## Edgar Filing: METLIFE INC - Form 4

METLIFE I Form 4	INC													
April 24, 20	008													
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									ът	OMB APPROVAL				
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								N OME Num		r: 3235-0287				
Check t if no lor subject Section Form 4	to <b>STATE</b> 16.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES										Expires:January 31Expires:2005Estimated averageburden hours perresponse0.5		
Form 5 obligations may continue. See Instruction 1(b). 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														
(Print or Type	Responses)													
1. Name and Address of Reporting Person <u>*</u> PRICE HUGH B			2. Issuer Name <b>and</b> Ticker or Trading Symbol METLIFE INC [MET]						5. Relationship of Reporting Person(s) to Issuer					
(Last)	(First) (	Middle)	3. Date of	of Earliest Transaction					(Check all applicable)					
200 PARK AVENUE			(Month/Day/Year) 04/22/2008						X_ Director10% Owner Officer (give titleOther (specify below) below)					
				If Amendment, Date Original led(Month/Day/Year)					<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>					
NEW YOF	Form filed by Person						y More that	n One	Reporting					
(City)	(State)	(Zip)	Tab	ole I - Noi	n-D	erivativ	e Secu	rities Ac	quired, Disposed	of, or Be	nefic	ially Owne	ed	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/Da	n Date, if Transac Code			4. Securit (A) or Di (Instr. 3,	spose	d of (D)	Owned Following Reported Transaction(s)	6. Ownersh Form: Direct (I or Indire (I) (Instr. 4)	nip D) ect	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
~				Code V	V	Amount		Price	(Instr. 3 and 4)					
Common Stock	04/22/2008			A <u>(1)</u>	-	1,887	А	\$ 59.63	15,381	D				
Common Stock									10	Ι		By MetL Policyho Trust (2)		

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

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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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	rlying	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	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships								
	Director	10% Owner	Officer	Other					
PRICE HUGH B 200 PARK AVENUE NEW YORK, NY 10166	Х								
Signatures									
Gwenn L. Carr, authorized signer	0								
<u>**</u> Signature of Reporting Person		Date							
Explanation of Responses:									

## 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 transaction is pursuant to the Non-Management Director Compensation arrangements whereby 50% of retainer fees are paid in the Company's common stock.
- (2) Shares held in trust under MetLife Policyholder Trust established to hold shares of Common Stock allocated to eligible policyholders of Metropolitan Life Insurance Company, a wholly-owned subsidiary of MetLife, Inc.

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.