# FORM 4

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

OMB APPROVAL				
OMB Number:	3235-0287			
Estimated average	burden			
ours 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

(Print or Type Responses)  1. Name and Address of Reporting Person *-			2. Issuer Name <b>and</b> Ticker or Trading Symbol				5.	5. Relationship of Reporting Person(s) to Issuer						
Lenehan William H			]	Macy's, Ir	nc. [M	1]				X Director		ck all applica	ole) % Owner	
(Last) (First) (Middle) 591 REDWOOD HIGHWAY, SUITE 1150			3. Date of Earliest Transaction (Month/Day/Year) 06/30/2018					-		give title below		her (specify belo	w)	
(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) (State) (Zip)			Table I - Non-Derivative Securities Acqu					ies Acquire	lired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year)		Date Month/Day/Year)	2A. Deemed Execution Date,		f Cod (Ins	e tr. 8)	(A) or Disposed of		d 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		llowing )	Ownership of Form:	eneficial wnership	
						С	ode V	Amount (A) (C)					Instr. 4)	msu. 4)
Reminder:	Report on a	separate line for ea	ch class of securiti	es beneficia	ally ow	vned d		_						
								ns who resp ined in this f				rmation oond unless		474 (9-02)
								rm displays	a currentl		MB contr	ol number.		
							the fo	rm displays posed of, or B	eneficially	y valid C	OMB contr	ol number.		
Security	Conversion	3. Transaction Date (Month/Day/Year	3A. Deemed Execution Date,	4. Transac Code	alls, w  5. tion of D  S  A  (A	arran . Num f	the for quired, Dis ts, options, oper oper of and Exp (Month/I	rm displays  cosed of, or B  convertible security  exercisable  ration Date	eneficially	y valid C Owned d f	8. Price of	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4)	Ownershi Form of Derivativ Security: Direct (D or Indirec	(Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, any	4. Transac Code	alls, w 5. tion D C A (A (A (A	Arran  Numl  f  Derivation  ecquire  A) or  Dispose  f (D)  Instr. 3	the for quired, Distance of and Exp (Month/sees d	rm displays  cosed of, or B convertible sectoration Date Day/Year)	7. Title an Amount o Underlyin Securities (Instr. 3 an	y valid C Owned d f	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(	Ownershi Form of Derivativ Security: Direct (D or Indirects)	p of Indire Benefici Ownersh (Instr. 4)

D	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Lenehan William H 591 REDWOOD HIGHWAY SUITE 1150 MILL VALLEY, CA 94941	X					

### **Signatures**

/s/ Ann Munson Steines, as attorney-in-fact for William H. Lenehan pursuant to a Power of Attorney	07/02/2018
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) 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.

