Edgar Filing: METLIFE INC - Form 4

Check this box if no longer subject to Section 16. SECURITIES SECURITIES Number: Value of the section 16. Number: Subject to Section 16. SECURITIES Number: Subject to Section 16. SECURITIES Number: Number: Subject to Section 16. SECURITIES Number: Subject to Section 16. SECURITIES Number: Section 16. Section 16. Sec								3235-0287 January 31, 2005 verage		
(Print or Type	Responses)									
Morris Maria R Syml			2. Issuer Name and Ticker or Trading ymbol IETLIFE INC [MET]				5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (N		3. Date of Earliest Transaction				(Check all applicable)			
			(Month/Day/Year) 09/01/2015				Director 10% Owner Officer (give title Other (specify below) below) EVP, Global Employee Benefits			
			Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
NEW YOR	ed(Month/Day/Year	r)			Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								y Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Dat any (Month/Day/Y	Code Zear) (Instr. 8)	4. Securi on(A) or D (Instr. 3,	ispose 4 and (A) or	d of (D) 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)	
Common	00/01/2015		Code V		, í	Price		D		
Stock	09/01/2015		M <u>(1)</u>	2,000	А	\$ 23.3	90,999.6771	D		
Common Stock	09/01/2015		S <u>(1)</u>	2,000	D	\$ 48.42	88,999.6771	D		
Common Stock	09/01/2015		M <u>(1)</u>	2,200	А	\$ 34.84	91,199.6771	D		
Common Stock	09/01/2015		S <u>(1)</u>	2,200	D	\$ 48.42	88,999.6771	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)

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. Number onf 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
Employee Stock Option (Right to Buy)	\$ 23.3	09/01/2015		M <u>(1)</u>	2,000	<u>(2)</u>	02/23/2019	Common Stock	2,000
Employee Stock Option (Right to Buy)	\$ 34.84	09/01/2015		M <u>(1)</u>	2,200	<u>(3)</u>	02/22/2020	Common Stock	2,200

Reporting Owners

Reporting Owner Name / Address				
1	Director	tor 10% Owner Officer		Other
Morris Maria R 200 PARK AVENUE NEW YORK, NY 10166			EVP, Global Employee Benefits	
Signatures				
Mark A. Schuman, authorized signer		09/03/2015	j	
**Signature of Reporting Person		Date		

S S

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 transactions reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person.
- (2) The option vested in three equal installments on February 24, 2010, 2011 and 2012.
- (3) The option vested in three equal installments on February 23, 2011, 2012 and 2013.

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.