

3M CO Reported by LOBEY JEAN

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 12/03/09 for the Period Ending 12/01/09

Address 3M CENTER

BLDG. 220-11W-02

ST PAUL, MN 55144-1000

Telephone 6517332204

CIK 0000066740

Symbol MMM

SIC Code 3841 - Surgical and Medical Instruments and Apparatus

Industry Constr. - Supplies & Fixtures

Sector Capital Goods

Fiscal Year 12/31





Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP **OF SECURITIES**

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(f) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *					2. Issuer Name and Ticker or Trading Symbol							Symbol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Lobey Jean					3M CO [MMM]												
(Last) (First) (Middle)				3. Date of Earliest Transaction (MM/DD/YYYY)							/YYYY)	Director 10% Owner					
				12111222								X Officer (give title below) Other (specify below)					
3M CENTER						12/1/2009								EXEC VP SFTY SEC & PROT SVCS			
(Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)								6. Individual or Joint/Group Filing (Check Applicable Line)				
ST. PAUL, M	N 5514	4-100	00														
(City) (State) (Zip)												X_Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tab	ole I - Non	-Der	rivati	ve Secur	ities A	cq	juired,	Dis	pose	d of, or I	Beneficially	y Owned		-	
1.Title of Security (Instr. 3) 2. T Dat				te	Execution Date, if	3. Trans. Code (Instr. 8)		4. Secur Acquired Disposed (Instr. 3,	d (A) d of (Following (Instr. 3 a		nstr. 3 and 4) Form:		Ownership Form: Direct (D)	Beneficial Ownership		
					any		Code	Code V Amount		(A) or (D)	Price			e	(Instr. 4)		
Common Stock				12/	1/2009		F		888 (1)	D	\$78.6	3	199	40		D	
Common Stock													738	(2)		I	By 401k/paesop Trust
Tab	le II - De	rivati	ive Securi	ties l	Benef	icially O	wned	(4	₽.g. , pı	ıts,	calls,	, warran	ts, options	, convert	ible secu	rities)	
1. Title of Derivate Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security Derivative Security 3. Trans. Deemed Execution Date, if any Code (Instr. any)			rans.	5. N Deri Secu Acq Disp (Inst 5)	and Ex					e and Amou ities Underly ative Securit 3 and 4) Amount or I	ving y	8. Price of Derivative Security (Instr. 5)	of derivative Securities Beneficiall Owned Following Reported Transaction	Ownershi Form of Derivative Security: Direct (D) or Indirec (I) (Instr.			
				Code	V (A)	(D)		Exercisabl				Shares			(s) (Instr. 4)	')	

Explanation of Responses:

- (1) Shares held in corporate custody as restricted shares and awarded under the applicable 3M Management Stock Ownership Program pursuant to Rule 16b-3(d) have been distributed to participant (including shares withheld for taxes) pursuant to the provisions of the Program.
- (2) Includes shares acquired during the fiscal year pursuant to the 3M Voluntary Investment Plan.

Reporting Owners

Paparting Owner Name / Address	Relationships								
Reporting Owner Name / Address	Director	10%	Owner	Officer	Other				
Lobey Jean 3M CENTER				EXEC VP SFTY SEC & PROT SVCS	5				
ST. PAUL, MN 55144-1000									

George Ann Biros, attorney-in-fact for Jean Lobey

12/3/2009

** Signature of Reporting Person

Date

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

- * 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.

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.