FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OMB Number:	3235-0287
Estimated average burden	
hours per response:	0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

e. Contain so (i) of the information company rotes to the												
1. Name and Address of Reporting Person* PRIMIS LANCE R (Last) (First) (Middle) C/O AVALONBAY COMMUNITIES, INC. BALLSTON TOWER, 671 N. GLEBE ROAD			2. Issuer Name and Ticker or Trading Symbol AVALONBAY COMMUNITIES INC [AVB]	Relationship of Reporting Person(s) to Issuer (Check all applicable)								
PRIMIS LANC	st) (First) (Middle) AVALONBAY COMMUNITIES, INC.		[X	Director	10% Owner						
(14)	(First)	(AA: J-II-)			Officer (give title below)	Other (specify below)						
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)		DCIOW)	below)						
C/O AVALONBAY	COMMUNITIES,	INC.	05/31/2012									
C/O AVALONBAY COMMUNITIES, INC.												
(Ctro ot)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv	idual or Joint/Group Filing (Che	eck Applicable Line)						
l` ′				X	Form filed by One Reporting	Person						
ARLINGTON	VA	22203			Form filed by More than One	•						
(City)	(State)	(Zip)										
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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)	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			Securities Beneficially Owned	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	3 and 4)		(msu. 4)
Common Stock, par value \$.01 per share	05/31/2012		A		894	A	\$0.00(1)	10,483.888(2)	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)	Transaction Code (Instr. 8)		str. Securities Acquired (A)		Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		caction (Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		6. Date Exerc Expiration Day/\(\)	ate	7. Title and A Securities Un Derivative Se 3 and 4)	derlying	Derivative	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	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		(Instr. 4)						

Explanation of Responses:

- 1. Reflects grant of shares of Restricted Stock under the issuer's Stock Option and Incentive Plan, which are subject to vesting requirements.
- 2. The amount of securities owned following the reported transaction reflects direct ownership of all shares of common stock, some of which may be subject to vesting requirements.

Remarks:

By Catherine T. White, as attorneyin-fact under Power of Attorney dated January 6, 2009 06/04/2012

** 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.