### Edgar Filing: ZIONS BANCORPORATION /UT/ - Form 4

ZIONS BA Form 4 July 23, 200	NCORPORATIO	N /UT/										
FORM	ЛД								OMB AF	PPROVAL		
UNITED STATES SEC					AND EX n, D.C. 2(		NGE C	OMMISSION	OMB Number:	3235-0287		
Check this box if no longer CTLATENCENTE ON				u511111500	II, D.C. <b>2</b>				Expires:	January 31,		
subject Section	to <b>SIAIE</b> 16.	TATEMENT OF CHANGES IN BENEFICIAL OWNE SECURITIES							Estimated a burden hou	•		
Form 4 Form 5 obligati may co <i>See</i> Inst 1(b).	Public 1	Utility Ho	the Securi olding Con nt Compan	response 0.5 n								
(Print or Type	Responses)											
1. Name and Address of Reporting Person <u>*</u> SIMMONS L E			2. Issuer Name <b>and</b> Ticker or Trading Symbol ZIONS BANCORPORATION /UT/ [ZION]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First)	(Middle)	L	-	Transaction			X Director	10%	Owner		
			3. Date of Earliest Transaction (Month/Day/Year) 07/22/2008					Officer (give titleOther (specify below) below)				
	(Street)			nendment, l onth/Day/Ye	Date Origina ear)	ıl		6. Individual or Joi Applicable Line) _X_Form filed by On	ne Reporting Pe	rson		
SALT LA	KE CITY, UT 84	111						Form filed by Mo Person	ore than One Re	porting		
(City)	(State)	(Zip)	Та	ble I - Non	-Derivative	Secur	ities Acqu	uired, Disposed of,	or Beneficial	ly Owned		
1.Title of Security (Instr. 3)		2. Transaction Date 2A. Deemed Month/Day/Year) Execution Date, if any (Month/Day/Year)		Code (Instr. 3, 4 and 5)				or 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	07/22/2008			P	100,000	A	\$ 26.2963	3 351,807	D			
Common Stock							<u>(1)</u>	1,281.481	I	By Dividend Reinvestment Plan		
Common Stock								1,814,488	I	By Crestwood Communications		
Common Stock								6,662	Ι	Custodian for Minor Children		

(2)

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)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	ate	7. Titl Amou Under Securi (Instr.	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	, ,	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
<b>rg</b>	Director	10% Owner	Officer	Other			
SIMMONS L E ONE SOUTH MAIN STREET, 15TH FLOOR SALT LAKE CITY, UT 84111	Х						
Signatures							
By Thomas E. Laursen as attorney in fact	07/23/200	8					
<u>**</u> 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) Reporting person hereby undertakes to provide SEC's staff, the issuer or its shareowners, full information regarding the number of shares purchased or sold at each separate price.
- (2) The reporting person disclaims beneficial ownership of these securities, and this report shall not be deemed an admission that the reporting person is the beneficial owner of the securities for purposes of Section 16 or for any other purpose.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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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.