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UNITEDHEALTH GROUP INC

Form 3 April 27, 2007

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *

DARRETTA ROBERT J

(Last)

1. Title of Security

(Instr. 4)

(First)

C/O UNITEDHEALTH GROUP

(Middle)

Statement

(Month/Day/Year)

04/17/2007

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

UNITEDHEALTH GROUP INC [UNH]

4. Relationship of Reporting Person(s) to Issuer

5. If Amendment, Date Original

Filed(Month/Day/Year)

(Check all applicable) INCORPORATED, Â 9900 **BREN ROAD EAST**

10% Owner _X_ Director Officer Other

6. Individual or Joint/Group (give title below) (specify below) Filing(Check Applicable Line)

X Form filed by One Reporting Person Form filed by More than One

Reporting Person

MINNETONKA, MNÂ 55343

(Street)

(City) (State) (Zip)

Table I - Non-Derivative Securities Beneficially Owned 2. Amount of Securities

Beneficially Owned

(Instr. 4)

3. Ownership Form:

4. Nature of Indirect Beneficial

Ownership

(Instr. 5)

Direct (D) or Indirect (I) (Instr. 5)

Common Stock (1)

0

D

Â

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.

SEC 1473 (7-02)

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security

Expiration Date

2. Date Exercisable and 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)

4. 5. Ownership Conversion or Exercise Form of

6. Nature of Indirect Beneficial Ownership

(Instr. 5)

Price of Derivative

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Date Expiration Title Exercisable Date

Amount or Security Number of Shares Direct (D) or Indirect (I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

DARRETTA ROBERT J C/O UNITEDHEALTH GROUP INCORPORATED 9900 BREN ROAD EAST MINNETONKA, MNÂ 55343

X Â Â Â

Signatures

Dannette L. Smith for Robert J. Darretta

04/27/2007

**Signature of Reporting Person

Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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) Does not include shares and options reported on Mr. Darretta's Form 4 filed April 19, 2007.

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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