UMB FINANCIAL CORP

Form 4/A

February 12, 2015

FORM 4

Check this box

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB

OMB APPROVAL

Number:

3235-0287

Expires:

January 31, 2005

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if no longer STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to **SECURITIES** Section 16. Form 4 or Form 5 obligations

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 may continue.

30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

| 1. Name and Address of Reporting Person * Hagedorn Michael D | | | 2. Issuer Name and Ticker or Trading Symbol UMB FINANCIAL CORP [UMBF] | 5. Relationship of Reporting Person(s) to Issuer | | | |
|--|---------|----------|---|--|--|--|--|
| | | (Middle) | , | (Check all applicable) | | | |
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction | 1000 | | | |
| 1010 GRAND BLVD. | | | (Month/Day/Year) | Director 10% Owner | | | |
| | | | 02/11/2015 | X Officer (give title Other (specify below) | | | |
| | | | | President of Subsidiary | | | |
| (Street) | | | 4. If Amendment, Date Original | 6. Individual or Joint/Group Filing(Che | | | |
| | | | Filed(Month/Day/Year) | Applicable Line) | | | |
| | | | 02/12/2015 | _X_ Form filed by One Reporting Person | | | |
| KANSAS CITY, MO 64106 | | | | Form filed by More than One Reporting Person | | | |
| (City) | (State) | (Zip) | Table I - Non-Derivative Securities Acq | quired, Disposed of, or Beneficially Owned | | | |

| Tabla I | Non | Dominativa | Committee | bourings A | Disposed of | or Donofi | oially Owns | a |
|---------|-----|------------|-----------|------------|-------------|-----------|-------------|---|

| 1.Title of Security | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if | 3. Transactio | 4. Securities nAcquired (A) or | | | 5. Amount of Securities | 6. Ownership Form: Direct | Indirect Beneficial | |
|------------------------|--------------------------------------|-------------------------------|--|--------------------------------|-------------------|--------------|---------------------------------|----------------------------|------------------------|--|
| (Instr. 3) | (| any | Code | Disposed of (D) | | Beneficially | (D) or | | | |
| | | (Month/Day/Year) | Day/Year) (Instr. 8) (Instr. 3, 4 and 5) | | | | Owned Following | Indirect (I) (Instr. 4) | Ownership (Instr. 4) | |
| | | | | | (A) | | Reported | | | |
| | | | Code V | Amount | or | Price | Transaction(s) (Instr. 3 and 4) | | | |
| Common | 02/11/2015 | | A | 6,952 | (D) | \$ 0 | 48,648.8431 | D | | |
| Stock | 02/11/2013 | | 11 | (1) | <i>1</i> 1 | ΨΟ | 70,070.0731 | D | | |

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

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| 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, | Expiration D (Month/Day/ e | | | e and nt of dying tities 3 and 4) | Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|---------------------------------------|--|----------------------------------|------------|-------|---|--------------------------------|---|
| | | | | | 4, and 5) | Date | Expiration | | Amount | | |
| | | | | Code V | (A) (D) | Exercisable | Date | Title | Number of Shares | | |

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Hagedorn Michael D 1010 GRAND BLVD. KANSAS CITY, MO 64106

President of Subsidiary

Signatures

John Pauls, Attorney-in-fact for Mr.
Hagedorn

02/12/2015

**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 original Form 4 is being amended to reflect the correct number of shares issued in the stock grant

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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