ZIONS BANCORPORATION /UT/

Form 4

September 04, 2014

Check this box

if no longer

subject to

Section 16.

Form 4 or

| FORM 4 | UNITED STATES SECURITIES AND EXCHANGE COMMISSION Workington, D.C. 20540 |
|--------|---|
| | Washington, D.C. 20549 |

OMB APPROVAL

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 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 Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading Morris Michael Issuer Symbol ZIONS BANCORPORATION /UT/ (Check all applicable) [ZION] (Last) (First) (Middle) 3. Date of Earliest Transaction Director 10% Owner Other (specify _X__ Officer (give title (Month/Day/Year) below) ONE SOUTH MAIN, 15TH FLOOR 09/03/2014 **Executive Vice President** (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting SALT LAKE CITY, UT 84133-1109 Person

| (City) | (State) | (Zip) Table | e I - Non-D | erivative | Secur | ities Acq | uired, Disposed of | f, or Beneficial | ly Owned |
|--------------------------------------|---|---|-----------------------------------|------------|-------|-------------|--|--|---|
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | ecution Date, if Transaction Code | | | ` ′ | 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) |
| Common Stock | 09/03/2014 | | M | Amount 238 | A | \$ 29.22 | 5,199 | D | |
| Common Stock | 09/03/2014 | | F | 78 | D | \$ 29.22 | 5,121 | D | |
| Common Stock | | | | | | | 4,182.28 | I | By 401 (k) Plan |

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

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number.

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 | | | | 6. Date Exercisable and | | 7. Title and A | | |
|---------------------|-------------------------|---------------------|----------------------|--------|-----------------|-------------------------|------------|----------------|----------------------|------|
| Derivative | Conversion | (Month/Day/Year) | | | | Expiration Date | | Underlying S | Deriva | |
| Security (Instr. 3) | or Exercise Price of | | any (Month/Day/Year) | | | (Month/Day/Y | ear) | (Instr. 3 and | Securit (Instr. : | |
| , | Derivative | | , , | | Acquired | | | | | |
| | Security | | | | (A) or | | | | | |
| | | | | | Disposed of (D) | | | | | |
| | | | | | (Instr. 3, 4, | | | | | |
| | | | | | and 5) | | | | | |
| | | | | | | | | | Amount | |
| | | | | | | Date | Expiration | | or | |
| | | | | | | Exercisable | Date | Title | Number of | |
| | | | | Code V | (A) (D) | | | | Shares | |
| | | | | | | | | Camman | | |
| RSU | <u>(1)</u> | 09/03/2014 | | M | 238 | 09/03/2014 | (1) | Common Stock | 238 | \$ (|
| | | | | | | | | SIUCK | | |

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Morris Michael

ONE SOUTH MAIN, 15TH FLOOR Executive Vice President

SALT LAKE CITY, UT 84133-1109

Signatures

/s/By Thomas E. Laursen as 09/04/2014 attorney-in-fact

**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) Vested restricted stock units settled for shares of the Company's common stock.

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.

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