

REGIONS FINANCIAL CORP  
Form 4  
October 15, 2004

**FORM 4**

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

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

**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

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
**HENRIQUES ADOLFO**

(Last) (First) (Middle)

P.O. BOX 387

(Street)

MEMPHIS, TN 38147

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol

**REGIONS FINANCIAL CORP [RF]**

3. Date of Earliest Transaction (Month/Day/Year)

09/17/2004

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

\_\_\_\_ Director \_\_\_\_\_ 10% Owner  
 Officer (give title below) \_\_\_\_\_ Other (specify below)  
Group CEO

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
\_\_\_\_ Form filed by More than One Reporting Person

**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)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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)
				(A) or (D)	Code V Amount (D) Price		
Common Stock					75,473	D	
Common Stock					603	I	By 401(k)
Common Stock					680	I	By ESOP
Common Stock					338	I	By Spouse/Child(ren)
Common Stock					675	I	By Trust

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

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(9-02)

**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. Transaction Code (Instr. 8)	5. Number of Derivative 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
Stock Option	\$ 33.32	09/17/2004		A			17,721		03/17/2005	12/20/2010	Common Stock	17,721
Phantom Stock Units (UPC Deferred Comp.)	\$ 0 <sup>(1)</sup>								<sup>(1)</sup>	<sup>(1)</sup>	Common Stock	27,872
Stock Option	\$ 31.29								10/14/2001	10/14/2008	Common Stock	13,350
Stock Option	\$ 26.17								07/01/2004	12/16/2009	Common Stock	45,000
Stock Option	\$ 22.92								12/20/2003	12/20/2010	Common Stock	40,000
Stock Option	\$ 25.59								07/01/2004	10/10/2011	Common Stock	112,500
Stock Option	\$ 24.81								07/01/2004	10/08/2012	Common Stock	125,000
Stock Option	\$ 33.48								07/01/2004	10/14/2013	Common Stock	93,750

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
				Group CEO

HENRIQUES ADOLFO  
P.O. BOX 387  
MEMPHIS, TN 38147

## Signatures

By: Ronald C.  
Jackson

10/15/2004

\*\*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 reported phantom stock units were acquired under the Union Planters Corp. Deferred Compensation Plan for Executives.

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.