Edgar Filing: ASSURANT INC - Form 4

A COLID A NIT INC

Form 4 March 14, 20											
FORM	1								-	PPROVAL	
	UNITE	D STATES		ITIES A hington,			NGE (COMMISSION	OMB Number:	3235-0287	
Check this if no long subject to Section 10 Form 4 or	er STATE 5.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF							Expires: Estimated a burden hou response	irs per	
Form 5 obligation may conti <i>See</i> Instru 1(b).	nue. Section 1	7(a) of the		ility Hold	ling Com	pany	Act o	ge Act of 1934, f 1935 or Sectio 40	n		
(Print or Type R	esponses)										
Mergelmeyer Gene Symbol			Symbol	Issuer Name and Ticker or Trading ^{1bol} SURANT INC [AIZ]				5. Relationship of Reporting Person(s) to Issuer			
								(Check all applicable)			
				ate of Earliest Transaction nth/Day/Year) 10/2016				Director 10% Owner X Officer (give titleX Other (specify below) below) EVP, CAO / Pres&CEO Assur. Spec. Property			
				ndment, Date Original th/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
NEW YORK	K, NY 10005							Form filed by M Person			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ar) Executionany	ion Date, if Transa Code		4. Securities asactionAcquired (A) or e Disposed of (D) r. 8) (Instr. 3, 4 and 5) (A) or			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	03/10/2016			Code V A	Amount 5,210 (1)	(D) A	Price \$ 0		D		

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. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
The porting of the rand (radies)	Director	10% Owner	Officer	Other			
Mergelmeyer Gene ASSURANT, INC. 28 LIBERTY STREET, 41 FL. NEW YORK, NY 10005			EVP, CAO	Pres&CEO Assur. Spec. Property			
Signatures							
Lisa Richter,	02/14/2	016					

Attorney-in-Fact 03/14/2016 Date

**Signature of Reporting Person

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.