Hill John S Form 4 May 18, 2018

## FORM 4

#### **OMB APPROVAL**

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

**OMB** 3235-0287 Number:

Check this box if no longer subject to Section 16.

Washington, D.C. 20549

January 31, Expires: 2005

Form 4 or Form 5

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

Estimated average burden hours per response... 0.5

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 A Hill John S	ddress of Repor		ymbol	and Ticker or Trading  Insurance Holdings,	Issuer	ip of Reporting Pers	`,	
(Last) (First) (Middle)  1511 N. WESTSHORE BLVD., SUITE 870			. Date of Earlies Month/Day/Year 05/16/2018		Director 10% Owner _X Officer (give title Other (specify below)  VP, Secretary & CFO			
(Street) TAMPA,, FL 33607			. If Amendment, iled(Month/Day/Y	Č	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
(City)	(State)	(Zip)  Date 2A. Deen		n-Derivative Securities Ac	Person  quired, Dispose  5. Amount of	ed of, or Beneficial  6. Ownership	•	

	Table 1 - Non-Derivative Securities Acquired, Disposed of, or Beneficiary Own								ny Owncu
1.Title of	2. Transaction Date						5. Amount of	7. Nature of	
Security (Instr. 3)	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	Disposed (Instr. 3,	d of (D 4 and (A) or	))	Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial Ownership (Instr. 4)
Common Stock, \$0.001 par value	05/16/2018		P	500	` '	Φ.	9,500	I	By IRA
Common Stock							39,000 (1)	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

#### Edgar Filing: Hill John S - Form 4

#### number.

## 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	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration D	ate	Amou	ınt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security				Acquired						Follo
	·				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						`
					4, and 5)						
									Amount		
						Date	Expiration		or		
							Exercisable Date	Title Number of			
						Lacroisdoic					
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Hill John S 1511 N. WESTSHORE BLVD., SUITE 870 TAMPA., FL 33607

VP, Secretary & CFO

## **Signatures**

/s/ John S. Hill 05/18/2018

\*\*Signature of 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).
- Includes 32,000 restricted stock units ("RSUs") granted under the Amended and Restated 2014 Equity Incentive Plan pursuant to the share-matching program. RSUs vest in five annual equal installments, subject to continued employment with the Company, beginning on the first anniversary of the grant date. Each RSU represents a contingent right to receive one share of common stock of the Company. No RSUs have vested for the reporting person as of the date of this filing.

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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