FORM 4

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
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Check this box if no longer subject to	STATEMENT OF CHANGES IN BENEFICIAL OWNERSH	ΙP
Section 16. Form 4 or Form 5		
obligations may continue. See		

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

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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* <u>Conlon Christopher</u>						2. Issuer Name and Ticker or Trading Symbol ACADIA REALTY TRUST [AKR]									k all applica Director Officer (tionship of Reporting all applicable) Director Officer (give title		10% Ow Other (s	ner
(Last) (First) (Middle) C/O ACADIA REALTY TRUST 1311 MAMARONECK AVENUE, SUITE 260						Date o /26/2		st Trans	action (Mo	onth/D	ay/Year)	X	below)	enior Vic	e Pre	below) sident			
(Street) WHITE PLAINS NY 10605					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									dividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(Si	,	(Zip)											<u> </u>					
1. Title of Security (Instr. 3) 2. Tran				nsactio				Code (Instr.					A) or	s. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	ount (A) or P		Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Par Value	mmon Shares of Beneficial Interest - \$.001			11/2	26/20	6/2012		С		8,000	(1) A		(1)	8,000(2)			D		
			Table II - I								sed of onverti				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/	ate, T	4. Transa Code (1 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Year		of Securities		urity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transaction	i ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
				C	Code	v	(A)	(D)	Date Exercisa	ble E	Expiration Date	Title	O N O	lumber		(Instr. 4)	Jii(s)		
Limited Partnership Units	(1)	11/26/2012			С			8,000	(1)		(1)	Operati Partners Units ⁽⁾	nip {	3,000	(1)	68,224 ⁰	(3)	D	
Operating Partnership Units	(1)	11/26/2012			С		8,000		(1)		(1)	Commo Shares		3,000	(1)	8,000 ⁽⁴	4)	D	
Operating Partnership	(1)	11/26/2012			С			8,000	(1)		(1)	Commo		3,000	(1)	0 ⁽⁵⁾		D	

Explanation of Responses:

- 1. These limited partnership units ("LTIP Units") in Acadia Realty Limited Partnership ("ARLP") represent a portion of the LTIPs that were granted to Mr. Conlon on March of 2009, 2010 and 2011, 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 Acadia Realty Operating Partnership ("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.
- 2. This number represents the total number of common shares held by Mr. Conlon.
- 3. This number represents the total number of LTIPs held by Mr. Conlon following the conversion of 8,000 LTIPs to OP Units, as reported in this Form 4.
- 4. This number represents the total number of OP Units held by Mr. Conlon after the conversion of 8,000 LTIPs to OP Units, as reported on this Form 4.
- 5. This number represents the total number of OP Units held by Mr. Conlon after the conversion of 8,000 OP Units into an equal number of Common Shares, as reported on this Form 4.

Remarks:

Units

Christopher Conlon

11/28/2012

** 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.