

REGIONS FINANCIAL CORP
Form 3
November 08, 2006

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
Expires: January 31, 2005
Estimated average burden hours per response... 0.5

INITIAL STATEMENT OF 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 *			2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
(Last)	(First)	(Middle)				
Â RITTER C DOWD			11/04/2006	REGIONS FINANCIAL CORP [RF]		
P O BOX 10247					(Check all applicable)	
(Street)					<input type="checkbox"/> Director	6. Individual or Joint/Group Filing(Check Applicable Line)
BIRMINGHAM,Â ALÂ 352020247					<input type="checkbox"/> 10% Owner	<input checked="" type="checkbox"/> Form filed by One Reporting Person
(City)	(State)	(Zip)			<input checked="" type="checkbox"/> Officer	<input type="checkbox"/> Form filed by More than One Reporting Person
					(give title below) (specify below)	
					President & CEO	

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	243,994	D	Â
Common Stock	83,962.864	I	By 401(k)
Common Stock	239,220	I	By GRAT
Common Stock	15,416	I	By Spouse ⁽¹⁾

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

SEC 1473 (7-02)

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 number.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security	2. Date Exercisable and Expiration Date	3. Title and Amount of Securities Underlying	4. Conversion	5. Ownership	6. Nature of Indirect Beneficial
---------------------------------	---	--	---------------	--------------	----------------------------------

Edgar Filing: REGIONS FINANCIAL CORP - Form 3

(Instr. 4)	(Month/Day/Year)		Derivative Security (Instr. 4)		or Exercise Price of Derivative Security	Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
Stock Option	11/04/2006 ⁽²⁾	10/04/2009	Common Stock	318,960	\$ 30.96	D	Â
Stock Option	11/04/2006 ⁽²⁾	02/11/2010	Common Stock	151,247	\$ 20.1436	D	Â
Stock Option	11/04/2006 ⁽²⁾	01/30/2011	Common Stock	493,690	\$ 21.3444	D	Â
Stock Option	11/04/2006 ⁽²⁾	01/29/2012	Common Stock	511,700	\$ 25.4076	D	Â
Stock Option	11/04/2006 ⁽²⁾	02/09/2013	Common Stock	476,144	\$ 25.696	D	Â
Stock Option	11/04/2006 ⁽²⁾	02/04/2014	Common Stock	464,405	\$ 30.5493	D	Â
Stock Option	11/04/2006 ⁽²⁾	02/07/2015	Common Stock	423,260	\$ 32.0166	D	Â
Stock Option	04/02/2007 ⁽²⁾	04/02/2016	Common Stock	296,075	\$ 34.462	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
RITTER C DOWD P O BOX 10247 BIRMINGHAM, AL 352020247	Â X	Â	Â President & CEO	Â

Signatures

By: D. Bryan
Jordan

11/08/2006

**Signature of
Reporting Person

Date

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 5(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) Reporting person disclaims beneficial ownership of these shares.

(2) Provisions exist to these shares to allow for the withholding of shares to satisfy tax withholding obligations and the withholding of shares to satisfy the payment of the exercise price.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, See Instruction 6 for procedure.

Edgar Filing: REGIONS FINANCIAL CORP - Form 3

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.