Fairbairn Robert W Form 3 February 16, 2018 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL FORM 3 Washington, D.C. 20549 OMB Number:

INITIAL STATEMENT OF 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

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> Fairbairn Robert W			2. Date of Event Re Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol BLACKROCK MUNIASSETS FUND, INC. [MUA]				
(Last)	(First)	(Middle)	02/16/2018		4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)		
55 EAST 52	ND STRE	ET							
	(Street)			(Check	(Check all applicable)		6. Individual or Joint/Group		
NEW YORK, NY 10055				Officer	X_Director10% Owner OfficerOther (give title below) (specify below)		Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)	Tab	le I - Non-Derivat	ive Securities	s Beneficiall	eneficially Owned		
1.Title of Secur (Instr. 4)	rity			mount of Securities eficially Owned r. 4)	Ownership 0	4. Nature of Ind Ownership Instr. 5)	irect Beneficial		
Reminder: Repo owned directly			ch class of securities	beneficially S	EC 1473 (7-02)				
	inforr requi	mation conta red to respo	pond to the collec ained in this form ond unless the forr MB control numbe	are not n displays a					
Т	able II - De	rivative Secu	rities Beneficially O	wned (e.g., puts, calls,	warrants, optic	ons, convertible	e securities)		
1. Title of Deriv (Instr. 4)	vative Secur	Expi	ration Date /Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative	- · · · · r	6. Nature of Indirect Beneficial Ownership (Instr. 5)		

Date

Exercisable

Expiration

Title

Date

Security:

Security

Amount or

Number of

Shares

Direct (D)

or Indirect

(Instr. 5)

(I)

3235-0104

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

Reporting Owners

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
Fairbairn Robert W 55 EAST 52ND STREET NEW YORK, NY 10055	ÂX	Â	Â	Â	
Signatures					
/s/ Eugene Drozdetski as Attorney-in-Fact	02/16/2018				
**Signature of Reporting Person		D	ate		

Explanation of Responses:

No securities are beneficially owned

* If the form is filed by more than one reporting person, see Instruction 5(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).

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.