► See separate instructions.

Part | Reporting Issue

Part I Reporting	Issuer			
1 Issuer's name		2 Issuer's employer identification number (EIN)		
REGENCY CENTERS COR	PORATION			59-3191743
3 Name of contact for ad		5 Email address of contact		
BRIDGET K RUSNAK		BRIDGETRUSNAK@REGENCYCENTERS.COM		
6 Number and street (or F	P.O. box if mail is not	delivered to stre	et address) of contact	7 City, town, or post office, state, and Zip code of contact
		JACKSONVILLE, FL 32202		
ONE INDEPENDENT DRIV 8 Date of action	E, SUITE 114	JACKSONVILLE, FL 32202		
			тоск	
VARIOUS - see below 10 CUSIP number 11 Serial number(s)		COMMON S	2 Ticker symbol	13 Account number(s)
			5	
758849103			EG	
Part II Organizati	onal Action Atta	ch additional sta	atements if needed.	See back of form for additional questions.
0	ational action and, if a	applicable, the da	te of the action or the c	date against which shareholders' ownership is measured for
the action ►				
				areholders for the 2013 tax year. After finalizing the
line 15 for details.	ined that none of th		lere in excess of the c	current and accumulated earnings and profits. See Part II,
15 Describe the quantita share or as a percent.	-	anizational action	on the basis of the sec	urity in the hands of a U.S. taxpayer as an adjustment per
The following distribution	s were made during	the year:		
Payable Dates: 2/27/2013,				
Percentage of Distribution	Considered Return	n of Capital for a	II payments: 0%	
16 Describe the calculati valuation dates ►	on of the change in t	basis and the data	a that supports the calc	culation, such as the market values of securities and the
	nd profits were cald	ulated under IR	C section 312, as mod	ified by IRC section 857(d) for a real estate investment
trust, and the regulations				

Form 89	937 (Rev	. 12-2011)			Page 2			
Part		Organizational Action (continued)						
		· · · · ·						
17 L	List the	applicable Internal Revenue Code section	(s) and subsection(s) upon which the tax t	reatment is bas	ed ► IRC Sec. 301(c)(2)			
18 (Can any	resulting loss be recognized? ► N/A						
19 F	Provide	any other information necessary to impler	nent the adjustment, such as the reportat	ole tax year ►				
		s are effective on the dates identified at						
	Unde	r penalties of periury. I declare that I have exam	nined this return, including accompanying sche	dules and stateme	ents. and to the best of my knowledge and			
		der penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and ef, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.						
Sign		Original executed co	py available					
Here		ture▶ at corporate offices		Date ►				
		······						
	Print	your name► Kathy Miller		Title► Sr. Vi	ce President - Tax			
Paid		Print/Type preparer's name	Preparer's signature	Date	Check if PTIN			
Prep					self-employed			
	Only	Firm's name			Firm's EIN ►			
y		Firm's address ►			Phone no.			

Send Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054