Edgar Filing: FIRST INTERSTATE BANCSYSTEM INC - Form 4

FIRST INTE Form 4 October 03, 2	ERSTATE BANC 2006	SYSTEM INC								
FORM	1 /							OMB AF	PROVAL	
-	UNITED		URITIES A Vashington			NGE C	COMMISSION	OMB Number:	3235-0287	
Check thi if no long								Expires:	January 31,	
subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHI					NERSHIP OF	Estimated average burden hours per				
Form 4 or Form 5			1(()) (1	с ·	· -	1	A (61024	response	0.5	
obligation may cont <i>See</i> Instru 1(b).	ns inue. Section 17(a	a) of the Publi		ding Cor	npan	y Act of	e Act of 1934, 71935 or Sectior 90	1		
(Print or Type F	Responses)									
			2. Issuer Name and Ticker or Trading Symbol FIRST INTERSTATE BANCSYSTEM INC [N/A]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) PO BOX 30	· · · · ·	(Mor	te of Earliest T th/Day/Year) 9/2006	ransaction			Director XOfficer (give below) Exec. V		Owner er (specify	
(Street)			4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
Filed(Mor BILLINGS, MT 59116-0918				-	-		Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	fable I - Non-l	Derivative	Secur	ities Aca	uired, Disposed of,	or Beneficial	v Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		3. if Transacti Code ar) (Instr. 8)	4. Securi on(A) or D (Instr. 3,	ties A ispose 4 and (A) or	cquired d of (D)	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 of	
Common Stock	09/29/2006		Р	100	А	\$ 77.25	17,735	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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. oriNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address			Relationships					
	Director	10% Owner	Officer	Other				
GARDING ED PO BOX 30918 BILLINGS, MT 59116-0918			Exec. Vice Pres. & CCO					
Signatures								
/s/: Terrill R. Moore, Attorney- Person	09/29/2006							
**Signature of Report	ing 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).

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.