FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	OVAL						
	OMB Number: 3235-0							
l	Estimated average burden							
l	hours per response:	0.5						

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name an		2. Issuer Name and Ticker or Trading Symbol NMI Holdings, Inc. [ NMIH ]								5. Relationshi (Check all app X Direc	orting Person(s) to Issue									
(Last) (First) (Middle) C/O NMI HOLDINGS, INC.						3. Date of Earliest Transaction (Month/Day/Year) 05/10/2018								Officer (give title Other (spec below) below)						
2100 POWELL STREET, 12TH FL.							4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street) EMERYVILLE CA 94608						Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person														
(City)		(State	e) (	(Zip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Date					2. Transaction Date (Month/Day/	Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 at 5)			Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price	Transaction	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Restricted	l Stock U	Jnit (	right to receiv	e)	05/10/20	18			A		4,923(1)	A	\$0	89,62	29(2)	]	D			
Class A Common Shares, \$0.01 par value per share														10,0	000		I	By Susan A. Ozanne Family Trust, of which Mr. Ozanne and his wife are co-trustees and beneficiaries		
Class A Common Shares, \$0.01 par value per share										35,000		I		By LLC <sup>(3)</sup>						
	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)	e of 2. 3. Transaction 3A. Deemed Execution Date Execution Date if any		emed 4 ion Date, T C //Day/Year) 8	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (Aquired (D) (Instr. 3, 4 and 5)	6. Date Exer Expiration I (Month/Day		cisable and ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)  Amount or Number of Title Shares		8. Price of Derivative Security (Instr. 5)	erivative derivati ecurity Securit		10. Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficial Ownership ct (Instr. 4)				

## Explanation of Responses:

- 1. Represents restricted stock units granted pursuant to the NMIH Amended and Restated 2014 Omnibus Incentive Plan on May 10, 2018. The restricted stock units grant on the first anniversary of the grant
- 2. Represents 74,706 class A common shares, 10,000 class A common shares held by the James H. Ozanne Revocable Trust, a living trust of which the reporting person is the sole trustee and sole beneficiary and 4,923 unvested restricted stock units.
- 3. The common stock is held by Greenrange Partners LLC, a venture capital investment company, for which the reporting person serves as principal. As a principal, the reporting person may be deemed to be beneficially own the shares of stock held by Greenrange Partners LLC.

## Remarks:

/s/ Nicole C. Sanchez as Attorney-in-Fact

05/14/2018

\*\* Signature of Reporting Person

Date

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

- \* 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.

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 Number.