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OMAN MA Form 4 September 2													
FORM	ПЛ										PPROVAL		
	UNITED S	STATES						NGE	COMMISSION	OMB Number:	3235-0287		
Check th if no long subject to Section 1 Form 4 of Form 5	ger o STATEM 16. or										Lanuary 31Expires:2005Estimated averageburden hours perresponse0.5		
obligatio may con <i>See</i> Instr 1(b).	tinue. Section $17(a$	a) of the l		tility Ho	old	ing Con	npany	y Act o	of 1935 or Sectio	on			
(Print or Type]	Responses)												
			2. Issuer Name and Ticker or Trading Symbol						5. Relationship of Reporting Person(s) to Issuer				
(Last)	(Last) (First) (Middle) 3. Date of Earliest Tr						/IN [WFC]	(Chee	eck all applicable)			
(Mor			(Month/E 09/26/2	ay/Year)		insaction			Director 10% Owner X Officer (give title Other (specify below) Sr. Executive Vice President				
	(Street)		4. If Ame Filed(Mor			-	l		6. Individual or J Applicable Line) _X_ Form filed by Form filed by 1	One Reporting I	Person		
	IES, IA 50328								Person		eporting		
(City)	(State) ((Zip)	Tabl	e I - Non	-De	erivative	Secur	ities Ac	equired, Disposed o	of, or Beneficia	ally Owned		
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)			if TransactionAcquired (A) or Code Disposed of (D) r) (Instr. 8) (Instr. 3, 4 and 5) (A)					Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4)	Indirect Beneficial Ownership			
C				Code	V	Amount	(D)	Price	(Instr. 3 and 4)				
Common Stock, \$1 2/3 Par Value	09/26/2009			А		6,210 (1)	A	\$ 0	517,904	D			
Common Stock, \$1 2/3 Par Value									4,160	I	As Custodian For Daughter Under Ugma		
Common Stock, \$1									4,160	Ι	As Custodian		

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2/3 Par Value								For S Unde Ugm	er		
Common Stock, \$1 2/3 Par Value					17,865.09 (2)	938 I		Thro 401(1	ugh () Plan		
Common Stock, \$1 2/3 Par Value					110,000	Ι		Thro Fami	ugh ly Llc		
8% Pfd., Series J					3,000	D					
Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) 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)											
1. Title of 2. Derivative Conversion Security or Exercise (Instr. 3) Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Deemed 4. 5. 6. Date Exer cution Date, if TransactionNumber Expiration D Code of (Month/Day		ate	Amount of		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

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
OMAN MARK C ONE HOME CAMPUS 4TH FLOOR DES MOINES, IA 50328			Sr. Executive Vice President					

Signatures

Mark C. Oman, by Ross E. Jeffries, as Attorney-in-Fact

09/28/2009

**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).

Shares of Wells Fargo & Company (the "Company") common stock acquired under the Company's Long-Term Incentive Compensation Plan. As a condition to receiving these shares, the reporting person agreed to hold and not transfer, for the entire period during which the

- (1) Company has any obligations outstanding under the U.S. Treasury's Troubled Asset Relief Program (the "Restriction Period"), all of the shares received. These transfer restrictions will terminate upon the earlier of the end of the Restriction Period or the date of the reporting person's death or disability.
- (2) Reflects share equivalent of units in Wells Fargo Stock Fund and ESOP Fund of 401(k) Plan as of August 31, 2009, as if investable cash equivalents held by Plan were fully invested in Wells Fargo & Company Common Stock.

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.