Edgar Filing: RENWICK GLENN M - Form 4

RENWICK GI Form 4	LENN M											
September 20,	2018											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 Check this box								OMB	APPROVAL 3235-0287			
								irs per				
(Print or Type Res	sponses)											
T			2. Issuer Name and Ticker or Trading Symbol UNITEDHEALTH GROUP INC [UNH]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Month/				nte of Earliest Transaction nth/Day/Year) 8/2018					X_ Director 10% Owner Officer (give title Other (specify below) below)			
	Filed(Month/Day/Year) Applica					Applicable Line) _X_ Form filed by	Joint/Group Filing(Check y One Reporting Person					
MINNETON	KA, MN 5534	3							Form filed by I Person	More than One Ro	eporting	
(City)	(State)	(Zip)	Table	e I - Non-l	Deriv	vative S	ecuri	ties Ac	quired, Disposed o	of, or Beneficial	lly Owned	
	2. Transaction Day/Yea	r) Executionary	emed 3. 4. Securities			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 Stock	09/18/2018			А	1	49 <u>(1)</u>	А	\$0	79,700	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Instr. 8	5. etionNumbe of B) Derival Securit Acquir (A) or Dispose of (D) (Instr. 2 4, and 2	(Month/Day ive ies ed ed	Date	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code	V (A) (I	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
1 0	Director	10% Owner	Officer	Other				
RENWICK GLENN M C/O UNITEDHEALTH GROUP 9900 BREN ROAD EAST MINNETONKA, MN 55343	Х							
Signatures								
Faraz A. Choudhry, Attorney-in-F Renwick	09/20/2018							
<u>**Signature of Reporting</u>	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) Represents dividend equivalents paid on vested deferred stock units. The dividend equivalents are immediately vested and are subject to 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.

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