FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES I	N BENEFICIAL	OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										

0.5

hours per response:

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*

225 W. WASHINGTON STREET

(First)

(State)

3. Transaction

(Middle)

46204

(Zip)

3A. Deemed

SIMON DAVID

INDIANAPOLIS IN

(Last)

(Street)

(City)

1. Title of

1.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

or Section 30(h) of the Investment Company Act of 1940 5. Relationship of Reporting Person(s) to Issuer 2. Issuer Name and Ticker or Trading Symbol (Check all applicable) SIMON PROPERTY GROUP INC /DE/ Director X 10% Owner Officer (give title Other (specify below) below) 3. Date of Earliest Transaction (Month/Day/Year) CEO/Chairman of the Board 12/31/2013 6. Individual or Joint/Group Filing (Check Applicable Line) 4. If Amendment, Date of Original Filed (Month/Day/Year) Form filed by One Reporting Person Form filed by More than One Reporting

7. Title and Amount

8. Price of

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported		7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(IIISU: 4)
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned										

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

(e.g., puts, calls, warrants, options, convertible securities) 5. Number of 6. Date Exercisable and

Security (Instr. 3)	or Exercise Price of Derivative Security	(Month/Day/Year)	if any (Month/Day/Year)	Code (Instr. 8)		Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		(Month/Day/Year)		Underlying Derivative Security (Instr. 3 and 4)		Security (Instr. 5)	Securities Beneficially Owned Following Reported	Form: Direct (D)	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
LTIP Units ⁽¹⁾	\$0	12/31/2013		D			720,000	(1)	(1)	Common Stock	720,000	\$0.25	280,000	D	

Explanation of Responses:

1. Effective December 31, 2013, 720,000 service-based vesting long-term incentive performance ("LTIP") units of Simon Property Group, L.P. (the "Operating Partnership") originally granted to the reporting person on July 6, 2011, were cancelled in consideration of the grant to the reporting person 360,000 LTIP Units on December 31, 2013, and 360,000 LTIP Units on January 1, 2014, that are subject to both servicebased vesting requirements and the attainment of specified goals for funds from operations in 2015 and 2016. Simon Property Group, Inc. (the "Company") is the sole general partner of the Operating Partnership. After vesting, each LTIP Unit may be converted into a unit of partnership interest of the Operating Partnership and exchanged for a share of Company common stock or cash, as selected by the Company.

> David Simon, and his attorneyin-fact, James M. Barkley

02/27/2014

9. Number of

10.

11. Nature

** 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.