#### Edgar Filing: Extra Space Storage Inc. - Form 4

Extra Space S	Storage Inc.											
Form 4												
April 03, 200	7											
FORM	FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION							r	PPROVAL			
Washington, D.C. 20549						COMMISSION	OMB Number:	3235-0287				
Check this box if no longer subject to STATEMENT O									Expires:	January 31, 2005		
			F CHAN			CIAI	LOW	NERSHIP OF	Estimated a	Estimated average		
Section 16		SECURITIES							burden hours per			
Form 4 or Form 5		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,						response	0.5			
obligation	· ·						•	f 1935 or Sectio	'n			
may conti	nue.		of the In	•					11			
See Instru 1(b).	ction	50(11)	, or the m	vestment	company	1100	01 17					
(Print or Type R	esponses)											
1 37 14	11 (1) (1)	<b>D</b> *						5 5 1 1. /				
	ddress of Reportii Kent	ng Person _		2. Issuer Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
Christensen Kent			•	Symbol								
			•	Extra Space Storage Inc. [EXR]					(Check all applicable)			
(Last) (First) (Middle) 2795 EAST COTTONWOOD			3. Date of Earliest Transaction (Month/Day/Year) 02/21/2007					<b>D</b>	100			
								Director 10% Owner X Officer (give title Other (specify				
PARKWAY		OD	02/21/20	507				below)	below)			
									utive VP & CF			
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
SALTLAKI	E CITY, UT 84	4121						Form filed by M	More than One Re			
								Person				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecurit	ties Acq	quired, Disposed of	f, or Beneficial	lly Owned		
1.Title of	2. Transaction D	Date 2A. Dee	1					5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Ye		on Date, if Transaction(A) or Disposed of					Securities	Form: Direct			
(Instr. 3)		any (Month/	Code (D) Day/Year) (Instr. 8) (Instr. 3, 4 and 5)				5)	· · ·	(D) or Indirect (I)	(I) Ownership		
		(		(	(		- /	Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported Transaction(s)				
						or		(Instr. 3 and 4)				
Common				Code V	Amount	(D)	Price	(				
Common Stock	02/21/2007			А	10,000	А	<u>(1)</u>	151,777	D			
SIUCK												

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

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.

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

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. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)8(Instr. 3 and 4)(Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Options	\$ 19.91	02/21/2007		А	50,000	(2)	02/21/2017	Common Stock	50,000

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## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships					
	Director	10% Owner	Officer	Other		
Christensen Kent						
2795 EAST COTTONWOOD PARKWAY			Executive			
SUITE 400			VP & CFO			
SALT LAKE CITY, UT 84121						
0'						

## Signatures

Kent W. Christensen 03/30/2007

<u>\*\*</u>Signature of Reporting Person Date

# **Explanation of Responses:**

- \* 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).
- (1) Grant of restricted common stock under stock compensation plan. No purchase price.
- (2) Options are exercisable ratably over four yearsbeginning on the first anniversary of the date of grant.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.