#### Edgar Filing: HERNDON ELIZABETH - Form 5

#### HERNDON ELIZABETH

Form 5

January 26, 2005

## FORM 5

**OMB APPROVAL OMB** UNITED STATES SECURITIES AND EXCHANGE COMMISSION 3235-0362 Number: Washington, D.C. 20549 Check this box if January 31, Expires: no longer subject 2005 to Section 16. Estimated average ANNUAL STATEMENT OF CHANGES IN BENEFICIAL Form 4 or Form burden hours per 5 obligations OWNERSHIP OF SECURITIES response... 1.0 may continue. See Instruction 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 Address of Reporting Person \* 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to Issuer HERNDON ELIZABETH Symbol **NORTHWEST** (Check all applicable) BANCORPORATION INC [nbct] (Middle) 3. Statement for Issuer's Fiscal Year Ended (Last) (First) Director 10% Owner Other (specify X \_ Officer (give title (Month/Day/Year) below) below) 12/31/2004 Senior Vice President 421 WEST RIVERSIDE. STE 113 (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Reporting Filed(Month/Day/Year) (check applicable line) SPOKANE, WAÂ 99201 \_X\_ Form Filed by One Reporting Person Form Filed by More than One Reporting

(State) (City) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1. Title of 2. Transaction Date 2A. Deemed 3. 4. Securities 5. Amount of 6. Ownership 7. Nature of Security (Month/Day/Year) Execution Date, if Transaction Acquired (A) or Securities Form: Direct Indirect (Instr. 3) Code Disposed of (D) Beneficially (D) or Beneficial any (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Owned at end Indirect (I) Ownership of Issuer's (Instr. 4) (Instr. 4) (A) Fiscal Year or (Instr. 3 and 4) (D) Price Amount Common Â Â Â Â Â Â Â 16 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.

**SEC 2270** (9-02)

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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Options	\$ 13.85	12/22/2004	Â	A	750	Â	12/22/2005	12/21/2014	Common Stock	750 <u>(1)</u>
Employee Stock Options	\$ 16	Â	Â	Â	Â	Â	12/01/2000	12/01/2009	Common Stock	2,000 (1)
Employee Stock Options	\$ 10	Â	Â	Â	Â	Â	12/01/2001	12/01/2010	Common Stock	2,000
Employee Stock Options	\$ 10.1	Â	Â	Â	Â	Â	12/19/2003	12/17/2012	Common Stock	500
Employee Stock Options	\$ 13.3	Â	Â	Â	Â	Â	12/17/2004	12/17/2013	Common Stock	1,000 (1)

# **Reporting Owners**

\*\*Signature of Reporting Person

Reporting Owner Name / Address	Relationships					
• 0	Director	10% Owner	Officer	Other		
HERNDON ELIZABETH 421 WEST RIVERSIDE STE 113 SPOKANE, WA 99201	Â	Â	Senior Vice President	Â		
Signatures						
Holly Austin, by power of attorney	(	01/26/2005				

Date

Reporting Owners 2

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# **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).
- Shares will be increased and price decreased to adjust for any stock dividend(s) granted subsequent to option issue date. Options are subject to a 20% per year vesting schedule.

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.