### Edgar Filing: AVIS BUDGET GROUP, INC. - Form 4

Form 4 January 05, 2	_	C.							OMB AF	PROVAL	
<b>FORM</b> Check thi if no long subject to Section 10	is box ger 5 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								OMB Number: Expires: Estimated a	3235-0287 January 31, 2005 verage	
Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b).	r Filed pur <sup>ns</sup> Section 17( inue.	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								's per 0.5	
(Print or Type R	Responses)										
4			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)			
(Mo			(Month/E	3. Date of Earliest Transaction Month/Day/Year) 12/31/2015				X Director 10% Owner X Officer (give title Other (specify below) below) Executive Chairman			
Filed(Mor				endment, Date Original onth/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>			
PARSIPPANY, NJ 07054											
(City)	(State)	(Zip)	Tabl	e I - Non-E	Derivative S	Securi	ities Acqu	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, i any (Month/Day/Year)		n Date, if	Code (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock	12/31/2015			М	25,700	А	\$ 0 <u>(1)</u>	813,321	D		
Common Stock	12/31/2015			F <u>(2)</u>	13,326	D	\$ 36.29	799,995	D		
Common Stock								15,472	I <u>(3)</u>	By trust	

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

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#### number.

# 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)	4. Transactic Code (Instr. 8)	<ul> <li>5. Number of</li> <li>actiorDerivative</li> <li>Securities</li> <li>8) Acquired (A)</li> <li>or Disposed of</li> <li>(D)</li> <li>(Instr. 3, 4, and 5)</li> </ul>		e Expiration Date (Month/Day/Year) (A) ed of		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8 I S ()
				Code V	(A) (I	D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units	\$ 0 <u>(1)</u>	12/31/2015		М	25,	700	12/31/2015	(4)	Common Stock	25,700	

er

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Othe			
NELSON RONALD L 6 SYLVAN WAY PARSIPPANY, NJ 07054	Х		Executive Chairman				
Signaturaa							

## Signatures

/s/ Jean M. Sera, by Power of Attorney for Ronald L. Nelson

<u>\*\*Signature of Reporting Person</u>
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).
- (1) Represents restricted stock units which automatically convert 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 25,700 shares of restricted stock units.

Securities are held by a family trust. Mr. Nelson's wife is a trustee of the trust. Mr. Nelson disclaims beneficial ownership of the securities(3) held by the trust, and the filing of this report is not an admission that Mr. Nelson is the beneficial owner of the securities for purposes of Section 16 or for any other purpose.

(4) Expiration date not applicable.

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.