METLIFE INC Form 4 May 02, 2008

FORM 4

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

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

OMB APPROVAL

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may continue. See Instruction

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

1(b).

Form 5

obligations

(Print or Type Responses)

1. Name and Address of Reporting Person * HENRIKSON C ROBERT			2. Issuer Name and 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)		
			(Month/Day/Year)	X Director 10% Owner		
200 PARK AVENUE			04/30/2008	_X_ Officer (give title Other (specify below)		
				Chairman and CEO		
	(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check		
			Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person		
NEW YORK, NY 10166				Form filed by More than One Reporting Person		

(City)	(State)	(Zip) Tak	ole I - Non-	Derivativ	e Seci	urities Ac	quired, Disposed	l of, or Benefi	icially Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securion(A) or D (Instr. 3,	ispose 4 and (A) or	ed 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	04/30/2008		M	3,100	A	\$ 29.95	195,755	D	
Common Stock	04/30/2008		S <u>(1)</u>	3,100	D	\$ 61.11	192,655	D	
Common Stock							10	I	By Irrevocable Family Trust
Common Stock							10	I	By MetLife Policyholder Trust (2)

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Common Stock Reminder: Report on a separate line for each class of securities ben	479 I eficially owned directly or indirectly.	By Other Trust (2)		
Common Stock	10 I	By Spouse (2)		

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)	ransaction Derivative Explode Securities (Me		6. Date Exercisable and Expiration Date (Month/Day/Year)		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)	\$ 29.95	04/30/2008		M	3,100	<u>(3)</u>	04/08/2011	Common Stock	3,100	

Reporting Owners

**Signature of Reporting Person

Reporting Owner Name / Address	Relationships						
roporting o where I take to read the	Director	10% Owner	Officer	Other			
HENRIKSON C ROBERT 200 PARK AVENUE NEW YORK, NY 10166	X		Chairman and CEO				
Signatures							
Gwenn L. Carr, authorized signer	0.	5/02/2008					

Date

Reporting Owners 2

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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.