## MetLife



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Computershare
PO Box 30170
College Station, TX 77842-3170
Within USA, US territories & Canada 800 649 3593
Outside USA, US territories & Canada 201 680 6578
Hearing Impaired (TDD) 201 680 6611
www.computershare.com/metlife

Name of Current Account Holder

Address

City, State, Zip

## MetLife - Notice to Withdraw

## REQUEST TO WITHDRAW FROM THE METLIFE POLICYHOLDER TRUST

By completing and returning the attached Withdrawal Election Form below, you elect to withdraw all of your Trust Interests from the MetLife Policyholder Trust associated with the account referenced above, and in exchange receive MetLife, Inc. common stock ("shares"). The shares you receive will be maintained in book-entry (electronic) form with Computershare, MetLife's Transfer Agent. You will receive a statement reflecting your ownership of these shares and a check will be issued for any fractional shares that you held.

Once you have withdrawn the shares of common stock from the Trust, you may no longer participate in the Trust's commission-free Purchase and Sale Program. Under the Program, subject to limitations, you may sell your Trust Interests and receive the proceeds, and, if you own less than 1,000 shares, you may buy more shares of common stock to be held for you in the Trust, all on a commission-free basis. Trust Beneficiaries may vote withdrawn shares of common stock on any matters on which stockholders are entitled to vote.

If you have a brokerage account, you may choose to transfer your withdrawn book-entry shares to your broker. Upon completion of this Withdrawal Election Form, a statement will be mailed to you. Simply provide the Holder Account Number from the statement and your Social Security Number, to your broker and instruct your broker to initiate an electronic transfer of your shares from Computershare (DTC number, 7807).

For any questions concerning this form, please call Computershare, MetLife, Inc.'s Transfer Agent, at the number listed above.

IMPORTANT: Carefully cut alo	ng the dotted line and return the Withdrawal Election Form	BELOW to the address provided.
WITHDRAWAL ELECTION FORM		4
Name:		E 1 N T W
Current Holder Account Number:		
the enclosed envelope. All owners must sign if the account has no live a substantial live and live as a substantial live as a substa		icyholder Trust and shares of MetLife, Inc. common stock
By signing and dating below, I/we acknowledge that I/we am/ar in the Trust's commission-free Purchase and Sale Program.	e relinquishing rights as a Trust Beneficiary under the terms of	The MetLife Policyholder Trust, including our rights to participate
Signature 1 - Please keep signature within the box	Signature 2 - Please keep signature within the box	Date (mm/dd/yyyy)

