Edgar Filing: CROWTHER JOHN M - Form 4

CROWTHE	R JOHN M											
Form 4	2007											
February 16,		ED STATE					NGE C	COMMISSION	OMB	PROVAL 3235-0287		
Check this box if no longer subject to Section 16. SECURITIES							Number:January 31,Expires:2005Estimated averageburden hours perresponse0.5					
(Print or Type I	Responses)											
			Symbol	2. Issuer Name and Ticker or Trading Symbol DIEBOLD INC [DBD]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) C/O DIEBC INCORPOR ROAD	(First) DLD, RATED, 5995	(Middle) MAYFAII	(Month/D 02/14/2	•	ansaction			Director X Officer (give below)	10%	Owner er (specify		
NORTH CA	(Street)	4720		ndment, Da hth/Day/Year)	-	1		6. Individual or Jo Applicable Line) _X_ Form filed by O Form filed by M Person	One Reporting Pe	rson		
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Yo	ear) Executi any	eemed 3. tion Date, if Transac Code h/Day/Year) (Instr. 8		4. Securities Acquired ion(A) or Disposed of (D) (Instr. 3, 4 and 5)			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								524	Ι	401(k) (1)		
Common Stock								2,246	I	By Wife		
Common Stock	02/14/2007			А	2,065 (2)	A	\$ 47.27	7,318	D			
Common Stock	02/14/2007			F	660 <u>(2)</u>	D	\$ 47.27	6,658 <u>(3)</u>	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Edgar Filing: CROWTHER JOHN M - Form 4

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)	5. Number onof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amoun Underlying Securiti (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Sha
Non-qualified Stock Option	\$ 36.51					07/08/2003	07/07/2012	Common Stock	15,0
Non-qualified Stock Option	\$ 36.31					02/05/2004	02/04/2013	Common Stock	12,0
Non-qualified Stock Option	\$ 53.1					02/11/2005	02/10/2014	Common Stock	8,60
Non-qualified Stock Option	\$ 55.23					02/10/2006	02/09/2015	Common Stock	8,10
Non-qualified Stock Option	\$ 39.43					02/20/2007	02/19/2016	Common Stock	8,00
Non-qualified Stock Option	\$ 47.27	02/14/2007		A <u>(4)</u>	7,500	02/14/2008	02/13/2017	Common Stock	7,50

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
CROWTHER JOHN M C/O DIEBOLD, INCORPORATED 5995 MAYFAIR ROAD NORTH CANTON, OH 44720			VP,Chief Information Officer				
Signatures							
Chad F. Hesse, Att'yin-fact for John Crowther	n M.	02	2/16/2007				
** 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) Number of 401(k) shares owned as of most current statement; fractional shares omitted.
- (2) Reflects delivery of performance shares earned for performance period 1/28/2004-1/30/2007 under the 1991 Equity and Performance Incentive Plan, as amended, and withholding of shares pursuant to tax withholding right.
- (3) Number includes restricted stock units
- (4) Granted under the 1991 Equity and Performance Incentive Plan; option is generally exercisable in annual increments of 25% beginning one year from 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.