

## RYDER SYSTEM INC

# Reported by SANCHEZ ROBERT E

## FORM 4

(Statement of Changes in Beneficial Ownership)

# Filed 05/21/13 for the Period Ending 05/14/13

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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *				2. Issuer Name <b>and</b> Ticker or Trading Symbol							Symbol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
SANCHEZ ROBERT E				RYDER SYSTEM INC [ R ]													
(Last) (First) (Middle)					3. Date of Earliest Transaction (MM/DD/YYYY)							YYYY)	X _ Direc				0% Owner
11690 N.W. 105 STREET				5/14/2013								X Officer (give title below) Other (specify below) Chair, CEO and President					
				4. If Amendment, Date Original Filed (MM/DD/YYYY)								6. Individual or Joint/Group Filing (Check Applicable Line)					
MIAMI, FL 33178												_ X _ Form filed by One Reporting Person					
(City)	(State)		(Zip)											lled by One l ed by More ti			erson
		Tab	ole I - No	n-Der	ivati	ve Securi	ities A	cq	uired, l	Dis	posed	l of, or E	Beneficially	y Owned			
1.Title of Security (Instr. 3)				2. T Dat	Γrans. te	2A. Deemed Execution Date, if	3. Trans. Code (Instr. 8)		4. Securities Acquired (A) Disposed of (Instr. 3, 4 and		(D)		nt of Securities Beneficially collowing Reported Transaction(s) and 4)		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	
						any	Code	v	Amount	(A) or (D)						or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock				5/1	4/2013		G (1)	v	375	D	\$0.00		4894	4		D	
Common Stock				5/1	5/2013		G (1)	v	333	D	\$0.00		48618	(2)		D	
Common Stock													1558	1		I	By Ryder Employee Savings Plan
Common Stock													2642	ļ.		I	by Ryder Deferred Compensation Plan
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
1. Title of Derivate Security (Instr. 3)	Title of Derivate 2. 3. 3A. 4. courity Conversion Trans. Deemed Trans. sstr. 3) or Exercise Date Execution Code		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date			7. Title Securit Deriva (Instr.	e and Amou ties Underly tive Securit 3 and 4)	nt of ring y	8. Price of 9. Num Derivative of derivati (Instr. 5) Security (Instr. 5) Securiti Benefic Owned Followi Reporte Transac		Ownership Form of S Derivative Direct (D) g or Indirect I (I) (Instr. 4)				
				Code	March (A) Date Exercisable Date Title Amount or No Shares				Number of		(s) (Insti						

## **Explanation of Responses:**

- (1) Gifts to a charitable organization.
- (2) Includes 7 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.

#### **Reporting Owners**

Domontina Overnon Nama / Address	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
SANCHEZ ROBERT E 11690 N.W. 105 STREET MIAMI, FL 33178	X		Chair, CEO and President						

#### **Signatures**

/s/ Julie A. Azuaje by power of attorney

5/21/2013

\*\* 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.