FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
OMB Number:	3235-0104						
Estimated average burden							
hours per response:	0.5						

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

				01 00011011 00(1	, 01 1110 1111	restment Company Act of 1940					
TELL 44 CL T			2. Date of Event Re Statement (Month/ 02/20/2020		3. Issuer Name and Ticker or Trading Symbol Armada Hoffler Properties, Inc. [AHH]						
I	(First) IOFFLER PROPER ARK AVENUE, SU	· · · · · · · · · · · · · · · · · · ·				onship of Reporting Person(s) to Issu Il applicable) Director Officer (give title below)	uer 10% Owner Other (specify		If Amendment, Date of Original Filed (Month/Day/Year) Individual or Joint/Group Filing (Check Applicable Line)		
(Street) VIRGINIA BEACH	VA	23462			A	Chief Operating Of	* * * *	Belowy	X Form filed by 0	One Reporting Person More than One Reporting Person	
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
			2. Amount Owned (In	str. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable a Expiration Date (Month/Day/Year)		n Date	Security (Instr. 4) Convers			Conversion or Exercise	or Indirect (I)	6. Nature of Indirect Beneficial Ownership (Instr. 5)			
		Date Exercisa	Expiration Date	Title		Amount or Number of Shares	Price of Derivative Security	(Instr. 5)			

Explanation of Responses:

Remarks:

Exhibit List: Exhibit 24 - Power of Attorney

No securities are beneficially owned.

Michael P. O'Hara, as Attorney-in-Fact

for Shawn J. Tibbetts ** Signature of Reporting Person

03/12/2020

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 5 (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.

POWER OF ATTORNEY

Know all by these presents, that the undersigned hereby constitutes and appoints Michael P. O'Hara, with full power of substitution, a:

(1) execute for and on behalf of the undersigned, in the undersigned's capacity as an officer and/or director of Armada Hoffler Properties, Inc.

(2) do and perform any and all acts for and on behalf of the undersigned which may be necessary or desirable to complete and execute any such

(3) take any other action of any type whatsoever in connection with the foregoing which, in the opinion of any such attorney-in-fact, may be o

The undersigned hereby grants to such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoev

This Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 3, 4, and 5 witl

IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of this __5th__ day of March, 2020.

/s/ Shawn J. Tibbets Signature

Shawn J. Tibbets Print Name