FORM 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0362							
Estimated average burden								
hours per response:	1.0							

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

Form 3 Holdings Reported.

Form 4 Transa	ctions Reported	d.					of the Securi			of 1934								
1. Name and Address of Reporting Person * MacDonald Robert D III					2. Issuer Name and Ticker or Trading Symbol 3M CO [MMM]							Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) 3M CENTER	(First)	(N	liddle)		3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2009							X Officer (give title Other (spec below) below) VICE PRESIDENT MARKETING				pecify		
(Street) ST. PAUL MN 55144-1000 (City) (State) (Zip)			4. If Ame	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							
		Ta	able I - Non-De	erivative S	Securiti	es Aco	uired, Dis	posed o	f, or E	Benefici	ally Ow	ned						
D		2. Transaction Date	nsaction 2A. Deemed Execution Date,		3. Transactio	on (Instr. 3, 4				`´ s	5. Amount of Securities Beneficially Owned		6. Ownership Form: Direct (D) or Indirect		7. Nature of Indirect Beneficial			
(Month/l			(Month/Day/Yea	r) if any (Month/Da		Code (Ins B)	Amount	Amount (A) or (D)		Price	a F	at end of Issuer's Fiscal Year (Instr. 3 and 4)		(I) (Instr.		Ownership (Instr.		
Common Stock	ζ.		04/15/2009			G	14	12	D	\$0		34,872		D				
Common Stock	ζ		12/31/2009			J ⁽¹⁾	8,9	01	D	(2)		25,971		D				
Common Stock											2,571(3)		I		By 401k/paesop Trust			
Common Stock	ζ											9,614		I	Ву	Spouse		
			Table II - Deri (e.g.				ired, Dispo				y Owne	ed						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	version Date (Month/Day/Year) e of vative	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration D	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amoun Securities Underlyi Derivative Security 3 and 4)		8. Price of Derivative Security (Instr. 5)	deriva Securi Benefi Owned Follow Repor	ities icially d ving ted	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					(A)	(D)	Date Exercisable	Expiration Date	Title		Amount or Number of Shares		Transa (Instr.	action(s) 4)				
Restricted Stock	(2)	12/31/2009		J ⁽¹⁾	8,901		(4)	(4) (4) Common Stock		8,901	(2) 8		,901	D				

Explanation of Responses:

- 1. Due to reporting automation changes instituted by Issuer's stock plan vendor, the reporting person's restricted stock units will be reported on Table II going forward. This transaction indicates the number of restricted stock units that will be transferred to Table II.
- 2. Each restricted stock unit represents a contingent right to receive one share of 3M common stock.
- 3. Includes shares acquired during the fiscal year pursuant to the 3M Voluntary Investment Plan.
- 4. The restricted stock units will vest 100% three years from the grant date (2/9/2009).

George Ann Biros, attorney-in-fact for Robert D. MacDonald III

** 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 Number.