

RYDER SYSTEM INC

Reported by **SMITH E FOLLIN**

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 05/06/08 for the Period Ending 05/02/08

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

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1. Name and Add	lress of Re	eporti	ng Persor	* 2. Issuer Nan RYDER S		uer ivaime	e and Ticker or Trading Symbol						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
SMITH E FO	LLIN				RYI	ER SY	STEM	IJ	INC [R]								
(Last) (First) (Middle)				3. Date of Earliest Transaction (MM/DD/YYYY)							YY)	X Director 10% Owner						
												Officer (give title below) Other (specify						
11690 N.W. 105 STREET					5/2/2008							belo	w)					
(Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)								6. Individual or Joint/Group Filing (Check Applicable Line)					
MIAMI, FL 3	33178																	
(City) (State) (Zip)													X _ Form filed by One Reporting Person Form filed by More than One Reporting Person					
													. 01111	ou oy 1,1010 t	nun one rep	<u> </u>		
		Tab	le I - No	n-De	rivativ	e Securi	ties Acq	ui	red, Di	spos	ed of	f, or Bene	eficiall	y Owned				
1.Title of Security (Instr. 3)					. Trans. Pate	2A. Deemed Execution Date, if	3. Trans. Code (Instr. 8)		4. Securi Acquired Disposed (Instr. 3,	(A) of (E	(A) or Follo		mount of Securities Beneficially Owned owing Reported Transaction(s) r. 3 and 4)			Ownership Form: Direct (D)	Beneficial Ownership	
						any	Code	v	Amount	(A) or (D)	Price					or Indirect (I) (Instr. 4)	(Instr. 4)	
Common Stock				5/	/2/2008		A (1)		1262	A	\$0.00		58	388 ⁽²⁾		D		
Tab	ole II - De	rivati	ive Secur	ities	Benefi	cially O	wned (e.	.g.	. , puts,	call	s, wa	arrants, o	ptions	, convert	ible secur	ities)		
1. Title of Derivate Security (Instr. 3)	2. 3 Conversion T or Exercise Price of Derivative Security 3		Deemed Execution	4. Trans. Code (Instr.	8) Deriv Secur Acqu Dispo		6. Date Exercisable and Expiration Date			Secu Deri	ırities	d Amount of Underlying Security ad 4)	ing Derivative	of derivative Securities Beneficially Owned Following Reported	Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	V (A)	(D) Date Exercisable Date Title Amount or Number of Shares			Transaction (s) (Instr. 4)	4)								

Explanation of Responses:

- (1) Annual grant of \$90,000 of restricted stock units pursuant to the Company's 2005 Equity Compensation Plan based on \$71.26 per share which was the average of the high and low sales price of the Company's common stock on May 2, 2008.
- (2) Includes 62 restricted stock units acquired by the reporting person pursuant to the dividend reinvestment feature of the Issuer's 2005 Equity Compensation Plan.

Reporting Owners

Panarting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10%	Owner	Officer	Other			
SMITH E FOLLIN								
11690 N.W. 105 STREET	X							
MIAMI, FL 33178								

Signatures

/s/ Flora R. Perez, by power of attorney

5/6/2008

^{**} 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.