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* *
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* *
* Printed Name: _____ Date: _____ Time: _____ *
* *
* Signature: _____ *
* *
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<SUBMISSION>
<TYPE> 4
<REPORTING-OWNER>
  <CIK> 0000927944
  <CCC> xxxxxxxx
  <NAME> Harold Brown
  <OFFICER-TITLE> Treas. & Dir. of Gen. Ptnr NEN
  <RELATIONSHIP> DIRECTOR
  <RELATIONSHIP> OWNER
  <RELATIONSHIP> OFFICER
</REPORTING-OWNER>
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  <CIK> 0001473909
  <CCC> xxxxxxxx
  <NAME> Harold Brown 1999 REVOCABLE TRUST
  <RELATIONSHIP> OWNER
</REPORTING-OWNER>
<PERIOD> 10/15/2009
<SUBJECT-COMPANY>
  <CIK> 0000746514
  <NAME> New England Realty
</SUBJECT-COMPANY>
<SUBMISSION-CONTACT>
  <NAME> EDGAR Advantage Service Team
  <PHONE> (800) 688 - 1933
</SUBMISSION-CONTACT>

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DOC 1

<Name> 4

<Description> 4

DOC 1 Header

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

STATEMENT OF CHANGES IN 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

OMB APPROVAL	
OMB Number:	3235-0287
Expires:	February 28, 2011
Estimated average burden hours per response...	0.5

(Print or Type Responses)

1. Name and Address of Reporting Person * Harold Brown (Reporting Owner Name)		2. Issuer Ticker or Trading Symbol [NEN]		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director <input checked="" type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below) Treas. & Dir. of Gen. Ptrn NEN	
c/o New England Realty Associates LP, 39 Brighton Avenue (Street)		3. Date of Earliest Transaction (Month/Day/Year) 10/15/2009		6. Individual or Joint/Group Filing (Check Applicable Line) <input type="checkbox"/> Form filed by One Reporting Person <input checked="" type="checkbox"/> Form filed by More than One Reporting Person	
Allston, MA 02134 (City) (State) (Zip)		4. If Amendment, Date Original Filed(Month/Day/Year)			

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
NEN Depository Receipts	10/15/2009		J(1)		220,000	A	\$0(1)	220,000	I	By Trust

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

SEC 1474 (9-02)

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/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Harold Brown c/o New England Realty Associates LP 39 Brighton Avenue Allston, MA 02134	X	X	Treas. & Dir. of Gen. Ptnr NEN	
Harold Brown 1999 REVOCABLE TRUST c/o New England Realty Associates LP 39 Brighton Avenue Allston, MA 02134		X		

Signatures

/s/ Harold Brown

**Signature of Reporting Person

/s/ Harold Brown, Co-Trustee

**Signature of Reporting Person

10/16/2009

Date

10/16/2009

Date

Explanation of Responses:

- * 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).
- (1) On October 15, 2009, the reporting person effected an equity exchange pursuant to which the reporting person acquired 220,000 Depositary Receipts from a third party in a privately negotiated transaction in exchange for ownership interests in 13 properties consisting of an aggregate of 260,888 square feet of retail, office and residential space with a fair market value of approximately \$11,581,744.

Remarks:

The 220,000 Depositary Receipts were acquired by the Harold Brown 1999 Revocable Trust (the "1999 Trust"). Harold Brown is the sole beneficiary of the 1999 Trust during his lifetime and is a co-trustee of the 1999 Trust and exercises voting and dispositive control over the Depositary Receipts beneficially owned by the 1999 Trust. Accordingly, this Form 4 is being filed jointly by Mr. Brown and the 1999 Trust to report the direct beneficial ownership of the Depositary Receipts by the 1999 Trust and Mr. Brown's indirect beneficial ownership of the Depositary Receipts.

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.