

Holt John  
Form 3  
May 16, 2011

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF 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(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â Holt John		(Month/Day/Year)	HERTZ GLOBAL HOLDINGS INC [HTZ]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
1211 STATE ROAD 436, STE 295			(Check all applicable)	
(Street)			___ Director	___ 10% Owner
			<u>X</u> Officer	___ Other
CASSELBERRY, Â FL Â 32707			(give title below)	(specify below)
(City)	(State)	(Zip)	Vice President	
				6. Individual or Joint/Group Filing(Check Applicable Line)
				<u>X</u> Form filed by One Reporting Person
				___ Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	17,805 <sup>(1)</sup>	D	Â

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

**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.**

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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## Edgar Filing: Holt John - Form 3

	Date Exercisable	Expiration Date		Amount or Number of Shares		or Indirect (I) (Instr. 5)	
Employee Stock Options (right to purchase)	Â (2)	05/31/2017	Common Stock	6,000	\$ 21.54	D	Â
Employee Stock Options (right to purchase)	Â (3)	03/12/2020	Common Stock	8,635	\$ 9.99	D	Â
Employee Stock Options	Â (4)	03/01/2021	Common Stock	7,911	\$ 14.6	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Holt John 1211 STATE ROAD 436, STE 295 CASSELBERRY, FL 32707	Â	Â	Â Vice President	Â

## Signatures

Stuart Geschwind, by Power of Attorney on behalf of John Holt 05/16/2011

\_\_Signature of Reporting Person

Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, *see* Instruction 5(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).
- (1) Includes 8662 of restricted stock units
- (2) The options were granted on May 31, 2007 and vested in 3 equal annual installments on the first through third anniversaries of the grant date. The options are now fully vested.
- (3) The options vest in 4 equal installments of 2159 shares, except that the first installment is for 2158 shares, on the first through fourth anniversaries of the grant date. The grant date was March 12, 2010.
- (4) The options vest in 4 equal installments of 1978 shares, except that the first installment is for 1977 shares, on the first through fourth anniversaries of the grant date. The grant date was March 1, 2011.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.