## Edgar Filing: DOYLE MICHAEL J - Form 4

DOYLE M	ICHAEL J										
Form 4											
March 01, 2	2006										
	ЛЛ							OMB A	PPROVAL		
FORM	UNITED	STATES		RITIES A			COMMISSIO	N OMB Number:	3235-0287		
Check t				U				Expires:	January 31, 2005		
if no lor subject		<b>AENT O</b>	F CHAN	NGES IN	BENEF	ICIAL OV	OWNERSHIP OF Estimated average				
Section	16.	SECURITIES							urs per		
Form 4 Form 5			1	1((-) - f 4		· · · E- · 1· ·		response	. 0.5		
obligati	·			· · /			nge Act of 1934,				
may con				•	•	· ·	of 1935 or Secti	on			
See Inst	ruction	30(h)	of the I	nvestment	t Compar	y Act of 1	.940				
1(b).											
(Print or Type	Responses)										
	-										
1. Name and	Address of Reporting	Person <sup>*</sup>	2. Issue	er Name <b>an</b>	d Ticker or	Trading	5. Relationship	of Reporting Per	rson(s) to		
DOYLE MICHAEL J S						U	Issuer				
			US BA	NCORP	DE\ [US	B]					
					-		(Check all applicable)				
(Last)	(First) (	Middle)		of Earliest T	ransaction		Director	100	% Owner		
				Month/Day/Year) )2/27/2006			Difector X Officer (gi				
			0212112	2000			below)	below)	· · · · · · · · · · · · · · · · · · ·		
							EVP, e	Chief Credit Off	icer		
			4. If Am	If Amendment, Date Original			6. Individual or Joint/Group Filing(Check				
			Filed(Mo	onth/Day/Yea	r)		Applicable Line)				
							_X_ Form filed by	One Reporting P More than One R			
MINNEAF	POLIS, MN 55402	2					Person	More than One K	epotting		
(City)	(State)	(Zip)	Tak	lo I Non l	Dorivotivo	Socurities A	cquired, Disposed	of or Bonoficio	lly Ownod		
							• • •		•		
1.Title of	2. Transaction Date	<ul> <li>2A. Deemed</li> <li>Execution Date, if</li> <li>any</li> </ul>		3. Transactio	4. Securit		5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect		
Security (Instr. 3)	(Month/Day/Year)			TransactionAcquired (A) or Code Disposed of (D)			Beneficially	(D) or Indirect			
(Insu: 5)		(Month/Da	av/Year)	(Instr. 8)	(Instr. 3, 4		Owned	(I)	Ownership		
		、 · · · / _ ·			(		Following	(Instr. 4)	(Instr. 4)		
						(A)	Reported				
						(A) or	Transaction(s)				
				Code V	Amount		(Instr. 3 and 4)				

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof	Expiration Date	Underlying Securities	Ε
Security	or Exercise		any	Code	Derivative	(Month/Day/Year)	(Instr. 3 and 4)	S

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	Securit Acquir (A) or Dispose of (D) (Instr. 2 and 5)	ed ed				
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Deferred Compensation Plan Participation	<u>(1)</u>	02/27/2006		А		5.62		<u>(1)</u>	<u>(1)</u>	Common Stock	5.62

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
	Director	10% Owner	Officer	Other				
DOYLE MICHAEL J U.S. BANCORP 800 NICOLLET MALL MINNEAPOLIS, MN 55402			EVP, Chief Credit Officer					
Signatures								

Lee R. Mitau for Michael J. Doyle

\*\*Signature of Reporting Person

03/01/2006

Date

## **Explanation of Responses:**

- \* 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).
- (1) Deferred Compensation Plan Participation is valued against U.S. Bancorp common stock on a one-for-one basis and becomes payable in common stock following the termination of the reporting person's employment with U.S. Bancorp.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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