FORM 4

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

Washington, D.C. 20549

OMB APPROVAL

OMB Number:	3235-0287
Estimated average burden	
houre per reenence.	0.5

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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

(-)				
Name and Address of Reporting Person*     Dickson Zoe L			2. Issuer Name and Ticker or Trading Symbol 3M CO [ MMM ]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director  Officer (give title Other (specify
(Last) 3M CENTER	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 05/01/2024	X Officer (give title Officer Specify below)  EVP & Chief HR Officer
(Street) ST. PAUL	MN	55144	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)		Tominied by More than One Reporting Person

### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr.	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	3 and 4)		(Instr. 4)
Common Stock	05/01/2024		M		983	A	\$98.44	4,504.2641	D	
Common Stock	05/01/2024		F		301	D	\$98.44	4,203.2641(1)(2)	D	
Common Stock								289	I	401k/paesop Trust

# 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)	4. Transac Code (Ir 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Restricted Stock Units	(3)	05/01/2024		M			983	(4)	(4)	Common Stock	983	\$0	748	D	

## Explanation of Responses:

- $1. \ Includes \ dividend \ share \ equivalents, \ accrued \ quarterly, \ pursuant \ to \ 3M's \ Deferred \ Compensation \ Planton \ Pl$
- 2. Includes shares acquired under 3M's General Employee Stock Purchase Plan.
- $3. \ Each \ restricted \ stock \ unit \ represents \ a \ contingent \ right \ to \ receive \ one \ share \ of \ 3M \ common \ stock.$
- 4. The final tranche of this restricted stock unit will vest on April 1, 2026.

/s/ Patricia L. Meagher, attorneyin-fact for Zoe L. Dickson

\*\* Signature of Reporting Person

Date

05/03/2024

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.