Edgar Filing: ROOS THOMAS E - Form 4

Form 4											
November 06, 2018 FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB APPROVAL OMB 3235-0287 Number:			
Check this if no longer subject to Section 16. Form 4 or	STATE	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							Expires: January 31 200 Estimated average burden hours per response 0.		
Form 5 obligations may continu <i>See</i> Instruct 1(b).	ue. Section 17	(a) of the l	Public U		ding Cor	npan	y Act of	e Act of 1934, 1935 or Section 0	I		
ROOS THOMAS E Symb				2. Issuer Name and Ticker or Trading ymbol INITEDHEALTH GROUP INC				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) C/O UNITED GROUP, 9900	HEALTH	(Middle) D EAST	[UNH] 3. Date of (Month/E 11/05/2	-	ransaction			Director X Officer (give below)	10%	Owner r (specify	
				endment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Tabl	e I - Non-E	Derivative	Secu	rities Acqu	uired, Disposed of,	or Beneficiall	y Owned	
	Transaction Dat Month/Day/Year) Execution any	ned 1 Date, if	3. Transactio Code (Instr. 8) Code V	4. Securi on(A) or Di (Instr. 3,	ties Adispose 4 and (A) or	cquired d of (D)	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	
Common 1 Stock 1	1/05/2018			F	2,218 (1)	(D) D	\$ 261.01	23,460.427	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)

Reporting Owners

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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. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu 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			
1	Director	10% Owner	Officer	Other		
ROOS THOMAS E C/O UNITEDHEALTH GROUP 9900 BREN ROAD EAST MINNETONKA, MN 55343			Chief Accounting Officer			
Signatures						
Faraz A. Choudhry, Attorney-in-F Roos	Fact for Th	nomas E.	11/06/2018			
**Signature of Reporting P	erson		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 the withholding of shares to satisfy tax obligations upon the vesting of Restricted 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.