FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Morris James Richard	2. Date of Event Requiring Statement (Month/Day/Year) 02/23/2005	3. Issuer Name and Ticker or Trading Symbol AVALONBAY COMMUNITIES INC [AVB]				
(Last) (First) (Middle) 2900 EISENHOWER AVE., SUITE 300	_	(Check all app Dire	ector cer (give title ow)	10% Owner Other (specify below)		nendment, Date of Original Filed /Day/Year) /2005
(Street) ALEXANDRIA VA 22314 (City) (State) (Zip)	_		Senior Vice Presi	dent		idual or Joint/Group Filing (Check ble Line) Form filed by One Reporting Person Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock, par value \$.01 per share	11,714.443 ⁽¹⁾	D	

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		or Exercise	Form: Direct (D) or	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security Indirect (I) (Instr. 5)		

Explanation of Responses:

1. The amount of securities reported reflects direct ownership of all shares of common stock, including restricted shares.

Remarks:

Edward M. Schulman by Power of

Attorney dated as of March 1, <u>2005.</u>

** Signature of Reporting Person

03/09/2005

Date

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

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.

 $^{^{\}star}$ 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).