FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	DС	20549
rvasiliigion,	D.C.	20040

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL										
	OMB Number:	3235-0287									
	Estimated average burden hours per response: 0.5										

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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* Detrick Christine Rose						2. Issuer Name and Ticker or Trading Symbol REINSURANCE GROUP OF AMERICA INC [RGA]									all app Direc	onship of Reporting P ill applicable) Director Officer (give title below)		10% O	wner	
(Last) 16600 SV	(Last) (First) (Middle) 16600 SWINGLEY RIDGE ROAD						3. Date of Earliest Transaction (Month/Day/Year) 05/10/2022											Other (specify	
(Street) CHESTERFIELD MO 63017 (City) (State) (Zip)					4. If .	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	Form filed by One Reporting Person Form filed by More than One Reporting Person					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye				ear) l	2A. Deemed Execution Date, if any (Month/Day/Year)		e,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			nd 5) Securi Benef		ities Following (I)		: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price		Transa	Transaction(s) (Instr. 3 and 4)			(
Common Stock 05/10/202				22	2			S		1,043	D	\$113.	3942	4,874.8			D			
Common Stock 05/10/202			!2			S		3,257	D	\$113.	3249	1,617.8			D					
		Tal	ole I	l - Derivati (e.g., pu							posed of, convertil				Owne	t				
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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration (Month/Day			Amou Secu Unde Deriv	rlying ative rity (Insti	Der Sec (Ins	rice of ivative urity tr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exer	e rcisable	Expiration Date	Title	Amoun or Numbe of Shares	r						

Explanation of Responses:

Remarks:

William Hutton, by power of

05/12/2022

attorney

** 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.