### Edgar Filing: FIRST INTERSTATE BANCSYSTEM INC - Form 4

Form 4 May 07, 20		CSYSTEM	I INC								OMB A	PPROV	21
FORI Check t	UNITED	STATES		RITIES An ashington				GE CO	MMISSIC	ON	OMB OMB Number:	3235	-0287
if no los subject Section Form 4 Form 5	nger to 16. or Filed put		NGES IN BENEFICIAL OWNERSHIP OF SECURITIES 16(a) of the Securities Exchange Act of 1934,								stimated average urden hours per		
obligati may co <i>See</i> Inst 1(b).	ntinue. Section 170			Jtility Hol nvestment	•		- ·		935 or Sec	tion			
(Print or Type	Responses)												
1. Name and Address of Reporting Person <u>*</u> EBZERY WILLIAM B			2. Issuer Name <b>and</b> Ticker or Trading Symbol FIRST INTERSTATE				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
			BANC	SYSTEM	I INC	C [N/A	4]		(0	neex	un application	()	
(Last) (First) (Middle) 2 NORTH MAIN, SUITE 301			3. Date of Earliest Transaction (Month/Day/Year) 05/04/2007			_	X_ Director10% Owner Officer (give titleOther (specify below) below)						
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			Al	<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</li> </ul>						
SHERIDA	N, WY 82801							Pe	_ Form filed t rson	by MC	ore than One R	eporting	
(City)	(State)	(Zip)	Tab	ole I - Non-l	Deriv	ative S	Securitie	es Acquir	ed, Dispose	d of,	or Beneficia	lly Owne	d
1.Title of Security (Month/Day/Year) 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)		Date, if	3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or		Secu Bene Own Follo Repo Tran (Inst	owing	Fo (D (I)	Ownership rm: Direct ) or Indirect astr. 4)	7. Nature Indirect Beneficia Ownersh (Instr. 4)	al iip			
				Code V	Amo	ount	(D) Pri	rice					
Reminder: Re	eport on a separate line	e for each cla	uss of sec	urities bene	P ir re d	erson oformation	ns who ation co ed to res /s a cur	respond ontained spond u	rectly. I to the col I in this for Inless the f alid OMB o	rm a form	re not	SEC 1474 (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	6. Date Exercisable and	7. Title and Amount of	8. P
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof	Expiration Date	Underlying Securities	Der
Security	or Exercise		any	Code	Derivative	(Month/Day/Year)	(Instr. 3 and 4)	Sec

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	Securi Acqui (A) or Dispo of (D) (Instr. and 5)	red sed 3, 4,					(Ins
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Options $(1)$	\$ 89	05/04/2007		А		480		05/04/2007	05/04/2017	Common Stock	480	9
Stock Options	\$ 89	05/04/2007		А		999		05/04/2007	05/04/2017	Common Stock	999	9

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>				
	Director	10% Owner	Officer	Other
EBZERY WILLIAM B 2 NORTH MAIN, SUITE 301 SHERIDAN, WY 82801	Х			
Signatures				
/s/ Terrill R. Moore, Attorney-in	n-Fact for	Reporting		
Person				05/07/2007
<u>**</u> Signature of Reportin		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) Stock options granted at the discretion of the Compensation Committee of the Board of Directors for no consideration. 100% vested on date of grant.
- (2) Issued in lieu of cash payment for annual Board of Directors membership retainer and/or committee chair fee. 100% vested on date of grant.

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.