

RYDER SYSTEM INC

Reported by **GREENE GREGORY F**

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 02/10/11 for the Period Ending 02/08/11

Address 11690 N.W. 105TH STREET

MIAMI, FL 33178

Telephone 3055003726

CIK 0000085961

Symbol R

SIC Code 7510 - Automotive Rental And Leasing, Without Drivers

Industry Rental & Leasing

Sector Services

Fiscal Year 12/31





] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP **OF SECURITIES**

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(f) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *				* 2	2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
GREENE GREGORY F				F	RYDER SYSTEM INC [R]												
(Last) (First) (Middle)				3	3. Date of Earliest Transaction (MM/DD/YYYY)							Direct	or	_	10% O	wner	
												X _ Officer (give title below) Other (specify					
11690 N.W. 105 STREET												below) EVP and	CAO				
(Street)					4. If Amendment, Date Original Filed							6. Individual or Joint/Group Filing (Check					
					(MM/DD/YYYY)							Applicable Line)					
MIAMI, FL 33178												X Form filed by One Reporting Person					
(City) (State) (Zip)												Form filed by More than One Reporting Person					
		Tab	ıle I - Non	-Deriv	vatis	ze Securi	ties Ac	201	nired T	ici	nosed (of or F	Seneficially	v Owned			
				2. Tra	ans.		3. Trans. Code (Instr. 8)		(A) or Di (D) (Instr. 3,	spo 4 ar (A) or	sed of ad 5)	Followi	mount of Securities Beneficially Owned owing Reported Transaction(s) r. 3 and 4)				7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock 2/8					011		${\bf F}^{(1)}$		2712	D	\$49.92		13051 (2)			D	
Common Stock 2/1					2011		F (3)		161	D	\$49.48		12890			D	
Tab	ole II - De	rivati	ive Securi	ties Bo	enefi	icially O	wned (e.	g. , put	5, 0	alls, w	varrant	s, options	, convert	ible secur	ities)	
1. Title of Derivate Security (Instr. 3)	curity Conversion or Exercise Price of Derivative Security Security Security Conversion Trans. Deemed Execution Date, if any			Frans. Code Instr. 8)	Deriv Secu Acqu Disp	nired (A) or osed of (D) r. 3, 4 and	and Expiration Date				Securities Derivativ (Instr. 3 a	,	ing	8. Price of Derivative Security (Instr. 5)	of derivative Securities Beneficially Owned Following	Security: Direct (D) or Indirect (I) (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

- (1) Represents shares of common stock withheld by the Company for the payment of taxes due upon the vesting of restricted stock rights granted to the reporting person on February 8, 2008.
- (2) Includes 87 shares of common stock acquired by the reporting person under the Company's dividend reinvestment plan since the date of the reporting person's last Section 16 filing.
- (3) Represents shares of common stock withheld by the Company for the payment of taxes due upon the vesting of restricted stock rights granted to the reporting person on February 10, 2010.

Reporting Owners

Paparting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10%	Owner	Officer	Other			
GREENE GREGORY F								
11690 N.W. 105 STREET				EVP and CAO				
MIAMI, FL 33178								

Signatures

/s/ Julie A. Azuaje, by power of attorney

2/10/2011

** Signature of Reporting Person

Date

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

- * 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).

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 control number.