FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

,	Was	shing	ton,	D.C.	20549

STATEMENT	OF (CHANGES	IN BENEFICIA	AL.	OWNERSHIP
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OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

obligations may continue. See Instruction 1(b) 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* <u>Kuppuswamy Murali</u>						2. Issuer Name and Ticker or Trading Symbol HERTZ GLOBAL HOLDINGS, INC									Check	all app Dired	olicable) ctor	ng Perso	Person(s) to Issuer 10% Owner Other (specify	
(Last) (First) (Middle) 8501 WILLIAMS ROAD						3. Date of Earliest Transaction (Month/Day/Year) 03/02/2020										X Officer (give title below) EVP Chief Hum			below) an Resources Offi	
(Street) ESTERO			33928 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									i. Indivi ine) X					
		Tabl	e I - No	n-Deriv	ative	Se	curiti	es Acc	quired,	Dis	posed o	f, o	r Ben	efici	ally (Owne	ed			
Date				2. Transa Date (Month/I	n/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)				Disposed	ities Acquired (A) d Of (D) (Instr. 3, 4			l and Securi Benef Owner		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
										v	Amount		(A) or (D) Prid		Reported Transaction(s) (Instr. 3 and 4)		ction(s)			(Instr. 4)
Common Stock 03/02/					2/2020	2020		F		1,142(1)	D	\$0		25,390		I)		
Common Stock 03/02					2/2020	2020		A		19,153	(2)	A	A \$0		44,543		I)		
Common Stock 03/04					1/2020				A		7,529 ⁽³⁾		A	\$0		52,072		I)	
		Та									sed of, onvertib					ned				
Derivative Conversion Date Executive Security Or Exercise (Month/Day/Year) if any		3A. Deem Execution if any (Month/D	Date,	Code (8)	Transaction Code (Instr.		of Derivative (Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Date Exercisal Expiration Date Month/Day/Year		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of		ount nber	nt er		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Own For Dire or I (I) (I	nership m: ect (D) ndirect Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

- 1. Shares withheld to pay tax liabilities incident to the vesting of earned Performance Stock Units "(PSUs").
- 2. Includes 19,153 Restricted Stock Units, each of which represents a contingent right to receive one share of HTZ Common Stock, which will vest in equal installments on the first, second and third anniversaries of the grant date of March 2, 2020, subject to the continued employment of the Reporting Person by the Issuer or any subsidiary thereof through each such vesting date.
- 3. On March 4, 2019, the Reporting Person received 30,115 PSUs that vest on the third anniversary of the grant date, contingent upon (a) the recipient's continued employment and (b) achievement of financial performance goals (Adjusted Corporate EBITDA) for the 2019 performance period, the combined 2019 and 2020 performance period and the combined 2019, 2020 and 2021 performance period. Following certification of 2019 performance by the Compensation Committee on March 2, 2020, the Reporting Person earned 25% of the target award based on 2019 performance. The Reporting Person is eligible to earn 50% of the target award based on combined 2019 and 2020 performance and up to 150% based on combined 2019, 2020 and 2021 performance.

Remarks:

Albert K. Watson by Power of Attorney on behalf of Murali 03/04/2020

Kuppuswamy

** 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.