UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Accurso Laura

September 25, 2017

FORM 3

Form 3

					Number:	
INITIA	Expires: January 3					
	SE nant to Section 16(a) of the Public Utility 30(h) of the Invest	Holding Company	y Act of 193		Estimated average burden hours per response (	05
(Print or Type Responses)						
1. Name and Address of Reporting Person <u>*</u> Accurso Laura	Statement (Month/Day/Year)		GHT CAPI			
(Last) (First) (Middle	) 09/15/2017	4. Relationsh Person(s) to l	ip of Reporting		.mendment, Date Original Month/Day/Year)	
C/O GREENLIGHT CAPITAI RE, LTD, 65 MARKET STREET, SUITE 1207, CAMANA BAY	<u>_</u>	(Check Director X Officer		Owner		
(Street)		(give title belo	(specify below) (specify below) (specify below)	ow) L 6. Ind Filing _X_Fo Person		
TOWN, E9 KY11205					rm filed by More than One ing Person	
(City) (State) (Zip)	Tab	ole I - Non-Deriva	tive Securit	ies Benefici	ally Owned	
1.Title of Security (Instr. 4)		mount of Securities eficially Owned r. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Ownership (Instr. 5)	Indirect Beneficial	
CLASS A ORDINARY SHAP	23,8 23,8	848	D	Â		
information co required to re currently valid	or each class of securities respond to the collec ontained in this form spond unless the form d OMB control numbe ecurities Beneficially O	tion of are not m displays a er.	EC 1473 (7-02		ble securities)	
1. Title of Derivative Security2(Instr. 4)E	. Date Exercisable and Expiration Date	3. Title and Amount o Securities Underlying	f 4.	5.	6. Nature of Indirect	)

Derivative Security

or Exercise

Form of

(Month/Day/Year)

(Instr. 5)

OMB APPROVAL

3235-0104

OMB

Number:

#### Edgar Filing: Accurso Laura - Form 3

		(Instr. 4)		Price of	Derivative
Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I) (Instr. 5)

## **Reporting Owners**

Reporting Owner Name / Address		Relationships				
		10% Owner	Officer	Other		
Accurso Laura C/O GREENLIGHT CAPITAL RE, LTD 65 MARKET STREET, SUITE 1207, CAMANA BAY GEORGE TOWN, E9 KY11205	Â	Â	GENERAL COUNSEL	Â		
Signatures						

/s/ Tim Courtis, as 09/25/2017 attorney-in-fact \*\*Signature of Reporting Person

Date

# **Explanation of Responses:**

- \* 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).

### Â

#### **Remarks:**

#### EX. 24 - POA Laura Accurso

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.