#### STROTHER JAMES M

Form 4 May 01, 2013

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB APPROVAL

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

obligations

Check this box

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

may continue.

See Instruction

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * STROTHER JAMES M			2. Issues	r Name <b>and</b>	l Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)				
				S FARGO ANY/MN						
(Last)	(First) (	Middle)		f Earliest T Day/Year)	ransaction	Director _X_ Officer (given				
45 FREMONT STREET, 27TH			04/30/2	013		below) below) Sr. Executive Vice President				
FLOOR						SI. Exec	dire vice riesi	aciit		
		4. If Ame	endment, Da	ate Original	6. Individual or Joint/Group Filing(Check					
		Filed(Mor	nth/Day/Yea	r)	Applicable Line)					
						_X_ Form filed by	1 0			
SAN FRANCISCO, CA 94105						Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Tabl	le I - Non-I	Derivative Securities Acq	uired, Disposed o	f, or Beneficiall	y Owned		
1.Title of	2. Transaction Date	e 2A. Deen	ned	3.	4. Securities Acquired	5. Amount of	6.	7. Nature		
Security	(Month/Day/Year)	Execution	n Date, if	Transactio	on(A) or Disposed of (D)	Securities	Ownership	Indirect		
(Instr. 3)		any		Code	(Instr. 3, 4 and 5)	Beneficially	Form: Direct	Benefici		
		(Month/I	Day/Year)	(Instr. 8)		Owned	(D) or	Ownersh		

(- 3)	()	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ie I - Non-D	verivative s	securi	ities Acqu	iirea, Disposea oi	, or Beneficial	iy Ownea
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactio Code (Instr. 8)	4. Securition(A) or Dis (Instr. 3, 4)	sposed	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)
Common Stock, \$1 2/3 Par Value	04/30/2013		S	15,000	D	\$ 37.88	64,866	D	
Common Stock, \$1 2/3 Par Value							4,309.4197 (1)	I	Through 401(k) Plan

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

### Edgar Filing: STROTHER JAMES M - Form 4

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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. Transacti Code (Instr. 8)	Securities Acquired (A) or Disposed		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans
					of (D) (Instr. 3, 4, and 5)						(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

STROTHER JAMES M 45 FREMONT STREET 27TH FLOOR SAN FRANCISCO, CA 94105

Sr. Executive Vice President

**Signatures** 

James M. Strother, by Anthony R. Augliera, as Attorney-in-Fact

05/01/2013

\*\*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).
- (1) Reflects share equivalents of units in Wells Fargo ESOP Fund of 401(k) Plan as of April 30, 2013, as if investable cash equivalents held by the 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.

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