Edgar Filing: HEANEY J DAVID - Form 4

| HEANEY J I Form 4 | | | | | | | | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------|-------------------------------------|-------------------------------------------------------------|----------------------------------------------------|-----------------------------|---------------------|---------------------------------------------------------------------------------------------|----------------------------------------------------------------------|----------------------|--|
| April 11, 201 FORM Check this if no long subject to Section 10 Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b). | 4 UNITED | EMENT Of ursuant to S 7(a) of the | Was F CHAN | hington, GES IN I SECURI 6(a) of the ility Hold | D.C. 209 BENEFI ITIES Securiti ing Com | 549 CIA es Ez pany | L OW xchang | COMMISSION NERSHIP OF ge Act of 1934, f 1935 or Section 40 | OMB Number: Expires: Estimated a burden hou response | rs per | |
| (Print or Type R | esponses) | | | | | | | | | | |
| HEANEY J DAVID Sym ZIC | | | Symbol | IONS BANCORPORATION /UT/ | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) | (First) | (Middle) | 3. Date of (Month/Da 04/10/20 | - | ansaction | | | X_ Director Officer (give below) | | Owner er (specify | |
| | (Street) | | | ndment, Dat th/Day/Year) | - | | | 6. Individual or Jo Applicable Line) _X_ Form filed by O Form filed by M Person | - | erson | |
| (City) | (State) | (Zip) | Table | e I - Non-D | erivative S | Securi | ties Acc | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction D (Month/Day/Yea | ar) Executio any | med on Date, if Day/Year) | 3. Transactic Code (Instr. 8) Code V | on(A) or Di (D) (Instr. 3, | spose | d of 5) Price | Securities Beneficially Owned | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Common Stock | 04/10/2018 | | | М | 7,800 | А | \$ 47.1 | 36,306 | 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)

Edgar Filing: HEANEY J DAVID - Form 4

| 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. Transactic Code (Instr. 8) | Transaction of Derivative Code Securities | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|-------------------------------------------------------------|----------------------------------------|----------------------------------------------|---------------------|----------------------------------------------------------------|-----------------|---------------------------------------------------------------------|----|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| Stock Option (right to buy) | \$ 47.1 | 04/10/2018 | | М | 7,800 | (1) | 04/24/2018 | Common Stock | 7,800 | \$ |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|---------------------------------------|---------------|-----------|---------|-------|--|--|--|
| 1 | Director | 10% Owner | Officer | Other | | | |
| HEANEY J DAVID | Х | | | | | | |
| Signatures | | | | | | | |

| By Thomas E. Laursen as attorney in fact | 04/11/2018 | | |
|------------------------------------------|------------|--|--|
| **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).
- (1) Grant has a graded vesting schedule. Date exercisable will vary for each vesting tranche.

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.