## Edgar Filing: POPIK WILLAIM C MD - Form 4/A

POPIK WILL Form 4/A March 24, 20		·	Ţ								
<b>FORM</b> Check thi if no long subject to Section 1 Form 4 of Form 5 obligation may cont <i>See</i> Instru 1(b).	is box ger 6. r Filed pu inue. Section 17	MENT OF rsuant to S (a) of the P	Wa CHAN ection 1 Public U	shington NGES IN SECUF	, D.C. 20 BENEF RITIES le Securi ding Cor	<b>)549</b> ICIA ties E	LOV Exchar y Act	COMMISSION WNERSHIP OF nge Act of 1934, of 1935 or Section 940	N OMB Number: Expires: Estimated burden hou response	irs per	
(Print or Type F	Responses)										
1. Name and Address of Reporting Person <sup>*</sup> POPIK WILLAIM C MD (Last) (First) (Middle) 151 FARMINGTON AVENUE			<ol> <li>Issuer Name and Ticker or Trading Symbol</li> <li>AETNA INC /PA/ [AET]</li> <li>Date of Earliest Transaction (Month/Day/Year)</li> <li>02/11/2005</li> </ol>				ng	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title 10% Owner X Officer (give title 0ther (specify below) Sr. VP & Chief Medical Officer			
Filed 02/1			4. If Amendment, Date Original Filed(Month/Day/Year) 02/14/2005					<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_Form filed by One Reporting Person</li> <li>Form filed by More than One Reporting</li> </ul>			
	D, CT 06156							Person	wore than one it	eporting	
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secu	rities A	cquired, Disposed	of, or Beneficia	lly Owned	
	2. Transaction Date (Month/Day/Year)	Execution I any	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) of (D	)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder: Rep	ort on a separate line	e for each cla	ss of sec	urities benef	•		•	or indirectly. pond to the colle	ction of	SEC 1474	

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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	orDerivative	Expiration Date	Underlying Securitie
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

## Edgar Filing: POPIK WILLAIM C MD - Form 4/A

(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.	8)	Acquired or Dispos (D) (Instr. 3, 4 and 5)	ed of				
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Sha
Employee Stock Option	\$ 133.5	02/11/2005		А		17,566 (1)		06/30/2005 <u>(2)</u>	02/11/2015	Common Stock	17,5

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
r g a ta ta ta ta	Director	10% Owner	Officer	Other				
POPIK WILLAIM C MD 151 FARMINGTON AVENUE HARTFORD, CT 06156		Sr. VP & Chief Medical Officer						
Signatures								
William C. Popik by Judith H. Jones, Attorney-in-Fact		03/24/2005						
<b>**</b> 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) Amended to correct number of shares subject to option reported.

(2) Option granted under the 2000 Stock Incentive Plan; option for 9,399 shares exercisable in three equal installments on June 30, 2005; February 11, 2007; and February 11, 2008 and option for 8,167 shares exercisable on August 11, 2005.

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.