FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washingto

Washington, D.C. 20549	OMB APPRO	٥V	
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3:	
	Estimated average burden		

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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

OMB APPRO	OVAL
OMB Number:	3235-0287
Estimated average burd	den
hours per response:	0.5

1. Name and Address of Reporting Person* <u>BLANKENSHIP C RONALD</u>				2. Issuer Name and Ticker or Trading Symbol REGENCY CENTERS CORP [ REG ]								(Ch	Relationship neck all appli X Directo	cable)	g Pers	son(s) to Iss 10% Ov			
(Last) 5004 GR	(Fi	ŕ	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/05/2021									Officer below)	(give title		Other (s	specify
(Street) HOUST			77056 (Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person				
1. Title of Security (Instr. 3)  2. Trans Date				action	active Securities Acquaction  2A. Deemed Execution Date, if any (Month/Day/Year)				3. 4. Securit Transaction Disposed Code (Instr. 5)			cquired	d (A) or	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)		Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
Common	Common Stock 05/			05/0	5/202	5/2021		A		672	672		(1)	81	81,631		D		
Common	Stock			05/0	5/202	1			М		2,66	2 A		(3)	84	84,293		D	
Common	Stock			05/0	5/202	1			М		199	)	A	(4)	84,492 D		D		
		Т							juired, [ s, optio						y Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Executior if any (Month/Da	Date,	4. Transaction Code (Instr. 8)		n of		6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amount of Securities Underlying Derivative Se (Instr. 3 and			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	is lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	0 N	Amount or Number of Shares					
Restricted Stock Grant	\$0	05/05/2021			A		2,000		(2)		(2)	Com		2,000	\$0	4,662		D	
Restricted Stock	\$0	05/05/2021			M		2,662		(3)		(3)	Com		2,662	\$0	2,000		D	
Dividend Equivalent	\$0	05/05/2021			M		199		(4)		(4)	Com		199	\$0	0		D	

## **Explanation of Responses:**

- 1. Represents director's fees paid in stock pursuant to Regency's Omnibus Incentive Plan.
- 2. Shares vest 100% on the first anniversary of the date of grant.
- 3. Vesting of restricted stock granted pursuant to Regency's Omnibus Incentive Plan.
- 4. Settlement of dividend equivalent rights in connection with vesting of restricted 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 C. Ronald 05/05/2021

**Blankenship** 

\*\* 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.