Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| <i>N</i> ashington, | D.C. | 20549 |
|---------------------|------|-------|

| Section 16. Form 4 or Form 5 | STATEMENT OF CHANGES IN BENEFICIAL | OWNERSHIP |
|-------------------------------|------------------------------------|-----------|
| obligations may continue. See | | |

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* <u>DeBiase Christine M.</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol Brighthouse Financial, Inc. [BHF] | | | | | | | | | c all applic Directo | cable) | | erson(s) to Issuer 10% Owner Other (specify | |
|--|---|--|---------------------|---|--------|---|-------|------------------------------------|------------------|--|----------------------|-----------------|--------------------------------|---|-------------------------|---|---|---|-------------|
| (Last) 11225 No | ` | irst) MMUNITY HO | (Middle) USE ROA | ΔD | | Date of Earliest Transaction (Month/Day/Year) 9/30/2018 | | | | | | | | | below) | | nin O | below) | |
| (Street) CHARL(| | | 28277 (Zip) | | 4. 1 | If Ame | ndme | nt, Date o | of Origina | l Filed | l (Month/Da | ay/Year) | | 6. Indi Line) X | Form fi | led by One led by Mor | Repo | (Check Apporting Person | 1 |
| | ` | - | | n-Deriv | /ativ | e Se | curit | ies Ac | auired. | Dis | posed o | of, or Be | nefic | cially | Owned | | | | |
| 1. Title of Security (Instr. 3) 2. Tra | | | 2. Transa Date | ransaction 2 e E nth/Day/Year) if | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | or 5. Amount o | | nt of es ally following | Form (D) o | n: Direct r Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | (A) o (D) | r Pri | ice | Transact (Instr. 3 | tion(s) | | | (111311. 4) |
| Common Stock 09 | | | 09/30 |)/2018 | 2018 | | | М | | 36,899 | 9 A | | (1) | 37,634 ⁽²⁾ | | | D | | |
| Common | Stock | | | 09/30 |)/2018 | 8 | | | F | | 16,524 | (3) D | \$4 | \$44.24 21,110 | | | | D | |
| | | - | Гаble II - | | | | | | | | osed of, converti | | | | wned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) 3. A. Deem Executior if any (Month/Day | | Date, Transa Code (I | | | | 6. Date E Expiratio (Month/E | n Dat | | of Securities | | | . Price of perivative security Instr. 5) | | Owner Form: Direct or Indi (I) (Ins | Ownership | Beneficial Ownership ct (Instr. 4) | |
| | | | | Co | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | Amo or Num of Shar | ber | | | | | |
| Restricted Stock | (1) | 09/30/2018 | | | M | | | 36,899 | (4) | | (4) | Common Stock | 36,8 | 899 | \$0.00 | 0 | | D | |

Explanation of Responses:

- 1. Each Restricted Stock Unit ("RSU") represents the contingent right to receive one share of Brighthouse Financial, Inc. ("BHF") common stock.
- 2. Amount includes 735 shares of BHF common stock received by the reporting person in connection with the distribution by MetLife, Inc. of BHF's common stock.
- 3. Shares withheld to satisfy the Reporting Person's tax withholding obligation due on the RSU payout.
- 4. The RSUs vested on September 30, 2018.

Remarks:

/s/ Emily C. Nagle, Attorney-

10/02/2018

** Signature of Reporting Person

Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.