FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D C	20540
wasnington,	D.C.	20049

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
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).

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*  Campbell Kristin Ann					2. Issuer Name <b>and</b> Ticker or Trading Symbol REGENCY CENTERS CORP [ REG ]									(Ch	Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u> </u>	CII IXIISUI	<u>1 / 11111</u>											X Direc	or		10% Ov	vner				
(Last)	(Fi	rst) (	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/15/2024									Office below	r (give title		Other (s below)	pecify		
C/O REGENCY CENTERS CORPORATION					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Applicable															
ONE INDEPENDENT DRIVE, SUITE 114						Sale of original mod (monant bay) roding									- 1	Line)					
					-												•		orting Perso		
(Street)																Form Perso		re thar	n One Repo	rting	
JACKSC	NVILLE I	FL .	32202		$\vdash$																
					⊦ Rι	Rule 10b5-1(c) Transaction Indication															
(City)	(Si	tate)	(Zip)																nd to		
					$ \sqcup$	Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.															
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
		Iabi	e i - Noi			_			÷		ופוט		-								
1. Title of Security (Instr. 3)  2. Transc Date (Month/L)					ay/Year) if any		A. Deemed xecution Date, any //onth/Day/Year)		Transaction Dispose Code (Instr. 5)		rities Acquired (A) o ed Of (D) (Instr. 3, 4 a			Benefic Owned	es Form ally (D) of Following (I) (II		: Direct r Indirect	7. Nature of Indirect Beneficial Ownership			
										Code	v	Amount		(A) or (D)	Price		ed ction(s) 3 and 4)			(Instr. 4)	
Common Stock 01/15					5/2024	2024			M		608		A	(1)		508		D			
Common Stock 01/15/				5/2024					M		19 A		(2)		627		D				
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
				(e.g., p	uts, (	calls	, war	rants	s, o	ption	s, c	onverti	ble	secu	rities)						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date,		Transaction Code (Instr.		ı of		6. Date Exercisable an Expiration Date (Month/Day/Year)			d 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		Security	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)	Dat Exe	te ercisabl		xpiration ate	Title		Amount or Number of Shares						
Restricted Stock	\$0	01/15/2024			M			608		(1)		(1)		nmon	608	\$0	0		D		

## Explanation of Responses:

- 1. Vesting of restricted stock granted pursuant to Regency's Omnibus Incentive Plan.
- 2. Settlement of dividend equivalent rights in connection with vesting of restrictive stock. The rights accrued when and as dividends were paid on Regency's common stock and vested proportionately with the restricted stock. Each dividend equivalent is the equivalent of one share of Regency's common stock.

/s/ Michael B. Kirwan,

Attorney-in-Fact for Deirdre

01/17/2024

**Evens** 

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.