Edgar Filing: ASSURANT INC - Form 4

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Form 4												
April 03, 2009 FORM 4 LINITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL				
Was				RITIES AND EXCHANGE COMMISSION shington, D.C. 20549				COMMISSION	OMB Number:	3235-0287		
Check thi if no long subject to Section 1 Form 4 or	er STATEN 6.	GES IN I SECUR		ICIA	LOW	NERSHIP OF	Expires: Estimated a burden hour response					
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940												
(Print or Type R	Responses)											
Mergelmeyer Gene Symbol				r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (Middle)	3. Date of Earliest Transaction				(Check all applicable)					
(Month/D ASSURANT, INC., ONE CHASE MANHATTAN PLAZA, 41 FL.				-				Director 10% Owner _X Officer (give title _X Other (specify below) Executive Vice President / Pres., Assur. Spec. Property				
(Street) 4. If Amer Filed(Mon NEW YORK, NY 10005				ndment, Date Original				6. Individual or Joint/Group Filing(Check				
				th/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)	Executio any	ned n Date, if Day/Year)	(A) or			d of (D) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common Stock	04/01/2009			F	83	(D) D	Price \$ 22.52	37,301	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)	4. Transacti Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	rlying	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

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Mergelmeyer Gene ASSURANT, INC. ONE CHASE MANHATTAN PLAZA, 41 FL. NEW YORK, NY 10005			Executive Vice President	Pres., Assur. Spec. Property		

Signatures

Paulette Lang Attorney-in-Fact 04/03/2009

**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).

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.