

U-HAUL HOLDING CO /NV/ Reported by DE RESPINO LAURENCE J

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 03/12/12 for the Period Ending 03/09/12

Address	5555 KIETZKE LANE STE 100
	RENO, NV, 89511
Telephone	7756886300
CIK	000004457
Symbol	UHAL
SIC Code	7510 - Services-Auto Rental and Leasing (No Drivers)
Industry	Ground Freight & Logistics
Sector	Industrials
Fiscal Year	03/31

Powered By EDGAR Online

https://www.edgar-online.com

© Copyright 2025, EDGAR Online LLC, a subsidiary of OTC Markets Group. All Rights Reserved. Distribution and use of this document restricted under EDGAR Online LLC, a subsidiary of OTC Markets Group, Terms of Use.

[] 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

OMB APPROVAL OMB Number: 3235-0287 Expires: November 30, 2011 Estimated average burden hours per response... 0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP hours per response... 0.5 OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(f) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *			2. Is	2. Issuer Name and Ticker or Trading Symbol 5. Relatio (Check al											Person(s)	to Issuer		
De Respino I	Laurence	e J			AN	AERCO	/NV	/[UHA	L]							
(Last) (First) (Middle)					3. D	3. Date of Earliest Transaction (MM/DD/YYYY)								Director 10% Owner Officer (give title below)X Other (specify				
1325 AIRMO 100)TIVE V	VAY	', SUITE]			3	/9	/2012	2				^{below)} General (Counsel			
(Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)							6. Individual or Joint/Group Filing (Check Applicable Line)						
RENO, NV 8 (City)	89502 (State)	,	(Zip)													Reporting Pe han One Rep		n
		Tal	ole I - Non	-Der	rivat	tive Secur	rities A	Acc	quired	, Dis	spo	osed o	of, or I			•	<u></u>	
1.Title of Security (Instr. 3)		2. T Dat	Γrans. te		3. Trans. Code (Instr. 8)		4. Securities (A) or Dispos (Instr. 3, 4 an		sed of (D) Follov		nount of Securities Beneficially Owned wing Reported Transaction(s) . 3 and 4)			Form:	7. Nature of Indirect Beneficial Ownership			
						any	Code	v	Amour	(A or nt (D	r	Price						
Common Stock				3/9	9/2012	2 3/9/2012	s		200.000	00 D	\$	5109.33		20	0.0000		D	
Common Stock														63	8.0000		I	ESOP Trust Fund
Ta	ble II - De	erivat	ive Securit	ties]	Bene	eficially C)wned	. (e	<i>e.g.</i> , p	uts,	ca	ills, wa	arran	ts, options	, convert	ible secur	ities)	
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		Execution C	l. Trans. Code Instr. 8	8) Aco Dis	Number of crivative curities cquired (A) or sposed of (D) astr. 3, 4 and	and E	6. Date Exercisable and Expiration Date			7. Title and Amou Securities Underly Derivative Securit (Instr. 3 and 4)			ying ty	8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned Following Reported	Form of Derivative Security: Direct (D) or Indirect (I) (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Code			Code	V (4	A) (D)	Date Exercisable		Expin ble Date	ation	Title Amount or M Shares		Number of	Transaction (s) (Instr. 4)		4)		

Explanation of Responses:

Reporting Owners

Reporting Owner Name / Addres	Relationships									
Reporting Owner Name / Address	Director	10% Owner	Officer	Other						
De Respino Laurence J 1325 AIRMOTIVE WAY SUITE 100 RENO, NV 89502				General Counsel						

Signatures

/s/ Laurence J. De Respino

** Signature of Reporting Person

3/12/2012

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.