AMERIPRISE FINANCIAL INC

Form 4

December 22, 2016

FORM	FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL				
UNITED STATES SECURITIES AND EACHANGE COMMISSION									CIVID	3235-028			
Washington, D.C. 20549 Check this box								Number:	January 31				
	if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								Expires:	200			
Section	subject to Section 16. Form 4 or								Estimated average burden hours per response 0.				
Form 5 obligation may con <i>See</i> Instraction 1(b).	ons tinue. Section	•	of the I		ility H	old	ing Com	pany	Act of	te Act of 1934, f 1935 or Section 40	·		
(Print or Type	Responses)												
1. Name and Address of Reporting Person * Junek John Carl			2. Issuer Symbol AMERII			Ficker or T			5. Relationship of Reporting Person(s) to Issuer				
				[AMP]	KISL	, 1.11	MANCIF	L II	(Check all applicable)				
(Last) (First) (Middle) GENERAL COUNSEL'S OFFICE, 1098 AMERIPRISE FINANCIAL CENTER				3. Date of Earliest Transaction (Month/Day/Year) 12/21/2016						Director 10% Owner Officer (give title Other (specify below)			
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)						6. 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)	(Zij	p)	Table	I - No	n.De	erivative S	ecuri	ties A <i>cc</i>	quired, Disposed o	f or Reneficia	lly Owned	
		ear) I	ate 2A. Deemed				4. Securi nAcquired Disposed (Instr. 3,	ties (A) o l of (D 4 and	or O)	5. Amount of 6 Securities F Beneficially (Owned I	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	•	
Common					Code	V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Stock	12/21/2016				G	V	3,786 (1)	D	\$0	19,633	D		
Common Stock										33.87 (2)	I	By 401(k) Plan	
Reminder: Rej	port on a separate	line for	r each cla	ass of secur	ities be	nefic	-		-				
									SEC 1474 (9-02)				

number.

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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.	6. Date Exerc	cisable and	7. Title	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amount	t of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ing	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securitie	es	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3	and 4)		Own
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
								^	mount		
									mount		
						Date	Expiration Date	or Title Number of			
						Exercisable					
				C + V	(A) (D)						
				Code V	(A) (D)			S	hares		

Reporting Owners

Relationships Reporting Owner Name / Address

> Officer Other Director 10% Owner

Junek John Carl GENERAL COUNSEL'S OFFICE 1098 AMERIPRISE FINANCIAL CENTER MINNEAPOLIS, MN 55474

Exec VP and General Counsel

Signatures

/s/ Thomas R. Moore for John Carl Junek

12/22/2016

**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) The reporting person made an in-kind charitable gift of shares of Ameriprise Financial, Inc.
 - Estimate of the number of shares held in the reporting person's account in the Ameriprise Financial Stock Fund under the Ameriprise
- (2) Financial 401(k) plan as of December 21, 2016. This plan uses unit accounting and the number of shares that a participant is deemed to hold varies with the price of Ameriprise stock

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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