Edgar Filing: HOOD III WILLIAM H. - Form 4

HOOD III V Form 4	WILLIAM H.									
May 10, 20	ЛЛ								APPROVAL	
FUNI	/ 4 UNITED	STATES SE	SECURITIES AND EXCHANGE COMMISSIO Washington, D.C. 20549					OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).			HANGES IN I SECUR ion 16(a) of the	Expires: January 31 2009 Estimated average burden hours per response 0.5						
(Print or Type	Responses)									
			2. Issuer Name and Ticker or Trading Symbol UNITED INSURANCE HOLDINGS CORP. [UIHC]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
	ED INSURANCE S CORP., 800 2N	(Me 05/	Date of Earliest Tra onth/Day/Year) /08/2018	ansaction			X Director Officer (give below)	e title1 below)	0% Owner Other (specify	
OT DETED	(Street) RSBURG, FL 337	File	f Amendment, Da ed(Month/Day/Year)	-	ıl		6. Individual or J Applicable Line) _X_ Form filed by Form filed by	One Reporting	Person	
(City)	(State)	(Zip)			~		Person			
	· · ·	-					quired, Disposed o		-	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year) 05/08/2018		e, if Transactior Code Year) (Instr. 8) Code V	(Instr. 3, 4	sposed	f of (D) 5) Price \$	Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) D	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Stock Common Stock	03/00/2010			.,	1	19.72	200	I	Beneficial Ownership, Purchased by Dependent Child	
Common Stock							689,191	I	William H. Hood III	

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Revocable Trust

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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	5		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		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

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
HOOD III WILLIAM H. C/O UNITED INSURANCE HOLDINGS CORP. 800 2ND AVENUE S ST. PETERSBURG, FL 33701	Х					
Signatures						
/s/ Jessica Strathman, Attorney-in-Fact for William H Hood, III	ł	C	5/10/201	8		

**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).

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.

Date