FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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| STATEMENT | OF CHAN | GES IN BEN | IEFICIAL O | WNERSHIP |
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| OMB APPRO | VAL |
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| OMB Number: | 3235-0287 |
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Check this box if no longer subject to Section 16. Form 4 or Form 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* HOOD ROBERT C | | | | | 2. Issuer Name and Ticker or Trading Symbol MCGRATH RENTCORP [MGRC] | | | | | | | | | ationship k all appli Directo | cable) | ıg Per | son(s) to Iss 10% Ov | | |
|-------------------------------------------------------------------------------------|-----------------------------------------------------------------------|--------------------------------------------|------------------------------------------------|-------------|-------------------------------------------------------------------------------|-------------------------------------------------------------|--------|-------------|-----------------------------------------------------------|-------------------------------------------------------|--------------------|----------------------------------------------------------------------------------------------|---------------------------------------|-------------------------------------|----------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-------------------------|--------------------------------------------------------------------------|--------------------------------------------------------------------|
| (Last) 5700 LA | (F S POSITA | , | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/26/2017 | | | | | | | Officer (give title Othe below) below | | | | | specify | |
| (Street) LIVERM (City) | | tate) | 94551 (Zip) | | - | | | | | | (Month/D | , , | L | ine) X | Form t Form t Persoi | iled by One iled by Moi 1 | e Rep | g (Check Ap orting Perso n One Repo | n |
| Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | saction | ction 2A. Deemed Execution Date, | | | 3. Trans | Transaction Disposed Of (D) (Instr. 3, 4) Code (Instr. 5) | | | red (A) o |) or 5. Amou Securiti Benefici Owned | | nt of es ally Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | |
| Common Stock 07 | | | | 07/20 | 6/2017 | /2017 | | Code | v | Amount | (A) or (D) Pr | | 0 | (Instr. 3 | Transaction(s) Instr. 3 and 4) | | D | (Instr. 4) | |
| | | 7 | able II - | | | | | | | | | , or Bei | | | wned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Day | Date, Trans | | iction Instr. | ı of E | | Expiration | Date Exercisable xpiration Date Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4) | | Di Si (li | 3. Price of Derivative Security Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4) | i (| 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | expiration Pate | Title | Amour or Number of Shares | r | | | | | |
| Restricted Stock Units | \$0 | 07/26/2017 | | | M | | | 1,400 | (2) | C | 3/02/2024 | Common | 1,400 | | \$0 | 1,800 | | D | |

Explanation of Responses:

- Common stock acquired is underlying RSU award.
- 2. The Board of Directors accelerated the vesting of the restricted stock units in connection with the Reporting Person's resignation from the Board of Directors on July 26, 2017.

<u>David M. Whitney, POA for</u> <u>Robert Hood</u>

07/28/2017

** 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.