# FORM 4

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

| OMB APPROVAL            |           |  |  |  |  |  |
|-------------------------|-----------|--|--|--|--|--|
| MB Number:              | 3235-0287 |  |  |  |  |  |
| stimated average burden |           |  |  |  |  |  |
| ours per respons        | e 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 Ty   | pe Response         | es)                                  |                      |  |   |        |                            |            |                               |   |                              |   |  |                                       |  |  |                                       |
|--|---------------------|--------------------------------------|----------------------|--|---|--------|----------------------------|------------|-------------------------------|---|------------------------------|---|--|---------------------------------------|--|--|---------------------------------------|
| 1. Name and Address of Reporting Person * Lenehan William H          |                     |                                      |                      | 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)<br>591 REDWOOD HIGHWAY, SUITE 1150           |                     |                                      |                      |  | 3. Date of Earliest Transaction (Month/Day/Year) 09/30/2017 |        |                            |            |                               |   |                              |   |  | give title below                      |  | her (specify belo  | ow)                                   |
| (Street) MILL VALLEY, CA 94941                                       |                     |                                      |                      | 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  | y)                  | (State)                              |                      | (Zip)  |   |        | Tab                        | le I - N   | lon-Deri                      | ivati   | ve Securition                | es Acquir   | ed, Dispos                             | ed of, or Bo                          | eneficially Ov   | wned   |                                       |
| 1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year) |                     |                                      | Execution Date, if C |  |   |        | (A) or Dis<br>(Instr. 3, 4 |            | or Disposed<br>tr. 3, 4 and : | osed of (D) Reported (Instr. 3  |                              | of Securities<br>Owned Fol<br>ansaction(s)<br>4)  | llowing                                | Ownership<br>Form:                    | Beneficial<br>Ownership  |  |                                       |
| Reminder:  | Report on a         | separate line f                      | or each o            | class of securiti  | es benefi   | cially | owned                      | d direc    | Perso                         | ons<br>aine   | who respo                    | orm are i   | not requir                             | on of info<br>ed to resp<br>control n | ond unless   |  | 474 (9-02)                            |
|  |                     |                                      |                      | Table II - D   |   |        |                            |            |                               |   | ed of, or Be<br>vertible sec |   | Owned                                  |                                       |  |  |                                       |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                  | Conversion          | 3. Transactio<br>Date<br>(Month/Day/ | Year) E              | 3A. Deemed<br>Execution Date,<br>ary)<br>(Month/Day/Ye       | Code  |        | of                         |            | and Exp                       | 6. Date Exercisable and Expiration Date (Month/Day/Year)  7. Ti Amo Unde Secu (Inst.) |                              |   | of<br>ng                               |                                       | 9. Number of<br>Derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) | Ownersh<br>Form of<br>Derivativ<br>Security:<br>Direct (D<br>or Indirect | Beneficial<br>Ownershij<br>(Instr. 4) |
|  |                     |                                      |                      |  | Code  | e V    | (A)                        |            | Date<br>Exercisa              | able  | Expiration<br>Date           | Title   | Amount<br>or<br>Number<br>of<br>Shares |                                       |  |  |                                       |
| Phantom<br>Stock<br>Units  | <u>(1)</u>          | 09/30/2017                           |                      | A  |   | 1,02   | 9                          | <u>(2)</u> | 1                             | (2)   | Commo<br>Stock               | 1,029   | \$<br>21.8805<br>(3)                   | 1,029                                 | D  |  |                                       |
| Repor  | ting O              | wners                                |                      |  |   |        |                            |            |                               |   |                              |   |  |                                       |  |  |                                       |
| Reporting Owner Name / Address                                       |                     |                                      | Relationsl           |  | Oth   | er     |                            |            |                               |   |                              |   |  |                                       |  |  |                                       |
|  | William H<br>WOOD H | IGHWAY                               | V                    |  | 3.11001   | Juli   |                            |            |                               |   |                              |   |  |                                       |  |  |                                       |

## **Signatures**

MILL VALLEY, CA 94941

| /s/ Ann Munson Steines, as attorney-in-fact for William H. Lenehan pursuant to a Power of Attorney-in-fact for William H. Lenehan pursuant to Attorney-in-fa | rney | 10/03/2017 |
|--|------|------------|
| ——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) 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.