## Edgar Filing: Hogan Michael - Form 4

Form 4											
May 16, 201										PROVAL	
<b>FORM</b>		SECURITIES AND EXCHANGE CO Washington, D.C. 20549					OMB OMB Number:	3235-0287			
if no long subject to Section 1 Form 4 o Form 5	F CHANGES IN BENEFICIAL OWNE SECURITIES Section 16(a) of the Securities Exchange A						Expires: Estimated a burden hou response	ours per			
obligation may cont <i>See</i> Instru 1(b).	inue. Section 1	7(a) of the	Public Ut		ling Con	ipan	y Act of	1935 or Section	n		
(Print or Type F	Responses)										
Hogan Michael Sy U			Symbol UNITE	2. Issuer Name <b>and</b> Ticker or Trading Symbol UNITED INSURANCE HOLDINGS CORP. [UIHC]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Mon				ate of Earliest Transaction nth/Day/Year) 5/2018				X Director 10% Owner Officer (give title Other (specify below) below)			
			endment, Date Original nth/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>				
ST PETERS	SBURG, FL 33	701						Person		porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)		3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A)			Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)				
Common Stock	05/15/2018			Code V P	Amount 251	or (D) A	Price \$ 20.47	(Instr. 3 and 4) 61,439	D		
Common Stock	05/15/2018			Р	2,249	А	\$ 20.55	63,688	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.

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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. Transacti Code (Instr. 8)	5. orNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	Amou Unde Secur	le and unt of rlying rities : 3 and 4)	8. Price of Derivative Security (Instr. 5)	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			
Hogan Michael C/O UNITED INSURANCE HOLDINGS CORP. 800 2ND AVE S ST PETERSBURG, FL 33701	X						
Signatures							
/s/ Jessica Strathman, Attorney-in-Fact for Michael Hogan		05/16/2	018				
**Signature of Reporting Person		Date	e				
Explanation of Responses:							

## planation of nesponses.

\* 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.