Edgar Filing: WILSON D ELLEN - Form 4

WILSON D EI	LLEN										
Form 4											
December 17, 2	2018										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Weshington D.C. 20549									APPROVAL 3235-0287		
Check this b if no longer subject to Section 16. Form 4 or Form 5 obligations may continu <i>See</i> Instruction 1(b).	STATE Filed p _{le.} Section 1	Washington, D.C. 20549 TEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES pursuant to Section 16(a) of the Securities Exchange Act of 1934, 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940							Expires: January 2 20 Estimated average burden hours per response 0		
(Print or Type Res	ponses)										
1. Name and Add WILSON D E	2. Issuer Name and Ticker or Trading Symbol UNITEDHEALTH GROUP INC [UNH]				-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Mo				3. Date of Earliest Transaction (Month/Day/Year) 12/13/2018				Director 10% Owner X_Officer (give title Other (specify below) below) EVP Human Capital			
Filed(Month/				ndment, Date Original th/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
MINNETONK	XA, MN 5534	43						Person		porting	
(City)	(State)	(Zip)	Table	I - Non-De	erivative S	ecuri	ties Ac	quired, Disposed of	f, or Beneficial	lly Owned	
	2. Transaction E Month/Day/Ye	ar) Executio any	med	3. Transactic Code (Instr. 8) Code V	4. Securit onAcquired Disposed (Instr. 3,	ties (A) o of (D	r)	5. Amount of	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	•	
Common Stock	12/13/2018			А	68.5 (1)	А	\$0	51,147.848	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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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 Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
i o	Director	10% Owner	Officer	Other				
WILSON D ELLEN C/O UNITEDHEALTH GROUP 9900 BREN ROAD EAST MINNETONKA, MN 55343			EVP Human Capital					
Signatures								
Faraz A. Choudhry, Attorney-in-H Wilson	. Ellen	12/17/2018						
**Signature of Reporting P	erson		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) Represents dividend equivalents paid on outstanding restricted stock units. The dividend equivalents are subject to the same terms as the underlying restricted stock units and are forfeited if such units do not vest.

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.