### Edgar Filing: CAUSEY CHRISTOPHER - Form 4

CAUSEY CI	HRISTOPHER										
Form 4											
September 1	3, 2010										
FORM	14					~~~	NOR		OMB AF	PROVAL	
Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box if no longer critering on chieve on proversion and complete on the proversion of the chieve of the							Expires:	January 31, 2005			
subject to Section 1 Form 4 o	F CHAN	GES IN SECUR		ICIA	L OW	NERSHIP OF	Estimated a burden hou response	verage			
Form 5 obligation may cont <i>See</i> Instru 1(b).	ns Section 17(a	) of the 1	Public Ut		ling Con	npan	y Act of	e Act of 1934, E 1935 or Section O	n		
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> CAUSEY CHRISTOPHER			2. Issuer Name <b>and</b> Ticker or Trading Symbol				-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
		UNITED THERAPEUTICS Corp [UTHR]									
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)					X_ Director 10% Owner Officer (give title Other (specify			
	D THERAPEUT TION, 1040 SPRI		09/10/20	•				below)	below)		
				4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)			
SILVER SP	RING, MD 2091	)						_X_ Form filed by C Form filed by M Person			
(City)	(State) (	Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	ecurity (Month/Day/Year) Execution Date		n Date, if	Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)				Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock	09/10/2010	09/10/2	010	М	1,500 (2)	А	\$ 30.75	2,008	D		
Common Stock	09/10/2010	09/10/2	010	S	1,500 (2)	D	\$ 51	508	D		
Common Stock								900	I	By Ugma Account	

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

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Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)	4. Transactio Code (Instr. 8)	5. Number onof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of 8 Underlying Securities 1 (Instr. 3 and 4) 5	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Options	\$ 30.75	09/10/2010	09/10/2010	М	1,500 (2)	04/29/2009	04/29/2018	Common Stock	1,500

# **Reporting Owners**

Reporting Owner Name / Address		Relationships					
	Director	10% Owner	Officer	Other			
CAUSEY CHRISTOPHER C/O UNITED THERAPEUTICS CORPORATIO 1040 SPRING STREET SILVER SPRING, MD 20910	N X						
Signatures							
/s/ Paul A. Mahon under Power of Attorney	09/13/2010						
**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) Shares held in Uniform Gift to Minors Accounts for the benefit of the reporting person's children.
- This exercise of stock options and corresponding sale of shares was pursuant to a Rule 10b5-1 trading plan entered into by the reporting (2) person.

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.