

RYDER SYSTEM INC

Reported by **FUENTE DAVID I**

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 12/20/10 for the Period Ending 12/17/10

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

OMB APPROVAL OMB Number: 3235-0287 Expires: February 28, 2011 Estimated average burden hours per response... 0.5

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 *													5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
FUENTE DA	VID I			1	RYD	ER SY	STE	M	INC	[R	R]							
(Last) (First) (Middle)				3	3. Date of Earliest Transaction (MM/DD/YYYY)								X Director 10% Owner					
													Officer (give title below) Other (specify below)					
11690 N.W. 1	05 STR	EET	1				12/	17	<mark>//201</mark> 0				below)					
(Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)								6. Individual or Joint/Group Filing (Check Applicable Line)					
MIAMI, FL	33178																	
(City) (State) (Zip)					_ X								X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tab	ole I - Non-	Deri	vativ	e Securi	ties Ac	equ	uired, l	Disp	posed	l of, or l	Beneficially	y Owned				
1.Title of Security (Instr. 3)				2. Tr. Date		2A. Deemed Execution Date, if any	3. Trans. Code Acquired (Disposed of (Instr. 3, 4			d (A)	A) or Owned I f (D)		ant of Securities Beneficially Following Reported Transaction(s and 4)			6. Ownership Form: Direct (D)		Nature of direct eneficial wnership
							Code	v	Amount	(A) or (D)		e				or Indir (I) (Inst 4)		nstr. 4)
Common Stock 12				12/17	17/2010		A (1)		352	A	\$0.00	,	19517			D		
Common Stock													1602			I	D	y Ryder eferred ompensation an
Tal	ble II - De	erivati	ive Securit	ies B	enefi	cially O	wned (e.	g. , pu	ts, c	alls,	warran	ts, options	, convert	ible se	curitie	s)	
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		Execution C	ans. ode astr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date				Securiti Derivat	and Amor ies Underl tive Securi 3 and 4)	ying	8. Price of Derivative Security (Instr. 5) Securiti Benefic Owned Following Reporter		ve For Derivation of Idea (I)	nershi m of ivativ urity: ect (D ndirec	Beneficial Ownership (Instr. 4)
			Co	ode V	(A)	(D)	Date Expiration Date Title Amount or Shares		Number of	Transact (s) (Instr		1 ′						

Explanation of Responses:

(1) Grant of restricted stock units pursuant to the dividend reinvestment feature of the Issuer's 2005 Equity Compensation Plan.

Reporting Owners

reporting Owners										
Paparting Owner Name / Addre	20	Relationships								
Reporting Owner Name / Addre	Director	10% Owner	ips Officer	Other						
FUENTE DAVID I										
11690 N.W. 105 STREET	X									
MIAMI, FL 33178										

Signatures

/s/ David M. Beilin, by power of attorney

12/20/2010

^{**} Signature of Reporting Person

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.