FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| Washing | jton, E |).C. 2 | 20549 | |
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| OMB APF | PROVAL | | | | | | | | |
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| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average burden | | | | | | | | | |
| hours per response | : 0.5 | | | | | | | | |

5. Relationship of Reporting Person(s) to Issuer

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

1. Name and Address of Reporting Person

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

2. Issuer Name and Ticker or Trading Symbol

| FIALA MARY LOU | | | | | $ \frac{\mathbf{R}}{\mathbf{R}}$ | REGENCY CENTERS CORP [REG] | | | | | | | | eck all applic | , | 10% (| Owner | |
|---|---|--------------------------|---|--------|---|---|-----------------|---------------|--|-------------------------|--|-----------------|---|---|--|--|---------------------------------------|--|
| | DEPENDE | • | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/12/2015 | | | | | | | | Officer below) | (give title | Other below | (specify) | |
| SUITE 1 | 14 | | | | 4. 1 | | | | | | | | 6. Ir | ndividual or Joint/Group Filing (Check Applicable | | | | |
| (Street) JACKSO | ONVILLE F | TL | 32202 | | _ | | | | | | | | | X Form fi | led by More | Reporting Pers than One Rep | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | |
| | | Tak | ole I - Nor | ı-Deri | vativ | e Se | curitie | es Acc | uired, | Disp | osed o | f, or Ber | neficiall | y Owned | | | | |
| Date | | | 2. Tran Date (Month | | action 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code (Instr. 5) | | | | | | 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 | Transact (Instr. 3 a | ion(s) | | (111511.4) | | | | | |
| Common Stock 05/15 | | | | L5/201 | 15 | | М | | 200 | A | (1) | 29, | 258 | D | | | | |
| Common Stock 05/15 | | | | 15/201 | 15 | | M | | 192 | 192 A | | 29,450 | | D | | | | |
| | | | Table II - | | | | | | | | sed of, onvertib | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | Date (Month/Day/Year) | 3A. Deemed Execution Date if any (Month/Day/Ye | ate, | 4. Transaction Code (Instr. | | n Derivative | | 6. Date Exercisal Expiration Date (Month/Day/Year) | | e Amount sar) Securitie Underlyi | | f g Security | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(| Ownersh Form: Direct (D or Indirec (I) (Instr. | Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisal | | Expiration Date | Title | Amount or Number of Shares | | (Instr. 4) | 1(3) | | |
| Restricted Stock Grant | \$0 | 05/12/2015 | | | М | | 2,000 | | (3) | | (3) | Common Stock | 2,000 | \$0 | 7,000 | D | | |
| Restricted Stock | \$0 | 05/15/2015 | | | M | | | 2,000 | (1) | | (1) | Common Stock | 2,000 | \$0 | 5,000 | D | | |

Explanation of Responses:

\$0

1. Vesting of stock pursuant to Regency's Omnibus Incentive Plan.

05/15/2015

- 2. 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 common stock.
- 3. Shares vest 25% per year beginning on the first anniversary of the date of grant.

Remarks:

Dividend

Equivalent

/s/ Michael B. Kirwan,

Stock

Attorney-in-Fact for Mary Lou 05/18/2015

Fiala

** Signature of Reporting Person Date

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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.