UNITED INSURANCE HOLDINGS CORP.

Form 4/A June 30, 2015

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 Check this box if no longer STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to **SECURITIES** Section 16. Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

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response... 0.5

(Print or Type Responses)

1(b).

1. Name and Address of Reporting Person * Menon Deepak		Symbol UNITE	er Name and Ticker or Trading ED INSURANCE HOLDINGS [UIHC]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
	D INSURANCE S CORP., 360 CEN	(Month/I 02/24/2	f Earliest Transaction Day/Year) 2015	Director 10% Owner X Officer (give title Other (specify below) VP Operations and Business Dev			
ST. PETERSBURG, FL 33701				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person quired, Disposed of, or Beneficially Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price 10.845	Securities Form: Direct Indirect Beneficially (D) or Beneficial Owned Indirect (I) Ownership Following (Instr. 4) (Instr. 4) Reported Transaction(s) (Instr. 3 and 4)			
Stock	02/24/2015		A (1) A \$0	48,987 (2) (3) D			

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)	2. Conversion or Exercise Price of	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)			ate	7. Title Amoun Under	int of lying ities	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene
	Derivative Security				Securities Acquired			(Instr.	3 and 4)		Owne Follo
					(A) or Disposed						Repo Trans
					of (D) (Instr. 3, 4, and 5)						(Instr
					4, and 3)				Amount		
						Date Exercisable	Expiration Date	Title	or Number of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Menon Deepak C/O UNITED INSURANCE HOLDINGS CORP. 360 CENTRAL AVE. SUITE 900 ST. PETERSBURG, FL 33701

VP Operations and Business Dev

Signatures

/s/ John Rohloff, Attorney-in-fact for Deepak Menon

06/30/2015

**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).
- These shares were acquired pursuant to a grant of restricted stock units under the United Insurance Holdings Corp. 2013 Omnibus Incentive Plan. The award vests in three equal annual installments beginning February 24, 2016.
- (2) Final shares reflect changes to direct ownership in conjunction with a marital separation agreement.
- These shares were omitted from the reporting person's original Form 4, and also were omitted from four Form 4 filings filed by the reporting person after his original Form 4 was filed.

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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