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 Add | • | rting Person * | | | 2. Is | ssuer | Name a | ı nd Tickei | | | mpany Act c | 1040 | | ationship of F | | erson(s) to Issu | er | |
|---|---|----------------|--|--------|--|-----------------|--------|---|--|---|-----------------------|---------------------------|--|--|---|---|---------------------------------------|--|
| Singh Jesse | | | Medala V | 3. D | 3M CO [MMM] 3. Date of Earliest Transaction (Month/Day/Year) 02/05/2015 | | | | | | | X | Director Officer (g below) | 10% Own other (sp | | (specify | | |
| (Last) 3M CENTER | (First) | (1 | Middle) | | | 32,33,2313 | | | | | | | | Senior Vice President | | | | |
| (Street) ST. PAUL MN 55144-1000 | | | | | 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 | | Zip) | | | | | | | | | | | TOTTIME | a by More | man One Nepor | ing r erson | |
| | | Т | able I - No | on-Der | ivativ | ve S | ecuri | ties Ac | quired | , Dis | posed of | f, or Benef | icially Ov | vned | | | | |
| 1. Title of Security (Instr. 3) | | | 2. Transaction Date (Month/Day/Year) | | | Execution Date, | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) or D Of (D) (Instr. 3, 4 and 5) | | or Disposed | Securities Beneficiall Following | | 6. Ownership Form: Direct (D or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code V | | Amount | unt (A) or (D) Pric | | Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) | |
| Common Stock | | | | 02/05 | 5/2015 | 5 | | | M | | 12,000 | A | \$87.35 15,14 | | 145 | D | | |
| Common Stock 02 | | | | | 02/05/2015 | | | | | | 4,068 | D | \$166.03 11,07 | | 077 | D | | |
| Common Stock 02/05 | | | | | 5/2015 | 5 | | | S | | 6,510 | D | \$166.0691 4,56 | | 67 | D | | |
| Common Stock 02/05 | | | | | | 5/2015 | | | S | | 122 | D | \$166.1099 4,44 | | 145 | D | | |
| Common Stock 02/05 | | | | | 5/2015 | | | | S | | 200 | D | \$166.13 4,24 | | 245 | D | | |
| Common Stock 02/05/ | | | | | | 5/2015 | | | S | | 1,100 | D | \$166.145 | 6.145 3,145 | | D | | |
| Common Stock 02/05 | | | | | 05/2015 | | | | G | V | 188 | D | \$ <mark>0</mark> | 2,957 | | D | | |
| | | | Table II - | | | | | | | | | or Benefic le securiti | | ed | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | | 3A. Deemed Execution D if any (Month/Day/ | ate, T | Code (Instr. | | | | 6. Date Exerci Expiration Da (Month/Day/Yo | | te Securities Underly | | nderlying | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s | Ownersh Form: Direct (D) or Indirect (I) (Instr. | Beneficial Ownership (Instr. 4) | |
| | | | | Cod | ode | v | (A) | (D) | Date Exercis | able | Expiration Date | Title | Amount or Number of Shares | | (Instr. 4) | onto) | | |
| Non-qualified Stock Option (Right to Buy) | \$87.35 | 02/05/2015 | | | M | | | 12,000 | 05/09/2 | 2007 | 05/09/2016 | Common Stock | 12,000 | \$0 | 0 | D | | |

Explanation of Responses:

/s/ Sheila B. Claugherty, attorney-in-fact for Jesse G. Singh

** Signature of Reporting Person

Date

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

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.

^{*} 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).