Edgar Filing: Shine Kenneth Irwin - Form 4

Shine Kenneth Form 4	Irwin										
June 28, 2018											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL		
	UNITE	Washington, D.C. 20549								3235-0287	
Check this l if no longer subject to Section 16. Form 4 or Form 5 obligations may continu <i>See</i> Instruct 1(b).	Filed p ue. Section 1	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							burden hou response	Estimated average burden hours per response 0.5	
(Print or Type Res	sponses)										
1. Name and Address of Reporting Person <u>*</u> Shine Kenneth Irwin			2. Issuer Name and Ticker or Trading Symbol UNITEDHEALTH GROUP INC [UNH]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) C/O UNITEDHEALTH GROUP, 9900 BREN ROAD EAST			3. Date of Earliest Transaction (Month/Day/Year) 06/26/2018					X_Director10% Owner Officer (give titleOther (specify below) below)			
				4. If Amendment, Date Original Filed(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
MINNETON	KA, MN 5534	43						Form filed by Person	More than One R	eporting	
(City)	(State)	(Zip)	Table	e I - Non-E	Derivative S	Securi	ties Ac	quired, Disposed o	of, or Beneficia	lly Owned	
	2. Transaction E (Month/Day/Ye	ar) Execution any	emed on Date, if /Day/Year)	Code (Instr. 8)	4. Securi onAcquired Disposed (Instr. 3,	l (A) o l of (D 4 and (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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	06/26/2018			A	105 <u>(1)</u>		\$0	29,053	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)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationsh			
	Director 10% Owner		Officer	Other	
Shine Kenneth Irwin C/O UNITEDHEALTH GROUP 9900 BREN ROAD EAST MINNETONKA, MN 55343	Х				
Signatures					
Faraz A. Choudhry, Attorney-in-F Shine, MD	06/28/2018				
<u>**Signature of Reporting</u>	ng 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).
- Represents dividend equivalents paid on vested deferred stock units. The dividend equivalents are immediately vested and are subject to (1) 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.