## Edgar Filing: ASSURANT INC - Form 4

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Form 4					
FORM 4 UNITED STATE		OMB APPROVAL			
UNITED STATE	S SECURITIES AND EXCHANG Washington, D.C. 20549	E COMMISSION OMB Number: 3235-0287			
subject to	F CHANGES IN BENEFICIAL C SECURITIES	WNERSHIP OF Expires: January 31, 2005 Estimated average			
Section 16. Form 4 or Form 5 Filed pursuant to	burden hours per response 0.5 ange Act of 1934,				
$\frac{\text{obligations}}{\text{may continue}}$ Section 17(a) of the	Public Utility Holding Company Ac	t of 1935 or Section			
(Print or Type Responses)					
1. Name and Address of Reporting Person <u>*</u> Sondej John Andrew	2. Issuer Name <b>and</b> Ticker or Trading Symbol ASSURANT INC [AIZ]	5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle)	3. Date of Earliest Transaction (Month/Day/Year)	(Check all applicable)			
ASSURANT, INC., ONE CHASE MANHATTAN PLAZA, 41ST FLOOR	03/14/2013	X_Officer (give title Other (specify below) Other (specify below) SVP, Controller (PAO)			
(Street)	4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
NEW YORK, NY 10005		Form filed by More than One Reporting Person			
(City) (State) (Zip)		Acquired, Disposed of, or Beneficially Owned			
(Instr. 3) any	emed 3. 4. Securities on Date, if TransactionAcquired (A) or Code Disposed of (D) /Day/Year) (Instr. 8) (Instr. 3, 4 and 5)	5. Amount of Securities6. Ownership Form: Direct7. Nature of IndirectBeneficially Owned(D) orBeneficialOwnedIndirect (I)OwnershipFollowing Reported(Instr. 4)(Instr. 4)			
Common	(A) or Code V Amount (D) Pr A 3,054	Transaction(s) (Instr. 3 and 4)			
Stock 03/14/2013	$A \xrightarrow{(1)} A $				

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. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Addre		Relationships				
IB	Director	10% Owner	Officer	Other		
Sondej John Andrew ASSURANT, INC. ONE CHASE MANHATTAN PLAZA, 4 NEW YORK, NY 10005	ST FLOOR		SVP, Controller (PAO)			
Signatures						
Lisa Richter Attorney 03/18/	)13					

in Fact 03/18/

\*\*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) These shares are represented by restricted stock units.
- (2) Includes restricted stock units.

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.