FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

Name and Address of Reporting Person* Weinblatt Brett							2. Issuer Name and Ticker or Trading Symbol AVIS BUDGET GROUP, INC. [CAR]										of Reporting Per cable) or (give title		son(s) to Iss 10% Ov Other (s	vner
(Last) (First) (Middle) 6 SYLVAN WAY						3. Date of Earliest Transaction (Month/Day/Year) 03/06/2009										below)		coun	below)	` ´
(Street) PARSIPPANY NJ 07054					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person													n	
(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					action	ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3,		d (A) or	5. Amou Securitie Benefici Owned I	int of es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
										Code	v	Amount		(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
Common Stock 03					5/2009	9			M ⁽¹⁾		1,62	6	A	\$0 ⁽¹) 5,	5,120		D		
Common Stock 03/06					5/2009	9			F ⁽²⁾		618		D	\$0.3	9 4,	4,502		D		
Common Stock 03/06/					5/2009	9			M ⁽¹⁾		1,77	0	A	\$0(1	6,	6,272		D		
Common Stock 03/06/2					5/2009	9				F ⁽⁴⁾		673		D	\$0.3	9 5,	,599		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. Deeme Execution if any (Month/Day	Date,	4. Transaction Code (Instr. 8)		n of			. Date Exe xpiration Month/Day	Date		Amo Secu Und Deri	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 (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)			ate xercisabl		xpiration ate	or Num of		Number					
Restricted Stock Units	\$0 ⁽¹⁾	03/06/2009			M ⁽¹⁾			1,626		(3)		(6)		nmon ock	1,626	\$0	3,251		D	
Restricted	* 2(1)	03/06/3000		T	1 (1)			1 770		(5)		(6)	Com	nmon	1 770		E 211			

Explanation of Responses:

- 1. Represents restricted stock units which automatically converted to Common Stock upon the vesting of such units on a one-to-one basis.
- 2. Represents tax withholdings in connection with the vesting of 1,626 shares of restricted stock units on March 6, 2009.
- $3.\ Original\ grant\ vests\ in\ four\ installments\ on\ March\ 6,\ 2008,\ 2009,\ 2010\ and\ 2011.$
- 4. Represents tax withholdings in connection with the vesting of 1,770 shares of restricted stock units on March 6, 2009.
- 5. Original grant vests in four installments on March 6, 2009, 2010, 2011 and 2012.
- 6. Expiration date not applicable.

Remarks:

Units

Jean M. Sera, by Power of Attorney for Brett D. Weinblatt

03/10/2009

** 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.