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Stewart David Ke	nt										
Form 4	,										
February 12, 2013	,									PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington D.C. 20549								OMB OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. <i>See</i> Instruction 1(b).	Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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								Expires: Estimated a burden hou response		
(Print or Type Respon	ises)										
Stewart David Kent Symbol				r Name and Ticker or Trading IPRISE FINANCIAL INC				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)(First)(Middle)3. Date of (Month/DGENERAL COUNSEL'S02/08/20OFFICE, 1098 AMERIPRISEFINANCIAL CENTER				-				Director 10% Owner X_ Officer (give title Other (specify below) below) Sr Vice Pres and Controller			
(5	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			
MINNEAPOLIS, MN 55474 Form filed by More than One Rep Person								porting			
(City) (S	State) (2	Zip)	Table	e I - Non-D	erivative S	Secur	ities Aca	uired, Disposed of	. or Beneficial	lv Owned	
	ansaction Date nth/Day/Year)		ed Date, if	3. Transactio Code (Instr. 8)	4. Securit n(A) or Di (Instr. 3, -	ies Ad sposed 4 and (A) or	cquired d of (D) 5)	5. Amount of	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of	
Common 02/0 Stock	08/2013			Code V F	Amount	(D) D	Price \$ 66.49	26,543	D		
Common Stock								231.7965	I	By 401(k) Plan (1)	

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

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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 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. Transactio 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	(2)	02/08/2013		А	154.1585		(3)	(3)	Common Stock	154.1585

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Stewart David Kent GENERAL COUNSEL'S OFFICE 1098 AMERIPRISE FINANCIAL CENTER MINNEAPOLIS, MN 55474			Sr Vice Pres and Controller				
Signatures							
/s/ Thomas R. Moore for David Kent Stewart	02/1	2/2013					

**Signature of Reporting Person

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).

Date

- 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 4, 2013. 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.
- (4) Includes 469.2977 phantom shares credited to the reporting person's account as a result of the deemed reinvestment of dividends allocated since phantom shares were last reported.

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.