FORM 4

### **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

Ī	aug u	2005 2007
ı	OMB Number:	3235-0287
l	Estimated average burden	
l	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

Thrume and Address of Reporting Ferson			2. Issuer Name <b>and</b> Ticker or Trading Symbol AVALONBAY COMMUNITIES INC [ AVB ]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
WALIER W EDWARD				X	Director	10% Owner			
					Officer (give title	Other (specify			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)		below)	below)			
WALTER W EDWARD  (Last) (First) (Middle)  C/O AVALONBAY COMMUNITIES, INC.  BALLSTON TOWER, 671 N. GLEBE ROAD  (Street)  ARLINGTON VA 22203			05/23/2019						
BALLSTON TOW	ER, 671 N. GLEBE	ROAD							
(01 1)			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	n Person			
ARLINGTON	VA	22203			Form filed by More than One Reporting Person				
					1 om med by word than one	c reporting r croon			
(City)	(State)	(Zip)							

### 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)	Code (Instr.		4. Securities Ad Disposed Of (D			Securities Beneficially Owned	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	05/23/2019		A		785(1)	A	\$0.00	12,932.6381 <sup>(2)</sup>	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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative	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)	

#### Explanation of Responses:

- 1. Reflects grant of Deferred Stock Units ("Units") under the issuer's Second Amended and Restated 2009 Equity Incentive Plan, which Units are subject to vesting requirements. The Units will convert into common stock on a one to one basis when the reporting person ceases to be an employee or director of the issuer.
- 2. The amount of securities owned following the reported transaction reflects direct ownership of all shares of common stock, including deferred stock units convertible into common stock, some of which may be subject to vesting requirements.

## Remarks:

By Catherine T. White, as attorneyin-fact under Power of Attorney 05/28/2019 dated as of January 21, 2009.

\*\* 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.