## Edgar Filing: Kennard William E - Form 4

Form 4	Illiam E											
December										PPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB OMB Number:	3235-0287				
Check if no lo subject Section Form 4 Form 5		F CHANGES IN BENEFICIAL OWN SECURITIES						Expires: Estimated burden hou response	•			
obligat may co	ions Section 17	(a) of the l	Public I	Utility Ho		pany	Act of	Act of 1934, 1935 or Sectior )	I			
(Print or Type	e Responses)											
1. Name and Address of Reporting Person <u>*</u> Kennard William E			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 Earliest Transaction			(Check all applicable)						
200 PARK AVENUE			(Month/Day/Year) 12/13/2017					X_ Director 10% Owner Officer (give title Other (specify below) below)				
			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
NEW YO	RK, NY 10166							Form filed by M Person	ore than One R	eporting		
(City)	(State)	(Zip)	Ta	ble I - Non	-Derivative S	ecurit	ies Acqu	ired, Disposed of,	or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution I any (Month/Day	Date, if	3. Transactic Code (Instr. 8) Code V	4. Securities por Disposed (Instr. 3, 4 and Amount	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	12/13/2017			A <u>(1)</u>	104.5707	А	\$ 52.84	13,918.3639	D			
Common Stock								10	I	By the MetLife Policyholder 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	le and int of rlying ities . 3 and 4)	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**

Reporting Owner Name / Address	Relationships							
1 0	Director	Director 10% Owner		Other				
Kennard William E 200 PARK AVENUE NEW YORK, NY 10166	Х							
Signatures								
Mark A. Schuman, authorized signer		12/15/201	7					
**Signature of Reporting Person		Date						
Evalenation of Deenenace.								

## 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).

Represents imputed reinvestment of dividends on Deferred Shares in the Reporting Person's deferral account pursuant to the MetLife
 (1) Deferred Compensation Plan for Non-Management Directors. Deferred Shares represent shares of MetLife, Inc. common stock that have become payable, but that remain unpaid because payment has been deferred.

(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.

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.