Edgar Filing: ELLINOR DAN H - Form 4

ELLINOR Form 4	DAN H										
March 01, 2	2007										
FORM	14	STATES	SECU	DITIES /	ND FV	CHANCE		-	PPROVA	L	
Washington, D.C. 20549									3235-0		
Check this box if no longer STATEMENT OF CHANCES IN DENEFICIAL OWNEDSHID OF									Januar	y 31, 2005	
subject to Section 16. Form 4 or								Estimated burden hou	Estimated average burden hours per response 0.5		
Form 5 obligation may con <i>See</i> Inst 1(b).	ons ntinue. Section 17((a) of the l	Public U	tility Hol	ding Co		nge Act of 1934, of 1935 or Secti 940			0.0	
(Print or Type	Responses)										
				2. Issuer Name and Ticker or Trading Symbol BOK FINANCIAL CORP ET AL			5. Relationship of Reporting Person(s) to Issuer				
			[BOKF]				(Check all applicable)				
(1				 Date of Earliest Transaction (Month/Day/Year) 02/27/2007 			Director 10% Owner X_ Officer (give title Other (specify below) Sr. Ex. VP-Commercial Banking				
		131	4 TE A	d t - D		-1		Leint/Carrow Eili	n = (Cl 1		
				Filed(Month/Day/Year) Applicable _X_Form f			Applicable Line) _X_ Form filed by	or Joint/Group Filing(Check e) by One Reporting Person by More than One Reporting			
TULSA, O	K 74103						Person	More than One R	eporting		
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned	I	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	3. Transactio Code (Instr. 8)	Disposed	(A) or of (D) 4 and 5) (A) 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 Indirect Beneficia Ownershi (Instr. 4)	1	
				Code V	Amount	(D) Price					
Reminder: Re	port on a separate line	e for each cl	ass of sec	urities bene	-	-	-				
					inforr requi	nation cont red to resp ays a curre	spond to the colle tained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)		
	Tab	le II - Deriv	vative Sec	urities Aco	uired, Dis	sposed of, or	Beneficially Owne	d			

(e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8.
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	of Derivative	Expiration Date	Underlying Securities	D

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/Year)		(Instr. 3 and 4)		So (I
				Code V	(A) (I	D) Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Options (1)	\$ 37.74	02/27/2007		А	3,422	(2)	(3)	Common Stock	3,422	9
Performance Shares	\$ 0	02/27/2007		А	902	(4)	(4)	Common Stock	902	

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
ELLINOR DAN H C/O FREDERIC DORWART LAWYERS 124 E FOURTH ST TULSA, OK 74103			Sr. Ex. VP-Commercial Banking				
Signatures							

Frederic 03/01/2007 Dorwart

<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) Represents upward stock option adjustments based upon attainment of performance goals established pursuant to the BOKF Executive Incentive Plan for stock option awards made in 2003.
- (2) For options granted in any one year, one-seventh of the options of such grant vest and become exercisable on the grant date of the anniversary each year commencing on the first anniversary after the grant.
- (3) Options expire 3 years after vesting.
- (4) Represents upward performance share adjustments based upon attainment of performance goals established pursuant to the BOKF Executive Incentive Plan for all performance shares (including this adjustment) granted in 2003 which will vest on December 31, 2008.
- (5) Executive received the shares as part of compensation.

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.