AVIS BUDGET GROUP, INC.

Form 4 May 12, 2008

## FORM 4

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** 

**OMB APPROVAL** 

3235-0287 Number: January 31,

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obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b). (Print or Type Responses)

(111111 01	Type Responses)	

1. Name and Address of Reporting Person * KROMINGA LYNN			2. Issuer Name <b>and</b> Ticker or Trading Symbol AVIS BUDGET GROUP, INC. [CAR]				5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
(Last) 6 SYLVA	, ,	(1	3. Date of Earliest Transaction (Month/Day/Year) 05/08/2008			_X_ Director 10% Owner Officer (give title below) Other (specify below)				
PARSIPP	(Street) ANY, NJ 07054		4. If Amendment, Date Original Filed(Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
		(7)					Person			
(City)	(State)	(Zip)	Table I - Nor	n-Derivati	ve Sec	urities A	cquired, Dispose	ed of, or Bene	ficially Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Datany (Month/Day/Y	Code Year) (Instr. 8)	4. Securion(A) or D (Instr. 3,	ispose 4 and (A) or	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	05/08/2008		A	1,340	A	\$ 13.29 (1)	10,400	I	Held by NQ Deferred Compensation Plan	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of **SEC 1474** information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)			ate	7. Title Amoun Under	int of lying ities	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene
	Derivative Security				Securities Acquired			(Instr.	3 and 4)		Owne Follo
					(A) or Disposed						Repo Trans
					of (D) (Instr. 3, 4, and 5)						(Instr
					4, and 3)				Amount		
						Date Exercisable	Expiration Date	Title	or Number of		
				Code V	(A) (D)				Shares		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
r g	Director	10% Owner	Officer	Other			
KROMINGA LYNN							
6 SYLVAN WAY	X						
PARSIPPANY, NJ 07054							

# **Signatures**

Jean M. Sera, by Power of Attorney for Lynn
Krominga
05/09/2008

\*\*Signature of Reporting Person Date

### **Explanation of Responses:**

- \* 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).

Award represents non-employee director retainer fees through June 30, 2008. All shares are deferred into the 1999 Non-Employee (1) Directors Deferred Compensation Plan and converted into deferred stock units thereunder. Payable upon termination of service as a

(1) Directors Deferred Compensation Plan and converted into deferred stock units thereunder. Payable upon termination of service as a director in accordance with the plan.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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