Edgar Filing: Sweere Lori - Form 4

Sweere Lori

Form 4 July 31, 2009											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check this if no longe subject to Section 16 Form 4 or Form 5 obligation	er STATE 5. Filed p	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								Expires:January 31, 2005Estimated average burden hours per response0.5	
<i>See</i> Instruction 1(b).	nue. Section 1			ility Hold vestment (•	· ·		f 1935 or Sectio 40	n		
(Print or Type R	esponses)										
1. Name and Address of Reporting Person <u>*</u> Sweere Lori			2. Issuer Name and Ticker or Trading Symbol UNITEDHEALTH GROUP INC					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First)	(Middle)	[UNH] ddle) 3. Date of Earliest Transaction					10% Owner			
C/O UNITEI	DHEALTH GI ATED, 9900 H	ROUP	(Month/D 07/30/20	ay/Year)	insaction			XOfficer (give below)		er (specify	
	(Street) 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	IKA, MN 5534	43						Form filed by M Person			
(City)	(State)	(Zip)	Table	e I - Non-De	erivative	Securi	ities Acc	quired, Disposed of	, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction E (Month/Day/Yea	ar) Executio any	on Date, if	3. Transactio Code (Instr. 8)	n(A) or D (D)	ispose 4 and	d of	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	07/30/2009			F	1,602	D	\$ 28.1	58,095 <u>(1)</u>	D		
Common Stock								2,880	I	by Trust	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 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)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/Year) vative urities uired or oosed D) r. 3,		Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur 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		
Sweere Lori C/O UNITEDHEALTH GROUP INCORPORATED 9900 BREN ROAD EAST MINNETONKA, MN 55343			EVP, Human Capital			
Signatures						
By: Christopher J. Walsh, Attorney-in-Fact For: Lori I Sweere	X	07/31/	/2009			
<u>**</u> Signature of Reporting Person		Dat	e			

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) Includes shares acquired under UnitedHealth Group's Employee Stock Purchase Plan.

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.