

U-HAUL HOLDING CO /NV/

Reported by SHOEN MARK V

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 08/24/09 for the Period Ending 08/21/09

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 1 A 1	d CT	D4:	. D ,	:	2	Icciie	r Nam	e and Tic	ker (or Tradia	na Symb	nol .	5 Relationshi	n of Reno	rting Perso	on(s) to Is	cuer
1. Name and Address of Reporting Person *					۷٠.	133UC	ı ınaıll	C and 11C	ACI (л Hauli	ng Symit	701		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
SHOEN MARK V						MEI	RCO	/NV/ [UH	AL]				,			
(Last) (First) (Middle)				3.]	Date	of Ear	liest Tran	sacti	on (MM/	DD/YYYY	7)		Director X 10% Owner				
(====)												X Officer (give title below) Other (specify below) VP,U-Haul Business Consultants					
1325 AIRMOTIVE WAY, SUITE 100							8/	21/2	2009			VP,U-Haul B	usiness C	onsultant	S		
(Street)				4.]	If An	nendm	ent, Date	Orig	inal File	ed (MM/D	D/YYY	Y) 6. Individual o	6. Individual or Joint/Group Filing (Check Applicable Line)				
RENO, NV 89502												X_Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)																	
			Tabl	e I - No	n-Dei	rivati	ive Sec	curities A	cqui	ired, Di	sposed o	of, or l	Beneficially Owne	ed			
1.Title of Security (Instr. 3) 2. Trans. Da			E	2A. Deemed Execution Date, if any		3. Trans. Code (Instr. 8)		4. Securit or Dispos (Instr. 3,		ed (A)	5. Amount of Securitie Following Reported Tr (Instr. 3 and 4)			Ownership Form:	7. Nature of Indirect Beneficial		
								Code	V	Amount	(A) or (D)	Price		0		Direct (D) or Indirect (I) (Instr. 4)	ect (Instr. 4)
Common Stock 8/21/20			8/21/200)9	8/21/2009		s		11013	D S	\$48.17	793439		I	Blackwater Investments, Inc.		
Common Stock													150	597		D	
Common Stock												41	40		I	ESOP Trust Fund	
Common Stock												2913884			I	MVS-028 Trust	
Common Stock											30000			I	SAC Holding Corporation		
	Ta	able II - l	Derivativ	e Secur	ities	Bene	ficiall	y Owned	(e.g	. , puts,	calls, w	arran	ts, options, conve	rtible sec	urities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	•	Execu	. Deemed ecution tte, if any		Acq Dis				6. Date Exercisable and Expiration Date		Securi Deriva	e and Amount of ties Underlying ative Security 3 and 4)	ying Derivative		Ownersh Form of Derivativ Security:	Beneficial Ownership (Instr. 4)
	Security				Code	v	(A)	(D)	Da Ex	nte ercisable	Expiration Date	Title	Amount or Number of Shares		Following Reported Transaction((Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	ct
		<u> </u>															

Explanation of Responses:

Reporting Owners

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Ow	ner	Officer	Other			
SHOEN MARK V 1325 AIRMOTIVE WAY SUITE 100 RENO, NV 89502		X	,	VP,U-Haul Business Consultants				

Signatures

Mark V. Shoen 8/22/2009
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.