Johnson James C Form 4 May 17, 2005

FORM 4

OMB APPROVAL

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

OMB 3235-0287 Number:

if no longer subject to Section 16.

Check this box

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

January 31, Expires: 2005 Estimated average burden hours per

0.5

response...

Form 4 or 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 * Johnson James C (Last) (First) (Middle) P. O. BOX 66149, MC-1370		2. Issuer Name and Ticker or Trading Symbol AMEREN CORP [AEE]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
		3. Date of Earliest Transaction			
		(Month/Day/Year) 05/16/2005	X Director 10% Owner Officer (give title below) Other (specification)		
	(Street)	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		
ST. LOUIS,	MO 63166-6149		Form filed by More than One Reporting Person		

(City)	(State)	(Zip)	Table I - Non-	Derivative Securities Acqui	red, Disposed of	, or Beneficia	illy Owned
1 Title of	2 Transaction Data	24 Doomad	2	1 Securities Acquired (A)	5 Amount of	6	7 Noture

2. Transaction Date	2A. Deemed	3.	4. Securit	ies A	cquired (A)	5. Amount of	6.	7. Nature of
(Month/Day/Year)	Execution Date, if	Transactio	omr Dispos	ed of	(D)	Securities	Ownership	Indirect
	any	Code	(Instr. 3, 4	4 and	5)	Beneficially	Form:	Beneficial
	(Month/Day/Year)	(Instr. 8)				Owned	Direct (D)	Ownership
						Following	or Indirect	(Instr. 4)
				(A)		Reported	(I)	
						Transaction(s)	(Instr. 4)	
		Code V	Amount	or (D)	Price	(Instr. 3 and 4)		
05/16/2005		A	1,000	A	\$ 52.6908	1,000	D	
	(Month/Day/Year)	any (Month/Day/Year)	(Month/Day/Year) Execution Date, if any Code (Month/Day/Year) (Instr. 8) Code V	(Month/Day/Year) Execution Date, if any Code (Instr. 3, 4) (Month/Day/Year) (Instr. 8) Code V Amount	(Month/Day/Year) Execution Date, if any Code (Instr. 3, 4 and (Month/Day/Year) (Instr. 8) (A) or Code V Amount (D)	(Month/Day/Year) Execution Date, if any (Month/Day/Year) Code (Instr. 3, 4 and 5) (Month/Day/Year) (Instr. 8) (A) or Code V Amount (D) Price	(Month/Day/Year) Execution Date, if any (Month/Day/Year) Code (Instr. 3, 4 and 5) Beneficially (Month/Day/Year) (Instr. 8) Owned Following Reported Transaction(s) (Instr. 3 and 4)	(Month/Day/Year) Execution Date, if any (Month/Day/Year) Code (Instr. 3, 4 and 5) Eneficially (Month/Day/Year) (Instr. 8) Securities Beneficially Form: Owned Direct (D) Following or Indirect Reported (I) Transaction(s) (Instr. 4) (Instr. 3 and 4)

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)

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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. Dr.Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Title Amoun Underly Securiti (Instr. 3	t of ying es	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 N	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
1 6	Director	10% Owner	Officer	Other			
Johnson James C							
P. O. BOX 66149, MC-1370	X						
ST. LOUIS, MO 63166-6149							

Signatures

G. L. Waters, Asst. Secy. for James C.

Johnson

**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).

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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