

# U-HAUL HOLDING CO /NV/

Reported by  
**SHANK ROBERTA ROBERTS**

## FORM 3

(Initial Statement of Beneficial Ownership)

Filed 10/31/16 for the Period Ending 08/25/16

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

# FORM 3

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

OMB APPROVAL  
OMB Number: 3235-0104  
Estimated average burden  
hours per response... 0.5

### INITIAL STATEMENT OF 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 * <b>Shank Roberta Roberts</b>	2. Date of Event Requiring Statement (MM/DD/YYYY) <b>8/25/2016</b>	3. Issuer Name and Ticker or Trading Symbol <b>AMERCO /NV/ [UHAL]</b>
(Last) (First) (Middle) <b>5555 KIETZKE LANE, SUITE 100</b>	4. Relationship of Reporting Person(s) to Issuer (Check all applicable)  ____ Director ____ 10% Owner ____ Officer (give title below) <input checked="" type="checkbox"/> Other (specify below) <b>/ Advisory Board Member</b>	
(Street) <b>RENO, NV 89511</b>	5. If Amendment, Date Original Filed (MM/DD/YYYY)	6. Individual or Joint/Group Filing (Check Applicable Line)  <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person
(City) (State) (Zip)		

#### Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
------------------------------------	---	--	--

#### Table II - Derivative Securities Beneficially Owned ( e.g. , puts, calls, warrants, options, convertible securities)

1. Title of Derivate Security (Instr. 4)	2. Date Exercisable and Expiration Date (MM/DD/YYYY)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

#### Explanation of Responses:

#### Remarks:

poarobertashank.txt

No securities are beneficially owned.

#### Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
<b>Shank Roberta Roberts</b> <b>5555 KIETZKE LANE</b> <b>SUITE 100</b> <b>RENO, NV 89511</b>				<b>Advisory Board Member</b>

#### Signatures

/s/ **Roberta R. Shank**

**10/31/2016**

\*\*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 5(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.

## LIMITED POWER OF ATTORNEY FOR SECTION 16(a) REPORTING

KNOW ALL PERSONS BY THESE PRESENTS, that the undersigned hereby makes, constitutes and appoints Jennifer M. Settles, Raphael Avraham and Ken White, each in their capacity as an employee of U-Haul International, Inc., and each of them, as the undersigned's true and lawful attorney-in-fact (the "Attorney-in-Fact"), with full power of substitution and resubstitution, each with the power to act alone for the undersigned and in the undersigned's name, place and stead, in any and all capacities to:

1. prepare, execute and file with the Securities and Exchange Commission, any national securities exchange or securities quotation system and AMERCO (the "Company") any and all reports (including any amendment thereto) of the undersigned required or considered advisable under Section 16(a) of the Securities Exchange Act of 1934, as amended (the "Exchange Act") and the rules and regulations thereunder, with respect to the equity securities of the Company, including Forms 3, 4 and 5; and
2. obtain, as the undersigned's representative and on the undersigned's behalf, information regarding transactions in the Company's equity securities from any third party, including the Company and any brokers, dealers, employee benefit plan administrators and trustees, and the undersigned hereby authorizes any such third party to release any such information to the foregoing Attorney-in-Fact.

The undersigned acknowledges that:

1. this Limited Power of Attorney authorizes, but does not require, the Attorney-in-Fact to act at his or her discretion on information provided to such Attorney? in-Fact without independent verification of such information;
2. any documents prepared or executed by the Attorney-in-Fact on behalf of the undersigned pursuant to this Limited Power of Attorney will be in such form and will contain such information as the Attorney-in-Fact, in his or her discretion, deems necessary or desirable;
3. neither the Company nor the Attorney-in-Fact assumes any liability for the undersigned's responsibility to comply with the requirements of Section 16 of the Exchange Act, any liability of the undersigned for any failure to comply with such requirements, or any liability of the undersigned for disgorgement of profits under Section 16(b) of the Exchange Act; and
4. this Limited Power of Attorney does not relieve the undersigned from responsibility for compliance with the undersigned's obligations under Section 16 of the Exchange Act, including, without, limitation, the reporting requirements under Section 16(a) of the Exchange Act.

The undersigned hereby grants to the Attorney-in-Fact full power and authority to do and perform each and every act and thing requisite, necessary or convenient to be done in connection with the foregoing, as fully, to all intents and purposes, as the undersigned might or could do in person, hereby ratifying and confirming all that the Attorney-in-Fact, or his or her substitute or substitutes, shall lawfully do or cause to be done by authority of this Limited Power of Attorney.

This Limited Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 4 or 5 with respect to the undersigned's transactions in equity securities of the Company, unless earlier revoked by the undersigned in a signed writing delivered to the Attorney-in-Fact, in the undersigned's sole discretion.

This Limited Power of Attorney shall be governed and construed in accordance the laws of the State of Arizona without regard to conflict-of-law principles.

IN WITNESS WHEREOF, I, the undersigned have executed this Limited Power of Attorney as of June 21st, 2016, and, being first duly sworn, do declare to the undersigned authority that I sign and execute this instrument as my Limited Power of Attorney and that I sign it willingly, or willingly direct another to sign for me, that I execute it as my free and voluntary act for the purposes expressed in the Limited Power of Attorney above, and that I am eighteen years of age or older, of sound mind and under no constraint or undue influence.

*Signature: /s/ Roberta R. Shank*  
*Print Name: Roberta R. Shank*

### WITNESS:

I, Laurie Thomas, the witness identified below, sign my name to the foregoing Limited Power of Attorney being first duly sworn and do declare to the undersigned authority that the Principal signs and executes this instrument as the Principal's Limited Power of Attorney and that the Principal signs it willingly, or willingly directs another to sign for the principal, and that I, in the presence and hearing of the Principal, sign this Limited Power of Attorney as witness to the Principal's signing and that to the best of my knowledge the Principal is eighteen years of age or older, of sound mind and under no constraint or undue influence.

*/s/ Laurie Thomas*  
*Witness*

### NOTARY:

STATE OF Arizona )  
)  
COUNTY OF Maricopa)

This instrument was acknowledged before me on June 21st, 2016 by Roberta R. Shank, as Principal, and Laurie Thomas as Witness, under the foregoing Limited Power of Attorney.

*/s/ Riannon Bornemisza*  
*NOTARY PUBLIC*

*My commission expires: 2/28/2019*