#### MUELLER MICHAEL G

Form 4

March 04, 2009

# FORM 4

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

OMB Number: 3235-0287

Estimated average

burden hours per

Expires:

5. Relationship of Reporting Person(s) to

(Check all applicable)

Issuer

Director

**OMB APPROVAL** 

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

January 31, 2005

Form 4 or Form 5 obligations may continue.

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

2. Issuer Name and Ticker or Trading

AMEREN CORP [AEE]

3. Date of Earliest Transaction

(Month/Day/Year)

Symbol

response... 0.5

10% Owner

See Instruction 1(b).

(Last)

(Print or Type Responses)

MUELLER MICHAEL G

1. Name and Address of Reporting Person \*

(First)

(Middle)

P. O. BOX 66149		03/02/2	03/02/2009				Officer (give titleX Other (specify below)  President of Subsidiary				
(Street) 4. If Ame			endment, Date Original			6. Individual or Joint/Group Filing(Check					
		Filed(Mo	nth/Day/Year)			Applicable Line) _X_ Form filed by One Reporting Person					
ST. LOUIS, MO 63166-6149				Form filed by More than One Person							
(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)		ies Acquired sposed of (D) 4 and 5)  (A) or (D) Price	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						1,320	Ι	By 401K			
Common Stock, \$.01 Par Value						113	I	By ESOP			
Common Stock, \$.01 Par Value						60	I	Custodian for Daughter #1			
						71	I				

#### Edgar Filing: MUELLER MICHAEL G - Form 4

		Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control						SEC 1474 (9-02)
Reminder: Report on a s	eparate line for each class of securi	ities bene	-		-	•	ation of	SEC 1474
Common Stock, \$.01 03/02/2 Par Value	2009	F	388	D	\$ 23.78	8,009	D	
Common Stock, \$.01 Par Value						51	I	Custodian for Son
Common Stock, \$.01 Par Value								Custodian for Daughter #2

 $\label{thm:convertible} \textbf{Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned} \\ \textit{(e.g., puts, calls, warrants, options, convertible securities)}$ 

number.

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title and A	Amount of	۶
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orNumber	Expiration D	ate	Underlying S	Securities	Ι
Security	or Exercise		any	Code	of	(Month/Day/	Year)	(Instr. 3 and	4)	S
(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		,			(
				Code V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Performance Units	<u>(1)</u>					<u>(1)</u>	12/31/2010	Common Stock	991	

# **Reporting Owners**

Reporting Owner Name / Address	Relationships							
1 0	Director	10% Owner	Officer	Other				
MUELLER MICHAEL G P. O. BOX 66149 ST. LOUIS, MO 63166-6149				President of Subsidiary				

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## **Signatures**

G. L. Waters, Asst. Secy. for Michael G. Mueller

03/04/2009

\*\*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) Each performance unit represents a contingent right to receive one share of Ameren common stock. The performance units vest after a two year hold period.

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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