### Edgar Filing: Stein Clint - Form 4

Stein Clint											
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March 01, 20	13										
FORM	4		GEGUD						т	PPROVAL	
	UNITED	STATES		hington,			NGE (	COMMISSION	OMB Number:	3235-0287	
Section 16.									Expires:	January 31 2005	
				HANGES IN BENEFICIAL OWNERSHIP O SECURITIES					Estimated average burden hours per		
Form 4 or Form 5			Testion 16	(a) = f + b = a	Conniti	a E		A -+ -f 1024	response	0.5	
obligation	- ·						-	ge Act of 1934, f 1935 or Sectio	m		
may contin <i>See</i> Instruc 1(b).	nue.		of the Inv	•	•	- ·			<u>, , , , , , , , , , , , , , , , , , , </u>		
(Print or Type R	esponses)										
Stein Clint Syr			2. Issuer Symbol	2. Issuer Name <b>and</b> Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer			
			COLUMBIA BANKING SYSTEM INC [COLB]					(Check all applicable)			
(Last)		liddle)	(Month/Da	-	insaction			Director X_Officer (give below)		6 Owner er (specify	
1301 A STREET, SUITE 800 03/			03/01/20	13				Chief Financial Officer			
(Street) 4. If			4. If Amen	. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
Filed(Mon TACOMA, WA 98402				onth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
		· <b></b> · )						Person			
(City)	(State) (	(Zip)	Table	I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Execut		3. Transactic Code (Instr. 8)	Disposed	l (A) c l of (D	)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	02/27/2013			Code V A	Amount 3,000 (1)	or (D) A	Price \$ 0	(Instr. 3 and 4)	D		
Stock											

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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

# **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
	Director	10% Owner	Officer	Other				
Stein Clint 1301 A STREET, SUITE 800 TACOMA, WA 98402			Chief Financial Officer					
Signatures								
/s/ Cathleen L. Dent on behalf Stein	03/01/2013							
<u>**</u> 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).

#### (1) RSA

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.