FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL								
	OMB Number: 3235-02 Estimated average burden								
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

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*  KAUFMAN IVAN						2. Issuer Name and Ticker or Trading Symbol ARBOR REALTY TRUST INC [ ABR ]							(Cr	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director X 10% Owner  Officer (give title Other (specify)					
(Last) (First) (Middle) C/O ARBOR REALTY TRUST, INC. 333 EARLE OVINGTON BLVD., STE. 900						3. Date of Earliest Transaction (Month/Day/Year) 05/25/2021								X Officer (give title Other (specify below)  COB, CEO and President					
(Street) UNIONE			11553 (Zip)		-   4. l	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)      X Form filed by One Reporting Person  Form filed by More than One Reporting Person					
(City)	vativ	tive Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/N				tion	on 2A. Deemed Execution Date,		ed Date,	3. Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar			5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Special Voting Preferred Stock, par value \$0.01 per share 05/25/20				2021	)21		J <sup>(1)</sup>		18,400	D	(1)	10,692,668 <sup>(2)</sup>		I		By Arbor Commercial Mortgage, LC			
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. Deel Execution if any (Month/I	on Date,	Code (		of Deri Secu Acqu (A) o Disp of (D	vative urities uired or oosed o) (Instr. and 5)	6. Date Exerc Expiration Da (Month/Day/Y		ate	7. Title and Amour of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Num derivat Securit Benefic Owned Follow Report Transa (Instr. 4	ive ties cially ing ed ction(s)	10. Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficial Ownership et (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares						
Partnership Common Units	(1)	05/25/2021			J <sup>(1)</sup>			18,400	(3)		(3)	Common Stock, par value \$0.01 per share	18,400	(1)	10,692	2,668 <sup>(2)</sup>	I	By Arbor Commercial Mortgage, LLC	

- 1. On May 25, 2021, Arbor Commercial Mortgage, LLC ("ACM") distributed 18,400 Partnership Common Units and Special Voting Preferred Stock with a fair value of approximately \$321.1 thousand to one of its members in consideration for the liquidation of their membership interest in ACM. The fair market value was determined in accordance with ACM's Operating Agreement, using the average closing stock price of the Company from May 20, 2021 through May 24, 2021 of \$17.45 per share.
- 2. Mr. Kaufman disclaims beneficial ownership of these shares, except to the extent of his pecuniary interest therein.
- 3. Not applicable.

05/27/2021 /s/ Ivan Kaufman

\*\* 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.