

# SECURITIES AND EXCHANGE COMMISSION

## FORM 4

Statement of changes in beneficial ownership of securities

Filing Date: **2006-01-05** | Period of Report: **2005-12-30**  
SEC Accession No. **0001179110-06-000552**

([HTML Version](#) on [secdatabase.com](http://secdatabase.com))

### REPORTING OWNER

#### LYDICK ROBERT CHAD

CIK: **1038263**

Type: **4** | Act: **34** | File No.: **000-28894** | Film No.: **06511222**

Business Address  
*P O BOX 1386  
CLOVIS NM 88102  
5057623771*

### ISSUER

#### ACCESS ANYTIME BANCORP INC

CIK: **1024015** | IRS No.: **850444597** | State of Incorporation: **DE** | Fiscal Year End: **1231**  
SIC: **6035** Savings institution, federally chartered

Mailing Address  
*801 PILE  
P O DRAWER 1569  
CLOVIS NM 88101*

Business Address  
*801 PILE  
P O DRAWER 1569  
CLOVIS NM 88101  
5057624417*

# FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

### OMB APPROVAL

OMB Number: 3235-0287  
 Expires: 02/28/2011  
 Estimated average burden hours per response 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person <b>LYDICK ROBERT CHAD</b>			2. Issuer Name and Ticker or Trading Symbol <b>ACCESS ANYTIME BANCORP INC</b> <b>[AABC]</b>		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below)	
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) <b>12/30/2005</b>		6. Individual or Joint/Group Filing (Check applicable line) <input checked="" type="checkbox"/> Form Filed by One Reporting Person <input type="checkbox"/> Form Filed by More than One Reporting Person	
PO BOX 1386			4. If Amendment, Date Original Filed(Month/Day/Year)			
(Street) <b>CLOVIS, NM 88101</b>						
(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)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		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)
			Code	V	Amount	(A) or (D)			
Common stock	12/30/2005		P		6,418 <sup>(1)</sup>	A	\$ 0	22,921	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)		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 Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date						Title
Phantom Stock	\$ 0	12/30/2005		P		6,418 <sup>(1)</sup>		12/30/2005	12/30/2005	Common Stock	6,418 <sup>(1)</sup>	\$ 0	0	D	

**Explanation of Responses:**

1. Phantom Stock was paid to Directors for attended Board meetings beginning 5/97. The non-employee director retainer Plan was terminated 12/30/05 due to the merger with First State Bancorporation, Inc. that closed 1/3/06.

**Signatures**

Robert Chad Lydick  
 \*\* Signature of Reporting Person

01/05/2006  
 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.**