### Edgar Filing: AMERIPRISE FINANCIAL INC - Form 4

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AMERIPRI Form 4 May 06, 20	SE FINANCIAL	INC									
OMB APPROVAL											
Check this box							OMMISSION	OMB Number:	3235-0287		
if no lor	nger								Expires:	January 31, 2005	
STATEMENT OF CHANGES IN BENEFICIAL OW Section 16. Form 4 or					AL OWN	ERSHIP OF	verage s per				
Form 4 or Form 5 obligations may continue.response0.5See Instruction 1(b).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 19400.5									0.0		
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> TRUSCOTT WILLIAM F							1	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
			[AMP]					(Check an applicable)			
								Director 10% Owner _X Officer (give title Other (specify below) CEO, U.S. Asset Management			
								int/Group Filing(Check			
				Filed(Month/Day/Year) A				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 Reporting Person											
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative	Secu	rities Acqui	ired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if		omr Dispos (Instr. 3, 4	ed 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	05/04/2011			S	12,000	D	60.0814	49,980	Ι	By LLC	
Common Stock								236.09	Ι	By 401(k) Plan (2)	

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

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#### number.

# 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)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title a Amount Underlyi Securitie (Instr. 3	of ing es	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
Dama	utin a O		Code V	(A) (D)	Date Exercisable	Expiration Date	or Title N of	lumber		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
1 0	Director	10% Owner	Officer	Other			
TRUSCOTT WILLIAM F GENERAL COUNSEL'S OFFICE 1098 AMERIPRISE FINANCIAL CENTER MINNEAPOLIS, MN 55474			CEO, U.S. Asset Management				
Signatures							
/s/ Thomas R. Moore for William Fredrick Truscott	05/	06/2011					
**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).

Reflects the weighted average price of 12,000 shares of common stock of Ameriprise Financial, Inc. sold by the reporting person in multiple transactions on May 4, 2011 with sale prices ranging from \$60.07 to \$60.0877 per share. The reporting person undertakes to

(1) Indupre durisdentials on May 4, 2011 with sale prices ranging noin 300.07 to 300.0877 per shale. The reporting person didertakes to provide upon request by the U.S. Securities and Exchange Commission staff, the issuer, or a security holder of the issuer, full information regarding the number of shares sold at each separate price.

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 January 28, 2011. 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.