COMERICA INC /NEW/

Form 4

February 08, 2005

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: 3235-0287

5. Relationship of Reporting Person(s) to

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005
Estimated average

OMB APPROVAL

Form 4 or Form 5 obligations may continue.

See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

burden hours per response... 0.5

1(b).

Common

Common

Stock

Stock

02/07/2005

(Print or Type Responses)

1. Name and Address of Reporting Person *

ACTON ELIZABETH S			2. Issuer Name and Ticker or Trading Symbol				Č	Issuer			
			COME	RICA IN	C /NEW/	[CM	[A]	(Chec	k all applicable	·)	
(Last) 500 WOOL FLOOR	(First) DWARD AVE.,	(Middle) 31ST		f Earliest T Day/Year) .005	ransaction			DirectorX Officer (give below)	e titleOthe	Owner er (specify	
120011	(Street)			endment, D nth/Day/Yea	ate Origina	EVP/Chief Financial O 6. Individual or Joint/Group Fili Applicable Line) _X_ Form filed by One Reporting F			oint/Group Filin	ng(Check	
DETROIT,	MI 48226							Form filed by N Person	More than One Re	porting	
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative	Secur	ities Acq	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	Execution any	med on Date, if Day/Year)	3. Transacti Code (Instr. 8)	4. Securit or(A) or Di (Instr. 3,	sposed	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	02/07/2005			Code V M	Amount 10,000	(D)	Price \$ 40.32	42,712 (1)	D		
Common Stock	02/07/2005			S	9,800	D	\$ 58.92	32,912 (1)	D		
Common Stock	02/07/2005			S	100	D	\$ 58.93	32,812 (1)	D		

S

100

32,712 (1)

147 (2)

D

I

by 401(k)

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

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SEC 1474 (9-02)

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. 5. Number of TransactionDerivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Exp (Mo	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A) (D)		te Exercisable	Expiration Date	Title	Amou or Numb of Sha
Employee Stock Option (right to buy)	\$ 62.02					04	/15/2002 <u>(3)</u>	04/13/2012	Common Stock	30,0
Employee Stock Option (right to buy)	\$ 40.32	02/07/2005		M	10,0	00 01	/27/2004 <u>(3)</u>	04/17/2013	Common Stock	30,0
Employee Stock Option (right to buy)	\$ 52.5					01.	/26/2005 <u>(3)</u>	04/16/2014	Common Stock	45,0

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	Director 10% Owner Officer		Other				
ACTON ELIZABETH S 500 WOODWARD AVE. 31ST FLOOR DETROIT, MI 48226			EVP/Chief Financial Officer					

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Signatures

/s/ Nicole V. Gersch, on behalf of Elizabeth S. Acton

02/08/2005

**Signature of Reporting Person

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) This number includes shares purchased under the CMA dividend reinvestment plan and shares acquired through employee stock plans as of January 30, 2005.
- (2) As of January 30, 2005.
- (3) The options vest in four equal annual installments beginning on the date indicated in this column.

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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