### Edgar Filing: ASSURANT INC - Form 4

ASSURANT Form 4	INC										
March 15, 20											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL			
	UNITED		shington, E			NGEU		OMB Number:	3235-0287		
Check this if no longe subject to Section 16 Form 4 or	er <b>STATEN</b> 5.	x STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							Expires:January 312005Estimated averageburden hours perresponse0.5		
Form 5 obligation may contin <i>See</i> Instruct 1(b).	s Section 17(	(20) (h) at the Invectment Commons A at at $1000$									
(Print or Type R	esponses)										
Pagano Christopher J Symbol			r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (I	Middle) 3. Date of	3. Date of Earliest Transaction			(Check all applicable)					
(Month/D ASSURANT, INC., 28 LIBERTY STREET, 41 FL.			-			Director 10% Owner XOfficer (give title Other (specify below) EVP, CRO					
			ndment, Date Original th/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
NEW YORK	K, NY 10005						Form filed by M Person				
(City)	(State)	(Zip) Tabl	e I - Non-Dei	rivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	ecurity (Month/Day/Year) Execution Date, if		(A)			d of (D)	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial		
Common	03/13/2017		Code V Z	Amount 743	or (D) D	Price \$	(Instr. 3 and 4) 55,284.1 ( <u>1</u> )	D			
Stock Common Stock						99.41	3,928.05	I	Through 401 (k) Plan		

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

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 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)	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	7. Tit Amou Under Secur (Instr	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

# **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
	Director	10% Owner	Officer	Other				
Pagano Christopher J ASSURANT, INC. 28 LIBERTY STREET, 41 FL. NEW YORK, NY 10005			EVP, CRO					
Signatures								
Lisa Richter Attorney-in-Fact	03/15/2	2017						
**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) 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.