AETNA INC /PA/ Form 4/A March 09, 2015

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

if no longer subject to Section 16. Form 4 or

Check this box

Form 5 obligations may continue.

See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

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 1940

(Print or Type Responses)

1. Name and Address of Reporting Person * Zubretsky Joseph M

2. Issuer Name and Ticker or Trading Symbol

AETNA INC /PA/ [AET]

(First) (Middle) (Last)

3. Date of Earliest Transaction (Month/Day/Year)

Filed(Month/Day/Year)

AETNA INC., 151 FARMINGTON AVENUE

03/02/2015

(Street) 4. If Amendment, Date Original

03/04/2015

5. Relationship of Reporting Person(s) to

OMB

Number:

Expires:

response...

Estimated average

burden hours per

OMB APPROVAL

3235-0287

January 31,

2005

0.5

Issuer

(Check all applicable)

Director 10% Owner

X_ Officer (give title Other (specify below) below)

Senior Exec. VP, Healthagen

6. Individual or Joint/Group Filing(Check Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

HARTFORD, CT 06156

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)

Derivative

Security

2. Transaction Date 2A. Deemed (Month/Day/Year)

Execution Date, if

(Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of Securities Beneficially Owned Following

Reported

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial (I) (Instr. 4)

Ownership (Instr. 4)

(A) Transaction(s) (Instr. 3 and 4) Code V Amount (D) Price

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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 3. Transaction Date 3A. Deemed

Conversion

or Exercise

(Month/Day/Year) Execution Date, if any

4. 5. Number of **Transaction**Derivative Code Securities

6. Date Exercisable and Expiration

(Month/Day/Year)

7. Title and A Underlying S (Instr. 3 and 4

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(Instr. 3) Price of Derivative Security

(Month/Day/Year) (Instr. 8) Acquired (A)

or Disposed of (D)

(Instr. 3, 4, and 5)

Code V (A) (D)

(D) Date Exercisable Expiration Date Title

Stock

Appreciation \$ 100.5 03/02/2015

A 88,167

03/02/2016(2) 03/01/2025(2)

Common Stock

Right (1)

Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

Zubretsky Joseph M

AETNA INC. 151 FARMINGTON AVENUE HARTFORD, CT 06156 Senior Exec. VP, Healthagen

Signatures

Joseph M. Zubretsky by Judith H. Jones, Attorney -in-fact

03/09/2015

**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).
- Due to a computational error by the Company, the Form 4 filed on March 4, 2015 incorrectly reported the number of derivative securities acquired by reporting person on March 2, 2015. This Form 4/A amends the Form 4 filing to correctly state the number of derivative securities acquired by reporting person.
- (2) Stock Appreciation Right granted under the Aetna Inc. 2010 Stock Incentive Plan, exercisable in three annual installments beginning March 2, 2016.

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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