FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|------------------|-------------------|---------------|------------------|

| OMB APPRO | DVAL |
|------------------------|-----------|
| OMB Number: | 3235-0287 |
| Estimated average burd | en |
| 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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* Hardy John D. Jr. | | | | | | 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) | | 3. Date of Earliest Transaction (Month/Day/Year) 05/08/2008 | | | | | | | | | | Office below | | | | Other (specify below) | | | | | | |
| (Street) PARSIPE | reet) ARSIPPANY NJ 07054 | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | G. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | |
| (City) | (SI | | Zip) | | | | | | | | | | | | | | | | | | | |
| | | Tabl | e I - I | Non-Deriv | /ativ | e Sec | uritie | s A | cqu | ired, | Dis | sposed | of, o | Benefi | cia | lly Owne | ed | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea | | | ear) i | 2A. Deemed Execution Date, if any (Month/Day/Year) | | T c | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5 | | | 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 | Am | ount | t (A) or Price | | - 1 | Transaction(s) (Instr. 3 and 4) | | | | |) | |
| Common Stock | | | | 05/08/200 | 8 | 1 | | | | | 1,302 | | A | \$13.29 | (1) | 7,568 ⁽²⁾ | | I | | Held by NQ Deferred Compensation Plan | | |
| | | Та | ble I | II - Derivat (e.g., p | | | | | | | | | | | | Owned | | | | | | |
| | | | | ansaction of ode (Instr. Derivativ | | | Expiration (Month/Dates d | | | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | Derivative Security (Instr. 5) | deriva Securi Benefi Owned Follow Repor | ities icially d ving ted action(s) | Form Direct or Ind (I) (In: | ership i: ct (D) direct | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | Code | ode V (A) (E | | (D) | Date Exercisal | | ble | Expiration Date | | Amour or Numbe of Shares | er | | | | | | | |

Explanation of Responses:

- 1. Award represents non-employee director retainer fees through June 30, 2008. All shares are deferred into the 1999 Non-Employee Directors Deferred Compensation Plan and converted into deferred stock units thereunder. Payable upon termination of service as a director in accordance with the plan.
- $2.\ Total\ includes\ 6,266\ shares\ which\ vest\ in\ three\ equal\ installments\ on\ April\ 2,\ 2009,\ 2010\ and\ 2011.$

Remarks:

<u>Jean M. Sera, by Power of</u> <u>Attorney for John D. Hardy, Jr.</u>

05/09/2008

** 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.