

## U-HAUL HOLDING CO /NV/

# Reported by SHOEN MARK V

#### FORM 4

(Statement of Changes in Beneficial Ownership)

### Filed 11/19/09 for the Period Ending 11/16/09

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 37 1 4 1	11 0	' D	/: D	*		2 1	[cc114	r Nam	e <b>and</b> Tio	ber	or Tradi	na Sym	201	5 Relationshi	n of Reno	rting Pers	on(s) to I	cuer
1. Name and Address of Reporting Person *						۷. ا	issuc.	ı ı vaili	Canu II	ACI	or rraul	ng Sym	501		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
SHOEN MARK V						Al	MEI	RCO	/NV/ [	UE	IAL]				,			
(Last) (First) (Middle)				3. 1	Date	of Ear	liest Tran	sact	ion (MM	DD/YYY	Y)		Director X 10% Owner					
(====)													X Officer (give title below) Other (specify below)					
1325 AIRMOTIVE WAY, SUITE 100							11	/16	/2009			VP,U-Haul B	VP,U-Haul Business Consultants					
(Street)				4. 1	lf An	nendm	ent, Date	Ori	ginal Fil	ed (MM/I	DD/YYY	Y) 6. Individual of	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)																		
				Table	e I - No	n-Der	ivati	ive Se	curities A	cqu	iired, Di	sposed	of, or l	Beneficially Own	ed			
1.Title of Security (Instr. 3) 2. Trans. Date				Ex	2A. Deemed Execution Date, if any		3. Trans. Code (Instr. 8)		4. Securit Disposed (Instr. 3,		ed (A) or	5. Amount of Securiti Following Reported 7 (Instr. 3 and 4)	ies Beneficially Owned Γransaction(s)		Ownership 1	7. Nature of Indirect Beneficial		
									Code	V	Amount	(A) or (D)	Price				Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock			11/16/200	9 1	11/16/2009		s		33821	D \$	52.0699	73	731230		I	Blackwater Investments, Inc.		
Common Stock														15	0597		D	
Common Stock												4140			I	ESOP Trust Fund		
Common Stock													2913884			I	MVS-028 Trust	
Common Stock					30000			I	SAC Holding Corporation									
	1	Γable	II - Der	ivativ	e Secur	ities l	Bene	ficiall	y Owned	( e.	g. , puts	, calls, v	varran	ts, options, conve	rtible sec	urities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exerci Price of Derivativ	on I	Date Exec	Execut	BA. Deemed Execution Oate, if any		Ac Di:				. Date Exe expiration I		Securi Deriva	e and Amount of ties Underlying tive Security 3 and 4)	Derivative Security	Securities Beneficially Owned	Ownersh Form of Derivativ Security	Beneficial Ownership (Instr. 4)
	Security					Code	v	(A)	(D)		oate xercisable	Expiration Date		Amount or Number of Shares		Following Reported Transaction (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	ct

#### **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 11/19/2009

\*\*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.