FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

W	/ashing	ton, D.0	C. 20549	

on, D.C. 20549	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

Name and Address of Reporting Person* <u>Conlon Christopher</u>					2. Issuer Name and Ticker or Trading Symbol ACADIA REALTY TRUST [AKR]								k all applica Director			10% Ow	ner	
	Last) (First) (Middle) C/O ACADIA REALTY TRUST H11 THEODORE FREMD AVENUE, SUITE 300					3. Date of Earliest Transaction (Month/Day/Year) 06/14/2017								Officer (give title below) Executive Vi		Other (s below) resident	ecify	
(Street) RYE (City)	Street) RYE NY 10580					4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Ta	able I - Non	-Deriva	tive S	Securiti	ies Ac	quired,	Dis	posed o	f, or Bene	ficially	Owned					
Date					2A. Deemed Execution Date, if any (Month/Day/Year)			Code (Instr.				Securities Beneficial Owned Fo		Form: (D) or	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
									v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Shares of Beneficial Interest - \$.001 Par Value				06/14/	4/2017			С		10,00	0 A	\$0	10,000(1)			D		
			Table II - [or Benefi ole securi		wned			<u> </u>		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Date Execution Date		Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date of Sec (Month/Day/Year) Under			Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	e V	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares		Transacti (Instr. 4)	on(s)			
Limited Partnership Units	(2)	06/14/2017		С			10,000	(2)		(2)	Operating Partnership Units	10,000	\$0	103,338	B ⁽³⁾	D		
Operating Partnership Units	(2)	06/14/2017		С		10,000		(2)		(2)	Common Shares	10,000	\$0	10,000	(4)	D		
Operating Partnership Units	(2)	06/14/2017		С			10,000	(2)		(2)	Common Shares	10,000	\$0	0 ⁽⁵⁾		D		

Explanation of Responses:

- $1. \ This \ number \ represents \ the \ total \ number \ of \ Common \ Shares \ (all \ vested) \ held \ by \ Mr. \ Conlon \ at \ this \ time.$
- 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 (3,086 vested and 100,252 unvested) held by Mr. Conlon following the conversion of 10,000 LTIP Units into an equal number of OP Units, as reported in this
- 4. This number represents the total number of OP Units held by Mr. Conlon following the conversion of 10,000 LTIP Units into an equal number of OP Units, as reported in this Form 4.
- 5. This number represents the total number of OP Units held by Mr. Conlon following the conversion of 10,000 OP Units into an equal number of Common Shares, as reported in this Form 4.

Remarks:

Christopher Conlon

06/15/2017

** 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.