Edgar Filing: REINSURANCE GROUP OF AMERICA INC - Form 4

REINSURA Form 4	NCE GROUP	OF AMER	ICA INC			-						
January 24, 2	2008											
									OMB AF	PROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									OMB Number:	3235-0287		
Check this box if no longer								Expires:	January 31, 2005			
subject to Section 16. Form 4 or							Estimated a burden hou response	iverage				
Form 5	Filed 1	pursuant to	Section 1	6(a) of the	e Securit	ies E	xchang	e Act of 1934,	16500156	0.0		
obligation may cont	ns Section	•					-	1935 or Section	1			
See Instru 1(b).		30(h)	of the In	vestment	Compan	y Ac	t of 194	0				
(Print or Type I	Responses)											
LAY JACK B Symb			Symbol REINSU	2. Issuer Name and Ticker or Trading Symbol REINSURANCE GROUP OF				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
			AMERI	RICA INC [RGA]				(chock an approach)				
				hth/Day/Year)Off				· · · · · · · · · · · · · · · · · · ·	give title 10% Owner Other (specify below) Senior EVP & CFO			
171111111111	(Street)		1 If Ama	ndmant Da	to Origina	1		6 Individual or Ia	int/Group Filir	or (Chaola		
· · · · · · · · · · · · · · · · · · ·				ed(Month/Day/Year) Ap				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
CHESTERF	FIELD, MO 63	3017						Person	ore than One Re	porting		
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ear) Execution any		3. Transactic Code (Instr. 8) Code V	(Instr. 3,	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common Stock	01/23/2008			A	8,541 (1)	A	\$ 50.22	38,828	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 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)	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
		Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
LAY JACK B 1370 TIMBERLAKE MANOR PARKWAY CHESTERFIELD, MO 63017			Senior EVP & CFO				
Signatures							
William Hutton, by power of							
attorney 01	/24/2008						

**Signature of Reporting Person

Date

Explanation of Responses:

* 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).

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

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.