#### **REGIONS FINANCIAL CORP**

Form 4 April 19, 2005

## FORM 4

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

Check this box

Number: January 31, Expires:

**OMB** 

if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

Estimated average burden hours per response... 0.5

**OMB APPROVAL** 

3235-0287

2005

Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * PEREZ JORGE M			2. Issuer Name and Ticker or Trading Symbol REGIONS FINANCIAL CORP [RF]					5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
			(Month/Da	ay/Year)				_X_ Director		6 Owner	
2828 CORAL WAY, PENTHOUSE STE.			04/15/2005					Officer (give below)	e title Oth below)	er (specify	
	(Street)	4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
	Filed(Month/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person					
MIAMI, FL	. 33145							Form filed by Person	More than One Ro	eporting	
(City)	(State)	Zip)	Table	e I - Non-De	erivative S	Securitie	s Acq	uired, Disposed o	of, or Beneficial	lly Owned	
1.Title of	2. Transaction Date	2A. Dee	med	3.	4. Securit	ties		5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year)	r) Executi	on Date, if Transac		tionAcquired (A) or			Securities	Form: Direct	Indirect	
(Instr. 3)		any		Code	Disposed of (D) (Instr. 3, 4 and 5)			Beneficially	(D) or	Beneficial	
		(Month/	Day/Year)	(Instr. 8)				Owned	Indirect (I)	Ownership	
				C-l- V	A	(A) or		Following Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)	(Instr. 4)	
Common				Code V	Amount	(D) F	Price				
Common								46.200	D		
Stock								46,200	D		
(Trust)											

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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

#### Edgar Filing: REGIONS FINANCIAL CORP - Form 4

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. 5. Number of TransactionDerivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exerci Expiration Dat (Month/Day/Y	te	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
Phantom Stock Units (DDSIP)	<u>(1)</u>	02/25/2005		J <u>(1)</u>	V	5.87		<u>(1)</u>	<u>(1)</u>	Common Stock	5.87
Phantom Stock Units (DDSIP)	(1)	04/15/2005		P		423.81		<u>(1)</u>	<u>(1)</u>	Common Stock	423.81
Stock Option	\$ 33.48							07/01/2004	10/14/2013	Common Stock	6,200

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
PEREZ JORGE M							
2828 CORAL WAY, PENTHOUSE STE.	X						

MIAMI, FL 33145

# **Signatures**

By: Ronald C. Jackson 04/19/2005

\*\*Signature of Date
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) The reported phantom stock units were acquired under Regions' Directors Deferred Stock Investment Plan.

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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