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UNITEDHEALTH GI Form 4 June 27, 2014	ROUP INC									
FORM 4	ПТЕЛ СТАТЕ(S SECUD	ITIES AT		' LI A R	NCE (COMMISSION	r	PPROVAL	
	ONITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							OMB Number:	3235-0287	
Check this box if no longer subject to S								Expires: Estimated a	January 31, 2005 average	
Section 16. Form 4 or								burden hou	rs per	
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, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940									0.5	
(Print or Type Responses)										
1. Name and Address of R BALLARD WILLIA	Symbol	Name and '				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) C/O UNITEDHEALT GROUP, 9900 BREN	3. Date of (Month/Da 06/25/20		insaction			X_ Director 10% Owner Officer (give title Other (specify below) below)				
			ndment, Date Original th/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
MINNETONKA, MN	1 55343						Form filed by M Person	More than One Re	eporting	
(City) (State)	(Zip)	Table	e I - Non-De	erivative S	ecuri	ties Aco	quired, Disposed o	f, or Beneficial	lly Owned	
	Transaction Date 2A. Deemed Ionth/Day/Year) Execution Date, if any (Month/Day/Year)		3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common 06/25/2 Stock	014		Code V A	Amount 75 <u>(1)</u>	(D) A	Price \$ 0	65,631	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)

(1)	Represents dividend equivalents paid on vested deferred stock units. The dividend equivalents are immedia retained by the director until the director's completion of service on the Board.
Poter	: File three copies of this Form, one of which must be manually signed. If space is insufficient, <i>see</i> Instruction that a persons who are to respond to the collection of information contained in this form are not required to respond to Valid OMB number.

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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. Transact Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Amou Unde Secur	le and ant of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)
				Code V	· (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

Reporting Owners

Relationships **Reporting Owner Name / Address** Director 10% Owner Officer Other BALLARD WILLIAM C JR C/O UNITEDHEALTH GROUP Х 9900 BREN ROAD EAST MINNETONKA, MN 55343 Signatures Amy L. Schneider, Attorney-in-Fact for William C. 06/27/2014 Ballard, Jr. **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).
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Deriv Secu Bene

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