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HENRIKSO Form 4 March 07, 2 FORN	ЛЛ						COMMISSIO	N OMB	3 APPROVAL 3235-0287	
Check t	his box	Wa	ashington	i, D.C. 2	20549)		Number	: January 31	
if no los subject Section Form 4 Form 5	to STATEME 16. or		NGES IN BENEFICIAL OWN SECURITIES					Estimate burden l respons	ed average hours per	
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)									
	Address of Reporting Per ON C ROBERT	Symbol	er Name an		or Trad	ling	5. Relationship Issuer	of Reporting	Person(s) to	
(Lost)		METLIFE INC [MET] 3. Date of Earliest Transaction				(Check all applicable)				
(Last) 200 PARK	(First) (Mid AVENUE	,	'Day/Year)	ransactio	n		X Director X Officer (gi below) Ch			
NEW YOF	(Street) RK, NY 10166		nendment, D onth/Day/Yea	-	nal		6. Individual or Applicable Line) _X_ Form filed by Form filed by	One Reportin	g Person	
(City)	(State) (Zi	ip) T al	hla I Non	Dorivotiv	0 S 001	urition A a	Person quired, Disposed	of or Bonofi	cially Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 24 (Month/Day/Year) Ex an	A. Deemed xecution Date, if	3. Transactio Code (Instr. 8)	4. Securi on(A) or D (Instr. 3,	ties A ispose 4 and (A) or	cquired d of (D) 5)	5. Amount of Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	03/05/2008		Code V M	3,100	(D) A	Price \$ 29.95	136,625	D		
Common Stock	03/05/2008		S <u>(1)</u>	3,100	D	\$ 57.82	133,525	D		
Common Stock							10	I	By Irrevocable Family Trust (2)	
Common Stock							10	I	By MetLife Policyholder Trust <u>(2)</u>	

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Common Stock	:	10	I	By Spouse	(2)			
Common Stock		479		By Other Trust (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 required to respond unless the form displays a currently valid OMB control number. SEC 1474 (9-02) Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) SEC 1474 (9-02)								
1. Title of Derivative Security2.3. Transaction Date (Month/Day/Year)3A. Deemed Execution Date, if any(Instr. 3)Price of Derivative Security(Month/Day/Year)	Code Securities	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)				
	Code V (A) (D)		Expiration Date	Title	Amount or Number of Shares			
Employee Stock Option \$ 29.95 03/05/2008 (right to buy)	M 3,100) <u>(3)</u>	04/08/2011	Common Stock	3,100			
Reporting Owners								

Reporting Owner Name / Address	Relationships						
Toporong o when I take / I take oo	Director	10% Owner	Officer	Other			
HENRIKSON C ROBERT 200 PARK AVENUE NEW YORK, NY 10166	Х		Chairman and CEO				
Signatures							
Gwenn L. Carr, authorized signer	0	3/07/2008					
**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 sale transaction reported in this Form 4 was effected pursuant to a Rule 10b5-1 Sales Plan adopted by the reporting person on August 21, 2007.
- (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.
- (3) The option vested in three equal installments on April 9,2002, 2003 and 2004.

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.