FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

(Last) C/O ACA	Name and Address of Reporting Person*  ZOBA C DAVID  (Last) (First) (Middle)  C/O ACADIA REALTY TRUST  411 THEODORE FREMD AVE				2. Issuer Name and Ticker or Trading Symbol     ACADIA REALTY TRUST [ AKR ]  3. Date of Earliest Transaction (Month/Day/Year)     05/05/2022							(Ch	eck all applic X Directo Officer below)	rable) r (give title	Person(s) to Issuer 10% Owner Other (specify below)		
(Street) RYE (City)	citreet) NY 10580 City) (State) (Zip)				4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	Individual or Joint/Group Filing (Check Applicable Line)      X Form filed by One Reporting Person     Form filed by More than One Reporting Person				
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					ction 2A. Deemed Execution Date,			3. Transact Code (In:	3. Transaction Code (Instr. 8)		rities Acquired (A) or ed Of (D) (Instr. 3, 4 and		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)		g., pu	outs, call		5. Number				onverti	f, or Beneficiallible securities)  7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficial Ownership ct (Instr. 4)
				Co	ode \	v	(A)	(D)	Date Exercisable		piration te	Title	Amount or Number of Shares				
Limited Partnership Units	\$0.00	05/05/2022	05/05/2022	2 .	A		3,948		(1)		(1)	Common Shares of Beneficial Interest	3,948	\$0.00	54,371	D	
Limited Partnership Units	\$0.00	05/05/2022	05/05/2022	2	A		4,737		(2)		(2)	Common Shares of Beneficial Interest	4,737	\$0.00	59,108	D	

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 restricted limited partnership units in Acadia Realty Limited Partnership (LTIP Units) 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 LTIP Units reflect the portion of Mr. Zoba's cash compensation that he elected to receive in LTIP Units and represent the number of LTIP Units he was entitled to receive after giving effect to the 10% discount. These LTIP Units shall vest on May 9, 2023. There is no expiration date for the conversion of LTIP Units.

2. This grant was awarded in connection with the payment of annual Trustee fees. These LTIP Units shall vest according to the following schedule: one-third shall vest on May 9, 2023, one-third shall vest on May 9, 2024 and the remaining third shall vest on May 9, 2025, pursuant to the Trust Compensation Plan. There is no expiration date for the conversion of LTIP Units.

## Remarks:

/s/ David Zoba

05/05/2022

\*\* 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.