1. Name and Address of Reporting Person
Bruno Marc A
(C/O) UNITED RENTALS, INC.
100 FIRST STAMFORD PLACE, SUITE 700
STAMFORD CT 06902

2. Issuer Name and Ticker or Trading Symbol
UNITED RENTALS, INC. [ URI ]

3. Date of Earliest Transaction (Month/Day/Year)
09/30/2020

4. If Amendment, Date of Original Filed

5. Relationship of Reporting Person(s) to Issuer
X Director
10% Owner
Officer (give title below)
Other (specify below)

6. Individual or Joint/Group Filing (Check Applicable Line)
X Form filed by One Reporting Person
Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

<table>
<thead>
<tr>
<th>1. Title of Security (Instr. 3)</th>
<th>2. Transaction Date (Month/Day/Year)</th>
<th>3. Transaction Code (Instr. 8)</th>
<th>4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)</th>
<th>5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)</th>
<th>6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common Stock</td>
<td>09/30/2020</td>
<td>A</td>
<td>A</td>
<td>$174.5 (1)</td>
<td>3,943 D</td>
</tr>
</tbody>
</table>

Explanation of Responses:
1. Represents Phantom Stock Units acquired under the United Rentals, Inc. Deferred Compensation Plan for Directors. The Phantom Stock Units are deemed to be invested in shares of Common Stock (with each unit having the economic equivalent of one share).
2. The Common Stock represented by the Phantom Stock Units will be paid to the reporting person on a one-for-one basis on the first day of the month immediately following termination of the reporting person's service as a director.
3. Represents amount of deferred fees used to acquire one Phantom Stock Unit.

Remarks:
/s/ Alison M. Walsh, Attorney-in-fact 10/01/2020
** 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).
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 validOMB Number.