FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burden									
- 1	l .									

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

Name and Address of Reporting Person* SIMON DAVID					SI	2. Issuer Name and Ticker or Trading Symbol SIMON PROPERTY GROUP INC /DE/								Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) 225 W. V	Last) (First) (Middle) 225 W. WASHINGTON STREET				3. 🗅	SPG] 3. Date of Earliest Transaction (Month/Day/Year) 03/01/2021								X	X Officer (give title below) CEO/Chairman/I			Other (s below) President	pecify
(Street) INDIANAPOLIS IN 46204					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					action Day/Ye	ction 2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transac Code (I 8) Code	v	4. Securit Disposed 5) Amount	osed Of (D) (Instr. 3, 4 unt (A) or (D) of, or Benefici		or l and rice	5. Amount Securities Beneficial Owned FReported Transact (Instr. 3 a	nount of rities Fo (D) (I) rities (D) (I) (I) rities (D) (I) ritie		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
1. Title of Derivative Security (Instr. 3)	itle of 2. 3. Transaction Date Execution Date, urity or Exercise (Month/Day/Year) if any			I. Fransa	5. Number of ode (Instr. Derivative			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		ount	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)	
				c	Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amo or Num of Shar	ber					
Restricted Stock Units	(1)	03/01/2021			A		10,196		(2)		(2)	Common Stock	10,	196	\$0	10,196	5	D	

Explanation of Responses:

- 1. Each Restricted Stock Unit ("RSU") represents the contingent right to receive, at settlement, one share of common stock of Simon Property Group, Inc. (the "Company").
- 2. The RSUs are being issued pursuant to the Simon Property Group, L.P. 2019 Stock Incentive Plan (the "Plan") and will vest on March 1, 2024, subject to a continued service requirement, or may vest and settle earlier due to the Reporting Person's death or disability, a change of control of the Company, the retirement of the Reporting Person, subject to the approval of the Company's compensation committee, or as may otherwise be determined by the Company's compensation committee in accordance with the terms of the grant agreement and the Plan. Vested RSUs will be settled in shares of the Company's common stock as soon as practicable after the vesting date.

/s/ David Simon by his attorney-in-fact, Alexander L.W. Snyder

03/03/2021

** 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.