Edgar Filing: METLIFE INC - Form 4

METHIER INC

Form 4												
June 17, 201 FORN		D STATE						NGE C	OMMISSION	OMB AF OMB	PROVAL 3235-0287	
Check this box if no longer subject to STATEME			Washington, D.C. 20549 OF CHANGES IN BENEFICIAL OWN						NERSHIP OF	Number: Expires:	January 31, 2005	
Section 1 Form 4 c Form 5 obligatio may com <i>See</i> Instr 1(b).	or Filed p ns Section 1	ed pursuant to Section 16(a) of the Securities Exchange Act of 1934, on 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940							Estimated average burden hours per response C			
(Print or Type]	Responses)											
Morris Maria R Symbol			Symbol	r Name and Ticker or Trading				ıg	5. Relationship of Reporting Person(s) to Issuer			
(Month/D 200 PARK AVENUE 06/13/20 (Street) 4. If Amer			(Month/E	ate of Earliest Transaction nth/Day/Year) 13/2013					(Check all applicable) Director 10% Owner X Officer (give title Other (specify below) EVP, Global Employee Benefits			
			ndment, Date Original hth/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person				
NEW YOR	K, NY 10166								Form filed by M Person	Iore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Noi	n-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Execution any	emed on Date, if 'Day/Year)	Code (Instr.	8)	4. Securit n(A) or Di (Instr. 3, -	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	06/13/2013			A <u>(1)</u>		207	A	\$ 44.91	65,469	D		

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

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 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. Transact Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
Morris Maria R 200 PARK AVENUE NEW YORK, NY 10166			EVP, Global Employee Benefits						
Signatures									
Christine M. DeBiase, authoriz signer	zed	06/17/20)13						
<u>**</u> 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).

Reinvestment of dividends on shares held in Reporting Person's share deferral account (the "Plan Account") pursuant to the MetLife
 (1) Deferred Compensation Plan for Officers. The amount of shares beneficially owned following the reported transaction may include adjustments in the Reporting Person's Plan Account to reflect the accumulation of fractional shares into whole shares.

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.