**ASSURANT INC** Form 4 February 24, 2005

## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

Washington, D.C. 20549

if no longer subject to Section 16. Form 4 or

Check this box

Form 5 obligations may continue.

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

2. Issuer Name and Ticker or Trading

ASSURANT INC [AIZ]

3. Date of Earliest Transaction

4. If Amendment, Date Original

(Month/Day/Year)

Filed(Month/Day/Year)

02/22/2005

(Print or Type Responses)

See Instruction

1(b).

1. Name and Address of Reporting Person \* POLLOCK ROBERT B

(First) (Middle) (Last)

ONE CHASE MANHATTAN PLAZA, 41ST FLOOR

(Street)

(City) (State) (Zip)

NEW YORK, NY 10005

1.Title of 2. Transaction Date 2A. Deemed

Security (Instr. 3)

(Month/Day/Year)

Execution Date, if (Month/Day/Year)

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

Symbol

TransactionAcquired (A) or Code (Instr. 8)

3.

Disposed of (D)

4. Securities

(Instr. 3, 4 and 5)

(A)

Transaction(s) (Instr. 3 and 4) Code V Amount (D) Price

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)

1. Title of 3. Transaction Date 3A. Deemed Derivative Conversion (Month/Day/Year) Security or Exercise

Execution Date, if any

5. Number of **Transaction**Derivative Code Securities Acquired

6. Date Exercisable and **Expiration Date** (Month/Day/Year)

7. Title and Amount of **Underlying Securities** (Instr. 3 and 4)

**OMB APPROVAL** 

OMB 3235-0287 Number: January 31, Expires:

Estimated average burden hours per

5. Relationship of Reporting Person(s) to

(Check all applicable)

Exec. VP, CFO

6. Ownership

Form: Direct

(D) or Indirect Beneficial

6. Individual or Joint/Group Filing(Check

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

(T)

(Instr. 4)

Issuer

below)

Person

5. Amount of

Securities

Owned

Beneficially

Following

Reported

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Director

Applicable Line)

X\_ Officer (give title

response... 0.5

10% Owner

Other (specify

7. Nature of

Ownership

(Instr. 4)

SEC 1474

(9-02)

Indirect

2005

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Α

(Instr. 3) Price of (Month/Day/Year) (Instr. 8) (A) or Disposed of Derivative (D) (Instr. 3, 4, and 5)

Code V (A) (D) Date Expiration Title Amount of Exercisable Date Number of Shares

3,270.4851 (2) (3) Common Stock 3,270.48

**Reporting Owners** 

(1)

Reporting Owner Name / Address Relationships

02/22/2005

Director 10% Owner Officer Other

POLLOCK ROBERT B ONE CHASE MANHATTAN PLAZA 41ST FLOOR

Exec. VP, CFO

**Signatures** 

NEW YORK, NY 10005

Phantom

Stock

Lisa Richter 02/24/2005 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)** 1-for-1
- (2) Immediately exercisable
- (3) Shares of phantom stock are payable in cash following the reporting person's termination of employment with Assurant, Inc.

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.

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