## Edgar Filing: Lawson David C - Form 4

| Lawson David C  | C                   |   |  |                    |       |                                   |  |  |                             |  |
|---|---------------------|---|--|--------------------|-------|-----------------------------------|--|--|-----------------------------|--|
| Form 4  |                     |   |  |                    |       |                                   |  |  |                             |  |
| March 02, 2018  |                     |   |  |                    |       |                                   |  |  | PROVAL                      |  |
| FORM 4  | <b>4</b> UNITED ST  | ATES SECUR<br>Was                                       |  |                    |       | NGE C                             | OMMISSION  | OMB<br>Number:   | 3235-0287                   |  |
| Washington, D.C. 20549Check this box<br>if no longer<br>subject to<br>Section 16.<br>Form 4 or<br>Form 5<br>obligations<br> |                     |   |  |                    |       | e Act of 1934,<br>1935 or Sectior | January 31Expires:2005Estimated averageburden hours perresponse0.5   |  |                             |  |
| (Print or Type Resp   | oonses)             |   |  |                    |       |                                   |  |  |                             |  |
| Lawson David C Sy   |                     |   | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>COLUMBIA BANKING SYSTEM<br>INC [COLB] |                    |       |                                   | 5. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable)  |  |                             |  |
| (Last)<br>1301 A STREE  | (First) (Mide<br>ET | lle) 3. Date of<br>(Month/D<br>02/28/20                 | -  | ansaction          |       |                                   | Director<br>X_Officer (give<br>below)<br>EVP & C   |  | Owner<br>er (specify<br>cer |  |
|   |                     |   | endment, Date Original<br>onth/Day/Year)   |                    |       |                                   | <ul> <li>6. Individual or Joint/Group Filing(Check<br/>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul> |  |                             |  |
| TACOMA, WA  | A 98402             |   |  |                    |       |                                   | Person   | ore than One Re  | porting                     |  |
| (City)  | (State) (Zip        | ) Table   | e I - Non-D  | erivative <b>S</b> | Secur | ities Acq                         | uired, Disposed of   | , or Beneficial  | ly Owned                    |  |
|   | aı                  | A. Deemed<br>xecution Date, if<br>1y<br>Month/Day/Year) | 3.<br>Transactio<br>Code<br>(Instr. 8)<br>Code V   | (Instr. 3, 4       | spose | d of (D)                          | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4)   | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) |                             |  |
| Common 02   | 2/28/2018           |   | А  | 1,909<br>(1)       | А     | \$<br>41.78                       | 13,575   | D  |                             |  |

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<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transacti<br>Code<br>(Instr. 8) | 5.<br>orNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     | ate                | Secur | ınt of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owna<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|---|---------------------------------------|---|---------------------|--------------------|-------|--|---|--|
|   |   |   |   | Code V                                | (A) (D)   | Date<br>Exercisable | Expiration<br>Date | Title | Amount<br>or<br>Number<br>of<br>Shares |   |  |

## **Reporting Owners**

| Reporting Owner Name / Address                      | dress    |           |                          |       |  |  |  |  |
|---|----------|-----------|--------------------------|-------|--|--|--|--|
|   | Director | 10% Owner | Officer                  | Other |  |  |  |  |
| Lawson David C<br>1301 A STREET<br>TACOMA, WA 98402 |          |           | EVP & Chief H.R. Officer |       |  |  |  |  |
| Signatures  |          |           |                          |       |  |  |  |  |
| /s/ Cathleen Dent on behalf of David C.<br>Lawson   |          |           | 03/02/2018               |       |  |  |  |  |
| <u>**</u> Signature of Reporting Pers               | on       |           | Date                     |       |  |  |  |  |
| Evaluation of Poenoneoe:                            |          |           |                          |       |  |  |  |  |

## **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) Restricted Stock Award

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.