SEC Form 4	
FORM	4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average	burden							

Estimated average burden hours per response: 0.5

	fy the affirmative ons of Rule 10b5- ction 10.								
1. Name and Addre	ess of Reporting Pers	on [*]	2. Issuer Name and Ticker or Trading Symbol Extra Space Storage Inc. [EXR]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
	<u>-</u>	ulle 10b5- Reporting Person* 2. Issuer Name and Ticker or Trading Symbol Extra Space Storage Inc. [EXTR Director 10% Owner Officer (give title Officer (give title		10% Owner Other (specify					
(Last) 2795 EAST CO	(First) TTONWOOD PA	. ,			below)	below)			
SUITE 300									
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)		idual or Joint/Group Filing	(Check Applicable			
SALT LAKE				1	Form filed by One Repo	orting Person			
CITY	UT 84121					One Reporting			
(City)	(State)	(Zip)							

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)					5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	12/12/2024		G		6,775	D	\$ <u>0</u>	637,591	Ι	Krispen Family Holdings L.C. ⁽¹⁾
Common Stock								126,516	D	
Common Stock								161,215	Ι	The Kirk 101 Trust ⁽²⁾
Common Stock								17,500	Ι	Spenco Irrevocable Trust ⁽³⁾

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

			\ U 1	•				• •				•			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		of Deriv Secu Acqu (A) o Dispe	r osed) r. 3, 4	6. Date Exerc Expiration Da (Month/Day/Y	ate	Deriv	unt of rities rlying ative rity (Instr.	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. 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.

2. 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.

3. The reporting person disclaims beneficial ownership in the common stock held by Spenco Irrevocable Trust, except to the extent of his pecuniary interest therein.

Remarks:

/s/ Grace Kunde, Attorney-in-Fact <u>12/16/2024</u>

** 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 Number.