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

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* <u>Sievert Frederick James</u>					RE	2. Issuer Name and Ticker or Trading Symbol REINSURANCE GROUP OF AMERICA INC [RGA]									Check a	all appl Direct	oplicable) ector cer (give title		Person(s) to Issuer 10% Owner Other (specify below)		
(Last) (First) (Middle) 16600 SWINGLEY RIDGE ROAD						3. Date of Earliest Transaction (Month/Day/Year) 09/08/2017										Office below					
(Street) CHESTERFIELD MO 63017 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									. Individine)	′					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
Date					th/Day/Year) if an			A. Deemed Execution Date, f any Month/Day/Year)		3. 4. Securi Transaction Disposed Code (Instr. 8)			ities Acquired (A) d Of (D) (Instr. 3, 4				ies cially Following	Form (D) o	vnership i: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										v	Amount		(A) or (D)	Price	. т	Reported Transaction(s) (Instr. 3 and 4)				(msu. 4)	
Common Stock 09/08						3/2017			G		1,564	4	D \$		0	10,552			D		
	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)	Execution if any	Execution Date, f any C Month/Day/Year) 8		4. Transaction Code (Instr. 8)		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Date Expiration Date Date Expiration Date Month/Day/Year) Expiration Date Expiration Date Date Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Number of Title Shares			ntive ity 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		0. Ownership orm: Direct (D) r Indirect) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

William L. Hutton

09/11/2017

** 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.