FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	OMB APP	ROVAL
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235

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0.5

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Curtis Ross			2. Issuer Name and Ticker or Trading Symbol RENAISSANCERE HOLDINGS LTD RNR								Checl	ationship of Repor (all applicable) Director Officer (give title		10%		Issuer Owner (specify			
(Last) RENAIS	(Fi	,	/liddle)		3. Date of Earliest Transaction (Month/Day/Year) 03/18/2024								X	below	ı) ``	ortfol	below)	`	
12 CROW LANE				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person							
(Street) PEMBR	OKE DO) Н	IM 19											X		filed by Mo		orting Pers an One Rep	- 1
(City)	(St	ate) (Z	Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da			Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acqu Disposed Of (D) (In					Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership					
								Code	v	Amount	(A) (D)	Pric	е		ction(s) and 4)			(Instr. 4)	
Common Stock 03/18			03/18/	2024				D		467(1)	D	\$	0	17	6,620		D		
	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	med on Date, Day/Year)	4. Transaction Code (Instr. 8)		5. Nu of Deriv Secul Acqu (A) or Dispo of (D) (Instrand 5	rities ired sed . 3, 4	Expiration Date (Month/Day/Year)		te Amount of Securities Underlying Derivative Security (Ins 3 and 4)		nt of ties ying tive ty (Instr. I) Amount or Number of	f Sect (Inst		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

1. Represents the forfeiture of a portion of performance-based restricted shares granted to the reporting person on March 1, 2021 pursuant to the issuer's First Amended and Restated 2016 Long Term Incentive Plan, as amended. The award vested following the expiration of the performance period on December 31, 2023, subject to satisfaction of service- and performance-based conditions. The amount initially awarded represented the maximum achievable number of shares. The number of shares that ultimately vested was a function of the issuer's average growth in book value per common share plus accumulated dividends and average underwriting expense ratio as compared to peers during the three-year performance period, as determined by the Corporate Governance and Human Capital Management Committee. Shares that were no longer eligible to vest following the release of peer results and the Committee's determination of performance were forfeited.

Remarks:

/S/ Molly E. Gardner, Attorney-in-Fact

03/20/2024

** Signature of Reporting Person

Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.