#### AMERIPRISE FINANCIAL INC

Form 4

February 10, 2015

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB 3235-0287

**OMB APPROVAL** 

Number: 32

Expires:

Form filed by More than One Reporting

January 31, 2005

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Check this box if no longer subject to Section 16. 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

1(b).

(Print or Type Responses)

1. Name and Ad Froude Dona	•	orting Person *	2. Issuer Name <b>and</b> Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer			
			AMERIPRISE FINANCIAL INC [AMP]	(Check all applicable)			
(Last) 1098 AMERI	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 02/06/2015	Director 10% OwnerX Officer (give title Other (specify below) Pres., Personal Advisors Group			
CENTER							
(Street)			4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check			
			Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person			

### MINNEAPOLIS, MN 55474

(State)

(Zip)

(City)

Person

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

• • • • • • • • • • • • • • • • • • • •	Table 1 - Non-Derivative Securities Acquired, Dis							or benefician	y Ownea
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year) 2A. Deemed Execution Date, if any (Month/Day/Year)						5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(Instr. 4)	
Common Stock	02/06/2015		A	16,822	A	\$0	40,266	D	
Common Stock	02/06/2015		F	9,422	D	\$ 134.79	30,844	D	
Common Stock	02/07/2015		F	679	D	\$ 134.79	30,165	D	
Common Stock							4,251.12 <u>(1)</u>	I	By 401(k) Plan

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

## Edgar Filing: AMERIPRISE FINANCIAL INC - Form 4

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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. Transacti Code (Instr. 8)	5. Number of orDerivative 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 Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Phantom Stock	<u>(2)</u>	02/06/2015		A	863.5655		(3)	(3)	Common Stock	863.5655

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Froude Donald E 1098 AMERIPRISE FINANCIAL CENTER MINNEAPOLIS. MN 55474

Pres., Personal Advisors Group

## **Signatures**

/s/ Thomas R. Moore for Donald E. Froude

02/10/2015

\*\*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).
  - Estimate of the number of shares held in the reporting person's account in the Ameriprise Financial Stock Fund under the Ameriprise
- (1) Financial 401(k) plan as of February 7, 2015. This plan uses unit accounting and the number of shares that a participant is deemed to hold varies with the price of Ameriprise stock.
- (2) Each share of phantom stock represents the right to receive one share of Ameriprise Financial, Inc. common stock.
- (3) Shares of phantom stock are payable in shares of Ameriprise common stock following termination of employment or during a specified future year in accordance with The Ameriprise Financial Deferred Compensation Plan.

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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