Edgar Filing: MUNSELL WILLIAM A - Form 4

MUNSELL	WILLIAM A										
Form 4											
February 10,	, 2012										
FORM	4					~~	NOR		OMB AF	PROVAL	
	UNITED	STATES		RITIES A shington,			NGE (COMMISSION	OMB Number:	3235-0287	
Check th if no long									Expires:	January 31,	
subject to Section 1 Form 4 o Form 5	6. or	STATEMENT OF CHANGES IN BENEFICIAL OWNERS SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act								2005 verage rs per 0.5	
obligatio may cont <i>See</i> Instru 1(b).	ns Section 17(a) of the	Public U		ling Cor	npan	y Act of	f 1935 or Sectior	1		
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> MUNSELL WILLIAM A			2. Issuer Name and Ticker or Trading Symbol UNITEDHEALTH GROUP INC [UNH]					5. Relationship of Reporting Person(s) to Issuer			
								(Check all applicable)			
			f Earliest Transaction Day/Year)				Director 10% Owner Officer (give title Other (specify				
	EDHEALTH 900 BREN ROAI) EAST	02/09/2	-				below) EVP, Un	below) iitedHealth Gro	oup	
			endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(CheckApplicable Line)_X_ Form filed by One Reporting Person				
MINNETO	NKA, MN 55343	i						Form filed by M Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secu	rities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any		3. Transactic Code (Instr. 8)	4. Securi on(A) or Di (Instr. 3,	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common				Code V	Amount	(D)	Price \$	(Instr. 3 and 4)			
Stock	02/09/2012			F	5,941	D	ф 53.06	298,374.546	D		
Common Stock	02/09/2012			F	3,126	D	\$ 53.06	295,248.546	D		
Common Stock								290.6256	I	by 401(k)	

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 (9-02) required to respond unless the form

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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)	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 Securi (Instr.	ınt of rlying	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 0	Director	10% Owner	Officer	Other			
MUNSELL WILLIAM A C/O UNITEDHEALTH GROUP 9900 BREN ROAD EAST MINNETONKA, MN 55343			EVP, UnitedHealth Group				
Signatures							
Dannette L. Smith, Attorney-in-Fac Munsell	t for: Willia	m A.	02/10/2012				
<u>**</u> Signature of Reporting Pe	erson		Date				
Evalenction of Doon	0 D 0 0 0						

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.