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

ZIONS BANCORPORATION /UT/ Form 4/A December 12, 2008

| <b>FORM</b><br>Check this I<br>if no longer<br>subject to<br>Section 16.<br>Form 4 or<br>Form 5<br>obligations<br>may continu<br><i>See</i> Instruct<br>1(b). | 4 UNITED                            | <b>MENT O</b><br>rsuant to S<br>(a) of the I | Wa<br>F CHAN<br>Section 2<br>Public U | nshington<br>NGES IN<br>SECUF<br>16(a) of th<br>Jtility Hol | , D.C. 20<br>BENEF<br>RITIES<br>ne Securi<br>ding Con                         | <b>)549</b><br>ICIAL O'<br>ties Excha                    | COMMISSIO<br>WNERSHIP OF<br>nge Act of 1934,<br>of 1935 or Secti<br>940   | N OMB<br>Number:<br>Expires:<br>Estimated<br>burden hou<br>response  | average<br>urs per  |  |
|---|-------------------------------------|--|---------------------------------------|---|---|--|---|--|---|--|
| 1. Name and Add<br>HEMINGWA   | Symbol                              |  |                                       | Trading   | 5. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable) |  |   |  |   |  |
| (N  |                                     |  |                                       | of Earliest T<br>Day/Year)<br>2008                          | ransaction  |  | Director 10% Owner<br>XOfficer (give title Other (specify<br>below) below)<br>Exec. Vice President  |  |   |  |
| File  |                                     |  |                                       | endment, D<br>onth/Day/Yea<br>2008                          | -   | ıl   | <ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting Person</li> </ul> |  |   |  |
| (City)  | (State)                             | (Zip)  | Tab                                   | ole I - Non-l   | Derivative  | Securities A   | cquired, Disposed   | of, or Beneficia   | lly Owned   |  |
|   | Transaction Date<br>Ionth/Day/Year) | 2A. Deemo<br>Execution<br>any<br>(Month/Da   | Date, if                              | 3.<br>Transactio<br>Code<br>(Instr. 8)<br>Code V            | Disposed<br>(Instr. 3,  | (A) or<br>of (D)<br>4 and 5)<br>(A)<br>or                | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4)  | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I)<br>(Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
| Reminder: Report  | t on a separate line                | e for each cl                                | ass of sec                            | urities bene  | Perso<br>inforr<br>requi  | ons who res<br>nation cont<br>red to resp<br>ays a curre | or indirectly.<br>spond to the colle<br>tained in this forn<br>ond unless the fo<br>ntly valid OMB co   | n are not<br>rm  | SEC 1474<br>(9-02)  |  |

 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. Number of | 6. Date Exercisable and | 7. Title and Amount of |
|-------------|------------|---------------------|--------------------|-----------|--------------|-------------------------|------------------------|
| Derivative  | Conversion | (Month/Day/Year)    | Execution Date, if | Transacti | onDerivative | Expiration Date         | Underlying Securities  |

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

| Security<br>(Instr. 3) | or Exercise<br>Price of<br>Derivative<br>Security |            | any<br>(Month/Day/Year) | Code<br>(Instr. 8) |   | Securities Acquired<br>(A) or Disposed of<br>(D)<br>(Instr. 3, 4, and 5) |     | (Month/Day/Year)    |                    | (Instr. 3 and 4) |                                |
|------------------------|---|------------|-------------------------|--------------------|---|--|-----|---------------------|--------------------|------------------|--------------------------------|
|                        |   |            |                         | Code               | V | (A)  | (D) | Date<br>Exercisable | Expiration<br>Date | Title            | Amount o<br>Number o<br>Shares |
| Deferred<br>Comp       | \$ 0 <u>(1)</u>                                   | 02/14/2008 |                         | J <u>(2)</u>       | V | 2,620.9581<br>(3)  |     | (4)                 | (4)                | Common<br>Stock  | 2,620.9                        |

## **Reporting Owners**

| Reporting Owner Name / Address   | Relationships |           |                      |       |  |  |  |  |
|--|---------------|-----------|----------------------|-------|--|--|--|--|
|  | Director      | 10% Owner | Officer              | Other |  |  |  |  |
| HEMINGWAY W DAVID<br>ONE SOUTH MAIN STREET, 15TH FLOOR<br>SALT LAKE CITY, UT 84111 |               |           | Exec. Vice President |       |  |  |  |  |
| Signatures   |               |           |                      |       |  |  |  |  |
| By Thomas E. Laursen as attorney in fact   | 12/12/200     | 8         |                      |       |  |  |  |  |
| **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) Each unit represents one share of the company's Common Stock.
- (2) This amount represents Employer profit sharing distributions attributable to deferred compensation amounts and compensation in excess of IRS limitations.
- (3) Amendment. The Form 4 filed on 4/28/2008 inadvertantly reported an incorrect number of shares acquired due to an error by the plan's third-party administrator.
- (4) Units are paid out in cash or stock upon date or age elected at time of deferral, or upon termination of employment.
- (5) Includes shares acquired pursuant to Dividend Reinvestment.

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.