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STROSAHL	JAMES H										
Form 4											
January 09, 2	2007										
FORM	FORM 4 LINITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL		
	UNITED STATES SECURITIES AND EACHANGE COMMISSION						COMMISSION	ONID	3235-0287		
Check the	is box		Was	shington,	D.C. 20	549			Number:		
if no longer								Expires:		January 31, 2005	
subject to STATEMENT OF CHANC						ICIA		NERSHIP OF	Estimated average		
	ection 16. SECURITIES							burden hours per			
Form 4 o Form 5		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							response	0.5	
obligation				· · ·			0	7 1935 or Section	n		
may cont	mue.			vestment					11		
See Instru 1(b).	iction	50(II)	or the m	vestment	compan	y ne	. 01 174	0			
1(0).											
(Print or Type H	Responses)										
				r Name and	Ticker or	Tradir	ıg	5. Relationship of Reporting Person(s) to			
STROSAHI	Symbol					Issuer					
			GLACI	ER BANG	CORP IN	IC [C	BCI]	(Chec	k all applicable	:)	
(Last)	(First)	(Middle)	3. Date of	f Earliest Tr	ansaction			(ener	ii uii uppiituoit	,	
				(Month/Day/Year)				Director 10% Owner			
			01/05/2007					XOfficer (give titleOther (specify below) below)			
								· · · · · · · · · · · · · · · · · · ·	CFO/Secy/Trea	S	
			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
			Filed(Mor	nth/Day/Year)			Applicable Line)			
								_X_Form filed by C			
KALISPEL	L, MT 59901							Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)	Tabl	a I Non D	orivotivo	Soour	itios Aca	uired, Disposed of	or Bonoficial	ly Ownod	
1.77.1							-			-	
1.Title of Security	2. Transaction E (Month/Day/Ye	med on Date, if	3. Transactic	4. Securit			5. Amount of Securities	6. Ownership Form: Direct			
(Instr. 3)	(Wohth Day) ie	any	on Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)					Beneficially	(D) or	Beneficial	
		(Month/	Day/Year) (Instr. 8)					Owned	Indirect (I)	Ownership	
								Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
				Code V	Amount	or	Drice	(Instr. 3 and 4)			
Common					Amount	(D)	Price \$				
Stock	01/05/2007			Μ	6,833	А	φ 8.489	87,008 <u>(1)</u>	D		
Stock							0.10)				

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	onof De Secur Acqu (A) o Dispo (D)	rities hired or osed of 3, 4,	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
Option	\$ 8.489	01/05/2007		М		6,833	01/30/2004	01/30/2007	Common Stock	6,833 (1)
Option	\$ 9.445						01/29/2005	01/29/2008	Common Stock	7,734 <u>(1)</u>
Option	\$ 13.37						01/28/2006	01/28/2009	Common Stock	7,032 (1)
Option	\$ 16.67						01/26/2007	01/26/2010	Common Stock	7,443 (1)
Option	\$ 20.96						01/25/2008	01/25/2011	Common Stock	22,500

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
STROSAHL JAMES H 49 COMMONS LOOP KALISPELL, MT 59901			EVP/CFO/Secy/Treas					
Ciam at una a								

Signatures

James H. Strosahl 01/08/2007

<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) Shares are adjusted for a three-for-two stock split paid to all Glacier Bancorp, Inc. shareholders on December 14, 2006.

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.

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