FIRST INTERSTATE BANCSYSTEM INC Form 3 July 10, 2007 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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> Castle Julie G			2. Date of Event Requirin Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol FIRST INTERSTATE BANCSYSTEM INC [N/A]						
(Last)	(First)	(Middle)	07/06/2007		4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)		
PO BOX 309	918									
(Street) BILLINGS, MT 59166-0918				(Check	(Check all applicable)			6. Individual or Joint/Group		
				X Officer (give title below	Director 10% Owner X_Officer Other (give title below) (specify below) President, Financial Services		Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table I -	Cable I - Non-Derivative Securities Beneficially Owned						
1.Title of Secur (Instr. 4)	ity		2. Amount Beneficiall (Instr. 4)	of Securities y Owned	3. Owner Form: Direct or Indi (I) (Instr.	rship Ow (Ins (D) rect	lature of Indire nership tr. 5)	ct Beneficial		
Reminder: Repo owned directly		e line for ea	ch class of securities benef	icially SI	EC 1473	3 (7-02)				
	informa require	ation conta d to respo	oond to the collection o ined in this form are no nd unless the form dis //B control number.	ot						
Т	able II - Deriv	vative Secur	rities Beneficially Owned	(e.g., puts, calls,	warran	its, options,	convertible s	ecurities)		
1. Title of Deriv (Instr. 4)	vative Security	2. Date E Expiratio (Month/Day/M	n Date Secu	tle and Amount o urities Underlying vative Security r. 4)	g (c I	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
		D	F · .·		1	Jenvalive	Security.			

Security

Amount or

Number of

Shares

Direct (D)

or Indirect

(Instr. 5)

(I)

Date

Exercisable

Expiration

Title

Date

OMB APPROVAL

OMB Number: 3235-0104 Expires: January 31, 2005 Estimated average burden hours per response... 0.5

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Stock Options	07/02/2007	07	//02/2017	Common Stock	5,000	\$ 89	D	Â	
Reporting Owners									
Reporting Owner Name / A	ddress	Relationships							
	Dire	ctor	10% Owner	Officer	Officer		Other		
Castle Julie G PO BOX 30918 BILLINGS, MT 59160	Â 5-0918		Â	Presid	lent, Financial Services		Â		

Signatures

/s/: Terrill R. Moore, Attorney-in-Fact for Reporting Person	07/09/2007
**Signature of Reporting Person	Date

Explanation of Responses:

* 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.