FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

| OMB APPROVAL             |           |  |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number:              | 3235-0287 |  |  |  |  |  |  |  |
| Estimated average burden |           |  |  |  |  |  |  |  |
| hours per response:      | 0.5       |  |  |  |  |  |  |  |

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person * WIENS HAROLD J      |  |     |  |   |   | 2. Issuer Name and Ticker or Trading Symbol 3M CO [ MMM ] |   |                                   |               |  |  |                                    |       |  | 5. Relationship of Reporting Person(s) to Issuer<br>(Check all applicable)  Director 10% Owner   |                                      |  |   |  |   |  |
|---|--|-----|--|---|---|---|---|-----------------------------------|---------------|--|--|------------------------------------|-------|--|--|--------------------------------------|--|---|--|---|--|
| (Last)  | (First)  | (Mi |  | 3. Date of Earliest Transaction (Month/Day/Year) 01/14/2005 |   |   |   |                                   |               |  |  |                                    | X     | Officer (gives below)  |  | itle Ot<br>be                        |  | ′ |  |   |  |
|   |  |     |  |   | 4. If A                                 | 4. If Amendment, Date of Original Filed (Month/Day/Year)  |   |                                   |               |  |  |                                    |       |  | Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person |                                      |  |   |  |   |  |
| (City)  | (State)  |     |  | Non Don   | ivativ                                  | 0 800   | uritios   | Λοσι                              | uirod         | Die  | nosad of   | or Po                              | nofic | ially  | Ow/2   |                                      |  |   |  |   |  |
| 1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day |  |     |  | 2A. Deem<br>Execution<br>(Year) if any                      |   | emed  | 3.<br>Tran<br>Code  | 3.<br>Transaction<br>Code (Instr. |               | Disposed of, or Beneficia  4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) |  |                                    |       | 5. Amount of<br>Securities<br>Beneficially Owned<br>Following Reporter |  | ned                                  |  |   | 7. Nature of Indirect Beneficial Ownership (Instr. 4)          |   |  |
|   |  | (   |  |   | Code                                    | e V   | , A   | mount                             | (A) or<br>(D) | Price  |  | Transaction(s)<br>(Instr. 3 and 4) |       |  | (4) (  |                                      | ,  |   |  |   |  |
| Common Stock 01/14  |  |     |  |   | 005                                     |   |   | F                                 |               |  | 49(1)  | D \$82.57                          |       | 5725   | 55,031   |                                      |  | D |  |   |  |
| Common Stock  |  |     |  |   |   |   |   |                                   |               |  |  |                                    |       |  | 1,918  |                                      | I  |   | y<br>01k/PAESOP<br>Trust                                       |   |  |
|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |     |  |   |   |   |   |                                   |               |  |  |                                    |       |  |  |                                      |  |   |  |   |  |
| 1. Title of<br>Derivative<br>Security (Instr. 3)              | ive Conversion Date Execution Date,  |     |  |   | 4.<br>Transaction<br>Code (Instr.<br>8) |   | 5. Number of<br>Derivative<br>Securities<br>Acquired (A)<br>or Disposed<br>(D) (Instr. 3, 4<br>and 5) |                                   | Expira        | ation [  | xercisable and n Date Securities Underly ay/Year) 7. Title and Amou Securities Underly Derivative Securit (Instr. 3 and 4) |                                    |       | erlying  | 8  | Derivative<br>Security<br>(Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s) |   | 10.<br>Owners<br>Form:<br>Direct (I<br>or Indire<br>(I) (Instr | Beneficial<br>Ownership<br>ect (Instr. 4) |  |
|   |  |     |  |   | Code                                    | v   | (A) (I  |                                   | Date<br>Exerc | isable   | Expiration<br>Date   | Title                              | l c   | Amount<br>or<br>lumber<br>of Share                                     | .  |                                      | (Instr   |   |  |   |  |

## **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.

By: George Ann Biros For: Harold James Wiens

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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 Number.