

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

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

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

1. Name and Address of Reporting Person* <u>EQUITY INTERMEDIARY CO</u>  (Last) (First) (Middle) 700 Market Street  (Street) St. Louis MO 63101  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>REINSURANCE GROUP OF AMERICA INC [ RGA ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director <input checked="" type="checkbox"/> 10% Owner  Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) 12/16/2003	
		6. Individual or Joint/Group Filing (Check Applicable Line)  <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> 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/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	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			
Common Stock, par value \$.01 per share	12/16/2003		J <sup>(1)</sup>		4,784,689	A	(2)	32,243,539	D	
Common Stock, par value \$.01 per share	12/16/2003		J <sup>(1)</sup>		4,784,689	A	(2)	32,243,539	D	
Common Stock, par value \$.01 per share	12/16/2003		J <sup>(1)</sup>		4,784,689	A	(2)	32,243,539	D	
Common Stock, par value \$.01 per share	12/16/2003		P		2,532,600	A	(3)	32,243,539	D	
Common Stock, par value \$.01 per share	12/16/2003		J <sup>(4)</sup>		2,532,600	A	(5)	32,243,539	I	See Footnote <sup>(6)</sup>
Common Stock, par value \$.01 per share	12/16/2003		J <sup>(4)</sup>		2,532,600	A	(5)	32,243,539	I	See Footnote <sup>(6)</sup>
Common Stock, par value \$.01 per share	12/16/2003		J <sup>(4)</sup>		2,532,600	A	(5)	32,243,539	I	See Footnote <sup>(6)</sup>

**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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date					

1. Name and Address of Reporting Person\*  
EQUITY INTERMEDIARY CO  
 (Last) (First) (Middle)  
 700 Market Street  
 (Street)  
 St. Louis MO 63101  
 (City) (State) (Zip)

1. Name and Address of Reporting Person\*  
METLIFE INC  
 (Last) (First) (Middle)  
 One Madison Avenue  
 (Street)  
 New York NY 10010  
 (City) (State) (Zip)

(City)	(State)	(Zip)
1. Name and Address of Reporting Person*		
<u>METROPOLITAN LIFE INSURANCE CO/NY</u>		
(Last)	(First)	(Middle)
One Madison Avenue		
(Street)		
New York	NY	10010
(City)	(State)	(Zip)
1. Name and Address of Reporting Person*		
<u>GENAMERICA FINANCIAL CORP</u>		
(Last)	(First)	(Middle)
700 Market Street		
(Street)		
St. Louis	MO	63101
(City)	(State)	(Zip)
1. Name and Address of Reporting Person*		
<u>GENERAL MAERICAN LIFE INSURANCE CO</u>		
(Last)	(First)	(Middle)
700 MARKET STREET		
(Street)		
ST. LOUIS	MO	63101
(City)	(State)	(Zip)

**Explanation of Responses:**

1. These shares were transferred from Metropolitan Life Insurance Company ("MetLife") to GenAmerica Financial Corporation ("GenAmerica"); from GenAmerica to General American Life Insurance Company ("GenAm Life"); and from GenAm Life to Equity Intermediary Company ("EIM"); each transfer was made as a capital contribution. EIM is a wholly-owned subsidiary of GenAm Life, which is a wholly-owned subsidiary of GenAmerica, which is a wholly-owned subsidiary of MetLife, which is a wholly-owned subsidiary of MetLife, Inc. ("MLINC").
2. As a capital contribution, no consideration was paid for these shares.
3. MLINC transferred these shares to EIM in exchange for 93,402 shares of Series A Cumulative Preferred Stock of EIM, par value \$1,000 per share.
4. As a result of the transfer of these shares by MLINC to EIM (see footnote 3), MetLife, GenAmerica and GenAm Life, as direct and indirect parent companies of EIM, gained indirect beneficial ownership of these shares. (See footnote 6).
5. No consideration was paid for the indirect beneficial ownership of these shares.
6. These shares are directly owned by EIM, a wholly-owned subsidiary of GenAm Life, which is a wholly-owned subsidiary of GenAmerica, which is a wholly-owned subsidiary of MetLife, which is a wholly-owned subsidiary of MLINC. Therefore, these shares are indirectly owned by MLINC, MetLife, GenAmerica and GenAm Life.

/s/ Anthony J. Williamson,  
Director, Vice President and  
Treasurer, Equity Intermediary     12/18/2003  
Company

/s/ Anthony J. Williamson,  
Senior Vice President and     12/18/2003  
Treasurer, MetLife, Inc.

/s/ Anthony J. Williamson,  
Senior Vice President and     12/18/2003  
Treasurer, Metropolitan Life  
Insurance Company

/s/ Anthony J. Williamson,  
Vice President and Treasurer,     12/18/2003  
GenAmerica Financial  
Corporation

/s/ Anthony J. Williamson,  
Vice President and Treasurer,     12/18/2003  
General American Life  
Insurance Company

\*\* 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.

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