Edgar Filing: FIRST INTERSTATE BANCSYSTEM INC - Form 4

FIRST INTE Form 4 October 03, 2	RSTATE BANC	SYSTEM IN	IC							
FORM	ΙΔ							OMB AF	PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							COMMISSION	OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or					NERSHIP OF	Expires: January 31, 2005 Estimated average burden hours per				
Form 5 obligation may cont	Form 5 obligations may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940									
(Print or Type R	Responses)									
NANCE ROBERT L Symbol FIRST I			Issuer Name and abol RST INTERST NCSYSTEM	TATE		ng	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) PO BOX 71	(Last) (First) (Middle) 3. Date of (Month/Da PO BOX 7168 09/29/20			-			X_ Director 10% Owner Officer (give title Other (specify below)			
			f Amendment, Da d(Month/Day/Year	-	l		 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
BILLINGS,	MT 59103						Form filed by M Person			
(City)	(State) (Zip)	Table I - Non-E	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Data	Code (Instr. 8)	4. Securi on(A) or Di (Instr. 3, Amount	spose	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)	Indirect Beneficial	
Common Stock	09/29/2006		Р	647	A	\$ 77.25	20,330	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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amou	int of	Derivative	Deriv
Security	or Exercise	•	any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Securi	ities	(Instr. 5)	Bene
. ,	Derivative			. ,	Securities			(Instr.	3 and 4)	. ,	Owne
	Security				Acquired			,	,		Follo
	2				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
					, ,						
									Amount		
						Date	Expiration		or		
						Exercisable Date	Title	Title Number			
									of		
				Code V	(A) (D)				Shares		
_											

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Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
NANCE ROBERT L								
PO BOX 7168	Х							
BILLINGS, MT 59103								
Signatures								
/s/: Terrill R. Moore, Attorney- Person	09/29/2006							

**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).

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.