## Edgar Filing: WELLS FARGO & COMPANY/MN - Form 4

WELLS FAI Form 4	RGO & COMPA	NY/MN									
October 27,	2015										
FORM	4		an an a			~~~ .			OMB AF	PROVAL	
Wa				RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Check th if no long subject to Section 1 Form 4 o Form 5 obligatio may cont <i>See</i> Instru 1(b).	ger b 16. br Filed pur ns tinue. Section 17(a)	<b>SECUR</b> 6(a) of th	RITIES e Securit ding Com	ies E 1pany	NERSHIP OF e Act of 1934, 1935 or Section 0	Expires: January 31 2005 Estimated average burden hours per response 0.5					
(Print or Type I	Responses)										
Loughlin Michael J <sub>Sym</sub> WE				r Name <b>and</b> S FARGC ANY/MN	) &	Tradir	ng	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
				te of Earliest Transaction hth/Day/Year)				Director 10% Owner XOfficer (give title Other (specify below) below)			
420 MONT	GOMERY STRE	ET	10/23/2	015				· · · · · · · · · · · · · · · · · · ·	ive Vice Presi	dent	
	(Street)			endment, Da nth/Day/Year	-	l		6. Individual or Joi Applicable Line) _X_ Form filed by O Form filed by M	ne Reporting Per	son	
SAN FRAN	ICISCO, CA 9410	04						Person	ore than one Rej	porting	
(City)	(State)	(Zip)	Tab	le I - Non-E	Derivative	Secur	ities Acqu	uired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	3. Transactio Code (Instr. 8)	4. Securiti or(A) or Dis (Instr. 3, 4	posed	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock, \$1 2/3 Par Value	10/23/2015			М	85,700	A	\$ 31.4	86,960	D		
Common Stock, \$1 2/3 Par Value	10/23/2015			F	68,221	D	\$ 54.75	18,739	D		
Common Stock, \$1 2/3 Par Value								8,031.1013 <u>(1)</u>	Ι	Through 401(k) Plan	

Common Stock, \$1 2/3 Par Value						2'	00,728.324	I	Through Family Trust		
					ially 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)	Code	TransactionDerivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Employee Stock Purchase Option	\$ 31.4	10/23/2015		М		85,700	(2)	02/26/2018	Common Stock, \$1 2/3 Par Value	85,700	
Reporting Owners											

## Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director 10% Owner 0		Officer	Other				
Loughlin Michael J 420 MONTGOMERY STREET SAN FRANCISCO, CA 94104			Sr. Executive Vice President					
Signatures								
Michael J. Loughlin, by Anthony Attorney-in-Fact	R. Augli	era, as	10/27/2015					
**Signature of Repo	rting 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).

Reflects share equivalent of units in the Wells Fargo ESOP Fund under the 401(k) Plan (the "Plan") as of September 30, 2015, as if (1) investable cash equivalents held by Plan were fully invested in Wells Fargo & Company common stock.

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(2) The employee stock options, representing a right to purchase a total of 171,280 shares, became exercisable in three equal annual installments beginning on the first anniversary of the date of grant (2/26/2009).

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.