FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

3235-0287 OMB Number:

Estimated average burden hours per response: 0.5

Check this box if no l Section 16. Form 4 o may continue. See Ir	r Form 5 obligations			hours per response:			
- may continue. See in		FI	led 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 <u>Dunn Lili F</u>	of Reporting Person*		2. Issuer Name and Ticker or Trading Symbol <u>AVALONBAY COMMUNITIES INC</u> [AVB]	(Check all applicable) Director	title 10% Owner Other (specify		
(Last) 2900 EISENHOW	(First) ER AVE., SUITE 30	(Middle))	3. Date of Earliest Transaction (Month/Day/Year) 02/16/2006	below)	below) enior Vice President		
(Street) ALEXANDRIA	VA	22314	4. If Amendment, Date of Original Filed (Month/Day/Year)	X Form filed b	Froup Filing (Check Applicable Lin by One Reporting Person by More than One Reporting Perso		
(City)	(State)	(Zip)		Form lifed b	y more than one Reporting Ferse		

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)	Date, Transaction Code (Instr.		Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr.	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
			Code	v	Amount (A) or (D)		Price	3 and 4)		(Instr. 4)
Common Stock, par value \$.01 per share	02/16/2006		М		1,820	Α	\$33.75	38,320.259(1)	D	
Common Stock, par value \$.01 per share	02/16/2006		S		1,820	D	\$102.3663	36,500.259(1)	D	

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. Transac Code (Ir 8)		Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: 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		Transaction(s) (Instr. 4)		
Employee Stock Options (Right to Buy)	\$33.75	02/16/2006		М			1,820	02/28/2001 ⁽²⁾	02/28/2010	Common Stock	1,820	\$0.00 ⁽³⁾	84,092 ⁽⁴⁾	D	

Explanation of Responses:

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

2. The options exercised were included in options granted under the issuer's Stock Option and Incentive Plan on February 28, 2000, which became exercisable in three equal annual installments beginning on February 28, 2001. 3. Reflects grant of options under the Company's Stock Option and Incentive Plan.

4. The number of derivative securities beneficially owned following the reported transaction includes options granted in prior periods with varying exercise prices and vesting dates. Following the reported transaction the reporting person holds 3,410 options that expire on February 28, 2010 with an exercise price of \$33.75.

Remarks:

Edward M. Schulman, as attorneyin-fact under Power of Attorney 02/21/2006

Date

dated March 1, 2005

** Signature of Reporting Person

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.

OMB APPROVAL