UNITED INSURANCE HOLDINGS CORP.

Form 4 June 12, 2015

## FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**OMB** 3235-0287 Number:

Estimated average

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

January 31, Expires: 2005

**OMB APPROVAL** 

Form 4 or 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

burden hours per response... 0.5

See Instruction

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person \* POITEVINT ALEC II

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to

Symbol

UNITED INSURANCE HOLDINGS

3. Date of Earliest Transaction

(Check all applicable)

CORP. [UIHC]

\_X\_\_ Director 10% Owner

(Month/Day/Year)

06/11/2015

Other (specify Officer (give title

C/O UNITED INSURANCE HOLDINGS CORP., 360 CENTRAL

(First)

(Middle)

**AVENUE, SUITE 900** 

(Street) 4. If Amendment, Date Original

Filed(Month/Day/Year)

Applicable Line)

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

6. Individual or Joint/Group Filing(Check

Person

Issuer

ST. PETERSBURG, FL 33701

(City)	(State)	Table I - Non-Derivative Securities Acquired, 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)	3. Transactic Code (Instr. 8)	4. Securit or Dispos (Instr. 3, 4	ed of (	` ′	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	06/11/2015		P	2,500	A	\$ 14.04	431,799	I	See Footnote (1)	
Common Stock	06/12/2015		P	12,500	A	\$ 14.2326	444,299	I	See Footnote (1)	
Common Stock	06/11/2015		P	2,500	A	\$ 14.04	438,957	I	See Footnote (2)	

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Common Stock	06/12/2015	P	7,500	A	\$ 14.2326	446,457	I	Footnote (2)
Common Stock						10,000	D	

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.

SEC 1474

(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

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. Transac Code (Instr. 8	5. tionNumber of ) Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	ate	7. Tit Amou Unde Secur (Instr	int of rlying	8. Price of Derivative Security (Instr. 5)	
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

# Reporting Owner Name / Address

Director  $\frac{10\%}{\text{Owner}}$  Officer Other

POITEVINT ALEC II C/O UNITED INSURANCE HOLDINGS CORP. 360 CENTRAL AVENUE, SUITE 900 ST. PETERSBURG, FL 33701

X

## **Signatures**

/s/ John F. Rohloff, Attorney-in-Fact for Alec L. Poitevint II

06/12/2015

\*\*Signature of Reporting Person Date

Reporting Owners 2

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### **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) Shares held by Reporting Person inderectly through Mineral Associates, Inc. Reporting Person has voting and investment power over these securities.
- (2) Shares held by Reporting Person indirectly through SEM Minerals, LP, a limited partnership whose General Partner is SEM Minerals, Inc., of which Reporting Person is the Chairman and President.

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.