## Edgar Filing: ASSURANT INC - Form 4

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Form 4											
May 15, 2009	Λ	D STATES	SECUR	ITIES A	ND EX(	CHAN	NGE	COMMISSION		PPROVAL	
				hington,					Number:	3235-0287	
Check this if no long subject to Section 16 Form 4 or	F CHANGES IN BENEFICIAL OWNERSHIP SECURITIES					NERSHIP OF	Expires: January 3 200 Estimated average burden hours per response 0				
Form 5 obligation may conti <i>See</i> Instru 1(b).	s Section	7(a) of the		lity Hold	ing Com	pany	Act o	ge Act of 1934, ff 1935 or Sectio 40	on		
(Print or Type R	esponses)										
Sondej John Andrew Symb			Symbol	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					(Che	heck all applicable)		
				(Month/Day/Year) 05/14/2009				Director       10% Owner         Officer (give title       Other (specify below)         SVP, Controller (PAO)			
Filed(Mont				ndment, Date Original th/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
NEW YORK	S, NY 10005							Person		porting	
(City)	(State)	(Zip)	Table	I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	of, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	ecurity (Month/Day/Year) Execution Date, if nstr. 3) any			3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A)				5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
Common Stock	05/14/2009			Code V A	Amount 2,700 (1)	(A) or (D) A	Price \$ 0	Transaction(s) (Instr. 3 and 4) 11,662.01 (2)	D		
D 1 D		1:		:	-:	:	1	:			

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. Transactio Code (Instr. 8)	5. orNumber 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 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					
	Director	10% Owner	Officer	Other			
Sondej John Andrew ASSURANT, INC. ONE CHASE MANHATTAN PLAZA, 41ST FLOOR NEW YORK, NY 10005			SVP, Controller (PAO)				
Signatures							
Lisa Richter							

05/15/2009 Attorney-in-Fact

\*\*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.