## Edgar Filing: METLIFE INC - Form 4

METLIFE INC Form 4 April 04, 2006							
FORM 4 LINITED S				OMB AF	PROVAL		
UNITED S	TATES SECURITIES AN Washington, J		OMMISSION	OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or		stimated average urden hours per					
Form 5 obligations may continue.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 19401(b).							
(Print or Type Responses)							
1. Name and Address of Reporting P LIPSCOMB JAMES L	erson <sup>*</sup> 2. Issuer Name and <sup>7</sup> Symbol METLIFE INC [N	-	5. Relationship of Reporting Person(s) to Issuer				
(Lost) (First) (M	-	-	(Check	all applicable	)		
(Last)(First)(Middle)3. Date of Earliest Transaction (Month/Day/Year)200 PARK AVENUE03/31/2006			Director       10% Owner        X Officer (give title       Other (specify below)         below)       below)         Exec. VP & General Counsel				
(Street)	4. If Amendment, Date Filed(Month/Day/Year)	<ol> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ol>					
NEW YORK, NY 10166			Form filed by Mo Person				
(City) (State) (2	Table I - Non-De	erivative Securities Acqu	uired, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)	2A. Deemed 3. Execution Date, if Transaction	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or	5. Amount of Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of		
Common 03/31/2006 Stock	А	7,312 A <sup>\$</sup> 48.37	22,371	D			

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)

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna 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					
	Director	10% Owner	Officer	Other		
LIPSCOMB JAMES L 200 PARK AVENUE NEW YORK, NY 10166			Exec. VP & General Counsel			
Signatures						
Gwenn L. Carr, authorized signer	0	4/04/2006				
**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).

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.