## Edgar Filing: ASSURANT INC - Form 4

ASSURANT Form 4										
	November 14, 2014 FORM 4 LINITED STATES SECURITIES AND EXCHANCE COMMU							OMB APPROVAL		
	UNITED	ONTIED STATES SECONTIES AND EXCHANGE COMMISSION         Washington, D.C. 20549         STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES         Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,						OMB Number:	3235-0287	
Check this if no longe subject to Section 16 Form 4 or Form 5 obligation	Filed pure							Expires: January 31, 2005 Estimated average burden hours per response 0.5		
may contin <i>See</i> Instruct 1(b).	nue. Section 17(a	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	esponses)									
Mergelmeyer Gene Symbol			r Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)(First)(Middle)3. Date of (Month/DASSURANT, INC., ONE CHASE11/12/20MANHATTAN PLAZA, 41 FL.			-				Director 10% Owner X Officer (give titleX Other (specify below) below) EVP, CAO / Pres&CEO Assur. Spec. Property			
	(Street) 4. If Amer Filed(Mon			nte Origina	1		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
NEW YORK	, NY 10005						_X_Form filed by C Form filed by M Person			
(City)	(State)	(Zip) Tab	le I - Non-D	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	(Instr. 3,	ispose	d of (D)	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	11/12/2014		F	3,131	D	\$ 68.14	105,216 <u>(1)</u>	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.

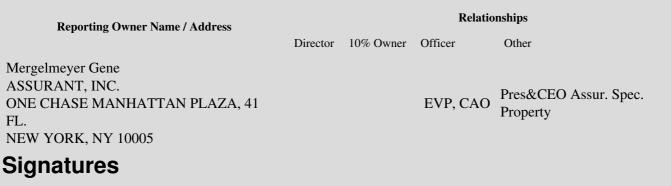
 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	Date	7. Title Amount Underly Securitie (Instr. 3	it of ying ies	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
		Code V	(A) (D)	Date Exercisable	Expiration Date	o Title N o	Amount or Number of Shares		

## **Reporting Owners**



Paulette Lang Attorney-in-Fact 11/14/2014

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) Includes restricted stock units.

\*\*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.