FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | |
|--------------|----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-028 | | | | | | | |

Estimated average burden hours per response: 0.5

| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 | |
|---|---|--|
| ame and Address of Reporting Person* | 2. Issuer Name and Ticker or Trading Symbol | |

| 1. Name and Address of Reporting Person* BLODNICK MICHAEL J | | | | | | 2. Issuer Name and Ticker or Trading Symbol GLACIER BANCORP INC [GBCI] | | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | | |
|---|---|--------------------------------------|---|----------|--|--|---|--------------|---|----------|--|--|-----------------|---|---|---|---------------|---|---|--------|--|
| (Last) (First) (Middle) 49 COMMONS LOOP | | | | | Date o | | Trans | saction (Mon | th/D | ay/Year) | X | below) | | Other (s below) dent/CEO | | pecify | | | | | |
| (Street) KALISPELL MT | | 59901 | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Line) | ndividual or Joint/Group Filing (Check Appel) X Form filed by One Reporting Person Form filed by More than One Repor | | | ı | | | | |
| (City) | (S | | (Zip) | Doriv | otive | | ouritios | . ^ ^ | auirod D | ior | | f or D | nof | | | | | | | - | |
| 1. Title of Security (Instr. 3) | | | 2. Trans Date | | saction | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. | | 4. Securities Acquired Disposed Of (D) (Instruction) | | red (A |) or | 5. Amount of Securities Beneficially Owned Followin | | Form (D) o | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | , | Amount | Amount (A) or (D) | | Price | Reported Transact (Instr. 3 a | ion(s) | | | (Instr. 4) | | |
| | I. | | | e.g., p | uts, | | s, warra | ants | , options | , C | onvertil | ole sec | uriti | es) | | | | , | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution I if any (Month/Day | Date, Ti | 4. Transaction Code (Instr. 8) | | | | 6. Date Exercisa Expiration Date (Month/Day/Yea | | | 7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4) | | urity | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | Beneficial Ownership (Instr. 4) | t d | |
| | | | | С | Code | v | (A) | (D) | Date Exercisable | | xpiration ate | Title | or Nui of | ount mber ares | | | | | | | |
| Employee Stock Option (right to buy) | \$13.37 | | | | | | | | 01/28/2006 | 0: | 1/28/2009 | Common Stock | 7, | 032 | | 7,032 | ! | D | | | |
| Employee Stock Option (right to buy) | \$16.67 | | | | | | | | 01/26/2007 | 0: | 1/26/2010 | Common Stock | 7, | 443 | | 14,47 | 5 | D | | | |
| Employee Stock Option (right to buy) | \$20.96 | | | | | | | | 01/25/2008 | 0: | 1/25/2011 | Common Stock | 22 | ,500 | | 36,97 | 5 | D | | | |
| Employee Stock Option (right to buy) | \$23.47 | | | | | | | | 01/31/2009 | 0: | 1/31/2012 | Common Stock | 15 | ,000 | | 51,97 | 5 | D | | | |
| Employee Stock Option | \$18.19 | 01/30/2008 | | | A | | 11,250 | | 01/30/2010 | 0: | 1/30/2013 | Common | 11 | ,250 | \$18.19 | 63,22 | 5 | D | | | |

Explanation of Responses:

Remarks:

Michael J. Blodnick

01/31/2008

** Signature of Reporting Person

Date

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

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.

^{*} 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).