FORM 4

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 Ty	pe Response	s)																	
1. Name ar	nd Address of	f Reporting I		2. Issuer Name and Ticker or Trading Symbol Macy's, Inc. [M]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Las	*	(First) 7 WEST	TOTAL CORD DECK	3. Date of Earliest Transaction (Month/Day/Year)										Director 10% Owner X Officer (give title below) Other (specify below) Chief Financial Officer					
C/O IVII IV			03/28/2014 4. If Amendment, Date Original Filed(Month/Day/Year)									6. Individual or Joint/Group Filing(Check Applicable Line)							
CINCIND	NATI, OH	,,									_X_Form filed by One Reporting Person Form filed by More than One Reporting Person								
(Cit	Table I. Non Parivativa Scauritics Assur										ired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year			2A. Deemed Execution Date, if			3. Transacti Code (Instr. 8)		4. Securiti (A) or Dis		rities Acquired Disposed of (D) 5, 4 and 5)		5. Amount of Securities Beneficially 6. 7. Nat Owned Following Reported Ownership of Ind				Beneficial Ownership			
							Code	ode V		Amount	(A) or nt (D) Pric		(I) (Instr. 4)						
Common Stock														2,727 (1)		I			By 401(k) Plan
Reminder:	Report on a	separate line	for each	n class of securities Table II - 1					Pe co for	rson ntair m di	s who ned in isplays	this for	m are ently	not i valid	required OMB co	of inform I to respoi ontrol nun	nd unless th		1474 (9-02)
1. Title of	<u> </u>	3. Transacti			e.g., puts.	calls,		ants,	option	ıs, co	nvertil	ole secur	ities)			O Duino of	9. Number of	f 10.	11. Natur
	Conversion			Execution Date, if	f Transaction of Code Deriv Acqu (A) o Dispo (D) (Instr. 8)		erivat curiti equire) or spose)	ive les ed	Expiration (Month/I		Exercisable an on Date Day/Year)		Amou Under Secur	ele and unt of crlying rities : 3 and 4)			9. Number of 2. Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form of Derivate Securit Direct of	hip of Indirect Beneficia Ownershi (Instr. 4)
							(A)	(D)	Date Exerc	cisabl	Expi le Date	ration	Title		Amount or Number of Shares				
Option to Purchase Common Stock		03/28/2014			A	27	,792	2	(2)		03/2	03/28/2024		mon ock	27,792	\$ 0	27,792	D	
Repor	rting O	wners																	
Reporting	Owner Nan	ne / Address			Relationships														
HOGUET KAREN M C/O MACY'S, INC. 7 WEST SEVENTH STREET CINCINNATI, OH 45202				tor 10% Owner	Officer Chief Financial Off			fficer	Oth	ier									
Signa	tures																		

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).

/s/ Linda J. Balicki, as attorney-in-fact for Karen M. Hoguet pursuant to a Power of Attorney

Signature of Reporting Person

(1) Reflects the reporting person's interest in Macy's stock under the Issuer's 401(k) plan, derived by dividing the value of the undivided interest of the reporting person in the applicable investment fund as of March 31, 2014 by \$59.29, the stock price of such date.

04/01/2014

(2) Grant to reporting person of options to purchase 27,792 shares of common stock under the Issuer's 2009 Omnibus Incentive Compensation Plan. The options become exercisable in 25% increments on March 28, 2015, March 28, 2016, March 28, 2017 and March 28, 2018.

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.