FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
vvasiliigtoii,	D.C.	20049

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
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)

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* <u>DILLARD GEORGE DOUGLAS JR</u>					<u>A</u>	2. Issuer Name and Ticker or Trading Symbol ACUITY BRANDS INC [ AYI ]							(Ch	elationship eck all appli X Directo	,		on(s) to Issu	
(Last)	,	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/24/2024								Officer below)	(give title		Other (s below)	pecify
C/O ACUITY BRANDS, INC. 1170 PEACHTREE STREET, NE, STE. 1200					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person					
(Street)	ΓA G.	A	30309											_	iled by More		One Repor	
(City)	(S	tate)	(Zip)		-   Ri	Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a satisfy the affirmative defense conditions of Rule 10b5-1(c). See Ins												
		Tab	le I - Nor	n-Deriv	vativ	e Se	curitie	s Ac	quired, D	isp	osed o	f, or Bei	neficiall	y Owned	<u> </u>			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Execution Date,			Code (Ins	Transaction Disposed Of (D) (Instr. 3, 4				5. Amou Securitie Benefici Owned F Reporte	es ally Following	Form:	Direct of Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
								Code V		Amount	(A) or (D)	Price	Transaci (Instr. 3	tion(s)			(Instr. 4)	
		-							uired, Dis , options					Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/	Date,	4. Transa Code ( 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisab Expiration Date (Month/Day/Year)		Amount of		f g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
c					Code			Date Exercisable	Expiration Date		Amount or Number of Shares							
Deferred Restricted Stock Units	(1)	01/24/2024			Α		681 <sup>(2)</sup>		01/24/2025 <sup>(2)</sup>		(2)	Common Stock	681	\$0 <sup>(3)</sup>	681		D	

- 1 1-for-1
- 2. Deferred Restricted Stock Units (DSUs) issued pursuant to the Issuer's Amended and Restated 2012 Omnibus Stock Incentive Compensation Plan. The DSUs resulted from the Reporting Person's election to receive a portion of annual director fees in the form of a DSU. The DSUs will vest in full on the first anniversary of the grant date, or, if earlier, the date of the next subsequent annual meeting of the Issuer's stockholders following the grant date. Once vested, DSUs will be payable upon retirement in either lump sum or five annual installments.
- 3. The number of DSUs received was calculated based on \$227.87, which was the average of the high and low sales prices of a share of the Issuer's common stock on the five trading dates immediately preceding the date of grant

## Remarks:

/s/ Chanda Kirchner, Attorney-01/26/2024 in-Fact for George Douglas Dillard, Jr.

\*\* 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.