GLACIER BANCORP INC Form 3/A January 12, 2016 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB approval

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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 Responses)

1. Name and Address of Reporting Person <u>*</u> SEMMENS MARK J			2. Date of Event Re Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol GLACIER BANCORP INC [GBCI]					
(Last) 49 COMMO	(Last) (First) (Middle) 01/11/2 COMMONS LOOP		01/11/2016	Person(s) to I		Filed(Mo	5. If Amendment, Date Original Filed(Month/Day/Year) 01/11/2016			
KALISPEL	(Street) L, MT S	59901		X Directo	all applicable) r 10% O Other w) (specify below	wner Filing(Ch _X_Form v) Person Form	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Tab	ole I - Non-Derivat	tive Securitie	s Beneficiall	Beneficially Owned			
1.Title of Secu (Instr. 4)	rity		Ben	mount of Securities eficially Owned tr. 4)	Ownership	4. Nature of Ind Ownership (Instr. 5)	irect Beneficial			
Reminder: Rep owned directly	-	ate line for ea	ch class of securities	s beneficially S	EC 1473 (7-02)					
ŗ	inforn requir currer	nation conta ed to respo ntly valid Ol	pond to the collec ained in this form nd unless the for MB control numbe rities Beneficially O	are not m displays a	, warrants, optic	ons, convertible	e securities)			
1. Title of Der (Instr. 4)	ivative Securi	-	te Exercisable and ration Date	3. Title and Amount o Securities Underlying	f 4. Conversion	5. 1 Ownership	6. Nature of Indirect Beneficial Ownership			

(Month/Day/Year)	ate	Derivative Security (Instr. 4)		or Exercise Price of	Form of Derivative	(Instr. 5)
Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I) (Instr. 5)	

3235-0104

January 31,

2005

0.5

Number:

Expires:

response...

Estimated average burden hours per

Reporting Owners

Reporting Owner Name / Address	Relationships					
1	Director	Director 10% Owner		Other		
SEMMENS MARK J 49 COMMONS LOOP KALISPELL, MT 59901	ÂX	Â	Â	Â		
Signatures						
LeeAnn Wardinsky on behalf o Semmens	f Mark J		01/	12/2016		
**Signature of Reporting Pe	Date					
Explanation of Deenenees						

Explanation of Responses:

No securities are beneficially owned

* If the form is filed by more than one reporting person, see Instruction 5(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.