FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

## ENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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*  Kirk Spencer						2. Issuer Name and Ticker or Trading Symbol  Extra Space Storage Inc. [ EXR ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Kirk Spencer														X	Dire	ctor	10% (	Owner	
,		rst) (	Middle)		_									X		er (give title		(specify	
(Last)		3. Date of Earliest Transaction (Month/Day/Year)										below) below)		)					
2795 EAST COTTONWOOD PARKWAY				10/	10/03/2016							Chief Executive Officer							
SUITE 400																			
		-																	
(Street)					4. 11	Amen	Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)					
SALT LA	KE	г (	14171											X	Forn	Form filed by One Reporting Person			
CITY	U'	1 6	84121											- 11	Form filed by More than One Reporting				
					-										Person				
(City)	(Si	tate) (	Zip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Date			2. Transaction Date (Month/Day/Yea		Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			nd 5)	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
						(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ti ii Day	reary	0,			(1)				ted	(1) (1113111 4)	(Instr. 4)	
									Code	۷	Amount	(A) oi (D)	Price	•		saction(s) r. 3 and 4)			
Common Stock				10/03/2			S		20,000(1)	D	\$78	\$78.2582		132,276	I	Krispen Family Holdings L.C. <sup>(2)</sup>			
Common Stock																34,430	D		
Common Stock															123,215		I	The Kirk 101 Trust <sup>(3)</sup>	
		Ta	ble II	- Derivat	tive S	ecur	ities	Acaı	iired.	Disp	osed of,	or Ber	neficia	ıllv Oı	vned				
											convertib								
Derivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any					nsaction de (Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		rative rities ired r osed )	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)				9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares								

## **Explanation of Responses:**

- $1. \ Sale\ occurred\ pursuant\ to\ a\ 10b5-1\ plan\ entered\ into\ by\ the\ reporting\ person\ on\ November\ 3,\ 2014.$
- 2. The reporting person disclaims beneficial ownership in the common stock held by Krispen Family Holdings, L.C., except to the extent of his pecuniary interest therein.
- 3. The reporting person disclaims beneficial ownership in the common stock held by The Kirk 101 Trust, except to the extent of his pecuniary interest therein.

Grace Kunde - attorney in fact 10/03/2016

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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 Number.