#### Edgar Filing: KANDARIAN STEVEN A - Form 4

#### KANDARIAN STEVEN A

Form 4

August 23, 2018

### FORM 4

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

OMB Number: 3235-0287

Estimated average

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Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005

0.5

**OMB APPROVAL** 

Form 4 or Form 5 obligations may continue.

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

response...

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * KANDARIAN STEVEN A	2. Issuer Name <b>and</b> Ticker or Trading Symbol METLIFE INC [MET]	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)		
(Last) (First) (Middle)	3. Date of Earliest Transaction	(Check an applicable)		
METLIFE, INC., 200 PARK AVENUE	(Month/Day/Year) 08/21/2018	_X_ Director 10% Owner _X_ Officer (give title Other (specify below)  Chairman, President & CEO		
(Street)	4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check		
NEW YORK, NY 10166	Filed(Month/Day/Year)	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								
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) ctiomr Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of 6. Securities Ownershi Beneficially Form: Owned Following Direct (D		Beneficial Ownership	
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	or Indirect (I) (Instr. 4)	(Instr. 4)	
Common Stock	08/21/2018		M	119,549	A	\$ 20.82	585,004.6629	D		
Common Stock	08/21/2018		S	85,683	D	\$ 46.93 (1)	499,321.6629	D		
Common Stock							9,250	I	By family member trusts (2)	

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 (9-02)

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# 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)	orDerivative Expir		ative Expiration Date ities (Month/Day/Year) red (A) or sed of (D)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amoun Numbe Shares
Employee Stock Option (right to buy)	\$ 20.82	08/21/2018		M		119,549	02/24/2012	02/23/2019	Common Stock	119,5

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
• 0	Director	10% Owner	Officer	Other				
KANDARIAN STEVEN A METLIFE, INC., 200 PARK AVENUE NEW YORK, NY 10166	X		Chairman, President & CEO					

### **Signatures**

Mark A. Schuman, authorized signer 08/23/2018

\*\*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).
- The price reported is the weighted average price of the aggregate number of shares purchased in multiple open market transactions. The shares were purchased at prices \$46.91 to \$46.965, inclusive. The Reporting Person undertakes to provide to the staff of the SEC,

  MetLife, Inc., or a security holder of the Issuer, upon request, full information regarding the number of shares purchased at each separate price.
- (2) Shares previously reported as indirectly owned through a Grantor Retained Annuity Trust.

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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