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ASSURANT	Γ INC									
Form 4 March 15, 20	016									
FORM	ЛЛ							OMB AF	PPROVAL	
	UNITED	STATES SECUI Wa	RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Check th if no long subject to Section 1 Form 4 o Form 5 obligatio may cont <i>See</i> Instru 1(b).	ger 5 16. 5 7 Filed pur ns 5 5 5 5 5 5 5 5 5 5 5 5 5	suant to Section 1 a) of the Public U	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Section of the Investment Company Act of 1940						Expires: January 31, 2005 Estimated average burden hours per response 0.5	
(Print or Type I	Responses)									
Mergelmeyer Gene Sy			2. Issuer Name and Ticker or Trading ymbol .SSURANT INC [AIZ]				5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (M	Middle) 3. Date o	3. Date of Earliest Transaction					k all applicable	;)	
ASSURAN' STREET, 4		(Month/Day/Year) 03/12/2016				Director 10% Owner X Officer (give titleX Other (specify below) below) EVP, CAO / Pres&CEO Assur. Spec. Property				
			endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
NEW YOR	K, NY 10005						Form filed by M Person			
(City)	(State)	(Zip) Tab	le I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	e 2A. Deemed Execution Date, if any (Month/Day/Year)	Code	4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
			Code V	Amount		Price	(Instr. 3 and 4)			
Common Stock	03/12/2016		F	997	D	\$ 77.6	99,415	D		
Common Stock	03/13/2016		F	851	D	\$ 77.6	98,564	D		
Common Stock	03/14/2016		F	2,145	D	\$ 77.43	96,419 <u>(1)</u>	D		

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

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information contained in this form are not
required to respond unless the formSEC 1474
(9-02)

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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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Securi (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date		Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	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, Attorney-in-Fact	03/15/2	016					

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Date

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

(1) Includes restricted stock units.

<u>**</u>Signature of Reporting Person

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.