Lynch Karen S Form 4 March 06, 2018

FORM 4

OMB APPROVAL

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

OMB Number: 3235-0287

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

Expires: January 31, 2005

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

Form 4 or Form 5 obligations 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(b) of the Investment Company Act of 1940

struction 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

(Ctata)

(7:n)

1. Name and Address of Reporting Person * Lynch Karen S			2. Issuer Name and Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer		
			AETNA INC /PA/ [AET]	(Check all applicable)		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction	` **		
			(Month/Day/Year)	Director 10% Owner		
AETNA INC., 151 FARMINGTON AVENUE		MINGTON	03/02/2018	_X_ Officer (give title Other (specify below)		
				President		
	(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		
HARTFORI	O, CT 06156			Form filed by More than One Reporting Person		

(City)	(State)	(Zip) Tabl	le I - Non-I	Derivative	Secur	ities Acqui	red, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	3. Transactio	4. Securit	ed of (` ′	5. Amount of Securities Beneficially	6. Ownership Form:	7. Nature of Indirect Beneficial
(mail: 5)		(Month/Day/Year)	(Instr. 8)		(A) or		Owned Following Reported Transaction(s) (Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock	03/02/2018		Code V M	Amount 17,912 (1)	(D)	Price (2)	82,173	D	
Common Stock	03/02/2018		F	7,277 (3)	D	\$ 177.53	74,896	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 1474

(9-02)

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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. Transactic Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amoun Underlying Securit (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amor or Numl of Sh
Performance Stock Units	(2)	03/02/2018		M		14,926	<u>(4)</u>	<u>(4)</u>	Common Stock	14,9
Restricted Stock Units	<u>(5)</u>	03/02/2018		A	30,981		<u>(6)</u>	<u>(6)</u>	Common Stock	30,9

Reporting Owners

Reporting Owner Name / Address	Relationships							
1 8	Director	10% Owner	Officer	Other				
Lynch Karen S								
AETNA INC. 151 FARMINGTON AVENUE			President					

Signatures

HARTFORD, CT 06156

KAREN S. LYNCH, by Judith H. Jones,
Attorney-in-Fact

**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).
- (1) Represents vesting of previously reported Performance Stock Units ("PSUs") granted under the 2010 Stock Incentive Plan (the "Plan").
- (2) Each PSU represents a right to receive up to two shares of Aetna Inc. Common Stock net of taxes.
- (3) Represents tax withholding on vesting of previously reported PSUs.
- (4) PSUs granted under the Plan.
- (5) Each Restricted Stock Unit ("RSU") represents a right to receive one share of Aetna Inc. Common Stock net of taxes.
- (6) RSUs granted under the Plan vest in three annual installments beginning December 2, 2018.

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.

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