RENAISSANCERE HOLDINGS LTD Form 3 May 17, 2016 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

#### INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> Sanders Carol P			Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol RENAISSANCERE HOLDINGS LTD [RNR]					
(Last)	(First)	(Middle)	05/16/2016	4. Relationshi Person(s) to Is	p of Reporting		mendment, Date Original /onth/Day/Year)			
12 CROW L	ANE					(-	)			
	(Street)			(Check	(Check all applicable) 6. Individual or		vidual or Joint/Group			
PEMBROK	E, D0 H	IM19		X Director Officer (give title below	<pre> 10% C Other /) (specify below</pre>	Wyner Filing( _X_Fo w) Person Fo	Filing(Check Applicable Line) _X_ Form filed by One Reporting			
(City)	(State)	(Zip)	Tabl	e I - Non-Derivat	ive Securitie	es Beneficia	eneficially Owned			
1.Title of Secu (Instr. 4)	rity			nount of Securities ficially Owned . 4)	Ownership	4. Nature of I Ownership (Instr. 5)	ndirect Beneficial			
Reminder: Repo owned directly		ate line for ea	ch class of securities b	beneficially SI	EC 1473 (7-02)					
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 Beneficially Owned ( <i>e.g.</i> , puts, calls, warrants, options, convertible securities)										
1. Title of Deri (Instr. 4)	vative Securi	Expir	Tation Date Station Date Statio	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of		(Instr. 5)			

Date

Exercisable

Expiration

Title

Date

Derivative

Security

Amount or

Number of

Shares

Security:

Direct (D)

or Indirect

(Instr. 5)

(I)

OMB APPROVAL

3235-0104

January 31,

2005

0.5

OMB

Number:

Expires:

response...

Estimated average burden hours per

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Sanders Carol P 12 CROW LANE PEMBROKE, D0 HM19	ÂX	Â	Â	Â		
Signatures						
/S/ Molly E. Gardner, Attorney-in-Fact	05/17/2016					
**Signature of Reporting Person		Date				

## **Explanation of Responses:**

#### No securities are beneficially owned

\* If the form is filed by more than one reporting person, *see* Instruction 5(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).

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#### **Remarks:**

The Reporting Person was appointed to the Issuer's Board of Directors effective as of May 16, 20

### Exhibit List Exhibit 24 - Power of Attorney

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.