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MAGTEDG DODEL

| Form 4 | KOBER I | | | | | | | | | |
|---|---|--|---|--|----------|--|--|---|---|--|
| September 17 | 7. 2012 | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | OMB | PROVAL 3235-0287 | | | |
| Check thi | s box | VV a | asnington, | D.C. 20 | 549 | | | Number: | January 31 | |
| 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 OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | Expires. 2005 Estimated average burden hours per response 0.5 | | | |
| (Print or Type R | esponses) | | | | | | | | | |
| 1. Name and A MASTERS | Symbol | 2. Issuer Name and Ticker or Trading Symbol ACADIA REALTY TRUST [AKR] | | | | 5. Relationship of Reporting Person(s) to Issuer | | | | |
| (Last) | (First) (M | | 3. Date of Earliest Transaction | | | , | (Check all applicable) | | | |
| C/O ACADI TRUST, 131 AVENUE, S | (Month/ 09/14/ | (Month/Day/Year) 09/14/2012 | | | | Director 10% Owner X_Officer (give title Other (specify below) below) below) Sr. VP and General Counsel | | | | |
| | | | endment, Dat onth/Day/Year) | ndment, Date Original th/Day/Year) | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person | | | |
| WHITE PLA | AINS, NY 10605 | | | | | | Form filed by M Person | lore than One Re | porting | |
| (City) | (State) (Z | Zip) Tal | ole I - Non-D | erivative | Securi | ities Acqu | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | f 2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if | | 3. f Transactio Code c) (Instr. 8) | Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or | | | 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) | |
| Common Shares of Beneficial Interest - \$.001 Par Value | 09/14/2012 | | Code V | Amount 1,000 | (D) D | Price \$ 25.75 | 21,000 | D | | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transact Code (Instr. 8) | 5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 5 | Date | Amou Under Secur | rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr |
|---|---|---|--------------------------------------|--|---------------------|--------------------|------------------------|--|---|--|
| | | | Code V | 7 (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|--|---------------|-----------|----------------------------------|-------|--|--|
| | Director | 10% Owner | Officer | Other | | |
| MASTERS ROBERT C/O ACADIA REALTY TRUST 1311 MAMARONECK AVENUE, SUITE 260 WHITE PLAINS, NY 10605 | | | Sr. VP and General Counsel | | | |
| Cianaturaa | | | | | | |

Signatures

Robert Masters 09/17/2012

<u>**</u>Signature of Reporting Person Date

Explanation of Responses:

* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.