Peed Daniel Form 4 February 22, 2019

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

OMB Number:

3235-0287

Expires:

**OMB APPROVAL** 

January 31, 2005

0.5

subject to Section 16. Form 4 or

if no longer

Check this box

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

Estimated average burden hours per response...

Form 5 obligations may continue. See Instruction

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).

(Print or Type Responses)

1. Name and Address of Reporting Person \* Peed Daniel

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Symbol

UNITED INSURANCE HOLDINGS

(Check all applicable)

CORP. [UIHC]

(Last) (First) (Middle) 3. Date of Earliest Transaction

X\_ Director X\_\_ 10% Owner Other (specify Officer (give title

(Month/Day/Year) 02/21/2019

C/O UNITED INSURANCE HOLDINGS CORP., 800 2ND AVE

(Street)

S

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Applicable Line)

Filed(Month/Day/Year)

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

below)

ST PETERSBURG, FL 33701

(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1.Title of 2. Transaction Date 2A. Deemed 3. 4. Securities Acquired 5. Amount of Transaction(A) or Disposed of (D) Security (Month/Day/Year) Execution Date, if Securities (Instr. 3) Code (Instr. 3, 4 and 5)

> (Month/Day/Year) (Instr. 8)

7. Nature of Indirect Ownership Beneficially Form: Beneficial Owned Direct (D) Ownership Following or Indirect (Instr. 4) Reported (I) Transaction(s) (Instr. 4)

(A) or

Code V Amount (D) Price

\$ S D 4,000 D 1,986,836

02/21/2019 Stock 16.41 Common

See 11,876,563 Ι Footnote (1)

Common Stock

Common

Stock

3,487,837

(Instr. 3 and 4)

Ownership, Held by Leah

Beneficial

Anneberg Peed (2)

#### Edgar Filing: Peed Daniel - Form 4

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

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.		5.	6. Date Exerc	cisable and	7. Titl	le and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration D	on Date		ınt of	Derivative	
Security	or Exercise		any	Code		of	(Month/Day/	Year)	Under	rlying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr.	8)	Derivative	e		Secur	ities	(Instr. 5)
	Derivative					Securities			(Instr.	. 3 and 4)	
	Security				Acquired						
	·					(A) or					
						Disposed					
						of (D)					
						(Instr. 3,					
						4, and 5)					
						i, una 5)					
										Amount	
							Date Exercisable	Expiration Date	Title	or	
										Number	
										of	
				Code	V	(A) (D)				Shares	

## **Reporting Owners**

Peed Daniel C/O UNITED INSURANCE HOLDINGS CORP. 800 2ND AVE S

X X

ST PETERSBURG, FL 33701

## **Signatures**

/s/ Jessica Strathman, Attorney-in-Fact for Daniel Peed

02/22/2019

Relationships

\*\*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).
- (1) Shares held by Reporting Person indirectly through Peed FLP1, Ltd., L.L.P., a limited liability partnership that is wholly owned by the Reporting Person.
- (2) Shares held by Leah Anneberg Peed, the Reporting Person has voting power over these shares.

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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