#### GEOGLOBAL RESOURCES INC.

Form 4

January 02, 2013

# FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL** OMB

Number:

3235-0287

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January 31, 2005

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Form 5 obligations may continue.

See Instruction

1 Name and Address of Departing Da

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).

(Print or Type Responses)

	ress of Reporting Per evelopment Comp	pany- Symbol	Name and Ticker or Trading OBAL RESOURCES IN	Issuer C.	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
(Last) 2, ARIE SHEN	(First) (Mic	3. Date of (Month/Date 12/31/20		Director Officer (give ti	tle 10% Owner Other (specify below)			
TEL ANIN I	(Street)		ndment, Date Original th/Day/Year)	Applicable Line) _X_ Form filed by Or	nt/Group Filing(Check ne Reporting Person ore than One Reporting			
TEL-AVIV, L	3 68010			Person	no man one reporting			
(City)	(State) (Zi	ip) Table	e I - Non-Derivative Securities	s Acquired, Disposed of,	or Beneficially Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code (Instr. 3, 4 and 5	of (D) Securities	6. 7. Nature of Ownership Indirect Form: Beneficial Direct (D) Ownership or Indirect (Instr. 4) (I) (Instr. 4)			
Common Stock,\$0.001 per share	12/31/2012		S 28,313 D	\$ 48,060,424 0.059	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)

#### Edgar Filing: GEOGLOBAL RESOURCES INC. - Form 4

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transactio	5. orNumber	6. Date Exerc Expiration Da		7. Title Amoun		8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security	(Monan Day) Teal)	any (Month/Day/Year)	Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/		Underly Securiti (Instr. 3	ying les	Security (Instr. 5)	Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title N	Amount or Number of Shares		

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Israel Land Development Company- Energy Ltd. 2, ARIE SHENKAR TEL-AVIV, L3 68010

## **Signatures**

/s/ Yosef Meir, Director on behalf of The Israel Land Development Company - Energy Ltd.

01/02/2013

\*\*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. ew Roman; font-size:12pt">

**NUMBER OF** 

**SHARES** 

BENEFICIALLY

OWNED BY

**EACH** 

REPORTING

**PERSON** 

Reporting Owners 2

#### WITH

WIII
5
SOLE VOTING POWER
NONE
6
SHARED VOTING POWER
800,000 shares of Common Stock
7
SOLE DISPOSITIVE POWER
NONE
8
SHARED DISPOSITIVE POWER
800,000 shares of Common Stock
9
AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON
800,000 shares of Common Stock
10
CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES
Not applicable.

11

### Edgar Filing: GEOGLOBAL RESOURCES INC. - Form 4

### PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

Less than 0.1%

12

TYPE OF REPORTING PERSON

CO

CUSIP No. 949746 10 1 13G Page 10 of 49 Pages 1 NAME OF REPORTING PERSON National Liability & Fire Insurance Company CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP 2 **(b)** (a) 3 **SEC USE ONLY** CITIZENSHIP OR PLACE OF ORGANIZATION 4 State of Connecticut 5 SOLE VOTING POWER **NUMBER OF NONE SHARES** SHARED VOTING POWER **BENEFICIALLY OWNED BY** 2,788,000 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER **WITH** 2,788,000 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 2,788,000 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

### 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

0.1%

#### 12 TYPE OF REPORTING PERSON

13G CUSIP No. 949746 10 1 Page 11 of 49 Pages 1 NAME OF REPORTING PERSON Cypress Insurance Company CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP 2 **(b)** (a) 3 **SEC USE ONLY** 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of California 5 SOLE VOTING POWER **NUMBER OF NONE SHARES SHARED VOTING POWER BENEFICIALLY OWNED BY** 820,000 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** SHARED DISPOSITIVE POWER **WITH** 820,000 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 820,000 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

### 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

Less than 0.1%

#### 12 TYPE OF REPORTING PERSON

CUSIP No. 949746 10 1 13G Page 12 of 49 Pages 1 NAME OF REPORTING PERSON National Indemnity Company of the South CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP 2 **(b)** (a) 3 **SEC USE ONLY** 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Florida 5 SOLE VOTING POWER **NUMBER OF NONE SHARES SHARED VOTING POWER BENEFICIALLY OWNED BY** 460,000 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** SHARED DISPOSITIVE POWER **WITH** 460,000 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 460,000 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

### 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

Less than 0.1%

#### 12 TYPE OF REPORTING PERSON

CUSIP No. 949746 10 1 13G Page 13 of 49 Pages 1 NAME OF REPORTING PERSON Redwood Fire and Casualty Insurance Company CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP 2 **(b)** (a) 3 **SEC USE ONLY** 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Nebraska 5 SOLE VOTING POWER **NUMBER OF NONE SHARES** SHARED VOTING POWER **BENEFICIALLY OWNED BY** 241,940 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER **WITH** 241,940 shares of Common Stock AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 9 241,940 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

### 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

Less than 0.1%

#### 12 TYPE OF REPORTING PERSON

CUSIP No. 949746 10 1 13G Page 14 of 49 Pages 1 NAME OF REPORTING PERSON **GEICO Corporation** 2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) **(b)** 3 **SEC USE ONLY** 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Delaware 5 SOLE VOTING POWER **NUMBER OF NONE SHARES** SHARED VOTING POWER **BENEFICIALLY OWNED BY** 29,365,900 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER **WITH** 29,365,900 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 29,365,900 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

### 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

0.6%

#### 12 TYPE OF REPORTING PERSON

HC, CO

CUSIP No. 949746 10 1 13G Page 15 of 49 Pages 1 NAME OF REPORTING PERSON Government Employees Insurance Company CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP 2 (a) **(b)** 3 **SEC USE ONLY** 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Maryland 5 SOLE VOTING POWER **NUMBER OF NONE SHARES** SHARED VOTING POWER **BENEFICIALLY OWNED BY** 17,631,400 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** SHARED DISPOSITIVE POWER **WITH** 17,631,400 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 17,631,400 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

### 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

0.4%

#### 12 TYPE OF REPORTING PERSON

13G CUSIP No. 949746 10 1 Page 16 of 49 Pages 1 NAME OF REPORTING PERSON General Re Corporation 2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP **(b)** (a) 3 **SEC USE ONLY** 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Delaware 5 SOLE VOTING POWER **NUMBER OF NONE SHARES** SHARED VOTING POWER **BENEFICIALLY OWNED BY** 22,580,200 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER **WITH** 22,580,200 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 22,580,200 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

### 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

0.5%

#### 12 TYPE OF REPORTING PERSON

HC, CO

CUSIP No. 949746 10 1 13G Page 17 of 49 Pages 1 NAME OF REPORTING PERSON General Reinsurance Corporation CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP 2 **(b)** (a) 3 **SEC USE ONLY** 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Delaware 5 SOLE VOTING POWER **NUMBER OF NONE SHARES** SHARED VOTING POWER **BENEFICIALLY OWNED BY** 22,580,200 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER **WITH** 22,580,200 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 22,580,200 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

### 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

0.5%

#### 12 TYPE OF REPORTING PERSON

13G CUSIP No. 949746 10 1 Page 18 of 49 Pages 1 NAME OF REPORTING PERSON U.S. Investment Corporation CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP 2 **(b)** (a) 3 **SEC USE ONLY** 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Pennsylvania 5 SOLE VOTING POWER **NUMBER OF NONE SHARES** SHARED VOTING POWER **BENEFICIALLY OWNED BY** 2,000,000 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER **WITH** 2,000,000 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 2,000,000 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

### 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

Less than 0.1%

#### 12 TYPE OF REPORTING PERSON

HC, CO

CUSIP No. 949746 10 1 13G Page 19 of 49 Pages 1 NAME OF REPORTING PERSON Mount Vernon Fire Insurance Company CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP 2 **(b)** (a) 3 **SEC USE ONLY** 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Pennsylvania 5 SOLE VOTING POWER **NUMBER OF NONE SHARES** SHARED VOTING POWER **BENEFICIALLY OWNED BY** 1,922,600 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER **WITH** 1,922,600 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 1,922,600 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

### 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

Less than 0.1%

#### 12 TYPE OF REPORTING PERSON

CUSIP No. 949746 10 1 13G Page 20 of 49 Pages 1 NAME OF REPORTING PERSON The Medical Protective Company CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP 2 **(b)** (a) 3 **SEC USE ONLY** 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Indiana 5 SOLE VOTING POWER **NUMBER OF NONE SHARES** SHARED VOTING POWER **BENEFICIALLY OWNED BY** 9,272,000 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** SHARED DISPOSITIVE POWER **WITH** 9,272,000 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 9,272,000 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

### 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

0.2%

#### 12 TYPE OF REPORTING PERSON

13G CUSIP No. 949746 10 1 Page 21 of 49 Pages 1 NAME OF REPORTING PERSON United States Liability Insurance Company CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP 2 (a) **(b)** 3 **SEC USE ONLY** 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Pennsylvania 5 SOLE VOTING POWER **NUMBER OF NONE SHARES** SHARED VOTING POWER **BENEFICIALLY OWNED BY** 77,400 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER **WITH** 77,400 shares of Common Stock AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 9 77,400 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

### 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

Less than 0.1%

#### 12 TYPE OF REPORTING PERSON

CUSIP No. 949746 10 1 13G Page 22 of 49 Pages 1 NAME OF REPORTING PERSON MedPro Group Inc. 2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) **(b)** 3 **SEC USE ONLY** 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Indiana 5 SOLE VOTING POWER **NUMBER OF NONE SHARES** SHARED VOTING POWER **BENEFICIALLY OWNED BY** 10,267,000 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER **WITH** 10,267,000 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 10,267,000 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

### 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

0.2%

#### 12 TYPE OF REPORTING PERSON

HC, CO

CUSIP No. 949746 10 1 13G Page 23 of 49 Pages 1 NAME OF REPORTING PERSON Central States of Omaha Companies, Inc. CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP 2 **(b)** (a) 3 **SEC USE ONLY** 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Nebraska 5 SOLE VOTING POWER **NUMBER OF NONE SHARES SHARED VOTING POWER BENEFICIALLY OWNED BY** 1,000,000 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** SHARED DISPOSITIVE POWER **WITH** 1,000,000 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 1,000,000 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

### 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

Less than 0.1%

#### 12 TYPE OF REPORTING PERSON

HC, CO

CUSIP No. 949746 10 1 13G Page 24 of 49 Pages 1 NAME OF REPORTING PERSON Central States Indemnity Co. of Omaha CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP 2 **(b)** (a) **SEC USE ONLY** 3 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Nebraska 5 SOLE VOTING POWER **NUMBER OF NONE SHARES** SHARED VOTING POWER **BENEFICIALLY OWNED BY** 1,000,000 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** SHARED DISPOSITIVE POWER **WITH** 1,000,000 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 1,000,000 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

### 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

Less than 0.1%

#### 12 TYPE OF REPORTING PERSON

CUSIP No. 949746 10 1 13G Page 25 of 49 Pages 1 NAME OF REPORTING PERSON **BH Finance LLC** 2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) **(b) SEC USE ONLY** 3 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Nebraska 5 SOLE VOTING POWER **NUMBER OF NONE SHARES** SHARED VOTING POWER **BENEFICIALLY OWNED BY** 6,812,857 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER **WITH** 6,812,857 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 6,812,857 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

### 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

0.1%

#### 12 TYPE OF REPORTING PERSON

CO

CUSIP No. 949746 10 1 13G Page 26 of 49 Pages 1 NAME OF REPORTING PERSON Berkshire Hathaway Assurance Corporation CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP 2 (a) **(b)** 3 **SEC USE ONLY** 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of New York 5 SOLE VOTING POWER **NUMBER OF NONE SHARES** SHARED VOTING POWER **BENEFICIALLY OWNED BY** 3,033,500 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** SHARED DISPOSITIVE POWER **WITH** 3,033,500 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 3,033,500 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

## 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

0.1%

#### 12 TYPE OF REPORTING PERSON

CUSIP No. 949746 10 1 13G Page 27 of 49 Pages 1 NAME OF REPORTING PERSON Berkshire Hathaway Life Insurance Company of Nebraska CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP 2 (a) **(b)** 3 **SEC USE ONLY** 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Nebraska 5 SOLE VOTING POWER **NUMBER OF NONE SHARES SHARED VOTING POWER BENEFICIALLY OWNED BY** 5,250,000 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** SHARED DISPOSITIVE POWER **WITH** 5,250,000 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 5,250,000 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

## 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

0.1%

#### 12 TYPE OF REPORTING PERSON

CUSIP No. 949746 10 1 13G Page 28 of 49 Pages 1 NAME OF REPORTING PERSON Berkshire Hathaway Homestate Insurance Company CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP 2 (a) **(b)** 3 **SEC USE ONLY** 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Nebraska 5 SOLE VOTING POWER **NUMBER OF NONE SHARES SHARED VOTING POWER BENEFICIALLY OWNED BY** 12,996,300 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** SHARED DISPOSITIVE POWER **WITH** 12,996,300 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 12,996,300 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

## 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

0.3%

# 12 TYPE OF REPORTING PERSON

CUSIP No. 949746 10 1 13G Page 29 of 49 Pages 1 NAME OF REPORTING PERSON First Berkshire Hathaway Life Insurance Company CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP 2 **(b)** (a) 3 **SEC USE ONLY** 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of New York 5 SOLE VOTING POWER **NUMBER OF NONE SHARES** SHARED VOTING POWER **BENEFICIALLY OWNED BY** 53,500 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** SHARED DISPOSITIVE POWER **WITH** 53,500 shares of Common Stock AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 9 53,500 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

## 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

Less than 0.1%

#### 12 TYPE OF REPORTING PERSON

13G CUSIP No. 949746 10 1 Page 30 of 49 Pages 1 NAME OF REPORTING PERSON Princeton Insurance Company CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP 2 **(b)** (a) 3 **SEC USE ONLY** 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of New Jersey 5 SOLE VOTING POWER **NUMBER OF NONE SHARES SHARED VOTING POWER BENEFICIALLY OWNED BY** 995,000 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** SHARED DISPOSITIVE POWER **WITH** 995,000 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 995,000 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

## 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

Less than 0.1%

#### 12 TYPE OF REPORTING PERSON

13G CUSIP No. 949746 10 1 Page 31 of 49 Pages 1 NAME OF REPORTING PERSON National Indemnity Company of MidAmerica CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP 2 **(b)** (a) 3 **SEC USE ONLY** 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Iowa 5 SOLE VOTING POWER **NUMBER OF NONE SHARES SHARED VOTING POWER BENEFICIALLY OWNED BY** 307,000 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** SHARED DISPOSITIVE POWER **WITH** 307,000 shares of Common Stock AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 9 307,000 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

## 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

Less than 0.1%

#### 12 TYPE OF REPORTING PERSON

CUSIP No. 949746 10 1 13G Page 32 of 49 Pages 1 NAME OF REPORTING PERSON **GEICO Marine Insurance Company** CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP 2 **(b)** (a) 3 **SEC USE ONLY** 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Maryland 5 SOLE VOTING POWER **NUMBER OF NONE SHARES SHARED VOTING POWER BENEFICIALLY OWNED BY** 186,000 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** SHARED DISPOSITIVE POWER **WITH** 186,000 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 186,000 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

## 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

Less than 0.1%

#### 12 TYPE OF REPORTING PERSON

CUSIP No. 949746 10 1 13G Page 33 of 49 Pages 1 NAME OF REPORTING PERSON GEICO Advantage Insurance Company CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP 2 **(b)** (a) 3 **SEC USE ONLY** 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Nebraska 5 SOLE VOTING POWER **NUMBER OF NONE SHARES** SHARED VOTING POWER **BENEFICIALLY OWNED BY** 350,000 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** SHARED DISPOSITIVE POWER **WITH** 350,000 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 350,000 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

## 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

Less than 0.1%

#### 12 TYPE OF REPORTING PERSON

13G CUSIP No. 949746 10 1 Page 34 of 49 Pages 1 NAME OF REPORTING PERSON **GEICO Casualty Company** 2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP **(b)** (a) 3 **SEC USE ONLY** 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Maryland 5 SOLE VOTING POWER **NUMBER OF NONE SHARES** SHARED VOTING POWER **BENEFICIALLY OWNED BY** 1,776,000 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER **WITH** 1,776,000 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 1,776,000 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

## 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

Less than 0.1%

#### 12 TYPE OF REPORTING PERSON

CUSIP No. 949746 10 1 13G Page 35 of 49 Pages 1 NAME OF REPORTING PERSON **GEICO Choice Insurance Company** CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP 2 **(b)** (a) 3 **SEC USE ONLY** CITIZENSHIP OR PLACE OF ORGANIZATION 4 State of Nebraska 5 SOLE VOTING POWER **NUMBER OF NONE SHARES** SHARED VOTING POWER **BENEFICIALLY OWNED BY** 350,000 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** SHARED DISPOSITIVE POWER **WITH** 350,000 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 350,000 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

## 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

Less than 0.1%

#### 12 TYPE OF REPORTING PERSON

13G CUSIP No. 949746 10 1 Page 36 of 49 Pages 1 NAME OF REPORTING PERSON **GEICO Indemnity Company** 2 CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP **(b)** (a) 3 **SEC USE ONLY** 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Maryland 5 SOLE VOTING POWER **NUMBER OF NONE SHARES** SHARED VOTING POWER **BENEFICIALLY OWNED BY** 6,596,500 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER **WITH** 6,596,500 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 6,956,500 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

## 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

0.1%

#### 12 TYPE OF REPORTING PERSON

CUSIP No. 949746 10 1 13G Page 37 of 49 Pages 1 NAME OF REPORTING PERSON Berkshire Hathaway Specialty Insurance Company CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP 2 **(b)** (a) 3 **SEC USE ONLY** 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Nebraska 5 SOLE VOTING POWER **NUMBER OF NONE SHARES SHARED VOTING POWER BENEFICIALLY OWNED BY** 1,020,300 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** SHARED DISPOSITIVE POWER **WITH** 1,020,300 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 1,020,300 shares of Common Stock

CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

**10** 

## 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

Less than 0.1%

#### 12 TYPE OF REPORTING PERSON

CUSIP No. 949746 10 1 13G Page 38 of 49 Pages 1 NAME OF REPORTING PERSON General Re Life Corporation CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP 2 **(b)** (a) 3 **SEC USE ONLY** 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Connecticut 5 SOLE VOTING POWER **NUMBER OF NONE SHARES** SHARED VOTING POWER **BENEFICIALLY OWNED BY** 2,165,000 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** 8 SHARED DISPOSITIVE POWER **WITH** 2,165,000 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 2,165,000 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

## 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

Less than 1%

# 12 TYPE OF REPORTING PERSON

CUSIP No. 949746 10 1 13G Page 39 of 49 Pages 1 NAME OF REPORTING PERSON Finial Reinsurance Company CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP 2 **(b)** (a) 3 **SEC USE ONLY** 4 CITIZENSHIP OR PLACE OF ORGANIZATION State of Connecticut 5 SOLE VOTING POWER **NUMBER OF NONE SHARES** SHARED VOTING POWER **BENEFICIALLY OWNED BY** 215,000 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** SHARED DISPOSITIVE POWER **WITH** 215,000 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 215,000 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

## 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

Less than 1%

#### 12 TYPE OF REPORTING PERSON

CUSIP No. 949746 10 1 13G Page 40 of 49 Pages 1 NAME OF REPORTING PERSON **GEICO Secure Insurance Company** CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP 2 **(b)** (a) 3 **SEC USE ONLY** CITIZENSHIP OR PLACE OF ORGANIZATION 4 State of Nebraska 5 SOLE VOTING POWER **NUMBER OF NONE SHARES SHARED VOTING POWER BENEFICIALLY OWNED BY** 350,000 shares of Common Stock 7 SOLE DISPOSITIVE POWER **EACH** REPORTING **NONE PERSON** SHARED DISPOSITIVE POWER **WITH** 350,000 shares of Common Stock 9 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 350,000 shares of Common Stock **10** CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES

## 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9

Less than 0.1%

#### 12 TYPE OF REPORTING PERSON

#### **SCHEDULE 13G**

#### Item 1.

#### (a) Name of Issuer

Wells Fargo & Company

#### (b) Address of Issuer s Principal Executive Offices

420 Montgomery Street, San Francisco, CA 94104

#### **Item 2(a). Name of Person Filing:**

#### Item 2(b). Address of Principal Business Office:

#### Item 2(c). Citizenship:

Warren E. Buffett Precision Steel Warehouse, Inc.

3555 Farnam Street 3560 N. Wolf Road

Omaha, Nebraska 68131 Franklin Park, IN 60131

United States citizen Illinois

Berkshire Hathaway Inc.

National Liability & Fire Insurance Company

3555 Farnam Street 1314 Douglas Street

Omaha, Nebraska 68131 Omaha, NE 68102

Delaware Connecticut

BH Finance LLC Cypress Insurance Company

3555 Farnam Street 1314 Douglas Street

Omaha, Nebraska 68131 Omaha, NE 68102

Nebraska California

National Indemnity Company of the South

1314 Douglas Street 1314 Douglas Street

Omaha, Nebraska 68102 Omaha, NE 68102

Nebraska Florida

National Fire & Marine Insurance Company Redwood Fire & Casualty Insurance Company

1314 Douglas Street 1314 Douglas Street

Omaha, Nebraska 681302 Omaha, NE 68102

Nebraska Nebraska

Nebraska Furniture Mart, Inc. GEICO Corporation

700 South 72<sup>nd</sup> Street One GEICO Plaza

Omaha, Nebraska 68114 Washington, DC 20076

Nebraska Delaware

Columbia Insurance Company General Re Corporation

1314 Douglas Street 120 Long Ridge Road

Omaha, Nebraska 68102 Stamford, CT 06902

Nebraska Delaware

U.S. Investment Corporation General Re Life Corporation

190 South Warner Road 120 Long Ridge Road

Wayne, PA 19087 Stamford, CT 06902

Pennsylvania Connecticut

Mount Vernon Fire Insurance Company General Reinsurance Corporation

190 South Warner Road 120 Long Ridge Road

Wayne, PA 19087 Stamford, CT 06902

Pennsylvania Delaware

United States Liability MedPro Group Inc.

Insurance Company 5814 Reed Road

190 South Warner Road Ft. Wayne, IN 48635

Wayne, PA 19087 Indiana

Pennsylvania

The Medical Protective Company Central States Indemnity Co. of Omaha

5814 Reed Road 1222 North 96th Street

Ft. Wayne, IN 48635 Omaha, NE 68114

Indiana Nebraska

Central States of Omaha Companies, Inc.

Berkshire Hathaway Assurance Corporation

1212 North 96th Street 1314 Douglas Street

Omaha, NE 68114 Omaha, NE 68102

Nebraska New York

Berkshire Hathaway Life Insurance Company of Nebraska Berkshire Hathaway Specialty Insurance Company

1314 Douglas Street 1314 Douglas Street

Omaha, NE 68102 Omaha, NE 68102

Nebraska Nebraska

First Berkshire Hathaway Life Insurance Company

Berkshire Hathaway Homestate Insurance Company

1314 Douglas Street 1314 Douglas Street

Omaha, NE 68102 Omaha, NE 68102

New York Nebraska

National Indemnity Company of Mid America Berkshire Hathaway Homestate Insurance Company

1314 Douglas Street 1314 Douglas Street

Omaha, NE 68102 Omaha, NE 68102

Iowa Nebraska

GEICO Marine Insurance Company Princeton Insurance Company

880 South Pickett Street 746 Alexander Road

Alexandria, VA 22304 Princeton, NJ 08540

Maryland New Jersey

GEICO Casualty Insurance Company GEICO Advantage Insurance Company

5260 Western Ave. 5260 Western Ave.

Chevy Chase, MD 20815 Chevy Chase, MD 20815

Maryland Nebraska

**GEICO Choice Insurance Company** 

5260 Western Ave.

Chevy Chase, MD 20815

Nebraska

**GEICO Secure Insurance Company** 

5260 Western Ave.

Chevy Chase, MD 20815

Nebraska

Finial Reinsurance Company

1314 Douglas street

Omaha, NE 68102

Connecticut

#### (d) Title of Class of Securities

Common Stock

#### (e) CUSIP Number

949746101

# Item 3. If this statement is filed pursuant to § 240.13d-1(b), or 240.13d-2(b) or (c), check whether the person filing is a:

Warren E. Buffett (an individual who may be deemed to control Berkshire Hathaway Inc.), Berkshire Hathaway Inc., GEICO Corporation, General Re Corporation, U.S. Investment Corporation, MedPro Group Inc., and Central States of Omaha Companies, Inc. are each a Parent Holding Company or Control Person, in accordance with § 240.13d-1(b)(1)(ii)(G).

National Indemnity Company, National Fire & Marine Insurance Company, Columbia Insurance Company, National Liability & Fire Insurance Company, Cypress Insurance Company, National Indemnity Company of the South, Redwood Fire and Casualty Insurance Company, Government Employees Insurance Company, General Reinsurance Corporation, Mount Vernon Insurance Company, U.S. Underwriters Insurance Company, United States Liability Insurance Company, The Medical Protective Company, Central States Indemnity Co. of Omaha, Berkshire Hathaway Assurance Corporation, Berkshire Hathaway Life Insurance Company of Nebraska, Berkshire Hathaway Homestate Insurance Company, First Berkshire Life Insurance Company, Princeton Insurance Company, National Indemnity Company of Mid America, GEICO Marine Insurance Company, GEICO Advantage Insurance Company, GEICO Casualty Insurance Company, GEICO Indemnity Company, GEICO Secure Insurance Company, Berkshire Hathaway Specialty Insurance Company, General Re Life Corporation and Finial Reinsurance Company are each an Insurance Company as defined in section 3(a)(19) of the Act.

The Reporting Persons together are a group in accordance with § 240.13d-1(b)(i)(ii)(K).

#### Item 4. Ownership

Provide the following information regarding the aggregate number and percentage of the class of securities of the issuer identified in Item 1.

#### (a) Amount beneficially owned

See the Cover Pages for each of the Reporting Persons.

#### (b) Percent of class

See the Cover Pages for each of the Reporting Persons.

#### (c) Number of shares as to which such person has:

- (i) sole power to vote or to direct the vote
- (ii) shared power to vote or to direct the vote

- (iii) sole power to dispose or to direct the disposition of
- (iv) shared power to dispose or to direct the disposition of See the Cover Pages for each of the Reporting Persons.

#### Item 5. Ownership of Five Percent or Less of a Class.

Not Applicable.

# Item 6. Ownership of More than Five Percent on Behalf of Another Person.

Not Applicable.

# Item 7. Identification and Classification of the Subsidiary Which Acquired the Security Being Reported on By the Parent Holding Company or Control Person.

See Exhibit A.

# Item 8. Identification and Classification of Members of the Group.

Not Applicable.

#### **Item 9.** Notice of Dissolution of Group.

Not Applicable.

#### Item 10. Certification.

By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were acquired and are held in the ordinary course of business and were not acquired and are not held for the purpose of or with the effect of changing or influencing the control of the issuer of the securities and were not acquired and are not held in connection with or as a participant in any transaction having that purpose or effect, other than activities solely in connection with a nomination under §240.14a-11.

#### **SIGNATURES**

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated this 14th day of February, 2019

/s/ Warren E. Buffett Warren E. Buffett

#### BERKSHIRE HATHAWAY INC.

By: /s/ Warren E. Buffett
Warren E. Buffett
Chairman of the Board

BH FINANCE LLC, NATIONAL INDEMNITY COM NATIONAL FIRE AND MARINE INSURANCE COMPANY, COLUMBIA INSURANCE COMPANY, NEBRASKA FURNITURE MART, INC., THE FECHHEIMER BROTHERS COMPANY, PRECISION STEEL WAREHOUSE, INC., NATIONAL LIABILITY & FIRE INSURANCE COMPANY, CYPRESS INSURANCE COMPANY, NATIONAL INDEMNITY COMPANY OF THE SOUTH, REDWOOD FIRE AND CASUALTY INSURANCE COMPANY, GEICO CORPORATION, GOVERNMENT **EMPLOYEES INSURANCE** CORPORATION, GENERAL RE CORPORATION, GENERAL REINSURANCE CORPORATION, U.S. INVESTMENT CORPORATION, MOUNT VERNON FIRE INSURANCE COMPANY, UNITED STATES LIABILITY INSURANCE COMPANY, MEDPRO GROUP INC., THE MEDICAL PROTECTIVE COMPANY, CENTRAL STATES OF OMAHA COMPANIES, INC., CENTRAL STATES INDEMNITY CO. OF OMAHA, BERKSHIRE HATHAWAY ASSURANCE CORPORATION, BERKSHIRE HATHAWAY LIFE INSURANCE COMPANY OF NEBRASKA, BERKSHIRE HATHAWAY HOMESTATE INSURANCE COMPANY, FIRST BERKSHIRE LIFE

INSURANCE COMPANY, PRINCETON
INSURANCE COMPANY, NATIONAL
INDEMNITY COMPANY OF MID
AMERICA, GEICO MARINE INSURANCE
COMPANY, GEICO ADVANTAGE
INSURANCE COMPANY, GEICO
CASUALTY INSURANCE COMPANY,
GEICO CHOICE INSURANCE COMPANY,
GEICO INDEMNITY COMPANY, GEICO
SECURE INSURANCE COMPANY,
BERKSHIRE HATHAWAY SPECIALTY
INSURANCE COMPANY, GENERAL RE
LIFE CORPORATION AND FINIAL
REINSURANCE COMPANY

By: /s/ Warren E. Buffett

Warren E. Buffett Attorney-in-Fact

#### **SCHEDULE 13G**

#### **EXHIBIT A**

#### RELEVANT SUBSIDIARIES AND MEMBERS OF FILING GROUP

#### PARENT HOLDING COMPANIES OR CONTROL PERSONS:

Warren E. Buffett (an individual who may be deemed to control Berkshire Hathaway Inc.)

Berkshire Hathaway Inc.

**GEICO Corporation** 

General Re Corporation

U.S. Investment Corporation

MedPro Group Inc.

Central States of Omaha Companies, Inc.

INSURANCE COMPANIES AS DEFINED IN SECTION 3(a)(19) OF THE ACT:

**National Indemnity Company** 

National Fire & Marine Insurance Company

Columbia Insurance Company

National Liability & Fire Insurance Company

Cypress Insurance Company

National Indemnity Company of the South

Redwood Fire and Casualty Company

Government Employees Insurance Company

General Reinsurance Corporation

General Re Life Corporation

Mount Vernon Fire Insurance Company

United States Liability Insurance Company

The Medical Protective Company

Berkshire Hathaway Assurance Corporation

Berkshire Hathaway Life Insurance Company of Nebraska

Berkshire Hathaway Homestate Insurance Company

First Berkshire Life Insurance Company

**Princeton Insurance Company** 

National Indemnity Company of Mid America

**GEICO Marine Insurance Company** 

GEICO Advantage Insurance Company

**GEICO Casualty Insurance Company** 

**GEICO Choice Insurance Company** 

**GEICO Indemnity Company** 

**GEICO Secure Insurance Company** 

Berkshire Hathaway Specialty Insurance Company

Central States Indemnity Co. of Omaha

Finial Reinsurance Company

Note: No Common Stock of Wells Fargo & Company is held directly by Berkshire Hathaway Inc. 2,009,000 shares of Common Stock of Wells Fargo & Company are held directly by Warren E. Buffett, an individual who may be deemed to control Berkshire Hathaway Inc. 10,922,577 shares or approximately 0.2% of Common Stock of Wells Fargo & Company are held directly by Nebraska Furniture Mart, Inc., The Fechheimer Brothers Company, and Precision Steel Warehouse, Inc. and BH Finance LLC, none of which are persons specified in Rule 13d-1 (b) (1) (ii) (A) through (J).

#### **SCHEDULE 13G**

#### **EXHIBIT B**

#### **JOINT FILING AGREEMENT PURSUANT TO RULE 13d-1(k)(1)**

#### AND POWER OF ATTORNEY

The undersigned persons hereby agree that reports on Schedule 13G, and amendments thereto, with respect to the Common Stock of Wells Fargo & Company may be filed in a single statement on behalf of each of such persons, and further, each of such persons designates Warren E. Buffett as its agent and Attorney-in-Fact for the purpose of executing any and all Schedule 13G filings required to be made by it with the Securities and Exchange Commission.

Dated: February 14, 2019 /S/ Warren E. Buffett

Warren E. Buffett

Berkshire Hathaway Inc.

Dated: February 14, 2019 /S/ Warren E. Buffett

By: Warren E. Buffett

Title: Chairman of the Board

**National Indemnity Company** 

Dated: February 14, 2019 /S/ Marc D. Hamburg

By: Marc D. Hamburg

Title: Chairman of the Board

National Fire & Marine Insurance Company

Dated: February 14, 2019 /S/ Marc D. Hamburg

By: Marc D. Hamburg

Title: Chairman of the Board

Nebraska Furniture Mart, Inc.

Dated: February 14, 2019 /S/ Marc D. Hamburg

By: Marc D. Hamburg
Title: Assistant Secretary

The Fechheimer Brothers Company

Dated: February 14, 2019 /S/ Marc D. Hamburg

By: Marc D. Hamburg Title: Assistant Secretary

Columbia Insurance Company

Dated: February 14, 2019 /S/ Marc D. Hamburg

By: Marc D. Hamburg

Title: Chairman of the Board

Precision Steel Warehouse, Inc.

Dated: February 14, 2019 /S/ David Haivlich

By: David Haivlich Title: Treasurer

National Liability & Fire Insurance Company

Dated: February 14, 2019 /S/ Dale D. Geistkemper

By: Dale D. Geistkemper

Title: Treasurer

**Cypress Insurance Company** 

Dated: February 14, 2019 /S/ Marc D. Hamburg

By: Marc D. Hamburg Title: Assistant Secretary

National Indemnity Company of the South

Dated: February 14, 2019 /S/ Marc D. Hamburg

By: Marc D. Hamburg

Title: Chairman of the Board

Redwood Fire and Casualty Insurance Company

Dated: February 14, 2019 /S/ Marc D. Hamburg

By: Marc D. Hamburg
Title: Assistant Secretary

**GEICO Corporation** 

Dated: February 14, 2019 /S/ Stephen C. Parsons

By: Stephen C. Parsons Title: Vice President

Government Employees Insurance Company

Dated: February 14, 2019 /S/ Stephen C. Parsons

By: Stephen C. Parsons Title: Vice President

General Re Corporation

Dated: February 14, 2019 /S/ Kara Raiguel

By: Kara Raiguel Title: President

General Reinsurance Corporation

Dated: February 14, 2019 /S/ Kara Raiguel

By: Kara Raiguel Title: President

U.S. Investment Corporation

Dated: February 14, 2019 /S/ Stephen J. Rivituso

By: Stephen J. Rivituso

Title: Treasurer

Mount Vernon Fire Insurance Company

Dated: February 14, 2019 /S/ Stephen J. Rivituso

By: Stephen J. Rivituso

United States Liability Insurance Company

Dated: February 14, 2019 /S/ Stephen J. Rivituso

By: Stephen J. Rivituso

Title: Treasurer

The Medical Protective Company

Dated: February 14, 2019 /S/ Authory A. Bowser

By: Authony A. Bowser Title: Chief Financial Officer

MedPro Group Inc.

Dated: February 14, 2019 /S/ Authory A. Bowser

By: Authony A. Bowser Title: Chief Financial Officer

Central States of Omaha Companies, Inc.

Dated: February 14, 2019 /S/ John E. Kizer

By: John E. Kizer Title: President

Central States Indemnity Co. of Omaha

Dated: February 14, 2019 /S/ John E. Kizer

By: John E. Kizer Title: President

Berkshire Hathaway Assurance Corporation

Dated: February 14, 2019 /S/ Dale D. Geistkemper

By: Dale D. Geistkemper

Title: Treasurer

Berkshire Hathaway Life Insurance Company of

Nebraska

Dated: February 14, 2019 /S/ Dale D. Geistkemper

By: Dale D. Geistkemper

Berkshire Hathaway Homestate Insurance Company

Dated: February 14, 2019 /S/ Andrew R. Linkhart

By: Andrew R. Linkhart Title: Chief Financial Officer

Princeton Insurance Company

Dated: February 14, 2019 /S/ Authory A. Bowser

By: Authony A. Bowser Title: Chief Financial Officer

First Berkshire Life Insurance Company

Dated: February 14, 2019 /S/ Dale D. Geistkemper

By: Dale D. Geistkemper

Title: Treasurer

National Indemnity Company of Mid America

Dated: February 14, 2019 /S/ Dale D. Geistkemper

By: Dale D. Geistkemper

**GEICO Marine Insurance Company** 

Dated: February 14, 2019 /S/ William E. Roberts

By: William E. Roberts

Title: Chairman

GEICO Advantage Insurance Company

Dated: February 14, 2019 /S/ Stephen C. Parsons

By: Stephen C. Parsons Title: Vice President

**GEICO Casualty Insurance Company** 

Dated: February 14, 2019 /S/ Stephen C. Parsons

By: Stephen C. Parsons Title: Vice President

**GEICO Choice Insurance Company** 

Dated: February 14, 2019 /S/ Stephen C. Parsons

By: Stephen C. Parsons Title: Vice President

**GEICO Indemnity Company** 

Dated: February 14, 2019 /S/ Stephen C. Parsons

By: Stephen C. Parsons Title: Vice President

GEICO Secure Insurance Company

Dated: February 14, 2019 /S/ Stephen C. Parsons

By: Stephen C. Parsons Title: Vice President

Berkshire Hathaway

**Specialty Insurance Company** 

Dated: February 14, 2019 /S/ Dale D. Geistkemper

By: Dale D. Geistkemper

General Re Life Corporation

Dated: February 14, 2019 /S/ Joseph Conetta

By: Joseph Conetta Title: Treasurer

Finial Reinsurance Company

Dated: February 14, 2019 /S/ Dale D. Geistkemper

By: Dale D. Geistkemper