FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burden									
l	hours per response:	0.5								

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Machas Evelina Vougessis						2. Issuer Name and Ticker or Trading Symbol HERTZ GLOBAL HOLDINGS, INC HTZ]									ck all app Direc	olicable) etor	ing Person(s) to		wner
(Last) (First) (Middle) 8501 WILLIAMS ROAD						3. Date of Earliest Transaction (Month/Day/Year) 05/17/2023									belov	er (give title v)		Other (s below)	specify
(Street) ESTERO FL 33928					4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)					Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to														
	sa	check this box to indicate that a transaction was made pursuant to a contract, instruction of written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. ive Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)					ion 2A. Deemed Execution Date			oate,	3. 4. Securities Acq Transaction Disposed Of (D) (5)					5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Code	v	Amount	(A) or (D)		Price	Report Transa			,			
Common	2023			A		10,703(1	(1) A \$0		\$ <mark>0</mark>	35,945			D						
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	eemed tion Date, h/Day/Year)	4. Transaction Code (Instr. 8) 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Expiration Date (Month/Day/Year)				7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Price of erivative ecurity estr. 5)		у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code V		(A)	(D)			Expiration Date	Title	Amou or Numl of Share	ber					

Explanation of Responses:

1. Represents the equity portion of the annual retainer granted to the reporting person on May 17, 2023, which vests in full on the earlier of the business day immediately preceding the date of the Company's next annual stockholder's meeting, or the date of such director's departure from the Board for any reason other than a termination for cause (if earlier). The restricted stock units are subject to deferral election and will settle within 30 days following the date on which the reporting person ceases to serve as a director.

Remarks:

Dane E. Allen, by Power of Attorney on behalf of Evelina 05/18/2023 Vougessis Machas

** 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 Number.