Edgar Filing: RENAISSANCERE HOLDINGS LTD - Form 4

Check this box if no longer subject to Section 16. Number: Number: Longer Section 16. Section 16. Number: Number: Longer Section 16. Section 16.										3235-0287 January 31, 2005 d average burs per	
(Print or Type	Responses)										
ODonnell Kevin Symbol				ISSANC	nd Ticker (ERE HC		-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Month				Date of Earliest Transaction Month/Day/Year) 4/03/2017				X Director 10% Owner X Officer (give title Other (specify below) below) Pres & Chief Executive Officer			
				Amendment, Date Original d(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 			
(City)	(State)	(Zip)	Tab	le I - Non	-Derivativ	e Seci	urities Acq	uired, Disposed o	f, or Benefic	ially Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	Code (Instr. 8)	4. Securi or(A) or D (Instr. 3, Amount	ispose 4 and (A) or	d of (D) 5) Price	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)	
Common Stock	04/03/2017			S <u>(1)</u>	3,553	D	\$ 143.92 (2)	233,101	D		
Common Stock	04/03/2017			S <u>(1)</u>	3,447	D	\$ 144.89 (3)	229,654	D		
Common Stock								1,079	I	by Partnership (4)	

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	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Tit		8. Price of	9. Nu
Derivative Security	Conversion or Exercise	(Month/Day/Year)	any	Transactio Code	of	Expiration D (Month/Day/		Amou	rlying	Derivative Security	Deriv Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	· ·	(cal)	Secur		(Instr. 5)	Bene
(Derivative		((Securities				. 3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D) (Instr. 3,						(Instr
					(Insu: 3, 4, and 5)						
					i, uii e c)						
						Date Everaisable	Expiration	Title	Amount or Number		
				Code V	(A) (D)	Exercisable	Date		of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
ODonnell Kevin RENAISSANCE HOUSE 12 CROW LANE PEMBROKE, D0 HM 19	Х		Pres & Chief Executive Officer					
Signatures								
/S/ Molly E. Gardner, Attorney-in-Fact								
**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) The transactions were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on May 12, 2016.

Represents a weighted average price. The shares were sold in multiple transactions at prices ranged from \$143.56 to \$144.51 The (2) reporting person undertakes to provide the full information regarding the number of shares sold at each price to the Commission, the issuer or a security holder of the issuer upon request.

Represents a weighted average price. The shares were sold in multiple transactions at prices ranged from \$144.60 to \$145.15 The(3) reporting person undertakes to provide the full information regarding the number of shares sold at each price to the Commission, the issuer or a security holder of the issuer upon request.

(4)

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These securities are owned and controlled by a family limited partnership for the benefit of immediate family members of the Reporting Person and may be deemed to be beneficially owned by the Reporting Person.

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.