CHOKSI MARY C

Form 4 May 06, 2011

# FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL OMB** 

3235-0287 Number:

January 31, Expires: 2005

burden hours per

Estimated average response... 0.5

10% Owner

if no longer subject to Section 16. Form 4 or Form 5

Check this box

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

(Print or Type Responses)

1(b).

1. Name and Address of Reporting Person \*

CHOKSI MARY C

(Last) (First) (Middle)

6 SYLVAN WAY

(City)

(Instr. 3)

(Street)

(State)

05/05/2011

2. Issuer Name and Ticker or Trading

Symbol

AVIS BUDGET GROUP, INC. [CAR]

3. Date of Earliest Transaction

(Month/Day/Year) 05/05/2011

4. If Amendment, Date Original Filed(Month/Day/Year)

X\_ Director below)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Issuer

Other (specify Officer (give title

6. Individual or Joint/Group Filing(Check Applicable Line)

5. Relationship of Reporting Person(s) to

(Check all applicable)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting Person

6.

I

D

PARSIPPANY, NJ 07054

1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year)

Execution Date, if any (Month/Day/Year)

(Zip)

Code

Α

3. 4. Securities Acquired Transaction(A) or Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

Code V Amount (D)

1,370

(A)

or

A

Price

18.25

\$

(1)

Owned Following Reported Transaction(s) (Instr. 3 and 4)

42,817

27,100

5. Amount of

Securities

Beneficially

Ownership Indirect Beneficial Form: Ownership Direct (D) (Instr. 4) or Indirect (I)(Instr. 4)

> Held by NQ Deferred Compensation

7. Nature of

Plan

Common Stock

Common

Stock

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

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 control number.

SEC 1474 (9-02)

### Edgar Filing: CHOKSI MARY C - Form 4

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

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exer		7. Title		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration D	ate Amou		nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secur
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8) Derivative		e		Securi	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security				Acquired (A) or						Follo
											Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3, 4, and 5)						
									Amount		
						Date Expir Exercisable Date	Expiration		or		
							*	Title	Number		
							Date		of		
				Code V	(A) (D)				Shares		

# **Reporting Owners**

Relationships Reporting Owner Name / Address

10% Owner Officer Other Director

CHOKSI MARY C 6 SYLVAN WAY X PARSIPPANY, NJ 07054

### **Signatures**

Jean M. Sera, by Power of Attorney for Mary C. 05/06/2011 Choksi

> \*\*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 the portion of non-employee director retainer fees through June 30, 2011 paid in deferred common stock of the

(1) Company. All shares are deferred into the Non-Employee Directors Deferred Compensation Plan and converted into deferred stock units thereunder. Payable upon termination of service as 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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