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Steinke Bruce Form 4	e A									
January 03, 2	018									
FORM	4								PPROVAL	
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMB Number:	3235-0287			
Check thi if no long subject to Section 10 Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b).	er STATEM 6. Filed purs ¹⁸ Section 17(a	FEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES I pursuant to Section 16(a) of the Securities Exchange Act of 1934, 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940							January 31, 2005 Estimated average burden hours per response 0.5	
(Print or Type R	lesponses)									
1. Name and A Steinke Bruc	Symbol	2. Issuer Name and Ticker or Trading Symbol AMEREN CORP [AEE]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First) (M	iddle) 3. Date o	3. Date of Earliest Transaction				(Check an applicable)			
P.O. BOX 6		(Month/Day/Year) 01/01/2018				Director 10% Owner X Officer (give title Other (specify below) SVP, Finance & CAO				
		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 				
ST. LOUIS,	MO 63166-6149						Person		eporting	
(City)	(State) (2	Zip) Tab	le I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		4. Securi onAcquired Disposed (Instr. 3, Amount	l (A) o l of (D 4 and (A) or)	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, \$.01 Par Value			Code V	Amount	(D)	The	1,692 <u>(1)</u>	I	By 401(K)	
Common Stock, \$.01 Par Value	01/01/2018		А	1,862 (2)	А	\$ 0	31,484	D		

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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and unt of rlying rities : 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
Steinke Bruce A			SVP,		
P.O. BOX 66149	Finance &				
ST. LOUIS, MO 63166-6149	CAO				
o' '					

Signatures

Jonathan T. Shade, Asst. Secy. for Ameren Corporation, attorney-in-fact for Bruce A.	01/03/2018
Steinke	01/03/2018

**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).
- (1) Amount includes a total of 99 shares acquired monthly from March through December 2017 at prices ranging from \$54.49 to \$64.11 per share.

These restricted stock units were granted under the issuer's 2014 Omnibus Incentive Compensation Plan (the "Plan") and are scheduled to(2) vest upon the payment date in 2021, which shall be no later than March 15, 2021, subject to the terms of the Plan and the applicable award agreement issued thereunder.

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.

Date