Edgar Filing: HAGAN ANNMARIE T - Form 4

HAGAN AN	INMARIE T										
Form 4											
February 28,											
FORM	14	STATE	SECUE	ITIES A	ND EV	CITA	NCEC	COMMISSION		PPROVAL	
	UNITED	SIAIE		shington,			INGE C	20111111551011	OMB Number:	3235-0287	
Check this box if no longer									Expires:	January 31,	
subject to STATEMENT OF CHAN				GES IN BENEFICIAL OWN SECURITIES				NERSHIP OF	Estimated a	2005 Iverage	
Section 1 Form 4 o									burden hou		
Form 5		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,						response	0.5		
obligation	ns Section 170						U	1935 or Section	n		
may cont See Instru	inue.			vestment	•	· ·					
1(b).					-	•					
(Print or Type F	Responses)										
	•										
	ddress of Reporting	Person [*]	2. Issuer	r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to			
•				ymbol				Issuer			
			CIGNA	CIGNA CORP [CI]				(Check all applicable)			
(Last)	(First) (Middle)		f Earliest Tr	ansaction						
			-	(Month/Day/Year)				Director 10% Owner X Officer (give title Other (specify			
1650 MARKET STREET, ONE (LIBERTY PLACE			02/24/2005					below) below)			
LIDENTT	LITEL							Chief A	ccounting Offi	cer	
				. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
Filed(Mor			onth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person				
PHILADELPHIA, PA 191921550								Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of	2. Transaction Dat			3.	4. Securi			5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Year)	any	Execution Date, if any		Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)			Securities Beneficially	Form: Direct (D) or	Beneficial	
(•	Day/Year)		(- /	Owned	Indirect (I)	Ownership	
								Following Reported	(Instr. 4)	(Instr. 4)	
						(A)		Transaction(s)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common							\$				
Stock, \$.25	02/28/2005			F	130	D	φ 90.34	4,605	D		
Par Value							20101				
Common											
Stock, \$.25								964.01 <u>(1)</u>	Ι	By 401(k)	
Par Value											

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.

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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 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. Transactic Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exerci Expiration Da (Month/Day/Y	te	7. Title and Underlying (Instr. 3 and	Securities
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (Right to buy)	\$ 89.42	02/24/2005		А	4,535	02/24/2006	02/24/2015	Common Stock	4,535

Reporting Owners

Reporting Owner Name / Address	Relationships					
I S S S S S S S S S S S S S S S S S S S	Director	10% Owner	Officer	Other		
HAGAN ANNMARIE T 1650 MARKET STREET ONE LIBERTY PLACE PHILADELPHIA, PA 191921550			Chief Accounting Officer			
Signatures						

By: Carol J. Ward on	
behalf of	02/28/2005

**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). **
- Includes 8.29 shares acquired through ongoing participation in CIGNA's 401 (K) Plan, based on report from Plan Administrator as of Jan (1)31, 2005.
- (2) This option vest in three equal installments beginning 2/24/2006

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.