#### Edgar Filing: BLODNICK MICHAEL J - Form 5

**BLODNICK MICHAEL J** Form 5 January 25, 2011 FORM 5

to Section 16.

5 obligations

may continue. See Instruction

1(b).

Reported

Form 4 Transactions Reported

#### **OMB APPROVAL** OMB UNITED STATES SECURITIES AND EXCHANGE COMMISSION 3235-0362 Number: Washington, D.C. 20549 Check this box if January 31, Expires: no longer subject 2005 Estimated average ANNUAL STATEMENT OF CHANGES IN BENEFICIAL Form 4 or Form burden hours per **OWNERSHIP OF SECURITIES** response... 1.0 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 1. Name and Address of Reporting Person \* 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to Issuer **BLODNICK MICHAEL J** Symbol GLACIER BANCORP INC [GBCI] (Check all applicable)

(Last) (First) (Middle) 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) \_X\_ Director \_X\_ Officer (give title 12/31/2010 below) 49 COMMONS LOOP (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Reporting

Filed(Month/Day/Year)

### KALISPELL, MTÂ 59901

\_X\_ Form Filed by One Reporting Person \_ Form Filed by More than One Reporting Person

10% Owner

below)

President/CEO

(check applicable line)

Other (specify

(City)	(State)	(Zip) Tab	ole I - Non-De	rivative S	ecurit	ies Acq	uired, Dispose	d of, or Benef	icially Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securi Acquirec Disposec (Instr. 3, Amount	d (A) of d of (E 4 and (A) or	))	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	Â	Â	Â	Â	Â	Â	237,089	D	Â
Common Stock	Â	Â	Â	Â	Â	Â	32,509 <u>(1)</u>	I	401(k)/Profit Sharing Plan
Common Stock	Â	Â	Â	Â	Â	Â	119,449	I	Wife
Common Stock	Â	Â	Â	Â	Â	Â	4,122	Ι	Custodian for children

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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. SEC 2270 (9-02)

# 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. Transaction Code (Instr. 8)	Secu Acqu (A) o	vative urities uired or oosed O) r. 3,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (right to buy)	\$ 20.96	Â	Â	Â	Â	Â	01/25/2008	01/25/2011	Common Stock	22,500
Employee Stock Option (right to buy)	\$ 23.47	Â	Â	Â	Â	Â	01/31/2009	01/31/2012	Common Stock	15,000
Employee Stock Option (right to buy)	\$ 18.19	Â	Â	Â	Â	Â	01/30/2010	01/30/2013	Common Stock	11,250
Employee Stock Option (right to buy)	\$ 15.37	Â	Â	Â	Â	Â	01/28/2011	01/28/2014	Common Stock	7,500

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
1 0	Director	10% Owner	Officer	Other				
BLODNICK MICHAEL J 49 COMMONS LOOP KALISPELL, MT 59901	ÂX	Â	President/CEO	Â				

## Signatures

Michael J. Blodnick

01/22/2011

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) Adjusted for shares acquired through dividend reinvestment in 401(k)/Profit Sharing Plan.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.