#### STERLING FINANCIAL CORP /WA/

Form 5

January 30, 2007

## FORM 5

#### **OMB APPROVAL**

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**OMB** 3235-0362 Number: January 31,

no longer subject to Section 16. Form 4 or Form 5 obligations may continue.

Check this box if

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

2005 Estimated average

1.0

OWNERSHIP OF SECURITIES See Instruction

burden hours per response...

Expires:

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940

Form 4 Transactions

Reported

1. Name and A GILKEY HA	ddress of Reporting F AROLD B	Symbol STERL	2. Issuer Name and Ticker or Trading Symbol STERLING FINANCIAL CORP /WA/ [STSA]				5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
(Last)	, , , , , ,	(Month/D	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2006				_X_ Director _X_ Officer (giv below) CEO & C		6 Owner er (specify Board	
(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Reporting  (check applicable line)				
SPOKANE,	WA 99201						_X_ Form Filed by One Reporting Person Form Filed by More than One Reporting Person			
(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially 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. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)  (A) or Amount (D) Price		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	232,818	D	Â	

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

12/31/2006

12/31/2006

12/31/2006

12/31/2006

 $J^{(1)}$ 

 $J^{(2)}$ 

877

0.5

Common

Common

Stock

Stock

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.

\$0

\$0

D

30,989

41,254

Ι

Ι

SEC 2270 (9-02)

401(k)

**Spouse** 

Plan

**IRA** 

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# 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 Exerc	cisable and	7. Titl	e and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration D	ate	Amou	int of	Derivative
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)
	Derivative				Securities			(Instr.	3 and 4)	
	Security				Acquired					
					(A) or					
					Disposed					
					of (D)					
					(Instr. 3,					
					4, and 5)					
									Amount	
									or	
						Date	Expiration	Title	Number	
						Exercisable	Date		of	
					(A) (D)				Shares	

of D Se

Is

### **Reporting Owners**

Reporting Owner Name / Address	Relationships						
r	Director	10% Owner	Officer	Othe			
GILKEY HAROLD B 111 N. WALL STREET SPOKANE, WA 99201	ÂΧ	Â	CEO & Chairman of the Board	Â			

### **Signatures**

Daniel G. Byrne 01/30/2007

\*\*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).
- (2) Adjustment to reflect an incorrect rounding of shares by the Transcentive stock administration program.
- (1) To balance 401(k) share ownership at 12/31/2006 -- This footnote reflects the shares owned by the employee as well as the company match at 12/31/2006.

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.

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