Edgar Filing: UMB FINANCIAL CORP - Form 4/A

UMB FINAN	ICIAL CORP	•											
Form 4/A													
February 15,													
FORM	4 UNITE	TD STATES	SECUR	ITIFS	۸N	ID FXC	нлы	NCF (COMMISSION	т	PPROVAL		
	UNIT					D EAC		UL	COMMISSION	OMB Number:	3235-0287		
Check this box						••			Expires:	January 31,			
subject to statement of changes in BENEFICIAL						LOW	NERSHIP OF		2005				
Section 16									Estimated average burden hours per				
Form 4 or								response	•				
Form 5 obligation	- · · · · · · · · · · · · · · · · · · ·	•						-	ge Act of 1934,				
may conti				•		U	• •		f 1935 or Sectio	n			
See Instru	ction	30(h)	of the Inv	vestmen	it C	ompany	Act	of 19	40				
1(b).													
(Print or Type R	esponses)												
1. Name and Address of Reporting Person * 2. Issuer Name and Ticker or Trading 5. Relationship or						Reporting Person(s) to							
•				Symbol UMB FINANCIAL CORP [UMBF]					Issuer				
									(Check all applicable)				
(Last) (First) (Middle) 3. Da			3. Date of	Date of Earliest Transaction					(-,		
				Month/Day/Year)					XDirector		6 Owner		
CYBERTEKIQ CONSULTING, 01/27 LLC, 47029 SILVER FIR ST.				/27/2017					Officer (give title Other (specify below) below)				
LLC, 47029	SILVER FIR	. 51.											
				Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
				ed(Month/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person				
01/31/20 PARKER, CO 80138				Fo					Form filed by M	Form filed by More than One Reporting			
	0 00150								Person				
(City)	(State)	(Zip)	Table	e I - Non-	-Der	rivative S	ecurit	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of	2. Transaction	emed						5. Amount of	6. Ownership	7. Nature of			
Security	(Month/Day/Y	on Date, if TransactionAcquired (A) or						(D) or Ben	Indirect				
(Instr. 3)		any (Month/	CodeDisposed of (D)/Day/Year)(Instr. 8)(Instr. 3, 4 and 5)			Beneficially Owned	Beneficial Ownership						
						(mour o, rund o)			Following	Instr. 4)	(Instr. 4)		
							(A)		Reported Transaction(s)				
				~ .			or		(Instr. 3 and 4)				
Common				Code	V	Amount	(D)	Price	,				
Stock	01/27/2017			А		580 <u>(1)</u>	А	\$0	644	D			

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

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day/ e	6. Date Exercisable and Expiration Date (Month/Day/Year)		le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Williams Leroy James Jr CYBERTEKIQ CONSULTING, LLC 47029 SILVER FIR ST. PARKER, CO 80138	Х						
Signatures							
/s/ John C. Pauls, Attorney-In-Fact for Williams	Mr.	02/15/2017					
**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).
- (1) The number of shares granted was previously overstated.

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.