Edgar Filing: UMB FINANCIAL CORP - Form 4

| UMB FINA | NCIAL CORP | | | | | | | | | |
|---|---|---|------------------------------|---|------------------|---|--|---|---|--|
| Form 4 | | | | | | | | | | |
| November (| 03, 2009 | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION | | | | | | | | OMB APPROVAL | | |
| CONVIA UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | MMISSION | OMB Number: | 3235-0287 | | |
| Check the check | iger STATEN | NGES IN 1 | RFNFFIG | TAT | RSHIP OF | Expires: | January 31, 2005 | | | |
| subject t Section | SECUR | | , IAL | o me | | Estimated av | s per | | | |
| Form 4 Form 5 | | | 16() 6.1 | a | - | | 6 102 4 | response | 0.5 | |
| obligatio | - | rsuant to Section | | | | • | | | | |
| See Instruction Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | | | |
| 1(b). | | | | | | | | | | |
| (Print or Type | Responses) | | | | | | | | | |
| | | _ * | | | | | | | | |
| 1. Name and A GRAVES (| Address of Reporting GREG M | | | | | Relationship of Reporting Person(s) to suer | | | | |
| GRAVES GREG M Symbol UMB | | | FINANCIA | AL CORP | [UM | BF] | (Check all applicable) | | | |
| (Last) (First) (Middle) 3. Date | | | of Earliest Transaction | | | | (eneck | un appricable) | | |
| | | | | | | | XDirector | | Owner | |
| 9400 WARD PARKWAY 11/0 | | | /2009 | | | bel | Officer (give title Other (specify below) | | | |
| | | | mendment, Date Original 6. 1 | | | | Individual or Joint/Group Filing(Check | | | |
| | | | Ionth/Day/Year |) | | - | oplicable Line) {_ Form filed by One Reporting Person | | | |
| IZ A NIC A C A | | 2210 | | | | _X | Form filed by Or Form filed by Mc | | | |
| KANSAS | CITY, MO 64114 | -3319 | | | | Per | rson | | 6 | |
| (City) | (State) | (Zip) Ta | able I - Non-D | Derivative Se | ecuriti | ies Acquire | ed, Disposed of, | or Beneficially | y Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Transaction Code (| 4. Securities Disposed of ((Instr. 3, 4 ar | (D) | red (A) or | 5. Amount of Securities Beneficially Owned Following | 6. Ownership Form: Direct (D) or Indirect | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | Code V | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | (I) (Instr. 4) | | |
| Common Stock | 11/03/2009 | | | 108.9175 | A | \$ 40.168 | 1,670.6955 (1) | 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) | 6. Date Exercisal ctionNumber Expiration Date of (Month/Day/Yea 8) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, | | ate | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr | |
|---|---|---|---|---------------------------------------|--|----|---------------------|---|-------|--|--|--|
| | | | | Code V | 4, and (A) (| ĺ. | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

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Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|--|---------------|-----------|---------|-------|--|--|--|--|
| F8 | Director | 10% Owner | Officer | Other | | | | |
| GRAVES GREG M 9400 WARD PARKWAY KANSAS CITY, MO 64114-3319 | Х | | | | | | | |
| Signatures | | | | | | | | |
| John C. Pauls, Attorney in Fact for Graves | 11/03/2009 | | | | | | | |
| <u>**</u> Signature of Reporting Person | | | Date | | | | | |
| Evenlay attack of Deer | | | | | | | | |

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) Includes shares acquired through participation in the UMB Financial Corporation Dividend Reinvestment 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.