FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CH | ANGES | IN BEN | EFICIAL | OWNER | SHIP |
|-----------|-------|-------|--------|---------|-------|------|
| | | | | | | |

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* SHERMAN JAMES E | | | | | RE | 2. Issuer Name and Ticker or Trading Symbol REINSURANCE GROUP OF AMERICA INC [RGA] | | | | | | | | | Check all | nship of Reportii applicable) Director Officer (give title | ng Pers | g Person(s) to Issuer 10% Owner Other (specify | |
|---|---|--|--|-------------------------------|------------------------------|--|---|---|-------------------------------|---|---------------------|-------------------------------|-------------------|--|---|---|---|---|--|
| (Last) 1370 TIN | (Last) (First) (Middle) 1370 TIMBERLAKE MANOR PARKWAY | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/23/2008 | | | | | | | | | | elow) `` EVP & Ge | neral (| below) | |
| (Street) CHESTE | CRFIELD M | | 63017 Zip) | | | | | | | | Form filed by On | e Repo | orting Pers | on | | | | | |
| | | Tabl | e I - Noi | n-Deriv | ative | Sec | curitie | s Acc | quired, | Dis | posed o | f, or | Ben | eficia | ally O | vned | | | |
| Di | | | Date | Date Ex Month/Day/Year) if | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Disposed Code (Instr. 5) | | ities Acquired (A) d Of (D) (Instr. 3, 4 | | | nd Se Be Or | Amount of ecurities eneficially wned Following eported | Form (D) o | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | () (I | A) or D) | Price | Tr | ansaction(s) estr. 3 and 4) | | | (msu. 4) |
| Common Stock | | | 01/23 | /2008 | | | A | | 3,718(1) | | 1) A \$50.2 | | .22 | 2 11,235 | | D | | | |
| | | Та | | | | | | | | | sed of, onvertib | | | | y Own | ed | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deem Execution if any (Month/Da | n Date, ay/Year) | 4. Transa Code (8) | | 5. Num of Deriv. Secum Acqu (A) or Dispc of (D) (Instr. and 5 | ative rities ired osed . 3, 4 | 6. Date Expiratio (Month/D | on Dat Day/Ye | | Amor Secu Unde Deriv | Amor | ount nber | 8. Price Derivat Securit (Instr. 5 | ve derivative Securities | / OF D O (I) | 0. Ownership orm: oirect (D) or Indirect () (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |

Explanation of Responses:

1. Acquired pursuant to award of performance contingent restricted stock granted in 2005.

William Hutton, by power of <u>attorney</u>

01/24/2008

** 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.