

SCC eFile
(6/10)

2012 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

212504492

1.) CORPORATION NAME:

Macy's Retail Holdings, Inc.

DUE DATE: **2/29/2012**

SCC ID NO: **F0139826**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CORPORATION SERVICE COMPANY

Bank of America Center, 16th Floor

1111 East Main Street

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100

RICHMOND, VA 23219

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

NY

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 7 WEST SEVENTH ST

CITY/ST/ZIP: CINCINNATI, OH 45202-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	DENNIS J BRODERICK	
TITLE:	PRESIDENT	
ADDRESS:	7W 7TH ST	
CITY/ST/ZIP/CO:	CINCINNATI, OH 45202-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	JOHN T. HARPER	
TITLE:	PRESIDENT	
ADDRESS:	1120 AVE. OF THE AMERICAS	
CITY/ST/ZIP/CO:	NEW YORK, NY 10036-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	MICHAEL KRAUTER	
TITLE:	PRESIDENT	
ADDRESS:	219 PERIMETER CTR. PWY	
CITY/ST/ZIP/CO:	ATLANTA, GA 30346-	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	JOEL A BELSKY	
TITLE:	VP/CONTROLLER	
ADDRESS:	7 W 7TH ST	
CITY/ST/ZIP/CO:	CINCINNATI, OH 45202-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	BRIAN M SZAMES	
TITLE:	VPT	
ADDRESS:	7 W 7TH ST	
CITY/ST/ZIP/CO:	CINCINNATI, OH 45202-	

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LINDA J BALICKI SECRETARY 611 OLIVE ST ST LOUIS, MO 63101-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEPHEN J O'BRYAN ASST S 7 W 7TH ST CINCINNATI, OH 45202-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TOM COLE CHIEF ADM OFFIC 151 34TH ST. 13TH FL NEW YORK, NY 10001-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CARL L. GOERTEMOELLER SVP 7 WEST 7TH STREET CINCINNATI, OH 45202-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	AMY L. HANSON EVP 7 WEST 7TH STREET CINCINNATI, OH 45202-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RONALD KLEIN CHIEF STORES OF 151 34TH ST., 13TH FL NEW YORK, NY 10001-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT B HARRISON VICE PRESIDENT 151 W 34TH ST. NEW YORK, NY 10001-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KAREN M HOGUET VICE PRESIDENT 7 W 7TH ST CINCINNATI, OH 45202-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANN MUNSON STEINES VICE PRESIDENT 7 W 7TH ST. CINCINNATI, OH 45202-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID W CLARK VICE PRESIDENT 7 W 7TH ST. CINCINNATI, OH 45202-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BRADLEY R. MAYS VICE PRESIDENT 7 W 7TH ST. CINCINNATI, OH 45202-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SUSAN P. STORER ASST TREASURER 7 W 7TH ST. CINCINNATI, OH 45202-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEVEN G. LUCAS ASST TREASURER 7 W 7TH ST. CINCINNATI, OH 45202-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WENDY SCHMIDT BEADLES ASST SECRETARY 170 O'FARRELL ST. SAN FRANCISCO, CA 94102-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MITCHELL F. BORGER ASST SECRETARY 131 W 34TH ST. NEW YORK, NY 10001-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RICHARD A. COHEN ASST SECRETARY 611 OLIVE ST. ST. LOUIS, MO 63101-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAY L MONITZ ASST SECRETARY HERALD SQ. 13TH FL. NEW YORK, NY 10001-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KATHLEEN A. FURLONG ASST SECRETARY 7 W 7TH ST. CINCINNATI, OH 45202-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	THOMAS M. FEINER ASST SECRETARY 611 OLIVE ST. ST. LOUIS, MO 63101-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DEBRA PAGE COLEMAN ASST SECRETARY 219 PERIMETER CTR PKWY ATLANTA, GA 30346-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: CHRISTOPHER M. KELLY TITLE: ASST SECRETARY ADDRESS: 7 W 7TH ST. CITY/ST/ZIP/CO: CINCINNATI, OH 45202-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: GARY A. WEBB TITLE: ASST SECRETARY ADDRESS: 7 W 7TH ST. CITY/ST/ZIP/CO: CINCINNATI, OH 45202-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ STEPHEN J O'BRYAN	STEPHEN J O'BRYAN, ASST S	2/3/2012
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.