FORM D

PROCESSED

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THOMSON FINANCIAL UNITED STATES

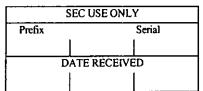
SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

1413528

OMB APPROVAL						
OMB Number:	3235-0076					
Expires:	April 30, 2008					
Estimated average burd	en ,					
hours per response	16.00					



Name of Offering ([] check if this is an amendment and name has changed, and indicate change.) Class A and B Shares in SW Stor-N-Lock #24	
Filing Under (Check box(es) that apply): [] Rule 504 [] Rule 505 [X] Rule 506 [] Section 4(6) [] ULOE Type of Filing: [X] New Filing [] Amendment	RECEIVED
A. BASIC IDENTIFICATION DATA	/3/ V/
Enter the information requested about the issuer	CEP 9 4 2007
Name of Issuer ([] check if this is an amendment and name has changed, and indicate change.) SW Stor-N-Lock #24, LLC	P
Address of Executive Offices (Number and Street, City, State, Zip Code) 333 W. Hampden Avenue, Suite 810, Englewood, CO 80110	Telephone Number (Including Area Code) (303) 534-1040200
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business SW Stor-n-Lock #24, LLC holds 50% ownership and profits and losses interest in Stor-n-Lock Partners #24, LL operates a self-storage center.	C, a Utah limited liability company that owns and
Type of Business Organization [] corporation [] limited partnership, already formed [X] other (please specify): limited liability [] business trust [] limited partnership, to be formed	company, already formed
Actual or Estimated Date of Incorporation or Organization:	Month Year [0 4] [0 7] [X] Actual [] Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada: FN for other foreign jurisdiction) [C 0]	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

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.

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- · Each promoter of the issuer, if the issuer has been organized within the past five years;
- · Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

• Each general and man Check Box(es) that Apply:	ging partner of partnership issuers. [X] Promoter [X] Beneficial Owner [] Executive Officer [] Director [X] General and/or Managing Partner
Check Box(cs) time repris.	[X] Foliote [X] Beneficial Owner [] Executive Offices [] [X] General and of Managing Carter
Full Name (Last name first, if is Utz, William G.	űvidual)
Business or Residence Address 1443 Bethel Ct., Castle Rock, C	Number and Street, City, State, Zip Code) 0 80109
Check Box(es) that Apply:	[X] Promoter [X] Beneficial Owner [] Executive Officer [] Director [X] General and/or Managing Partner
Full Name (Last name first, if it Cuje, Brian M.	lividual)
Business or Residence Address 5987 S. Eudora St., Littleton, C	Number and Street, City, State, Zip Code) 80121
Check Box(es) that Apply:	[X] Promoter [X] Beneficial Owner [] Executive Officer [] Director [X] General and/or Managing Partner
Full Name (Last name first, if in Brown, Benjamin L.	ividual)
Business or Residence Address 1600 Broadway, Suite 1490, Do	Number and Street, City, State, Zip Code) ver, CO 80202
Check Box(es) that Apply:	[] Promoter [X] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if in Junction, LLC	ividual)
	Number and Street, City, State, Zip Code) Trescent Parkway, Suite 400, Greenwood Village, CO 80111
Check Box(es) that Apply:	[] Promoter [X] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if in Benjamin L. Brown GST Trust	ividual)
	Number and Street, City, State, Zip Code) Broadway, Suite 1490, Denver, CO 80202
Check Box(es) that Apply:	[] Promoter [X] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if it Murray Frank Greenhuse List &	
	Number and Street, City, State, Zip Code) Street, Second Floor, Denver, CO 80202
Check Box(es) that Apply:	[] Promoter [X] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if it Brown, Keith L.	lividual)
	Number and Street, City, State, Zip Code) Iway, Suite 1490, Denver, CO 80202
Check Box(es) that Apply:	[] Promoter [X] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if it Donahue, Mark	lividual)
Business or Residence Address 4875 S. Monaco Street, Suite 3	Number and Street, City, State, Zip Code) 8, Denver, CO 80202
Check Box(es) that Apply:	[] Promoter [X] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if it Kechriotis, LLC, a Colorado Ll	
	Number and Street, City, State, Zip Code) , 419 Gilpin Street, Denver, CO 80218

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Check Box(es) that Apply:	[] Promoter [X] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if i Kechriotis, George	individual)
	s (Number and Street, City, State, Zip Code) ,#501, Longboat Key, FL 34228
Check Box(es) that Apply:	[] Promoter [X] Beneficial Owner [] Executive Officer [] Director [] General and/or Managing Partner
Full Name (Last name first, if i Jackman, Beth A.	individual)
	s (Number and Street, City, State, Zip Code) ell Mansion Pkwy., Englewood, CO 80113

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

				B. INI	FORMAT	ION ABO	OUT OFF	ERING					
1. Has the issuer so	old, or does th	e issuer inte	nd to sell, to	non-accre	dited investo	ors in this o	ffering?						Yes No [][X]
				Answer also	o in Append	lix, Column	2, if filing	under ULOI	Ę.				
2. What is the mini	mum investm	nent that will	be accepte	d from any	individual?.	***********	********		************				. \$ _ 2,500
			•	·									Yes No
3. Does the offerin	g permit joint	ownership o	of a single u	ınit?	*****************	••••••	***************************************	***************************************					
Enter the inform solicitation of puregistered with t of such a broker	rchasers in co he SEC and/o	onnection w	ith sales of s e or states, l	securities in ist the name	the offering of the brok	g. If a perso cer or dealer	on to be liste r. If more th	ed is an asso	ciated perso	on or agent o	of a broker o	or dealer	
Full Name (Last nam N/A	ne first, if ind	ividual)											
Business or Residen	ce Address (N	Number and	Street, City	, State, Zip	Code)								
Name of Associated	Broker or De	aler											
States in Which Pers (Check "All Stat	on Listed Ha	s Solicited o	r Intends to ates)	Solicit Pun	chasers							[] All States
(AL) (IL) (MT) (RI)	(AK) (IN) (NE) (SC)	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	(CT) [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
Full Name (Last nam			1 1		(1								
Business or Residen	ce Address (N	lumber and	Street, City.	, State, Zip	Code)								
Name of Associated	Broker or De	aler											
States in Which Pers (Check "All Stat	on Listed Hates" or check i	s Solicited o ndividual So	r Intends to ates)	Solicit Pur	chasers		************************			·····		[] All States
(AL) [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	(FL) [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
Full Name (Last nam	ne first, if ind	ividual)											
Business or Residen	ce Address (N	lumber and	Street, City	State, Zip	Code)						<u></u>		
				•									
Name of Associated	Broker or De	aler											
States in Which Pers (Check "All Stat							•••••					[] All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggrega Offering Price

	Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt	\$	\$ _	
	Equity [] Common [] Preferred	s	\$ _	
	Convertible Securities (including warrants)	s	S	
	Partnership Interests	s	\$	
	Limited liability company class A Other (Specify) and class B shares	\$ 1,450,200	s	1,450,200
		\$ 1,450,200	• -	1,450,200
	Total Answer also in Appendix, Column 3, if filing under ULOE.	1,430,200	3 _	1,430,200
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			Aggregate
		Number Investors		Dollar Amount of Purchases
	Accredited Investors	22	\$	1,450,200
	Non-accredited Investors	0	\$	0
	Total (for filings under Rule 504 only)		s	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505		s _	
	Regulation A		\$	
	Rule 504		s	
	Total		s -	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to furnish contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate	ire	-	
	Transfer Agent's Fees	[]	\$	
	Printing and Engraving Costs	[X]	\$	250
	Legal Fees	[X]	\$	12,000
	Accounting Fees	[X]	\$	7,500
	Engineering Fees	[X]	\$	8,250
	Sales Commissions (specify finders' fees separately)	[]	s	
	Other Expenses (identify) Form D Filing Fees	[X]	s	475
	Total	[X]	s	28,475

	b. Enter the difference between the aggregate offering price given in re						•	1 421 726
5.	furnished in response to Part CQuestion 4.a. This difference is the "ar Indicate below the amount of the adjusted gross proceeds to the issuer If the amount for any purpose is not known, furnish an estimate and payments listed must equal the adjusted gross proceeds to the issuer set	used or proposed to be used for each of check the box to the left of the estima	the purate. Th	poses :	shown.	******	\$	1.421.725
					Payments to Officers, Directors & Affiliates			Payments to Others
	Salaries and fees		[]	s _		_[]	\$.	
	Purchase of real estate		[]	s		_[]	\$	
	Purchase, rental or leasing and installation of machinery and equip	nent	[]	s _		_[]	\$	
	Construction or leasing of plant buildings and facilities		[]	s _		_[]	\$	
	Acquisition of other businesses (including the value of securities used in exchange for the assets or securities of another issuer pursu		[]	s _		_ []	\$	
	Repayment of indebtedness		[]	s _		[]	\$	
	Working capital		[]	s		[X]	S	1,421,725
	Other (specify):							
			- []	s _		[X]	S	1,421,725
	Column Totals		[]	s		[X]	S	1,421,725
	Total Payments Listed (column totals added)			[X]	\$ <u>1,421,</u>	725		
	D. FE	DERAL SIGNATURE						
und	issuer has duly caused this notice to be signed by the undersigned duly are taking by the issuer to furnish to the U.S. Securities and Exchange Com- accredited investor pursuant to paragraph (b)(2) of Rule 502.							
	er (Print or Type) Stor-N-Lock #24, LLC	ignature .		Date Septen	ıber /2, 2 007	·		
Nar Wil		itle of Signer (Print or Type)			Amino)		<i>-</i>	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

