Edgar Filing: AVALONBAY COMMUNITIES INC - Form 4

AVALONE Form 4 May 15, 20	3AY COMMUNI 14	TIES INC									
FORN Check t	his box	ONTIED STATES SECORTIES AND EXCHANGE COMMISSION Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							OMB AP OMB Number: Expires:	PROVAL 3235-0287 January 31, 2005	
subject Section Form 4	to SIAIE 16. or								Estimated average burden hours per response 0.5		
Form 5 obligation may con <i>See</i> Inst 1(b).	ons ntinue. Section 17	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									
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> Breslin Sean J.			2. Issuer Name and Ticker or Trading Symbol AVALONBAY COMMUNITIES INC [AVB]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) C/O AVALONBAY COMMUNITIES, INC., BALLSTON TOWER, 671 N. GLEBE ROAD		3. Date of Earliest Transaction(Month/Day/Year)05/13/2014					Director 10% Owner _X Officer (give title Other (specify below) below) Executive Vice President				
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
ARLINGT	ON, VA 22203							Form filed by Me Person			
(City)	(State)	(Zip)	Tal	ble I - Non-	Derivativ	ve Sec	urities Acq	uired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution any (Month/Da	Date, if	3. Transactic Code (Instr. 8) Code V	onor Dispo (Instr. 3,	(A) or) 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)	
Common Stock, par value \$.01 per share	05/13/2014			S	1,000	D	\$ 140.970 (1)	$\begin{array}{c} 21,693.0525\\ \underline{(2)}\\ \end{array}$	D		

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

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number.

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. Transactiv Code (Instr. 8)	5. of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	5	Date	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Amount or Title Number of Shares			
Reporting Owners											
Reporting Owner Name / Address			5	Relationships							
			Directo	or 10% C	Owner Ot	fficer		Other			
BALLST	LONBAY	COMMUNITIES R, 671 N. GLEBE 2203			E	Executive Vi	ice Preside	ent			
Signa	tures										
•		as attorney-in-fact	t under Power of	Attorney	dated M	ay 26,	05/	15/2014			
		<u>**</u> Signature of	f Reporting Person					Date			
Expla	nation	of Respo	nses:								
* If the f	form is filed by	y more than one report	ting person, see Instr	ruction 4(b)	(v).						
** Intenti	onal misstaten	nents or omissions of	facts constitute Feder	ral Crimina	l Violation	s. <i>See</i> 18 U.S.	C. 1001 and	15 U.S.C. 78ff(a).		
This tr	ansaction was	executed in multiple	trades at prices rangi	ng from \$1	40.9601 to	\$140.9950. Tł	ne price repo	rted above reflec	ets the		

- weighted average sale price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.
- (2) The amount of securities owned following the reported transaction reflects direct ownership of all shares of common stock, including restricted stock.

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.