FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	DVAL							
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							
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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

1. Name an		2. Issuer Name and Ticker or Trading Symbol AVIS BUDGET GROUP, INC. [CAR]										lationshi ck all app Dired	plicable	porting Person(s) to Issuer) 10% Owner										
(Last) (First) (Middle) 6 SYLVAN WAY						3. Date of Earliest Transaction (Month/Day/Year) 11/12/2015										Offic belo			Other (specify below)					
(Street) PARSIPPANY NJ 07054 (City) (State) (Zip)							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						
		Tabl	le I -	Non-Deriv	vativ	e Sec	uritie	s A	cqui	red, I	Disposed	of	f, or E	Benefic	ially	/ Own	ed							
Date				2. Transaction Date (Month/Day/	- 1	2A. Deemed Execution Date, if any (Month/Day/Year)		e,	3. Transaction Code (Instr 8)						5. Amount of Securities Beneficially Owned Followir Reported		,	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		Ownership (Instr.				
									Code	v	Amount	(A (C	A) or D)	Price	Tra	Transaction(s) (Instr. 3 and 4)				4)				
Common	Stock			11/12/20	15				P		10,000		Α	\$40.65		10,000 D								
Common	Stock															5,039	,039 I Held by NQ Deferred Compensation Plan				rred pensation			
		Та	able	II - Deriva (e.g., p							sposed o					wned								
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	rcise (Month/Day/Year) if any (Month/Day/Year) tive				5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)				6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration				and nt of ties lying tive ty (Instr. 3	Derivative Security (Instr. 5)		deriva Secur Benef Owne Follov Repor Trans	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		rship (D) irect tr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Explanation of Responses:

Remarks:

<u>/s/ Jean M. Sera by Power of Attorney for Jeffrey H. Fox</u>

11/16/2015

** Signature of Reporting Person

Date

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

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.

 $^{^{\}star}$ 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).