#### WELLS FARGO & CO/MN

Form 4 January 29, 2009

## 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:

January 31, 2005

0.5

Estimated average burden hours per

**OMB APPROVAL** 

response...

if no longer subject to Section 16. Form 4 or Form 5

Check this box

obligations may continue. See Instruction

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

1(b).

value

(Print or Type Responses)

|                                      | STEPHEN W                               | Symbol                                                      | er Name <b>an</b><br>LS FARGO           |            |        | ]             | S. Relationship of I                                                                                               | Reporting Pers                                           | · ·                                                   |
|--------------------------------------|-----------------------------------------|-------------------------------------------------------------|-----------------------------------------|------------|--------|---------------|--------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|-------------------------------------------------------|
|                                      |                                         |                                                             | 01/29/2009                              |            |        |               | _X Director                                                                                                        | **                                                       | Owner                                                 |
| WAYZATA                              | (Street)<br>A, MN 55391                 |                                                             | nendment, D<br>onth/Day/Yea             | Č          | al     | -<br>-        | 5. Individual or Joi<br>Applicable Line)<br>_X_ Form filed by O<br>Form filed by Mo<br>Person                      | ne Reporting Pe                                          | erson                                                 |
| (City)                               | (State)                                 | (Zip) Ta                                                    | ble I - Non-                            | Derivative | Secu   | rities Acqu   | ired, Disposed of,                                                                                                 | or Beneficial                                            | ly Owned                                              |
| 1.Title of<br>Security<br>(Instr. 3) | 2. Transaction Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 3.<br>Transaction<br>Code<br>(Instr. 8) |            | sed of |               | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| Common<br>Stock, \$1<br>2/3 par      | 01/29/2009                              |                                                             | P                                       | 2,000      | A      | \$<br>19.8995 | 2,400                                                                                                              | D                                                        |                                                       |

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

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)

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| 1. Title of | 2.          | 3. Transaction Date |                    | 4.         | 5.         | 6. Date Exerc       |                    | 7. Titl               |          | 8. Price of | 9. Nu  |
|-------------|-------------|---------------------|--------------------|------------|------------|---------------------|--------------------|-----------------------|----------|-------------|--------|
| Derivative  | Conversion  | (Month/Day/Year)    | Execution Date, if | Transacti  | orNumber   | Expiration D        | ate                | Amou                  | int of   | Derivative  | Deriv  |
| Security    | or Exercise |                     | any                | Code       | of         | (Month/Day/         | Year)              | Under                 | lying    | Security    | Secui  |
| (Instr. 3)  | Price of    |                     | (Month/Day/Year)   | (Instr. 8) | Derivative | e                   |                    | Securi                | ities    | (Instr. 5)  | Bene   |
|             | Derivative  |                     | •                  |            | Securities |                     |                    | (Instr.               | 3 and 4) |             | Owne   |
|             | Security    |                     |                    |            | Acquired   |                     |                    |                       |          |             | Follo  |
|             |             |                     |                    |            | (A) or     |                     |                    |                       |          |             | Repo   |
|             |             |                     |                    |            | Disposed   |                     |                    |                       |          |             | Trans  |
|             |             |                     |                    |            | of (D)     |                     |                    |                       |          |             | (Instr |
|             |             |                     |                    |            | (Instr. 3, |                     |                    |                       |          |             | (      |
|             |             |                     |                    |            | 4, and 5)  |                     |                    |                       |          |             |        |
|             |             |                     |                    |            | .,         |                     |                    |                       |          |             |        |
|             |             |                     |                    |            |            |                     |                    |                       | Amount   |             |        |
|             |             |                     |                    |            |            | Date<br>Exercisable | Expiration<br>Date | or<br>Title Num<br>of | or       |             |        |
|             |             |                     |                    |            |            |                     |                    |                       | Number   |             |        |
|             |             |                     |                    |            |            |                     |                    |                       | of       |             |        |
|             |             |                     |                    | Code V     | (A) (D)    |                     |                    |                       | Shares   |             |        |

# **Reporting Owners**

Reporting Owner Name / Address

Director 10% Owner Officer Other

SANGER STEPHEN W

OPTIMUS HOLDINGS, INC.
294 GROVE LANE EAST, SUITE 280

WAYZATA, MN 55391

### **Signatures**

Stephen W. Sanger, by Robert S. Singley, Attorney-in-Fact

01/29/2009

\*\*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).

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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