FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 * KOETJE JOHN F | | | | | 2. Issuer Name and Ticker or Trading Symbol MACATAWA BANK CORP [MCBC] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | | |
|---|--|--|-----------------------|----------------------------------|--|----------------------------------|---------|--|-------------------|--|---|--|---|------------------------|---|---|----------------------|--|---------------|--|
| | | | | 3. Da | 3. Date of Earliest Transaction (Month/Day/Year) 02/13/2009 | | | | | | | | _X_ Direct | or (give title belo | ow) | | Owner er (specify | below) | | |
| (Street) | | | | 4. If | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | | |
| HOLLAND, MI 49424 (City) (State) (Zip) | | | | | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | |
| (Instr. 3) Date | | 2. Transaction Date (Month/Day/Year) | Execution any | 2A. Deemed Execution Date, if | | 3. Transac Code (Instr. 8) | | (A) or Disposed o (Instr. 3, 4 and 5) | | quired of (E | f (D) S. Amour Beneficia Reported | | unt of Securities ially Owned Following d Transaction(s) | | 6. Ownership Form: | | Beneficial | | | |
| | | | (Month | | | Cod | le | V | Amount | (A) or (D) | Pric | | nstr. 3 and 4) | | \ / | | Owners Instr. 4 | | | |
| Common Stock | | | | | | | | | | 2 | 295,874 | | I By 7 | | By Tri | ust | | | | |
| Common | Stock | | | | | | | | | | | | 4 | 16,432 | | | D | | | |
| Common | Stock | | | | | | | | | | | | 1 | 1,569 | | | I | | By Found | lation |
| Common | Stock | | 02/13/2009 | | | | P | | | 10,321 | A | \$ 1.99 | 93 1 | 10,321 | | | Ι | | y Wi Γrust | fe's |
| Reminder: I | Report on a s | separate line | for each class of sec | - Deriva | ntive Sec | curi | ties Ac | quir | Per cor the | rsons who ntained i form dia Disposed | ho res in this splays | form a cu Benef | n are urrei ficial | not requ | ction of inf ired to res OMB conf | spond u | nless | SEG | C 1474 | (9-02) |
| Derivative Security (Instr. 3) | Title of 2. 3. Transaction 3A. Deemed Execution Date (Month/Day/Year) or Exercise (Month/Day/Year) | | | d Date, if | 4. | tion | 5. | | 6. and (M | and Expiration Date (Month/Day/Year) | | | 7. Ti Amo Undo Secu (Inst 4) | Amount or Number of | 8. Price of Derivative Security (Instr. 5) | 9. Numb Derivati Securitie Benefici Owned Followir Reported Transact (Instr. 4) | ve es ally ng d | 10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4) | | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | V | (A) | (D) | | | | | | Shares | | | | | | |

Reporting Owners

| | Relationships | | | | | | |
|--|---------------|--------------|---------|-------|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| KOETJE JOHN F 10753 MACATAWA DRIVE HOLLAND, MI 49424 | X | | | | | | |

Signatures

/s/ Harvey Koning as attorney-in-fact for John F. Koetje

02/17/2009

| **Signature of Reporting Person | Date | |
|---------------------------------|------|--|
| | | |

Explanation of Responses:

- * 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.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.