FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

o.C. 20549	OMB APPROVAL

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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).

Filed pursuant 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. Name and Address of Reporting Person* THURBER LYNN C						2. Issuer Name and Ticker or Trading Symbol ACADIA REALTY TRUST [AKR]									Check all	ship of Reportion (Specificable) rector	ng Person(s) to Issuer 10% Owner		
(Last) (First) (Middle) C/O JONES LANG LASALLE INCORPORATED						3. Date of Earliest Transaction (Month/Day/Year) 05/10/2018										ficer (give title rlow)		Other (specify below)	
200 E RANDOLPH DR (Street) CHICAGO IL 60601					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting				
(City)	(St	ate) ((Zip)		-											erson		·	
		Tab	le I - No	n-Deri\	ative/	Se	ecuriti	es Ac	quired,	Dis	posed o	f, or	Ben	efici	ally Ow	ned			
Date							2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				nd See Bei Ow	amount of curities neficially ned Following ported	6. Owners Form: Dire (D) or Indir (I) (Instr. 4)	ct ect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
										v	Amount	(A) or D)	Price	Tra	nsaction(s) etr. 3 and 4)		- [(111501. 4)
Common Shares of Beneficial Interest - \$.001 Par Value					05/10/2018				A		3,062(1	1)	A	\$23	.59	13,332	D		
Common Shars of Beneficial Interest - \$.001 Par Value					05/10/2018						3,391 [©]	3,391 ⁽²⁾ A		\$23	.59	16,723 ⁽³⁾	D		
		Ta									sed of, onvertib				y Owne	ed			
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. Transaction Code (Instr. 8)		n of r. Der Sec Acc (A) Dis of (I	of		exercis on Dat Day/Ye		7. Title and Amount of Securities Underlying Derivative Security (Instrant 4)		str. 3	8. Price Derivative Security (Instr. 5)		Owners Form: Direct (or Indir (I) (Inst	bhip D) ect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nui of	ount mber ıres					

Explanation of Responses:

- 1. This grant was awarded in connection with the payment of annual Trustee fees. Trustees have the option to convert all or part of any cash payment due to them under the Trust Compensation Plan to Common Shares with a vesting period of one year at a 10% discount to the preceding 20-day average share price from the date of issuance. These shares reflect the portion of Ms. Thurber's cash compensation that she elected to receive in shares and represent the number of shares she was entitled to receive after giving effect to the 10% discount. These shares shall vest on May 9, 2019.
- 2. This grant was awarded in connection with the payment of annual Trustee fees. These shares shall vest according to the following schedule: one-third shall vest on May 9, 2019, one-third shall vest on May 9, 2020 and the remaining third shall vest on May 9, 2021, pursuant to the Trust Compensation Plan.
- 3. This number represents the total number of Common Shares now held by Ms. Thurber.

Remarks:

<u>Lynn C. Thurber</u> <u>05/10/2018</u>

** 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.