Levin Ross B Form 3 March 27, 2009

#### FORM 3

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF 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

(Print or Type Responses)

1. Name and Address of Reporting Person *  Levin Ross B			2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name <b>and</b> Ticker or Trading Symbol AMERICAN COMMUNITY PROPERTIES TRUST [APO]				
, ,	(First)	(Middle)	03/18/2009	4. Relationship of Reporting Person(s) to Issuer (Check all applicable)			5. If Amendment, Date Original Filed(Month/Day/Year)	
149 FIFTH AV FOURTEENT		₹						
NEW YORK,	(Street) NY 1(	0010			10% (X Otherwork) (specify below) Trustee		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person	
(City)	(State)	(Zip)	Table I - N	Non-Derivat	ive Securiti	curities Beneficially Owned		
1.Title of Security (Instr. 4)			2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.	*	
Common Shar	es		8,900		D	Â		
Reminder: Report		te line for ea	ch class of securities benefic	ially S	EC 1473 (7-02	)		
	informa	ation conta	oond to the collection of lined in this form are not and unless the form displ	t				

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

currently valid OMB control number.

(Instr. 4) Expiration Date (Month/Day/Year) Securities Underlying Conversion Ownership Beneficial Or Derivative Security or Exercise Form of (Instr. 5) (Instr. 4) Price of Derivative Title	ure of Indirect icial Ownership 5)
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#### Edgar Filing: Levin Ross B - Form 3

Date Expiration Exercisable Date

Amount or Security Number of Shares Direct (D) or Indirect (I)

(Instr. 5)

### **Reporting Owners**

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

Levin Ross B

149 FIFTH AVENUE, FOURTEENTH FLOOR Trustee NEW YORK, NYÂ 10010

#### **Signatures**

Ross B. Levin 03/27/2009

\*\*Signature of Date

Reporting Person

## **Explanation of Responses:**

- \* 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. 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.

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