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UNITEDHEALTH GROUP Form 4	INC									
January 05, 2009										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL		
Check this box								3235-0287 January 31,		
if no longer subject to Section 16.STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIESForm 4 or Form 5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							Estimated burden ho response	2005 average urs per		
abligations Flicu pt	(a) of the P		y Hold	ling Con	npany Act	of 1935 or Secti				
(Print or Type Responses)										
1. Name and Address of Reporting BALLARD WILLIAM C J	Symbol	JNITEDHEALTH GROUP INC				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) C/O UNITEDHEALTH GR INCORPORATED, 9900 B ROAD EAST	3. Date of Ear (Month/Day/Y 01/02/2009	Year)	ansaction		X_ Director 10% Owner Officer (give title Other (specify below) below)					
(Street)	(Street) 4. If Amendment, Date Origina Filed(Month/Day/Year)				l	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person				
MINNETONKA, MN 5534	3					Person	More than One R	eporting		
(City) (State)	(Zip)	Table I -	Non-D) erivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)2. Transaction Data (Month/Day/Year)		d 3. Date, if Tran Cod y/Year) (Inst	nsaction le tr. 8)	4. Securiti Acquired (Disposed ((Instr. 3, 4	es (A) or of (D)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect		
Reminder: Report on a separate lin	e for each clas					or indirectly				
Reminder. Report on a separate in	ie for each clas	ss of securities	s benefi	icially Own	icu uncerty (si muneetty.				

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. 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)	Code Securities		ative es 1 1 of	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amour Underlying Securit (Instr. 3 and 4)		
				Code Y	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amo or Num of Share
Non-Qualified Stock Option (right to buy)	\$ 27.59	01/02/2009		А		5,000		01/02/2009	01/02/2019	Common Stock	5,0
Reporting Owners											
Reporting Owner Name / Address			Relationships								
			Director	ctor 10% Owner Officer Other							
BALLARD WI C/O UNITEDH 9900 BREN RC MINNETONKA	EALTH GF DAD EAST	ROUP INCORPO	RATED X								
Signature	es										
By: Dannette L. Smith, Attorney-In-Fact For: William C. Ballard, Jr.			01/05/2009								
**Signature of Reporting Person				Date							

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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).

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.