Edgar Filing: Latrenta Nicholas D - Form 4

Latrenta Ni Form 4 July 08, 20 FORM Check to if no los subject Section Form 4 Form 5 obligati may co <i>See</i> Inst 1(b).	11 VI 4 UNITED this box nger to 16. or Filed pu Section 17	MENT O	Wa F CHAI Section Public U	ashington NGES IN SECU 16(a) of t	n, D.C. 2 N BENE RITIES the Secur	FICI	AL OW Exchang ny Act c	COMMISSIO NERSHIP OI ge Act of 1934, of 1935 or Secti 40	N OMB Number Expires Estimate burden respons	January 31, 2005 ed average hours per	
Latrenta Nicholas D Sym				. Issuer Name and Ticker or Trading mbol ETLIFE INC [MET]				5. Relationship of Reporting Person(s) to Issuer			
(N			(Month/	3. Date of Earliest Transaction (Month/Day/Year) 07/06/2011				(Check all applicable) <u> </u>			
				Amendment, Date Original l(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 			
(City)	(State)	(Zip)	Tal	ble I - Non	-Derivativ	e Seci	irities Ac	quired, Disposed	of, or Benefi	cially Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	Code (Instr. 8)	4. Secur on(A) or D (Instr. 3,	ispose 4 and (A) or	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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	07/06/2011			M <u>(1)</u>	4,000	А	\$ 30.35	52,884	D		
Common Stock	07/06/2011			S <u>(1)</u>	4,000	D	\$ 43.62	48,884	D		
Common Stock								10	I	By the MetLife Policyholder Trust (2)	
Common Stock								10	Ι	By The Latrenta Family	

								,]]	Revocable Trust in the MetLife Policyholde Trust ⁽²⁾	ï	
Reminder: Report on a separate line for each class of securities beneficia				ially 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.				n are not orm	SEC 1474 (9-02)		
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 actionof Derivative Securities 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) 6. Date Exercisable and Expiration Date (Month/Day/Year) 			ate	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)	\$ 30.35	07/06/2011		M <u>(1)</u>		4,000	<u>(3)</u>	02/18/2012	Common Stock	4,000	
Reporting Owners											

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Latrenta Nicholas D 200 PARK AVENUE NEW YORK, NY 10166			E.V.P. & General Counsel					
Signatures								
Richard S. Collins, authorized signer		07/08/2011	l					
**Signature of Reporting Person		Date						

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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 stock option exercise and sale transaction reported in this Form 4 were effected pursuant to a Rule 10b5-1 Sales Plan adopted by the reporting person on May 5, 2010.
- (2) Shares held in trust under the 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.
- (3) The option vested in three equal installments on February 19, 2003, 2004 and 2005.

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.