Edgar Filing: HOOPER MICHELE J - Form 4

HOOPER MI	CHELE J										
Form 4											
January 03, 20	019										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								.	OMB APPROVAL		
Check this	Washington, D.C. 20549							OMB Number:	3235-0287		
if no longe subject to Section 16 Form 4 or Form 5	if no longer subject toSTATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIESSection 16. Form 4 or Form 5SECURITIESFiled pursuant to Section 16(a) of the Securities Exchange Act of 1934,						January 3Expires:200Estimated averageburden hours perresponse0				
obligation may contin <i>See</i> Instruct 1(b).	nue. Section 1		Public Uti of the Inv	•	•	- ·		f 1935 or Sectio 40	on		
(Print or Type Ro	esponses)										
1. Name and Address of Reporting Person _ 2. Issuer Nam HOOPER MICHELE J Symbol								5. Relationship of Reporting Person(s) to Issuer			
	UNITEDHEALTH GROUP INC [UNH]				C	(Check all applicable)					
(Last) (First) (Middle) C/O UNITEDHEALTH			3. Date of Earliest Transaction (Month/Day/Year) 01/02/2019					_X_Director10% Owner Officer (give titleOther (specify below)below)			
	00 BREN ROA	AD EAST	01/02/20	1)							
	Filed(Month/Day/Year) Applicable L					Applicable Line)	· Joint/Group Filing(Check				
MINNETON	IKA, MN 5534	43						Form filed by M Person	More than One Re	eporting	
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ar) Executio any	emed on Date, if Day/Year)	3. Transactic Code (Instr. 8) Code V	Disposed (Instr. 3,	l (A) o l of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	01/02/2019			A	211 <u>(1)</u>		\$ 0	33,439	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)

Edgar Filing: HOOPER MICHELE J - Form 4

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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Securi (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne 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								
	Director	10% Owner	Officer	Other					
HOOPER MICHELE J C/O UNITEDHEALTH GROUP 9900 BREN ROAD EAST MINNETONKA, MN 55343	Х								
Signatures									
Faraz A. Choudhry, Attorney-in-Fact for Michele J.									
Hooper				01/03/2019					
**Signature of Reporting		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).
- Represents deferred stock units that are granted as regular quarterly compensation for service as a director of UnitedHealth Group. (1) Deferred stock units are immediately vested, but must be retained by the director until the director's completion of service on the Board.

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.