UNIVERSAL INSURANCE HOLDINGS, INC.

Form 4

November 07, 2016

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

**OMB APPROVAL** 

**OMB** 3235-0287 Number:

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Check this box if no longer subject to Section 16. Form 4 or

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

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 \* PALMIERI RALPH J.

2. Issuer Name and Ticker or Trading Symbol

Issuer

UNIVERSAL INSURANCE HOLDINGS, INC. [UVE]

(Check all applicable)

5. Relationship of Reporting Person(s) to

(Last) (First) (Middle)

3. Date of Earliest Transaction (Month/Day/Year)

Director 10% Owner Other (specify Officer (give title below)

1110 WEST COMMERCIAL **BOULEVARD, SUITE 100** 

4. If Amendment, Date Original

11/03/2016

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

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

FORT LAUDERDALE, FL 33309

(Street)

(State) (Zip) (City) 2. Transaction Date 2A. Deemed 1. Title of

Security

(Instr. 3)

4. Securities 3. (Month/Day/Year) Execution Date, if TransactionAcquired (A) or Code Disposed of (D)

(Instr. 8)

5. Amount of 6. Ownership Securities Beneficially Owned (I) Following

Form: Direct Indirect (D) or Indirect Beneficial Ownership (Instr. 4) (Instr. 4)

Reported (A) Transaction(s) or (Instr. 3 and 4)

Code V Amount (D) Price

(Instr. 3, 4 and 5)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

(Month/Day/Year)

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)

7. Nature of

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

3. Transaction Date 3A. Deemed 1. Title of Derivative (Month/Day/Year) Execution Date, if TransactionDerivative Conversion

5. Number of 6. Date Exercisable and **Expiration Date** 

7. Title and Amount Underlying Securitie

#### Edgar Filing: UNIVERSAL INSURANCE HOLDINGS, INC. - Form 4

Code

Securities

(Month/Day/Year)

(Instr. 3 and 4)

(Instr. 3)	Price of Derivative Security	(Month/Day/Year)	'ear) (Instr. 8)	Acquired (A or Disposed (D) (Instr. 3, 4, and 5)	or Disposed of (D) (Instr. 3, 4,			
			Code V	/ (A) (	(D) Date Exercisable	Expiration Date	Title	Amour or Numbe of Shar
Option to Purchase Common	\$ 19.85	11/03/2016	A	20,000	11/03/2017 <u>(1)</u>	11/02/2021	Common Stock	20,00

# **Reporting Owners**

or Exercise

Reporting Owner Name / Address Relationships

any

Director 10% Owner Officer Other

PALMIERI RALPH J. 1110 WEST COMMERCIAL BOULEVARD SUITE 100 FORT LAUDERDALE, FL 33309

## **Signatures**

Security

Stock

/s/ Ralph J. 11/07/2016 Palmieri

\*\*Signature of Date Reporting Person

## **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) This option is scheduled to vest in full one year after the date of grant.

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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