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 or Section 30(b) of the Investment Company Act of 1940

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1. Name and Address of Reporting Person [*] ZOBA C DAVID						2. Issuer Name and Ticker or Trading Symbol ACADIA REALTY TRUST [AKR]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner							
														Direc	ctor		10% Ov	vner			
(Last)	(Fir	st) (f	(Middle)				3. Date of Earliest Transaction (Month/Day/Year) 03/08/2023								er (give title v)		Other (s below)	specify			
C/O AC	ADIA REA	LTY TRUST																			
C/O ACADIA REALTY TRUST						4. If Amendment, Date of Original Filed (Month/Day/Year) 03/10/2023								6. Individual or Joint/Group Filing (Check Applicable Line)							
411 THEODORE FREMD AVE														X Form filed by One Reporting Person							
														Form filed by More than One Reporting							
(Street)														Pers		ore than C	ле кер	orting			
RYE	RYE NY 10580																				
		Rule 10b5-1(c) Transaction Indication																			
(City)	(St	ate) (2																			
Check this box to indicate that a transaction was made											rsuant to a contract, instruction or written plan that is intended to										
1			Ll s	satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.																	
		Table	I - No	n-Deriva	tive S	Secur	rities Acq	uired,	Dis	posed of	f, or E	Ben	neficia	lly Owr	ned						
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Exect if any	eemed ution Date, th/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (<i>I</i> Disposed Of (D) (Instr. 3 5)			l Securi Benefi Owner	icially d	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership					
								<u> </u>						Repor	Following Reported		' I'	(Instr. 4)			
							Code	v	Amount	(A) or (D) Pr		Price		action(s) 3 and 4)							
Common Shares of Beneficial Interest - 03/08/2					023	3 03/08/2023		P ⁽¹⁾		700	A	\	\$14.06	6 1,700		D					
		Tah		Derivati		curit	ies Acqu	ired D	isn	nsed of	or Re	ene	ficially		h						
		Tak					varrants,								u						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Transaction Date (Month/Day/Year)	if any	ition Date, Transa		5. Number of Derivative Securities		Expiration Date (Month/Day/Year)			Amou Secur Unde	Amount of De Securities Se		Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficially Owned	Ow For y Dire	nership m: ect (D) ndirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Security (Instr. 3)	or Exercise Price of Derivative Security	(Month/Day/Year)	if any (Month/Day/Year)	8)		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		(Month/Day/Year)		Securities Underlying Derivative Security (Instr. 3 and 4)		Security (Instr. 5)	Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	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				

Explanation of Responses:

1. This Form 4 is being amended to correct the reporting of this open market purchase, which was inadvertently coded with an "A" code rather than a "P" code. The original Form 4 was filed timely. The reporting person did not engage in any sales within six months of the transaction.

Remarks:

/s/ C. David Zoba

06/07/2023

** 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.

OMB APPROVAL

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