Edgar Filing: RYAN VINCENT J - Form 4

Form 4	ĽJ								
January 10, 2013									
FORM 4	INUTED		CECU	DITIES				N.T.	PPROVAL
		STATES		shington			E COMMISSIO	N OMB Number:	3235-0287
Check this box if no longer								Expires:	January 31, 2005
subject to Section 16. Form 4 or	STATEN	1ENT OI	F CHAN		BENEF RITIES	ICIAL O	WNERSHIP OI	Estimated burden hou response	average urs per
Form 5 obligations may continue. <i>See</i> Instruction 1(b).	·	a) of the l	Public U	tility Ho	ding Co		nge Act of 1934, c of 1935 or Secti 1940		
(Print or Type Respon	nses)								
1. Name and Address RYAN VINCEN		Person <u>*</u>	Symbol	er Name an MOUNT.			5. Relationship Issuer		
(Last) (First) (1	Middle)		of Earliest T			(Che	eck all applicabl	e)
C/O SCHOONE	R CAPITAL			Day/Year)	Tunbuotion		X_ Director Officer (giv below)		% Owner ner (specify
	Street)			endment, D onth/Day/Yea	-	al		Joint/Group Fili y One Reporting P More than One R	erson
BOSTON, MA 0	2111						Person	whole than one R	eporting
(City) (State)	(Zip)	Tab	le I - Non-	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned
	nsaction Date th/Day/Year)	2A. Deeme Execution any (Month/Da	Date, if	Code (Instr. 8)	4. Securi mAcquired Disposed (Instr. 3, Amount	(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 on	a separate line	e for each cl	ass of sec				or indirectly.		
					Perso inforr requi	ons who res nation con red to resp ays a curre	spond to the collect tained in this forn ond unless the fo ntly valid OMB co	n are not orm	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	8
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities	D
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	S

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Acquired (A Disposed o (Instr. 3, 4, 5)	f (D)					(1
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock	<u>(1)</u>	01/08/2013		А	649.235		<u>(1)</u>	(1)	Common Stock	649.235	(1)
Phantom Stock	<u>(1)</u>	01/08/2013		А	0.525		<u>(1)</u>	(1)	Common Stock	0.525	

Reporting Owners

Director 10% Owner Officer Other RYAN VINCENT J C/O SCHOONER CAPITAL 745 ATLANTIC AVENUE BOSTON, MA 02111	Reporting Owner Name / Address				
C/O SCHOONER CAPITAL 745 ATLANTIC AVENUE X		Director	10% Owner	Officer	Other
	C/O SCHOONER CAPITAL 745 ATLANTIC AVENUE	Х			

Signatures

/s/ Sarah Cammarata, under Power of Attorney dated September 16, 2010 from Vincent J. 01/10/2013 Ryan

**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 Mr. Ryan's election to participate in the Iron Mountain Incorporated Directors Deferred Compensation Plan, the shares of
 (1) phantom stock become payable in shares of common stock following Mr. Ryan's disability or cessation of service as a director. Each share of phantom stock is the economic equivalent of one share of common stock.

Includes 0.412 shares of phantom stock owned by the Reporting Person and not previously reported as a result of an administrative error
 (2) just corrected by New York Life Investment Management LLC, the record-keeper for the Iron Mountain Incorporated Directors Deferred Compensation Plan.

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