Edgar Filing: UMB FINANCIAL CORP - Form 4

UMB FINA	NCIAL CORP												
Form 4													
May 02, 200)6												
FORM	Λ4								OMB AF	PROVAL			
UNITED STATES SECU				RITIES AND EXCHANGE COMMISSION ashington, D.C. 20549					OMB Number:	3235-0287			
Check this box if no longer				-					Expires:	January 31,			
subject t	- NIATHA	AENT OF	F CHAN	CHANGES IN BENEFICIAL OWNERSHIP OF					Expires. 2005 Estimated average				
Section 16.				SECURITIES					burden hours per				
Form 4 o Form 5				1(a) = f d		ing Er	1	A at af 1024	response	0.5			
obligatio	n o 1						•	Act of 1934, 1935 or Section					
may con	unue.			•	t Compan	- ·			L				
<i>See</i> Instr 1(b).	ruction	50(II)		livestillen	t Compan	y 1 iei	01124						
(Print or Type	Responses)												
1. Name and A DESILVA	Person [*] 2. Issuer Name and Ticker or Trading Symbol					8	5. Relationship of Reporting Person(s) to Issuer						
			UMB FINANCIAL CORP [UMBF]					(Check all applicable)					
(Last)	(First) (Middle)		3. Date of Earliest Transaction (Month/Day/Year)					(Check an applicable)					
							X Director X Officer (give t		Owner r (specify				
					05/01/2006				below) below)				
								President and COO					
	(Street)		4. If Am	endment, 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 Person					
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative S	Securi	ties Acqu	iired, Disposed of,	or Beneficiall	y Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3.4. Securities Acquired (A)Transactionor Disposed of (D)Code(Instr. 3, 4 and 5)(Instr. 8)			5. Amount of Securities Beneficially	6. Ownership Form:	7. Nature of Indirect Beneficial				
(11541-5)							Owned Following	Direct (D) or Indirect	Ownership (Instr. 4)				
						(A)		Reported	(I)				
						or		Transaction(s) (Instr. 3 and 4)	(Instr. 4)				
Common				Code V	Amount	(D)	Price \$	17,292.886					
Stock	05/01/2006			Р	14.7386	А	\$ 67.849		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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
. ,	Derivative		· · · ·	Ŷ,	Securities			(Instr.	3 and 4)	· · ·	Owne
	Security				Acquired			``			Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(
					4, and 5)						
					., und c)						
									Amount		
						Date	Expiration		or		
						Exercisable	Date	Title	Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships							
1	Director	10% Owner	Officer	Other				
DESILVA PETER J	Х		President and COO					

Signatures

John C. Pauls, Attorney in Fact for Peter deSilva

**Signature of Reporting Person

05/02/2006 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) Includes shares acquired through participation in the 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.