FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| l | OMB APPROVAL | | | | | | | | | |
|---|-------------------------|-----------|--|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | | |
| l | Estimated average burde | en | | | | | | | | |
| | hours per response: | 0.5 | | | | | | | | |
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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* <u>EDELMAN MARTIN L</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol AVIS BUDGET GROUP, INC. [CAR] | | | | | | | | | | Relationship neck all app X Direc | , | | , | on(s) to Issuer 10% Owner | | |
|--|------------|-----------|-------|--------------------------|--|---|--------------------------------------|--|-----|---|--------------------------|---|--|------------------------|--|--|--|---|-----------------|--|--|--|
| (Last) (First) (Middle) 6 SYLVAN WAY | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/15/2013 | | | | | | | | | | Office belov | | r (give title) | | Other (specify below) | | |
| (Street) PARSIPPANY NJ 07054 (City) (State) (Zip) | | | | | 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. Transactic Date (Month/Day/ | | | | | 2A. Deemed Execution Date, if any (Month/Day/Year | | Co | Transaction Code (Instr. | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5 | | | |) S | 5. Amount o Securities Beneficially Owned Follo Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | | | Co | de | v | Am | nount | (A) or (D) | Price | 1 | Transaction Instr. 3 and | | | | " | | |
| Common | 02/15/2013 | 2/15/2013 | | | | A | | | 986 | A | A \$23.84 ⁽¹⁾ | | 64,674 | | I | | Held by NQ Deferred Compensation Plan | | | | | |
| Common | | | | | | | | | | | | 35,300 | | D | | | | | | | | |
| | | Та | ble I | I - Derivat (e.g., pı | | | | | | | | | | Beneficia ecurities | | Owned | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | | | | | saction (Instr. | 5. Nun of Deriva Secur Acqui (A) or Dispo of (D) (Instr. and 5 | ative ities red sed 3, 4 | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date | | | | Ame Sec Und Deri Sec and | 7. Title and Amount of Securities Underlying Derivative Security (Instr.: and 4) Amount or Number of Title Shares | | Derivative Security (Instr. 5) Secur Owne Follov Repor Trans. (Instr. | | ities Form Direc or Inc (I) (Instance) | | t (D) lirect | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |

Explanation of Responses:

1. Award represents the portion of non-employee director retainer fees through March 31, 2013 paid in deferred common stock of the Company. All shares are deferred into the Non-Employee Directors Deferred Compensation Plan and converted into deferred stock units thereunder. Payable upon termination of service as director in accordance with the plan.

Remarks:

Jean M. Sera, by Power of Attorney for Martin L. **Edelman**

02/20/2013

** 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.