### Edgar Filing: ASSURANT INC - Form 4

Form 4 April 05, 200 <b>FORM</b> Check thi if no long subject to Section 1 Form 4 or Form 5 obligation may cont	April 05, 2005 FORM 4 Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction							OMB Number: Expires: Estimated a burden hour response	•		
(Print or Type F	Responses)										
CLAYTON J KERRY Sy			2. Issuer Name <b>and</b> Ticker or Trading Symbol ASSURANT INC [AIZ]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (N	Middle)	3. Date of Earliest Transaction				(Checl	k all applicable	)		
(Month				Month/Day/Year) )4/05/2005				X Director 10% Owner X Officer (give title Other (specify below) President, CEO, Director			
				endment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
NEW YORK, NY 10005 Form filed by More the Person							Iore than One Re	porting			
(City)	(State)	(Zip)	Tabl	e I - Non-De	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Executio any		3. Transactio Code (Instr. 8) Code V	4. Securit r(A) or Di (Instr. 3, Amount	sposed	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	04/05/2005			P <u>(1)</u>	1,000	A	\$ 32.95	84,644.485	D		
Common Stock							52.75	16,204.88	Ι	By 401 (k) Plan	

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.

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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)	5	ate	7. Titl Amou Under Secur (Instr.	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne 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				
CLAYTON J KERRY ONE CHASE MANHATTAN PLAZ 41ST FLOOR NEW YORK, NY 10005	A X		President, CEO, Director					
Signatures								
Lisa Richter 04 Attorney-in-Fact	/05/2005							
**Signature of Reporting Person	Date							

#### \*\*Signature of Reporting Person

## **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).
- The purchase reported on this Form 4 was effected pursuant to a Rule 10b5-1 Purchase Plan adopted by the Reporting Person on February (1) 28,2005.

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.