FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | OMB APPRO | OVAL | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | |
| l | Estimated average burden | | | | | | | | |
| l | hours per response: | 0.5 | | | | | | | |

| | Check this box if no longer subject to |
|---|--|
| ١ | Section 16. Form 4 or Form 5 |
| J | obligations may continue. See |
| | Instruction 1(h) |

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 an EDSEL | 2. Issuer Name and Ticker or Trading Symbol H&E Equipment Services, Inc. [HEES] | | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | | | | |
|--|--|--|---|-----|---|--|---|--------------------|------------------------------------|--------------------------------------|---|--|---|-----------|---|--|---|---|--|--|
| | | | | | | | | | | | X | Direc | tor | 10% | Owner | | | | | |
| (Last) (First) (Middle) | | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/02/2013 | | | | | | | | | Office | er (give title v) | Other below | (specify) | |
| 11100 MEAD ROAD | | | | | | | 01/02/2013 | | | | | | | | | | | | | |
| SUITE 200 | | | | | | | | | | | | | | | | | | | | |
| | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | |
| (Street) | | | | | | | | | | | | | | ine) X | Form | Form filed by One Reporting Person | | | | |
| BATON | LA | | 70816 | | | | | | | | | | | | Λ | | , , , | | | |
| ROUGE | | , | 70010 | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | |
| (City) | (St | ate) (| (Zip) | | | | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | Execution (ay/Year) if any | | | cution Date, | | Transaction Disposed Code (Instr. 5) | | ties Acquired (A) d Of (D) (Instr. 3, 4 | | | 4 and Se Be Ov | | ount of ties cially d 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 | | Reported Transaction(s) (Instr. 3 and 4) | | | (111511.4) | |
| Common Stock, par value \$0.01 per share ⁽¹⁾ 01/02/ | | | | | | | 2013 | | A | | 2,542 | | A | \$15.74 | | 4 | 4,637 | D | | |
| | | Та | | | | | | | | | sed of, onvertib | | | | y Ov | vned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | | 4. Transaction Code (Instr. 8) | | | | 6. Date E Expiratio (Month/E | n Dat | e Amo Secu Und Deri Secu | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | | vative irity r. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | Code | | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | or Nur of | ount nber ares | | | | | | | | | |

Explanation of Responses:

1. Stock grant under the Company's 2006 Stock-Based Incentive Compensation Plan, as amended. The shares of stock vested immediately upon issuance.

Remarks:

/s/ W. Scott Bozzell Attorney-

in-Fact

01/03/2013

** 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.