FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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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 and Address of Reporting Person* KROMINGA LYNN					2. Issuer Name and Ticker or Trading Symbol AVIS BUDGET GROUP, INC. [CAR]										all applic Directo	cable or	1		10% Owner		
(Last) 6 SYLVA	ast) (First) (Middle) SYLVAN WAY				3. Date of Earliest Transaction (Month/Day/Year) 02/22/2023									below) belov					Other (spelow)		
(Street) PARSIPI	PARSIPPANY NJ 07054					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						
		Table	I - Non-Deriva				_	uire								d					
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Ye	Execution		Date,	Trar	3. Transaction Code (Instr. 8)						Beneficially Owned Following			6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Cod	le ,	v	Amount	(A) o (D)	r _{Pr}	rice	Reported Transaction(s) (Instr. 3 and 4)								
Common	02/22/202	3			S	S		887	D	D \$226.3		628			D						
Common												26,953			I		Held by NQ Deferred Compensation Plan				
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. Deemed Execution Date, if any (Month/Day/Year)		Transaction of Code (Instr. Derivati			Exp	iration	cercisable ar n Date ay/Year)	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		nt of ities lying itive ity (Instr.		vative (deriv Secu Bene Own Follo Repo	owing orted saction(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	e V	(A)	(D)	Date Exercisa		Expirat ble Date			Amount or Number of Shares								

Explanation of Responses:

Remarks:

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

02/24/2023

** 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.

^{*} 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).