Edgar Filing: METLIFE INC - Form 4

METLIFE IN	NC										
Form 4											
March 15, 20)13										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB AF	PROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							COMMISSION	OMB Number:	3235-0287		
Check this box									Expires:	January 31,	
if no longer subject to STATEMENT OF CHAN						ICIA	LOW	NERSHIP OF	Estimated a	2005 average	
Section 16.				SECUR	ITIES				burden hours per		
Form 4 o Form 5			~ • •		~ .		_		response 0.5		
obligation		^					•	e Act of 1934,			
may cont	inue. Section			tility Hold	•			1935 or Section	1		
See Instru 1(b).	uction	30(II)) of the m	vestment	Compan	ly AC	101 194	Ю			
1(0).											
(Print or Type I	Responses)										
	ddress of Report	ing Person [*]	2. Issuer	Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
KELLY ALFRED F JR Symbol											
METLI			FE INC [I	MET]							
(Last)	(First)	(Middle)	3. Date of Earliest Transaction					/			
200 PARK AVENUE 03/13/2 (Street) 4. If Ame			(Month/D	Ionth/Day/Year)				_X_Director10% Owner			
			03/13/2	013				Officer (give titleOther (spec below) below)			
			endment, Da	te Origina	1		6. Individual or Joint/Group Filing(Check				
			Ionth/Day/Year)				Applicable Line)				
				•				_X_Form filed by C			
NEW YOR	K, NY 10166							Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)	Tahl	a I Nam D	:	C			an Dan affaial	les Oenne d	
	. ,							uired, Disposed of		-	
1.Title of Security	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if			3. Transactio	4. Securi		-	5. Amount of Securities	6. Ownership Form: Direct		
(Instr. 3)	(Woldin Day) IC	JII Date, II	Code	(Instr. 3,	•		Beneficially	(D) or	Beneficial		
, ,		(Month/Day/			. ,		,	Owned		Ownership	
								Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common						(D)	\$				
Stock	03/13/2013			J <u>(1)</u>	58	А	φ 39.98	21,585	D		
Stoon							07.70				

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)	4. Transact Code (Instr. 8)	ionNumber Expiration of (Month/ Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		5	ate	Amount of		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	4, and	,	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
L B	Director	10% Owner	Officer	Other				
KELLY ALFRED F JR 200 PARK AVENUE NEW YORK, NY 10166	Х							
Signatures								
Christine M. DeBiase, authoriz signer	ed	03/15/20	013					
**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 the Reporting Person's share deferral account (the "Plan Account") pursuant to the MetLife
 (1) Deferred Compensation Plan for Outside Directors. 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.