FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number	: 3235-028									
Estimated ave	erage burden									

0.5

hours per response:

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

				,	JI 3000	1011 30(11)	n tile	invesiment C	ompany Act	01 1340						
1. Name and Address of Reporting Person* <u>CROCKER DOUGLAS II</u>					2. Issuer Name and Ticker or Trading Symbol ACADIA REALTY TRUST [AKR]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
				-								Oirector	r	10% O	wner	
(Last)	`	irst) LTY TRUST	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 04/13/2007							Officer below)	(give title	Other (below)	specify	
1311 MAMARONECK AVENUE, SUITE 260				4.	If Amendment, Date of Original Filed (Month/Day/Year)						6. In	6. Individual or Joint/Group Filing (Check Applicable				
(Charan)				-								Line)				
(Street) WHITE PLAINS NY 10605											X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)													
		Tal	ble I - Non-De	rivativ	ve Se	curities	Ac	quired, Di	sposed o	f, or Ben	eficiall	y Owned				
1. Title of Security (Instr. 3) 2. Trans Date (Month/I				Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) 5)			I (A) or : 3, 4 and	5. Amoun Securities Beneficia Owned Fo	s Form ally (D) o following (I) (Ir	Ownership orm: Direct) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
						Code V	Amount	(A) or (D)	Price	Reported Transacti (Instr. 3 a	on(s)		(Instr. 4)			
			Table II - Deri (e.g.					uired, Disp				Owned				
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)	action	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	5)		
Common Shares of Beneficial Interest - Equivalent	(1)	04/13/2007		I		15		04/13/2007	(1)	Common Shares of Beneficial Interest	15	\$26.93	2,094	D		
Common Shares of Beneficial Interest -	(2)	05/15/2007		I		2,749 ⁽²⁾		05/15/2007	(2)	Common Shares of Beneficial Interest	2,749	\$27.37	4,843 ⁽³⁾	D		

Explanation of Responses:

- 1. These shares represent the stock equivalent equal to the value of dividends which would have been payable had shares been issued pursuant to the Issuers Deferred Compensation Plan.
- 2. These shares represent the stock equivalent for Trustee fees credited to his deferred account pursuant to the Issuers Deferred Compensation Plan (201 of these shares represent 2nd quarter fees).
- 3. This number reflects deferred shares only. In addition, Mr. Crocker owns 10,000 Options previously awarded to him from 2003 through 2006

/s/ Douglas Crocker II 05/17/2007

** 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.