Edgar Filing: Hagedorn Michael D - Form 4

Form 4	lichael D										
February 13	, 2018										
FORM	14 UNITED	STATES	SECUE	RITIES A	ND FX	сна	NGE (OMMISSION		PROVAL	
		NITED STATES SECURITIES AND EXCHANGE CO Washington, D.C. 20549							OMB Number:	3235-0287	
Check th if no lon subject t Section Form 4 o Form 5 obligatio may con <i>See</i> Instr	suant to S a) of the l	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934. Public Utility Holding Company Act of 1935 or Sect of the Investment Company Act of 1940						Estimated average burden hours per response 0.5			
1(b).											
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> Hagedorn Michael D			2. Issuer Name and Ticker or Trading Symbol UMB FINANCIAL CORP [UMBF]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (I	Middle)	3. Date of Earliest Transaction					(Check	k all applicable)		
1010 GRAND BLVD.			(Month/Day/Year) 02/12/2018					Director10% Owner XOfficer (give titleOther (specify below) President of Subsidiary			
				Amendment, Date Original I(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
KANSAS (CITY, MO 64106							Form filed by M Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tabl	le I - Non-D) erivative	Secur	ities Acq	uired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deen Execution any (Month/E	n Date, if	3. 4. Securities Acquire Transaction(A) or Disposed of (Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Pri		d of (D)	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	02/12/2018			F	165	(D) D	\$ 74.13	59,215.5187	D		
Common Stock	02/12/2018			F	439	D	\$ 74.13	58,776.5187	D		
Common Stock	02/12/2018			F	186	D	\$ 73.98	58,590.5187	D		
Common Stock								274.1482	Ι	By ESOP	

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		Secur	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or 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 Hagedorn	Mr.		02/13/2018				

**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).

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.