

## U-HAUL HOLDING CO /NV/

# Reported by SHOEN MARK V

#### FORM 4

(Statement of Changes in Beneficial Ownership)

#### Filed 05/30/17 for the Period Ending 05/30/17

Address 5555 KIETZKE LANE STE 100

RENO, NV, 89511

Telephone 7756886300

CIK 0000004457

Symbol UHAL

SIC Code 7510 - Services-Auto Rental and Leasing (No Drivers)

Industry Ground Freight & Logistics

Sector Industrials

Fiscal Year 03/31





☐ Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 *  |            |         |                       | 2.   | 2. Issuer Name and Ticker or Trading Symbol  |                            |           |                                   |           |                    |  |                               | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)              |  |  |                                   |
|--|------------|---------|-----------------------|--|--|----------------------------|-----------|-----------------------------------|-----------|--------------------|--|-------------------------------|--|--|--|-----------------------------------|
| SHOEN MARK V   |            |         |                       |  | AMERCO /NV/ [ UHAL ]                         |                            |           |                                   |           |                    |  | Director                      |  | <b>X</b> 10%   | 6 Owner  |                                   |
| (Last) (First) (Middle)  |            |         |                       | 3.   | 3. Date of Earliest Transaction (MM/DD/YYYY) |                            |           |                                   |           |                    |  |                               | Officer (give title below) Other (specify below)                                     |  |  |                                   |
| 5555 KIETZKE LANE, SUITE 100   |            |         |                       |  | 5/30/2017                                    |                            |           |                                   |           |                    |  |                               |  |  |  |                                   |
|  | (Stree     | et)     |                       | 4.   | If An  | nendme                     | ent, Date | Origi                             | inal File | ed (MM/E           | D/YYY  | 7) 6. Individual of           | or Joint/G   | roup Filing  | (Check Appl  | icable Line)                      |
| RENO, NV 89511   |            |         |                       |  |  |                            |           |                                   |           |                    |  |                               | _X _ Form filed by One Reporting Person Form filed by More than One Reporting Person |  |  |                                   |
| (C   | ity) (Stat | e) (Zip | )                     |  |  |                            |           |                                   |           |                    |  |                               |  |  |  |                                   |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned                                   |            |         |                       |  |  |                            |           |                                   |           |                    |  |                               |  |  |  |                                   |
| 1. Title of Security (Instr. 3)  2. Trans. Da  |            |         | ns. Date              | te 2A. Deemed Execution Date, if any   |  | 3. Trans. Co<br>(Instr. 8) | ode       | 4. Secur<br>Dispose<br>(Instr. 3, | of (D)    | red (A) o          | 5. Amount of Securi<br>Following Reported<br>(Instr. 3 and 4)                              |                               |  |  | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership                |                                   |
|  |            |         |                       |  |  |                            | Code      | V                                 | Amount    | (A) or<br>(D)      | Price  |                               |  |  | or Indirect<br>(I) (Instr.<br>4)                                   | (Instr. 4)                        |
| Common Stock   |            |         | 5/30                  | 0/2017   |  |                            | P         |                                   | 2,000     | A                  | \$352.867  | 7                             |  | 2,000  | I  | Willow<br>Grove<br>Holdings<br>LP |
| Common Stock   |            |         |                       |  |  |                            |           |                                   |           |                    |  |                               |  | 22,416   | D  |                                   |
| Common Stock   |            |         |                       |  |  |                            |           |                                   |           |                    |  |                               |  | 4,616  | I  | ESOP<br>Trust<br>Fund             |
| Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |            |         |                       |  |  |                            |           |                                   |           |                    |  |                               |  |  |  |                                   |
|  |            |         | 4. Trans<br>(Instr. 8 | tr. 8) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) |  |                            |           | and Expiration Date So D (I       |           |                    | 7. Title and Amount of<br>Securities Underlying<br>Derivative Security<br>(Instr. 3 and 4) |                               | derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported           | Ownership<br>Form of<br>Derivative<br>Security:<br>Direct (D)<br>or Indirect | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |                                   |
|  |            |         |                       | Code   | V  | (A)                        | (D)       |                                   | ercisable | Expiration<br>Date |  | Amount or Number of<br>Shares |  | Transaction(s)<br>(Instr. 4)   | (I) (Instr.<br>4)  |                                   |

#### **Explanation of Responses:**

Reporting Owners

| reporting owners               |               |           |            |  |  |  |  |
|--------------------------------|---------------|-----------|------------|--|--|--|--|
| Paparting Owner Name / Address | Relationships |           |            |  |  |  |  |
| Reporting Owner Name / Address | Director      | 10% Owner | wnerOffice |  |  |  |  |
| SHOEN MARK V                   |               |           |            |  |  |  |  |
| 5555 KIETZKE LANE              |               | v         |            |  |  |  |  |
| SUITE 100                      |               | A         |            |  |  |  |  |
| RENO, NV 89511                 |               |           |            |  |  |  |  |

#### Signatures

/s/ Mark V. Shoen 5/30/2017

\*\*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 control number.