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ACADIA REAI Form 4	LTY TRUST										
November 08, 2	2007										
FORM 4		CT A TEC	SECU	DITIES A	ND EV		COMMISSIO	T	PPROVAL		
Washington, D.C. 20549								N OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or							WNEDSHIDAL	Expires:	January 31, 2005		
							WNERSHIP OF	Estimated a burden hou response	average Irs per		
Form 5 obligations may continue <i>See</i> Instruction 1(b).	e. Section 17(a) of the l	Public U		ling Cor	npany Act	nge Act of 1934, of 1935 or Secti 940	on			
(Print or Type Resp	oonses)										
1. Name and Addr CROCKER DC	2. Issuer Name and Ticker or Trading Symbol			5. Relationship of Reporting Person(s) to Issuer							
(Lost)	(First)	Middle)	ACADIA REALTY TRUST [AKR			SI [AKK	(Check all applicable)				
			3. Date of Earliest Transaction (Month/Day/Year)			X Director	109	6 Owner			
C/O ACADIA TRUST, 1311 I AVENUE, SUI	MAMARONI	ECK	07/13/2	2007			Officer (giv below)	ve title Oth below)	er (specify		
				d(Month/Day/Year) Applicable Line)			oint/Group Filing(Check One Reporting Person				
WHITE PLAIN	NS, NY 10605	5					Form filed by Person	More than One Ro	eporting		
(City)	(State)	(Zip)	Tab	ole I - Non-D	erivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)		Execution any	ecution Date, if Tran y Code		4. Securities nsactionAcquired (A) or de Disposed of (D) str. 8) (Instr. 3, 4 and 5) (A)		5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						or	Transaction(s) (Instr. 3 and 4)				
				Code V	Amount	(D) Price					
Reminder: Report of	on a separate line	e for each cl	ass of sec	urities benefi	cially ow	ned directly	or indirectly.				
					inforn requi	nation cont red to responses ays a curre	spond to the colle tained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)		
	Tab			curities Acqu ls, warrants,			Beneficially Owner securities)	1			

1. Title of	2.	3. Transaction Date	3A. Deemed	4. 5. Number	6. Date Exercisable and	7. Title and Amount of	8. F
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactionof	Expiration Date	Underlying Securities	Der

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Derivative Securitie Acquired (A) or Disposed of (D) (Instr. 3, and 5)	ties ed ed		(Instr. 3 and 4)		Sec (Ins
				Code V	(A) (I	D) Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Common Shares of Beneficial Interest - Equivalent	<u>(1)</u>	07/13/2007		I	37 (1)	07/13/2007	<u>(1)</u>	Common Shares of Beneficial Interest	37	\$
Common Shares of Beneficial Interest - Equivalent	<u>(1)</u>	10/15/2007		I	39 (1)	10/15/2007	<u>(1)</u>	Common Shares of Beneficial Interest	39	\$
Common Shares of Beneficial Interest - Equivalent	<u>(2)</u>	11/07/2007		I	264 (2)	11/07/2007	<u>(2)</u>	Common Shares of Beneficial Interest	264	\$

Reporting Owners

Reporting Owner Name / Address	Relationships					
1	Director	10% Owner	Officer	Other		
CROCKER DOUGLAS II C/O ACADIA REALTY TRUST 1311 MAMARONECK AVENUE, SUITE 260 WHITE PLAINS, NY 10605	Х					
Signatures						

/s/ Douglas Crocker

11/08/2007

<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).

These shares represent the stock equivalent equal to the value of dividends which would have been payable had shares been issued (1) pursuant to the Issuer's Deferred Compensation Plan.

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- (2) These shares represent the stock equivalent for trustee fees credited to his deferred account pursuant to the Issuer's Deferred Compensation Plan.
- (3) This number reflects deferred shares only. In addition, Mr. Crocker owns 10,000 Options previously awarded to him through 2006.

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.