EVEREST RE GROUP LTD

Form 4 April 30, 2014

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires: 2005

OMB APPROVAL

Form 4 or Form 5 obligations Estimated average burden hours per response... 0.5

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 may continue. 30(h) of the Investment Company Act of 1940

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * 2. Issuer Name and Ticker or Trading de Saram Mark S Symbol EVEREST RE GROUP LTD [RE] 5. Relationship of Reporting Person(s) to Issuer

(Last)

(First)

EVEREST REINSURANCE

(Middle)

3. Date of Earliest Transaction (Month/Day/Year)

04/29/2014

Director 10% Owner Other (specify X_ Officer (give title

Executive Vice President

(Check all applicable)

(BERMUDA), LTD., WESSEX HOUSE, 45 REID STREET, 2ND

(Zin)

4. If Amendment, Date Original

Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

Applicable Line)

below)

X Form filed by One Reporting Person Form filed by More than One Reporting

HAMILTON DO HM DX, D0 DO

(State)

(Street)

HM DX

(City)

FLOOR

(City)	(State)	Table 1 - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned						y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	Transaction Disposed of (D) Code (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code V	Amount		Price	(Instr. 3 and 4)		
Common Shares (1)	04/29/2014	04/29/2014	A	6,000	A	\$ 74.33	39,087	D	
Common Shares (1)	04/29/2014	04/29/2014	F	4,317	D	\$ 157.665	34,770	D	

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

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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	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Tit.	le and	8. Price of	9. Nu
D	erivative	Conversion	(Month/Day/Year)	Execution Date, if	Transact	iorNumber	Expiration D	ate	Amou	unt of	Derivative	Deriv
S	ecurity	or Exercise		any	Code	of	(Month/Day	/Year)	Unde	rlying	Security	Secui
(I	nstr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	re		Secur	rities	(Instr. 5)	Bene
		Derivative				Securities	S		(Instr	. 3 and 4)		Own
		Security				Acquired	l					Follo
		-				(A) or						Repo
						Disposed	l					Trans
						of (D)						(Instr
						(Instr. 3,						
						4, and 5)						
										Amount		
							Date	Expiration		or		
							Exercisable	Date	Title	Number		
										of		
					Code V	$^{\prime}$ (A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
de Saram Mark S EVEREST REINSURANCE (BERMUDA), LTD. WESSEX HOUSE, 45 REID STREET, 2ND FLOOR HAMILTON DO HM DX DO DO HM DX			Executive Vice President			

Signatures

/S/ SANJOY MUKHERJEE (Attorney-in-Fact) 04/30/2014

**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) 6,000 share options were exercised. 2,828 shares were withheld to pay for the exercise cost and 1,489 shares were withheld for tax withholdings.

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.

Reporting Owners 2