## Edgar Filing: Doucette John P - Form 4

Form 4												
February 28, FORN Check th if no long	4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION s box er STATEMENT OF CHANCES IN RENEFICIAL OWNERSHIP OF									OMB APPROVAL OMB 3235-0287 Number: January 31, 2005		
subject to Section 1 Form 4 o Form 5 obligatio may cont See Instru 1(b).	6. or Filed pur <sup>ns</sup> Section 17(	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940								Estimated average burden hours per response 0.5		
(Print or Type I	Responses)											
1. Name and A Doucette Jo		Symbol EVEREST RE GROUP LTD [RE]				8	5. Relationship of Reporting Person(s) to Issuer					
						[RE]	(Check all applicable)					
(Me				<ul> <li>B. Date of Earliest Transaction</li> <li>Month/Day/Year)</li> <li>Model 2020</li> <li>Model 2020</li></ul>				Director 10% Owner X Officer (give title Other (specify below) below) President/CEO Reinsurance Div				
				Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
LIBERTY (	CORNER, NJ 079	938						_X_ Form filed by Of Form filed by Mo Person				
(City)	(State)	(Zip)	Tabl	e I - Non-I	Derivative	Secu	rities Acqu	ired, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8) Code V	nor Dispos (Instr. 3, 4	ed of		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 Shares $(1)$	02/26/2019	02/26/20	19	F	470	D	\$ 223.725	21,038	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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Instr. 8	5. tionNumber of ) Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	5	Date	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code Y	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Doucette John P 477 MARTINSVILLE ROAD LIBERTY CORNER, NJ 07938			President/CEO Reinsurance Div					
Signatures								
/S/SANJOY MUKHERJEE	02/28/20	19						

\*\*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) Common Shares used to pay withholding taxes on 953 restricted shares that vested on 02/26/19

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.