ASSURANT INC Form 4 January 05, 2010

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

1(b).

(Last)

Form 5

obligations

may continue.

See Instruction

(Print or Type Responses)

1. Name and Address of Reporting Person **
Wagner Sylvia

(First) (Middle)

ASSURANT, INC., ONE CHASE

MANHATTAN PLAZA, 41 FL.

(Street)

(Ctota)

2. Issuer Name **and** Ticker or Trading Symbol

ASSURANT INC [AIZ]
3. Date of Earliest Transaction

(Month/Day/Year) 01/01/2010

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

OMB APPROVAL

3235-0287

January 31,

2005

0.5

OMB

Number:

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response...

Estimated average

burden hours per

(Check all applicable)

____ Director ____ 10% Owner ____ Selection ____ Other (specify below) ____ Below) EVP

6. Individual or Joint/Group Filing(Check

Applicable Line)
X Form filed by One Reporting Person
__ Form filed by More than One Reporting

Person

NEW YORK, NY 10005

(City)	(State) ((Zip) Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed o	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)			d of (D)	5. Amount of Securities Beneficially Owned Following	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		
Common Stock	01/01/2010		M	3,252	A	\$ 22	58,544	D	
Common Stock	01/01/2010		D	2,426	D	\$ 29.48	56,118	D	
Common Stock	01/01/2010		F	344	D	\$ 29.48	55,774	D	
Common Stock	01/01/2010		M	4,415	A	\$ 26.82	60,189	D	
Common Stock	01/01/2010		D	4,016	D	\$ 29.48	56,173	D	

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Common Stock 01/01/2010 F 166 D $\frac{\$}{29.48}$ 56,007 $\frac{(1)}{(1)}$ 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.

SEC 1474

(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

I	. 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)	Secu Acqu (A) (Disp (D)	urities uired or oosed of tr. 3, 4,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
					Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amour or Number of Shares
1	Stock Appreciation Right	\$ 22	01/01/2010		M		3,252	02/04/2005	01/01/2010	Common Stock	3,251
1	Stock Appreciation Right	\$ 26.82	01/01/2010		M		4,415	02/04/2005	01/01/2010	Common Stock	4,41:

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		

Wagner Sylvia ASSURANT, INC. ONE CHASE MANHATTAN PLAZA, 41 FL. NEW YORK, NY 10005

EVP

Signatures

Paulette Lang Attorney-in-Fact 01/05/2010

**Signature of Reporting Person Date

Reporting Owners 2

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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) Includes a total of 715 shares, net of tax withholding (rounded to the nearest whole share) granted to Reporting Person pursuant to exercise of these SARs.

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.