Edgar Filing: AETNA INC /PA/ - Form 4

AETNA INC /PA	A/								
Form 4									
June 03, 2014	_								
FORM 4	UNITED	STATES	SECURI	FIES AND EX(CHANGE C	OMMISSION		PROVAL	
~				ington, D.C. 20			Number:	3235-0287	
Check this bo if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Expires: January 3 200 Estimated average burden hours per response 0.		
obligations may continue. <i>See</i> Instruction 1(b).	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 Respo	onses)								
1. Name and Address of Reporting Person <u>*</u> HACKMAN FRANKLIN BARBARA			2. Issuer Name and Ticker or Trading Symbol AETNA INC /PA/ [AET]			5. Relationship of Reporting Person(s) to Issuer			
						(Check all applicable)			
(Last) (First) (Middle) THE WATERGATE OFFICE BUILDING, 2600 VIRGINIA AVENUE, N.W. SUITE 506			3. Date of Earliest Transaction (Month/Day/Year) 05/30/2014			X_ Director 10% Owner Officer (give title Other (specify below) below)			
(Street)			4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check			
F WASHINGTON, DC 20037			Filed(Month/Day/Year)			Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table I	- Non-Derivative S	Securities Acq	uired, Disposed of	, or Beneficial	y Owned	
Security ((Instr. 3)	2. Transaction D Month/Day/Yea	ar) Execut any	eemed ion Date, if	3. 4. Secu TransactionAcquire	rities ed (A) or ed of (D) 3, 4 and 5) (A) or	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	
COMMON STOCK						26,109.2331	D		

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

Reporting Owners

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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. Transacti Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Pr Deri Secu (Inst
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units	<u>(1)</u>	05/30/2014		А	2,064	(2)	(2)	Common Stock	2,064	2

Deletionching

Reporting Owners

Reporting Owner Name / Address		Relationsi			
	Director	10% Owner	Officer	Other	
HACKMAN FRANKLIN BARBARA THE WATERGATE OFFICE BUILDING 2600 VIRGINIA AVENUE, N.W. SUITE 506 WASHINGTON, DC 20037	Х				
Signatures					
BARBARA HACKMAN FRANKLIN, by Melinda Westbrook, Attorney					

in Fact

**Signature of Reporting Person

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) Units convert to Common Stock on a one-for-one basis.
- Restricted Stock Units granted under the Aetna Inc. 2010 Non-Employee Director Compensation Plan (the "Plan"). Subject to terms of (2) the Plan, units will vest in four equal installments on August 30, 2014, November 30, 2014, February 28, 2015 and May 30, 2015, with payment of the units deferred until June 1, 2015. Upon payment date, units will be issued in Common Stock.

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.

Date