Mateo Miguel A
Form 3
August 14, 2009

(Print or Type Responses)

1. Name and Address of Reporting Person. *

| A |  |  |
| :--- | :--- | :--- |
| (Last) | (First) | (Middle) |

C/O DIEBOLD,
INCORPORATED,Â 5995
MAYFAIR ROAD
(Street)

NORTH
CANTON, Â OHÂ 44720

$$
\text { (City) } \quad \text { (State) } \quad \text { (Zip) }
$$

1.Title of Security
(Instr. 4)
2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Statement
(Month/Day/Year)
08/05/2009
DIEBOLD INC [DBD]
4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year)
(Check all applicable)

| $\qquad$ Director $\qquad$ 10\% Owner$\qquad$ Officer $\qquad$ Other (give title below) (specify below) VP,Latin America Division |  |  |
| :---: | :---: | :---: |
|  |  | Filing(Check Applic |
|  |  | _X_Form filed by One Reporting |
|  |  | Person |
|  |  | Form filed by More than One |
|  |  | Reporting Person |

Table I - Non-Derivative Securities Beneficially Owned

| 2. Amount of Securities | 3. | 4. Nature of Indirect Beneficial |
| :--- | :--- | :--- |
| Beneficially Owned | Ownership | Ownership |
| (Instr. 4) | Form: | (Instr. 5) |
|  | Direct (D) <br> or Indirect <br>  <br>  <br>  <br>  <br>  <br> (I) <br> (Instr. 5) |  |
|  |  |  |

2,133
3,237 (2)
I $\quad 401(\mathrm{k}) \underline{(1)}$
D $\hat{A}$

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

SEC 1473 (7-02)

> 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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security | 2. Date Exercisable and | 3. Title and Amount of <br> (Instr. 4) | Expiration Date <br> (Month/Day/Year) | Securities Underlying <br> Derivative Security | Conversion <br> or Exercise |
| :--- | :--- | :--- | :--- | :--- | :--- | | Ownership |
| :--- |
| Form of |$\quad$| 6. Nature of Indirect |
| :--- |
| Beneficial |
| Ownership |


|  | Date <br> Exercisable | Expiration Date | (Instr. 4) <br> Title | Amount or Number of Shares | Price of Derivative Security | Derivative Security: Direct (D) or Indirect (I) (Instr. 5) | (Instr. 5) |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Nonqualified Stock Option | 02/05/2004 | 02/04/2013 | Common <br> Stock | 200 | \$ 36.31 | D | A |
| Nonqualified Stock Option | 02/11/2005 | 02/10/2014 | Common <br> Stock | 5,000 | \$ 53.1 | D | Â |
| Nonqualified Stock Option | 02/10/2006 | 02/09/2015 | Common <br> Stock | 4,700 | \$ 55.23 | D | Â |
| Nonqualified Stock Option | 02/20/2007 | 02/19/2016 | Common <br> Stock | 4,000 | \$ 39.43 | D | Â |
| Nonqualified Stock Option | 02/14/2008 | 02/13/2017 | Common <br> Stock | 5,000 | \$ 47.27 | D | A |
| Nonqualified Stock Option | 02/13/2009 | 02/12/2018 | Common <br> Stock | 5,000 | \$ 25.53 | D | A |
| Nonqualified Stock Option | 02/11/2010 | 02/10/2019 | Common <br> Stock | 7,000 | \$ 24.79 | D | Â |

## Reporting Owners

Reporting Owner Name / Address

## Relationships

Director $10 \%$ Owner Officer Other
Mateo Miguel A
C/O DIEBOLD, INCORPORATED
5995 MAYFAIR ROAD
NORTH CANTON,Â OHÂ 44720
$\hat{A} \quad \hat{A} \quad \hat{A}$ VP,Latin America Division $\hat{A}$

## Signatures

Chad F. Hesse, Att'y.-in-fact for Miguel A. Mateo
**Signature of Reporting Person

08/14/2009

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).
(1) Number of $401(\mathrm{k})$ shares owned as of most current statement; fractional shares omitted.
(2) Number includes restricted stock units

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.

