SEC Form 4	
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Instruction 1(b)

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## FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287										
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

						0000	011 00(11) (		Investmen		inpuny / tot	01 10 10								
1. Name and Address of Reporting Person <sup>*</sup> <u>Hartmann Richard</u>						2. Issuer Name and Ticker or Trading Symbol <u>ACADIA REALTY TRUST</u> [ AKR ]									k all applic Director	able)	) Pers	on(s) to Issu 10% Ov	/ner	
(Last) (First) (Middle) C/O ACADIA REALTY TRUST						3. Date of Earliest Transaction (Month/Day/Year) 02/16/2024								Х	Officer below)	give title Sr.	Other (sp below) VP		pecify	
411 THEODORE FREMD AVE						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) RYE NY 10580													X	X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(St	ate)	(Zip) Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									to satisfy								
		Tak	ole I - Nor	1-Deriv	vativ	e Se	curities	s Ac	quired,	Dis	posed c	of, or Be	enefic	cially	Owned					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						ear)   I	A. Deemed execution Date, any Month/Day/Year)		Transaction Dispose Code (Instr. 5)			ties Acquir d Of (D) (In:		and Securities		s Illy ollowing	Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V Amount (A) or (D)				Pr Pi	rice	Transacti	Transaction(s) (Instr. 3 and 4)			instr. 4)						
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned         (e.g., puts, calls, warrants, options, convertible securities)																			
		Transa Code (	ransaction of ode (Instr. Derivative			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercisab		xpiration Date	Title	or	ount nber res						
Limited Partnership Units	\$0.00	02/16/2024	02/16/20	024	A		26,085		(1)		(1)	Common Shares of Beneficial Interest	26	085	\$0.00	155,15	4	D		

## Explanation of Responses:

1. On February 16, 2024, Mr. Hartmann was awarded these restricted long-term incentive partnership units ("LTIP Units") in Acadia Realty Limited Partnership (the "Company"). 26,085 LTIP Units shall vest as follows: equal amounts shall vest on January 6, 2025 and on each of the first, second, third and fourth anniversaries thereof, provided that Mr. Hartmann continues to be employed on the vesting date in question. This figure excludes LTIP Units granted under the Company's outperformance plan, the vesting of which is subject to conditions, other than the passage of time and continued employment, which are not tied solely to the marked price of an equity security of the Company's sume-property income.

## **Remarks:**

/s/ Richard Hartmann

<u>02/21/2024</u> Date

\*\* Signature of Reporting Person

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.