FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Boot Arnoud W.A. | | | | | RI | REINSURANCE GROUP OF AMERICA INC [RGA] | | | | | | | | | Check all a | titionship of Reporting all applicable) Director Officer (give title below) | | 10% C | Owner | |
|--|--|--|--|------|--------------------------|---|--|----------------------|---|--------------------------------------|---|---|--------------|---|-----------------|---|--|---|---|--|
| (Last) (First) (Middle) 16600 SWINGLEY RIDGE ROAD | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/11/2016 | | | | | | | | | | | | below) | (specify | |
| (Street) CHESTE | CHESTERFIELD MO 63017 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | ne) X Fo | ' | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| == 1 1.1.0 or occurry (o o) | | | | Date | Date (Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year | | Code (| Transaction Disposed Code (Instr. 5) | | ities Acquired (A) d Of (D) (Instr. 3, | | | nd Secu Bene | nount of rities ficially ed Following | For (D) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | | v | Amount | (1 | A) or D) | Price | Tran | action(s) 3 and 4) | | | (1130.4) | |
| Common | Stock | | 05/11/2016 s | | | | | S | | 625 | 5 D | | \$9 |)6 | 7,000 | | D | | | |
| | | Та | ble II - C | | | | | | | | sed of, onvertib | | | | y Owne | d | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | y/Year) Execution Date, if any (Month/Day/Year) 8) | | | | rative rities ired r osed) | Expiration (Month/Da | 6. Date Exercisable and Expiration Date Date Expiration Date Expiration Date | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amour or Numbe of Title Shares | | ount nber | 8. Price of Derivative Security (Instr. 5) | | , | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |

Explanation of Responses:

William Hutton, by power of attorney

05/12/2016

** 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.