AETNA INC /PA/ Form 4 July 07, 2005

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

Estimated average burden hours per 0.5 response...

OMB APPROVAL

3235-0287

January 31,

2005

OMB

Number:

Expires:

Form 5 obligations may continue. See Instruction 1(b).

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 <u>*</u> HANCOCK ELLEN M			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)	X Director 10% Owner			
P. O. BOX 169			07/06/2005	Officer (give title below) Other (specify below)			
(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			
RIDGEFIELD, CT 06877				Form filed by More than One Reporti Person			

RIDGEFIEI	LD, CT	06877

(City)	(State)	(Zip) Table	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)			d of (D)	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		
Common Stock	07/06/2005		M	1,501	A	\$ 17.89	0	D	
Common Stock	07/06/2005		S <u>(1)</u>	200	D	\$ 84.43	0	D	
Common Stock	07/06/2005		S(1)	100	D	\$ 84.41	0	D	
Common Stock	07/06/2005		S(1)	500	D	\$ 84.5	0	D	
Common Stock	07/06/2005		S(1)	300	D	\$ 84.65	0	D	
	07/06/2005		S(1)	300	D	\$ 85	0	D	

Common Stock

Common Stock 07/06/2005 $S_{\underbrace{(1)}}$ 07/06/2005 $S_{\underbrace{(1)}}$ 07/06/2005 D

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

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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 3. Transaction Date 3A. Deemed 5. Number 6. Date Exercisable and 7. Title and Amount of 4. **Underlying Securities** Derivative Conversion (Month/Day/Year) Execution Date, if Transaction of Derivative Expiration Date (Instr. 3 and 4) Security or Exercise Code Securities (Month/Day/Year) Price of (Instr. 8) (Instr. 3) (Month/Day/Year) Acquired Derivative (A) or Security Disposed of (D) (Instr. 3, 4, and 5) Amou Date Expiration Title Numb Exercisable Date of Code V (A) (D) Shares **DIRECTOR STOCK** COMMON (2) **OPTION** \$ 17.89 07/06/2005 1,501 01/25/2012 1,50 M **STOCK** (RIGHT TO

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

HANCOCK ELLEN M
P. O. BOX 169
X
RIDGEFIELD, CT 06877

Signatures

BUY)

ELLEN M. HANCOCK, BY JUDITH H. JONES, ATTORNEY IN FACT 07/07/2005

**Signature of Reporting Person Date

Reporting Owners 2

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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) THE SALE REPORTED WAS EFFECTED PURSUANT TO A 10b5-1 TRADING PLAN ADOPTED BY THE REPORTING PERSON ON JUNE 8, 2005.
- PREVIOUSLY REPORTED. OPTION GRANTED UNDER THE NON-EMPLOYEE DIRECTOR COMPENSATION PLAN
 (THE"PLAN") AND EXERCISABLE ON JANUARY 25, 2003 (3,667 SHARES), JANUARY 25, 2004 (3,667 SHARES) AND
 JANUARY 25, 2005 (3,666 SHARES). THIS OPTION HAS BEEN ADJUSTED TO REFLECT THE COMPANY'S 2 FOR 1 STOCK SPLIT ON MARCH 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.