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Salmon Kim Form 4 September 0	•										
	ЛЛ									APPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION						N OMB Number:	3235-0287				
Check th if no lon subject to Section 2 Form 4 of Form 5 obligation may con See Instr	ger o 16. or Filed pur ons tinue. Section 17(Washington, D.C. 20549 STATEMENT OF CHANGES IN 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									
1(b).					Ĩ						
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> Salmon Kimberly			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	() C	6. Date of Earlie Month/Day/Ye 09/07/2017		ransaction			Director X Officer (gi below)		0% Owner Dther (specify el	
ST. PETER	(Street) SBURG, FL 337	F	. If Amendmen Filed(Month/Day		-	al		6. Individual or Applicable Line) _X_ Form filed by Form filed by Person	y One Reporting	g Person	
(City)	(State)	(Zip)	Table I - N	Non-E	Derivative	Secu	rities Ac	quired, Disposed	of, or Benefic	cially Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		l 3. Date, if Trans Code /Year) (Instr	actio	4. Securin (A) or Di (Instr. 3, Amount	ties A spose	cquired 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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	09/07/2017		Р		900	A	\$ 14.08	29,622	I	Beneficial Ownership, Purchased by Spouse	
Common Stock								920	I	Beneficial Ownership, Purchased by Dependent Children	

Reporting Owners

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Stock

Common

35,241 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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transact Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Salmon Kimberly C/O UNITED INSURANCE HOLDINGS CORP 800 2ND AVENUE S. ST. PETERSBURG, FL 33701			General Counsel				
Signatures							
/s/ Jessica Strathman, Attorney-in-Fact for Kimber Salmon	ly	09/07	/2017				
** Signature of Reporting Person		Da	te				

If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Explanation of Responses:

** 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.