LEVY RICHARD

Form 4 March 01, 2010

## FORM 4

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** Number:

3235-0287

Expires:

5. Relationship of Reporting Person(s) to

Issuer

January 31, 2005

0.5

Estimated average burden hours per

response...

**OMB APPROVAL** 

subject to Section 16. Form 4 or Form 5 obligations may continue.

Check this box

if no longer

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

WELLS FARGO & CO/MN [WFC]

Symbol

1(b).

(Print or Type Responses)

LEVY RICHARD

1. Name and Address of Reporting Person \*

See Instruction

		WELLS	S FARGO & CO/MN [WFC]	(Check all applicable)							
(Last) 343 SANSO	(First) (		f Earliest Transaction Day/Year) 2010	Director 10% Owner Other (specify below) below)  Executive VP & Controller							
			endment, Date Original nth/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person							
SAN FRANCISCO, CA 94104  SAN FRANCISCO, CA 94104  Experimental by one Reporting  — Form filed by More than One Person											
(City)	(State) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1.Title of Security (Instr. 3)  Common Stock, \$1 2/3 Par	2. Transaction Da (Month/Day/Year		Code Disposed of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
Value Common Stock, \$1 2/3 Par Value				99	I	Ira					
Common Stock, \$1 2/3 Par Value				3,478.828 (1)	I	Through 401(k) Plan					

#### Edgar Filing: LEVY RICHARD - Form 4

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 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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. Transactio Code (Instr. 8)	5. Number of or Derivative Securities Acquired (A) or Disposed of (I (Instr. 3, 4, and 5)	Expiration I (Month/Day	6. Date Exercisable and Expiration Date (Month/Day/Year)		Amount of Securities 4)
				Code V	(A) (I	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Phantom Stock Units	(2)	02/26/2010		A	20.5864	(3)	(3)	Common Stock, \$1 2/3 Par Value	20.5864

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

LEVY RICHARD 343 SANSOME STREET SAN FRANCISCO, CA 94104

Executive VP & Controller

## **Signatures**

Richard Levy, by Anthony R. Augliera, as Attorney-in-Fact

03/01/2010

\*\*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) Reflects share equivalent of units in the Wells Fargo ESOP Fund of 401(k) Plan as of January 31, 2010, as if investable cash equivalents held by the Plan were fully invested in Wells Fargo & Company Common Stock.
- (2) Conversion price is 1-for-1. Includes shares held through supplemental 401(k) plan.
- (3) Supplemental 401(k) plan shares payable upon retirement.

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.

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