IRON MOUNTAIN INC Form 4

July 21, 2014

# 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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP 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(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \* RYAN VINCENT J

(First) (Middle) (Last)

C/O SCHOONER CAPITAL, 60 **SOUTH STREET, SUITE 1120** 

(Street)

(Month/Day/Year)

2. Issuer Name and Ticker or Trading Symbol

IRON MOUNTAIN INC [IRM]

3. Date of Earliest Transaction (Month/Day/Year)

07/17/2014

4. If Amendment, Date Original

Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

**OMB** 

Number:

Expires:

response...

Estimated average

burden hours per

(Check all applicable)

X\_ Director 10% Owner Other (specify Officer (give title below)

6. Individual or Joint/Group Filing(Check Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

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

BOSTON, MA 02111

Security

(Instr. 3)

(City) (State) (Zip) 1.Title of 2. Transaction Date 2A. Deemed

3. 4. Securities Execution Date, if

(Month/Day/Year) (Instr. 8)

TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5)

(A)

Code V Amount (D) Price

or

Beneficially Owned Following Reported Transaction(s)

(Instr. 3 and 4)

Securities

5. Amount of 6. Ownership Form: Direct (I)

7. Nature of Indirect (D) or Indirect Beneficial Ownership

(Instr. 4) (Instr. 4)

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

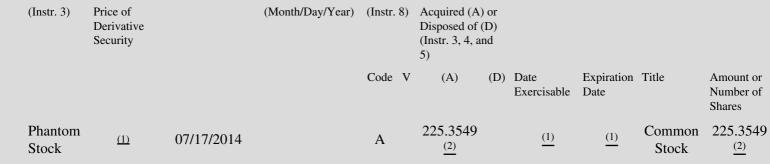
1. Title of 3. Transaction Date 3A. Deemed Derivative Conversion (Month/Day/Year) Execution Date, if Security or Exercise any

5. Number of TransactionDerivative Code Securities

6. Date Exercisable and **Expiration Date** (Month/Day/Year)

7. Title and Amount of **Underlying Securities** (Instr. 3 and 4)

### Edgar Filing: IRON MOUNTAIN INC - Form 4



### **Reporting Owners**

Reporting Owner Name / Address

Director 10% Owner Officer Other

RYAN VINCENT J

C/O SCHOONER CAPITAL
60 SOUTH STREET, SUITE 1120

BOSTON, MA 02111

## **Signatures**

/s/ Sarah Cammarata, under Power of Attorney dated September 16, 2010 from Vincent J. Ryan

07/21/2014

\*\*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).
- Pursuant to the Reporting Person's election to participate in the Iron Mountain Incorporated Directors Deferred Compensation Plan, the shares of phantom stock (the "Phantom Shares") will become payable in shares of Iron Mountain Incorporated common stock following the Reporting Person's disability or cessation of service as a director. Each Phantom Share is the economic equivalent of one share of common stock.
- (2) These shares give effect to dividends paid on common stock as if reinvested in Phantom Shares.

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.

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