П

# FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

### OMB APPROVAL OMB Number: 3235-0287

	hours per response:	0.5						
	Estimated average burden							
L		3233-0207						

			or Section So(ii) of the investment Company Act of 1540						
1. Name and Address of Reporting Person <sup>*</sup> Conlon Christopher			2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>ACADIA REALTY TRUST</u> [ AKR ]		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
				X	Officer (give title	Other (specify below)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)		below)	,			
C/O ACADIA REALTY TRUST			05/22/2019		Executive Vice President				
411 THEO	DORE FREMD AV	/ENUE, SUITE 300							
			4. If Amendment, Date of Original Filed (Month/Day/Year)		6. Individual or Joint/Group Filing (Check Applicable				
(Street)				Line)					
RYE	NY	10580			Form filed by One Re	porting Person			
		10000	-		Form filed by More the Person	an One Reporting			
(City)	(State)	(Zip)							

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code ( 8)						Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Shares of Beneficial Interest - \$.001 Par Value	05/22/2019		С		20,000	Α	\$0.00	<b>30,000</b> <sup>(1)</sup>	D	

#### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 7. Title and Amount of Securities Underlying 1. Title of 3. Transaction 3A. Deemed 5. Number 6. Date Exercisable and 8. Price of 9. Number of 10. 11. Nature Expiration Date (Month/Day/Year) Derivative Conversion Execution Date, Transaction derivative Ownership of Indirect Beneficial Derivative Date (Month/Day/Year) Derivative Security or Exercise if any Code (Instr. Security Securities Form: (Instr. 3) Price of Derivative Derivative Security (Instr. 3 and 4) Beneficially Owned Direct (D) or Indirect Ownership (Instr. 4) (Month/Day/Year) 8) Securities (Instr. 5) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) Security Following (I) (Instr. 4) Reported Transaction(s) (Instr. 4) Amount Number of Shares Date Expiration (D) Exercisable Date Title Code ν (A) Common Shares of Beneficial Limited 05/22/2019 (2) (2) (2) С 20,000 20.000 \$0.00 117.118(3) D Partnership Interest -Units \$.001 Par Value

## Explanation of Responses:

1. This number represents the total number of Common Shares held by Mr. Conlon at this time.

2. These limited partnership units ("LTIP Units") in Acadia Realty Limited Partnership ("ARLP") represent a portion of the LTIPs that were previously granted to Mr. Conlon which vested in accordance with the terms of each grant. The LTIPs are exchangeable on a 1:1 basis for common operating partnership units of ARLP ("OP Units") which, in turn, are exchangeable on a 1:1 basis for common shares of beneficial interest of Acadia Realty Trust. There is no expiration date for the conversion of LTIP Units or OP Units.

3. This number represents the total number of LTIP Units now held by Mr. Conlon.

## Remarks:

# Christopher Conlon

\*\* Signature of Reporting Person

05/23/2019

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.