FORM 4

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

OMB APPROVAL				
OMB Number:	3235-0287			
Estimated average burden				
nours per response	e 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

(I IIII OI I y	pe Responses													
1. Name and Address of Reporting Person* Hale Leslie D.		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) 3 BETHESDA METRO CENTER, SUITE 1000			3. Date of Earliest Transaction (Month/Day/Year) 03/31/2018				-	Officer (g	give title below)	Otl	er (specify belo	w)	
(Street) BETHESDA, MD 20814		4. If Amendment, Date Original Filed(Month/Day/Year) 04/03/2018				6	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person _Form filed by More than One Reporting Person				ine)			
(City	<i>i</i>)	(State)	(Zip)		Та	ble I -	Non-Deriva	ative Securit	ies Acquire	ed, Dispose	ed of, or Be	neficially Ow	1ed	
1.Title of Security (Instr. 3)			Date (Month/Day/Year)	2A. Deemee Execution I any (Month/Day	Date, if	3. Tran Code (Instr. 8	(A	(A) or Dispose		5. Amount of Securities Beneficially Owned Fol Reported Transaction(s) (Instr. 3 and 4)		owing [Ownership of Form:	Beneficial Ownership
						Code	e V Aı	mount (A) (D)				(I) Instr. 4)	
Reminder:							contain form dis	ed in this f	irrently va	ot require lid OMB o		nd unless tl	ne	474 (9-02)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date,	4. Transacti	5. Num of Deri Secu Acqu (A) of Disp of (I	vative urities uired or cosed	contain form dis	ed in this f splays a cu sed of, or Bonvertible sec ercisable tion Date	eneficially	ot require lid OMB of Owned	d to respondent of the second	nd unless tl	To 10. Ownershi Form of Derivativ Security: Direct (D or Indirec	11. Natur p of Indirec Beneficia Ownersh (Instr. 4)
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Reporting Owners

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Hale Leslie D. 3 BETHESDA METRO CENTER SUITE 1000 BETHESDA, MD 20814	X				

Signatures

/s/ Ann Munson Steines, as attorney-in-fact for Leslie D. Hale pursuant to a Power of Attorney	05/15/2018	
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) This amended Form 4 is being filed to correct the number of Phantom Stock Units granted on March 31, 2018, which were previously reported incorrectly. As of March 31, 2018, the reporting person was granted only 449 Phantom Stock Units.
- (2) 1-for-1 conversion
- (3) Units are to be settled in Common Stock upon the Reporting Person's termination from the Board of Directors.
- (4) 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.