FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSH	ΙP
--	----

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours per response:	0.5						

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

1. Name and Address of Reporting Person* BERNSTEIN KENNETH F				2. Issuer Name and Ticker or Trading Symbol ACADIA REALTY TRUST [AKR]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
DEKINS	O I E IIN KI	EININE I II F		-							-		Director			10% Ow	ner
(Last)	(F	irst)	(Middle)	_) Doto	of Farliagt T	ronos	ation (M-	ath/D	o. (Moor)		:	Officer (g	give title		Other (spector)	pecify
C/O ACADIA REALTY TRUST					3. Date of Earliest Transaction (Month/Day/Year) 02/18/2021						1	President	and C	CEO			
411 THEODORE FREMD AVE																	
(Street)				— [4							6. Ir	6. Individual or Joint/Group Filing (Check Applicable					
RYE	N	Y	10580									- 1		ed by One	Reporti	ing Person	
(City)	/0	tota)	(7in)	-	Form filed by More than One Reporting Person								ng Person				
(City)	(5	tate)	(Zip)														
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
Date				action 2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 3, 4 a 8)			Beneficiall Owned Fo	у	Form: I	Direct I Indirect E str. 4)	7. Nature of ndirect Beneficial Ownership				
					Code V Amount (A) or (D)					Price	Reported Transaction(s) (Instr. 3 and 4)			(nstr. 4)		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																
			•	7 .	ts, ca												
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	Code (Instr.		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 Amou Securities Underly Derivative Securit (Instr. 3 and 4)			9. Number of derivative Securities Beneficially Owned Following Reported Transaction(e s Illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(0)		
Limited Partnership Units	\$0.00	02/18/2021	02/18/2021	A		178,559 ⁽¹⁾		(1)		(1)	Common Shares of Beneficial Interest	178,559	\$0.00	1,646,0)78	D	

Explanation of Responses:

1. On February 18, 2021, Mr. Bernstein was awarded these restricted limited partnership units ("LTIP Units") in Acadia Realty Limited Partnership (the "Company"). 178,559 LTIP Units shall vest as follows: equal amounts shall vest on January 6, 2022 and on each of the first, second, third and fourth anniversaries thereof, provided that Mr. Bernstein continues to be employed on the vesting date in question. This figure excludes LTIP Units granted under the Company's outperformance plan, the vesting of which is subject to conditions, other than the passage of time and continued employment, which are not tied solely to the marked price of an equity security of the Company. The vesting conditions for the Company's outperformance plan relate to the Company's shareholder return relative to the total shareholder return of a basket of peer group companies.

Remarks:

/s/ Kenneth Bernstein

02/22/2021

** 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.