FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| 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

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed 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 Reporting Person* KROMINGA LYNN | | | | | | 2. Issuer Name and Ticker or Trading Symbol AVIS BUDGET GROUP, INC. [CAR] | | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | | | |
|--|--|---|--|--|----------|---|--|---------------------------------|----------------------|-------------------|----|-----------------------------|---------------|---|----|---|--|---|--|---|--|--|--|
| (Last) | ast) (First) (Middle) SYLVAN WAY | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/04/2018 | | | | | | | | | | Office below | | | Other (specify below) | | | | |
| (Street) PARSIPF (City) | ARSIPPANY NJ 07054 | | | | 4. | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye | | | | | ear) E | 2A. Deemed Execution Date, if any (Month/Day/Yea | | | | action (Instr. | | Securities / sposed Of (| | | 5) | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | | | | C | Code V | | An | nount | (A) or (D) | A) or D) Price | | Transaction (Instr. 3 and | | | 3) | | | | |
| Common Stock 05/04/2018 | | | | | 8 | | | | A | | | 643 | A | A \$44.76 ⁽¹⁾ | | 10,305 | | D | | | | | |
| Common Stock | | | | | | | | | | | | | | | | 53,906 | | I | | Held by NQ Deferred Compensation Plan | | | |
| | 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 | e of ivative (Month/Day/Year) if any (Month/Day/Yei | | | | ransaction ode (Instr. Securiti Acquire (A) or Dispose of (D) (Instr. 3, and 5) | | ative rities ired osed | Expiration (Month/Da | | | ay/Year) Expiration | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Number of Shares | | 8. Price of Derivative Security (Instr. 5) | ative derivati rity Securiti | | 10. Owne Form: Direct or Ind (I) (Ins | t (D) lirect | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |

Explanation of Responses:

Remarks:

/s/ Jean M. Sera, by Power of Attorney for Lynn Krominga

05/08/2018

** 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.

^{1.} Award represents the portion of non-employee director retainer fees through June 30, 2018 paid in common stock of the Company.