### Edgar Filing: HALVORSEN KRIS - Form 4

HALVORSEN K Form 4	RIS									
October 04, 2018	3									
FORM 4		~~	a= a= 1			~~~			PPROVAL	
	UNITED	STATES		RITIES A shington			E COMMISSIO	N OMB Number:	3235-0287	
Check this boy if no longer subject to Section 16. Form 4 or Form 5 obligations may continue.	<b>MENT OF</b> rsuant to S (a) of the I	Section 1 Public U	SECUI 6(a) of th ftility Hol	Estimated burden hou response	urs per					
See Instruction 1(b).	1	30(h)	of the Ir	ivestmen	t Compai	ny Act of 1	1940			
(Print or Type Respo	onses)									
1. Name and Address of Reporting Person <u>*</u> HALVORSEN KRIS			2. Issuer Name <b>and</b> Ticker or Trading Symbol IRON MOUNTAIN INC [IRM]				5. Relationship of Reporting Person(s) to Issuer			
(Last)							(Che	eck all applicabl	k all applicable)	
11 MCINNIS PARKWAY			<ul><li>3. Date of Earliest Transaction</li><li>(Month/Day/Year)</li><li>10/02/2018</li></ul>				X_ Director10% Owner Officer (give titleOther (specify below)Other (specify			
	4. If Amendment, Date Original Filed(Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>					
SAN RAFAEL,	CA 94903						Person	More than One R	eporting	
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned	
	ansaction Date nth/Day/Year)	2A. Deema Execution any (Month/Da	Date, if	Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3, -	(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder: Report or	n a separate line	e for each cla	ass of sec	urities bene	ficially ow	ned directly	or indirectly.			
					inforr requi	nation con red to resp ays a curre	spond to the colle tained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionDerivative		Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired (A) or		

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	Derivative Security				Disposed of (Instr. 3, 4, a) 5)					
			Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Phantom Stock	<u>(1)</u>	10/02/2018	А		403.3149 (2)		(1)	<u>(1)</u>	Common Stock	403.3149 (2)
Repor	ting Ow	ners								

Officer Other

Reporting Owner Name / Address	

Relationships

	Director	10% Owner	
HALVORSEN KRIS			
11 MCINNIS DADEWAV	V		

11 MCINNIS PARKWAY SAN RAFAEL, CA 94903

## Signatures

/s/ Elizabeth Tammaro, under Power of Attorney dated May 26, 2016, from Per-Kristian 10/04/2018 Halvorsen

\*\*Signature of Reporting Person

### **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 "Plan"), the shares of phantom stock (the "Phantom Shares") will become payable in shares of Iron Mountain

- (1) Fran (the Fran ), the shares of phantom stock (the Frantom shares ) will become payable in shares of non-Mountain Incorporated common stock ("Common Stock") on various dates selected by the Reporting Person or as otherwise provided in the Plan. 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.

Date