

<b>OMB APPROVAL</b>	
OMB Number:	3235-0287
Estimated average burden hours per response:	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**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>LEAVITT J CHRISTIAN</u>  (Last) (First) (Middle) ONE INDEPENDENT DRIVE SUITE 114  (Street) JACKSONVILLE FL 32202  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>REGENCY CENTERS CORP [ REG ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) <u>Chief Accounting Officer</u>
	3. Date of Earliest Transaction (Month/Day/Year) <u>02/13/2019</u>	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	02/13/2019		M		4,471 <sup>(1)</sup>	A	<sup>(2)</sup>	21,185	D	
Common Stock	02/13/2019		F		1,659	D	\$64.47	19,526	D	

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date						Title
Restricted Stock	<sup>(2)</sup>	02/13/2019		M		1,163		<sup>(2)</sup>	<sup>(2)</sup>	Common Stock	1,163	\$0	3,616	D	
Restricted Stock	<sup>(2)</sup>	02/13/2019		M		427		<sup>(2)</sup>	<sup>(2)</sup>	Common Stock	427	\$0	0	D	
Restricted Stock	<sup>(2)</sup>	02/13/2019		M		913		<sup>(2)</sup>	<sup>(2)</sup>	Common Stock	913	\$0	0	D	
Restricted Stock	<sup>(2)</sup>	02/13/2019		M		427		<sup>(2)</sup>	<sup>(2)</sup>	Common Stock	427	\$0	1,408	D	
Restricted Stock	<sup>(2)</sup>	02/13/2019		M		870		<sup>(2)</sup>	<sup>(2)</sup>	Common Stock	870	\$0	1,863	D	
Dividend Equivalents	<sup>(1)</sup>	02/13/2019		M		311		<sup>(1)</sup>	<sup>(1)</sup>	Common Stock	311	\$0	0	D	

**Explanation of Responses:**

- Includes 335 shares accrued when and as dividends were paid on Regency Centers Corporation common stock vested with the restricted stock and performance shares to which they relate. Includes 458 shares in Regency Centers Corporation's Non-Qualified Deferred Compensation Plan Account.
- Vesting of performance shares and restricted stock.

/s/ Michael B. Kirwan,  
Attorney-in-Fact for J. Christian Leavitt      02/14/2019

\*\* Signature of Reporting Person      Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

\* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

**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 Number.**