Form **8937**

(December 2011)
Department of the Treasury
Internal Revenue Service

Report of Organizational Actions Affecting Basis of Securities

➤ See separate instructions.

OMB No. 1545-2224

Parti	Reporting	Issuer			
1 Issuer's n	ame		.,,,,,,,		2 Issuer's employer identification number (EIN)
SMARTSTOP	SELF STOR	AGE, INC.			20.0011001
3 Name of	contact for ad-	ditional information	4 Telephone No. of contact		32-0211624 5 Email address of contact
BRIAN SHEP				801-365-4483	BSHEPPARD@EXTRASPACE.COM
o Number a	ina street (or F	O, box if mail is not	delivered to	street address) of contact	· 7 City, lown, or post office, state, and Zip code of contact
2795 E. COTT	ու որդատո	(WV #400		•	
8 Date of ac		(11) 4-400	9 Class	ification and description	SALT LAKE CITY, UT 84121
Monthly Distr				N STOCK DISTRIBUTIONS	
10 CUSIP nu	imber	11 Serial number(s	s)	12 Ticker symbol	13 Account number(s)
86277	W104	N/A		N/A	
			h additional		e back of form for additional questions.
	e the organiza	tional action and, if a	oplicable, the	date of the action or the date	e against which shareholders' ownership is measured for
the actio	□ SmartS	ton Solf Storage In	o poid top (1	A) distributions to at a section	against which shareholders, ownership is measured for
naid on the fo	Unulna data	op sen storage, in	c, paro ten (1	o) distributions to sharehol	ders during 2015. The distributions were
paid on the ic	mownig uate:	5; U1/19/15, UZ/17/1	5, 03/16/15, 0	4/15/15, 05/15/15, 06/15/15, (07/15/15, 08/17/15, 09/15/15 and 10/15/15.
Cuand Cham Ca	If Others the				
SmartStop Se	ur Storage, tn	c, paid a liquidating	i capital gain	distribution on 10/01/15.	

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		u.,	-w	· · · · · · · · · · · · · · · · · · ·	
15 Describe	the quantitati	ve effect of the orga	nizational acti	on on the basis of the securit	y in the hands of a U.S. taxpayer as an adjustment per
strare or	as a percenta	ge of old basis 🕨 <u>Th</u>	e Company i	oald ten (10) monthly distrib	outions, each at \$0,001917808 per day per share on
he outstandir	ig shares of d	common stock thro	ugh Septemb	per 2015. The percentage of	f nondividend cash distribution (return of capital)
s 67.013028%	of the total n	nonthly cash distrit	ution receiv	ed.	total vice in distribution (retain or capital)
The Company	paid a liquid	ating capital gain di	stribution at	\$13.75 per share on outsta	nding shares of common stock as of October 1, 2015.
The percentag	re of liquidati	na canital gain dist	ibution le 63	549476% of the each distri	bution received. The percentage of nonliquidating
eanltal gain di	etribution ic	AG AE1E2AOC of the	TOURIOTTIS 93	.346476% Of the Cash distri	button received. The percentage of nonliquidating
apriai gain di	Stripution is	46.451524% of the c	asn distribu	non received.	
·				k	
				1	Management of the second of th
			74		
6 Describe	the calculatio	n of the change in ba	sis and the d	ata that supports the calculat	tion, such as the market values of securities and the
valuation	dates ► The	Company calculate	d arminae a	ad profite in accordance will	the contract of the contract values of securities and the
ar a Dool Eate	to incompany	t Thurst	n earnings a	id profits in accordance wil	th IRC Section 312, as modified by IRC Section 857(d)
or a rear csta	<u>ste mvestmen</u>	t Trust, and the reg	ulations ther	eunder. The amount of dis	tributions in excess of earnings and profits reduce the
tocknoiders.	Dasis in its si	nare to the extent o	basis.		
·	<u> </u>	——————————————————————————————————————	· · · · · · · · · · · · · · · · · · ·		
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or Donomusel	- D A	-3.44 **			

	Organizational Action (continued)	,
17	List the applicable internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based > IRC Section(s)	tion 301(c)(2)
		•
·		-
18	Can any resulting loss be recognized? ► No tax loss is recognized	
,		
	THE COLOREST ACTIONS	ADE ECCEPTIVE
19 <u>ON</u>	Provide any other information necessary to implement the adjustment, such as the reportable tax year ► THESE ACTIONS THE DATES OF DISTRIBUTION IDENTIFIED ABOVE.	ARE LITEORIE
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•		
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any kind.	est of my knowledge and nowledge.
Sig	gn k $a = k$ k k k k k k k k k	6
He	Signature Signature Date A Dat	
	Print your name ► BRIAN SHEPPARD Title ► VICE PRESIDENT OF Check [1] Print/Type preparer's name Preparer's skinature Output Check [1]	FTAX.
Pr	eparer GREGG BLOOMBERG Self-employ	
	Se Uniy Firm's address > 1900 AVENUE OF THE STARS 28TH FLOOR, LOS ANGELES, CA 90067 Phone no.	310-843-9700
Sei	nd Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 842	01-0034

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