| SEC Form 4 |
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Instruction 1(b).

FORM 4

Check this box if no longer subject

to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL
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| Filed | ursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 |
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| 1 | |

| 1. Name and Addre | | SIM | 2. Issuer Name and Ticker or Trading Symbol <u>SIMON PROPERTY GROUP INC /DE/</u> SPG] | | | | | | ationship of Reportin (all applicable) Director Officer (give title | 10% C Other | Owner (specify | |
|-----------------------|-------------------|----------------|--|--|---|-------------|------------------------------------|--|---|---|---|---|
| (Last) 2 EAST 70TH | (First) STREET | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 05/12/2021 | | | | | | below) | below |) |
| (Street) | | 4. If Ai | mendment, Date of | Origina | l Filed | (Month/Day/ | 6. Indiv Line) | 6. Individual or Joint/Group Filing (Check Applica Line) | | | | |
| NEW YORK | NY | 10021 | | | | | | | X | Form filed by On | e Reporting Per | son |
| (City) | (State) | (Zip) | | | | | | | | Form filed by Mo Person | re than One Re | porting |
| | | Table I - Non- | -Derivative S | ecurities Acqu | uired, | Disp | osed of, o | or Ben | eficially | v Owned | | |
| Date | | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | | 4. Securities Disposed Of 5) | | | 5. Amount of Securities Beneficially Owned Following Reported | 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 | Transaction(s) (Instr. 3 and 4) | | (1150.4) |

| Common S | Stock | | 05/12 | /2021 | | A ⁽¹⁾ | 1,5 | 34 | Α | \$0 ⁽¹⁾ | 23 | 3,255 | D | |
|--|-------|---------------|-----------|-------|----------|------------------|-----|------|------------|---------------------------|----------|------------|-------|----------|
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | |
| 1 Title of | 2 | 2 Transaction | 24 Deemed | 4 | E Number | 6 Data I | | a 17 | 7 Title on | 4 0 | Drice of | 0 Number o | of 10 | 11 Notur |

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | of Deriv Secu Acqu (A) o Dispo of (D | r osed) r. 3, 4 | 6. Date Exerc Expiration Da (Month/Day/Y | Amount of | | 8. Price of Derivative Security (Instr. 5) 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) | | |
|---|---|--|---|------------------------------|---|--|---------------------------|--|--------------------|-------|---|--|--|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | |

Explanation of Responses:

1. Non-cash compensation - Award of restricted stock under the Simon Property Group, L.P. 2019 Stock Incentive Plan. The restricted stock vests one year after the award.

| <u>/s/ Stefan M. Selig by his</u> | |
|-----------------------------------|------------|
| attorney-in-fact, Alexander | 05/14/2021 |
| L.W. Snyder | |
| | |

** 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.