	Acqu	ired, Disposed of, or Beneficially (Owned	
1.Title of Security (Instr. 3)	Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	(Instr. 8)		(A) or Di (D) (Instr. 3, 4	sposed of 4 and 5) (A) or	of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership

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.

SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Nu	mber	6. Date Exer	rcisable	7. Title and		8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	ion	of		and Expirati	ion Date	Amount of		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		Deriv	ative	(Month/Day	/Year)	Underlying		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Secur	ities			Securities		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Acqui	ired			(Instr. 3 and	14)		Owned	Security:	(Instr. 4)
	Security					(A) 01	r						Following	Direct (D)	
						Dispo	sed						Reported	or Indirect	
						of (D))						Transaction(s)	(I)	
						(Instr.	. 3,						(Instr. 4)	(Instr. 4)	
						4, and	15)								
											Amount				
								Date	Evaluation		or				
								Exercisable	Expiration	Title	Number				
									Date		of				
				Code	V	(A)	(D)				Shares				
Phantom										~					
Stock	(1)	06/30/2013		А		457		(2)	(2)	Common	457	\$ 48.71	457	D	
Units	<u></u>	00/30/2013		11		137				Stock	157	<u>(3)</u>	137	D	
Units															

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
BOLLENBACH STEPHEN F C/O TIME WARNER INC. ONE TIME WARNER CENTER NEW YORK, NY 10019	Х						

Signatures

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) Units are to be settled in Common Stock upon the reporting person's termination from the Board of Directors.

(3) 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.