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

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]										lationshi ck all app Dired	olicable	•) to Is .0% O			
(Last)	ast) (First) (Middle) SYLVAN WAY					3. Date of Earliest Transaction (Month/Day/Year) 11/04/2016										Offic belo				Other (specify below)			
(Street) PARSIPI	PARSIPPANY 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						
				e I ·	- Non-Deriv	_			_	qui													
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year)		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				5. Amount of Securities Beneficially Owned Followin Reported		,	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr.			
								Co	de	v .	Amour		(A) or (D) Price		Transaction(s) (Instr. 3 and 4)					4)			
Common Stock 11/04/20			11/04/201	6			A	A .		762		A	\$37.73(1)		5,510		D						
Common Stock																53,906		I		Held by NQ Deferred Compensation Plan			
			Та	ble	II - Derivat (e.g., p										eneficia ecurities		wned						
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)			saction (Instr.	5. Nui of Derive Secur Acqui (A) or Dispo of (D) (Instr. and 5	ative ities ired sed	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amount or Number of Title Shares		De See (In	Price of rivative curity str. 5)	deriva Secur Benef Owner Follov Repor	ities Form icially Direct or In (I) (Ir ted action(s)		(D) rect	11. Nature of Indirect Beneficial Ownership (Instr. 4)					

Explanation of Responses:

1. Award represents the portion of quarterly non-employee director retainer fees paid in common stock of the Company.

Remarks:

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

11/08/2016

** 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.