#### UNITEDHEALTH GROUP INC

Form 4

September 22, 2016

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

Check this box

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

> 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

See Instruction 1(b).

(Last)

(City)

(Print or Type Responses)

1. Name and Address of Reporting Person \* LAWSON RODGER A

(First)

2. Issuer Name and Ticker or Trading

UNITEDHEALTH GROUP INC

[UNH]

09/20/2016

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

X\_ Director

Officer (give title below)

10% Owner Other (specify

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

Estimated average

burden hours per

C/O UNITEDHEALTH GROUP, 9900 BREN ROAD EAST

> (Street) 4. If Amendment, Date Original

(Middle)

(Zip)

Symbol

Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

5. Relationship of Reporting Person(s) to

(Check all applicable)

Applicable Line)

\_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

Issuer

MINNETONKA, MN 55343

(State)

1. Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3) (Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of Securities Beneficially Owned Following Reported

Form: Direct (D) or Indirect (I) (Instr. 4)

D

6. Ownership 7. Nature of Indirect Beneficial Ownership (Instr. 4)

(9-02)

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

Code V Amount

A

Price (D)

Common 09/20/2016 Stock

86 (1) \$0 A 25,880

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 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: UNITEDHEALTH GROUP INC - Form 4

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transacti<br>Code<br>(Instr. 8) |                                   |                     | ate             | 7. Title<br>Amoun<br>Under | int of<br>lying<br>ities | 8. Price of Derivative Security (Instr. 5) | 9. Nu<br>Deriv<br>Secur<br>Bene |
|---|---|---|---|---------------------------------------|-----------------------------------|---------------------|-----------------|----------------------------|--------------------------|--|---------------------------------|
|   | Derivative<br>Security                      |   |   |                                       | Securities<br>Acquired            |                     |                 | (Instr.                    | 3 and 4)                 |  | Owne<br>Follo                   |
|   |   |   |   |                                       | (A) or<br>Disposed                |                     |                 |                            |                          |  | Repo<br>Trans                   |
|   |   |   |   |                                       | of (D)<br>(Instr. 3,<br>4, and 5) |                     |                 |                            |                          |  | (Instr                          |
|   |   |   |   |                                       | 4, and 3)                         |                     |                 |                            | Amount                   |  |                                 |
|   |   |   |   |                                       |                                   | Date<br>Exercisable | Expiration Date | Title                      | or<br>Number<br>of       |  |                                 |
|   |   |   |   | Code V                                | (A) (D)                           |                     |                 |                            | Shares                   |  |                                 |

## **Reporting Owners**

| Reporting Owner Name / Address        | Relationships |           |         |       |  |  |  |
|---------------------------------------|---------------|-----------|---------|-------|--|--|--|
| · · · · · · · · · · · · · · · · · · · | Director      | 10% Owner | Officer | Other |  |  |  |
| LAWSON RODGER A                       |               |           |         |       |  |  |  |
| C/O UNITEDHEALTH GROUP                | X             |           |         |       |  |  |  |
| 9900 BREN ROAD EAST                   |               |           |         |       |  |  |  |
| MINNETONKA, MN 55343                  |               |           |         |       |  |  |  |

### **Signatures**

Amy L. Schneider, Attorney-in-Fact for Rodger A. Lawson

09/22/2016

\*\*Signature of Reporting 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).
- (1) Represents dividend equivalents paid on vested deferred stock units. The dividend equivalents are immediately vested and are subject to the same terms as the underlying deferred stock units.

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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