FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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on, D.C. 20549		OMB APPROVAL

-	OWID AT TING	/ V/\L							
	OMB Number:	3235-0287							
	Estimated average burden								
-	hours per response:	0.5							

Check this box 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

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* KIRK A RUSSELL					2. Issuer Name and Ticker or Trading Symbol Armada Hoffler Properties, Inc. [AHH]									(Ch	eck all appl	or	10	% Owner	
	MADA HO	irst) FFLER PROPEI RK AVENUE, S	1		3. Date of Earliest Transaction (Month/Day/Year) 06/16/2021								Officer (give title Other (spec below) below)						
(Street) VIRGIN BEACH (City)	V.	A tate)	23462 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date				2. Transact Date [Month/Day		2A. Deemed Execution Date, if any (Month/Day/Year)		e, Transaction Dispo		curities Acc osed Of (D)			Benefic	es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Benefici Ownersh	Beneficial Ownership		
									Code	v	Amou	unt (A) or D)	Price	Transa (Instr. 3	tion(s)		(Instr. 4)	
Common Stock				06/16/2	6/2021				A		2,	921	1 A \$		3'	37,209			
Common Stock												34	1,284	I	By Spouse	<u>(1)</u>			
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)	3A. Deemed Execution Date if any (Month/Day/Ye	Code	action (Instr.			6. Date Exercis: Expiration Date (Month/Day/Yea		ate	and	7. Title and Amour Securities Underly Derivative Security (Instr. 3 and 4)		ring y	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	Benefic Owners ct (Instr. 4)	i ial ship
				Code	v			Date Exerc	isable	Expiration Date		Title	Amour Numbe Shares	rof					
Common Units	(2)							(2)	(2	2)	Common Stock	1,153	,144		1,153,144	D		
Common Units	(2)							(2)	(2	2)	Common Stock	36,3	347		36,347	I	By Spou	ıse ⁽¹⁾
Common Units	(2)							(2)	(2	2)	Common Stock	91	L		91	I	By Limi Partners	

Explanation of Responses:

- 1. Mr. Kirk disclaims beneficial ownership of these securities, and this report shall not be deemed an admission that the reporting person is the beneficial owner of the securities for purposes of Section 16 or for any
- 2. Represents Class A common units of limited partnership interest ("Common Units") in Armada Hoffler, L.P., the operating partnership of Armada Hoffler Properties, Inc. (the "Company") and of which the Company is thegeneral partner. Commencing one year from the date of issuance, each Common Unit is redeemable for cash equal to the then-current market value of one share of the Company's common stock or, at the election of the Company, one share of the Company's common stock. Common Units have no expiration date.
- 3. Represents Mr. Kirk's pecuniary interest in Common Units held by a limited partnership.

Remarks:

Michael P. O'Hara, Attorney-in-06/17/2021 Fact for A. Russell Kirk

** 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.