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UNITEDHEALTH GRO Form 4 January 03, 2008	UP INC	-								
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							-	9PROVAL 3235-0287		
if no longer subject to Section 16. Form 4 or Form 5 Filec obligations may continue. See Instruction 1(b).	Expires: Estimated burden hou response	urs per								
(Print or Type Responses)										
1. Name and Address of Repo RYAN ROBERT L	2. Issuer Name and Ticker or Trading Symbol UNITEDHEALTH GROUP INC [UNH]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
			of Earliest T Day/Year) 2008	ransaction		XDirector Officer (give below)		% Owner her (specify		
(Street)	(Street) 4. If Amendment, Date O Filed(Month/Day/Year)			-	Applicable Line) _X_ Form filed by C			int/Group Filing(Check		
MINNETONKA, MN 55	5343					Form filed by I Person	More than One R	eporting		
(City) (State)	(Zip)	Tał	ole I - Non-l	Derivative	Securities	Acquired, Disposed o	of, or Beneficia	lly Owned		
1.Title of Security2. Transaction Date (Month/Day/Year)2A. Deeme Execution any (Month/Da(Instr. 3)any (Month/Da		n Date, if	Date, if Transactio Code		ies (A) or of (D) 4 and 5) (A) or (D) Pric	Securities I Beneficially (Owned (Following (Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect		
Reminder: Report on a separat	e line for each c	lass of sec								

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)

1. Title of Derivative Security (Instr. 3)	vative Conversion (Month/Day/Year) Execution rity or Exercise any		Execution Date, if	4. Transactio Code (Instr. 8)	5. Number on f 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 Amour Underlying Securit (Instr. 3 and 4)			
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amo or Num of Share		
Non-Qualified Stock Option (right to buy)	\$ 56.67	01/02/2008		А	5,000		01/02/2008	01/02/2018	Common Stock	5,0		
Reporting Owners												
Reporting Owner Name / Address			Directo		tionships wner O	;)fficer	Other					
RYAN ROBER C/O UNITEDH 9900 BREN RO MINNETONKA	EALTH GI DAD EAST	ROUP INCORPO	RATED X									
Signature	es											
By: Dannette L. Smith, Attorney-In-Fact For: Robert L. Ryan			r: Robert L.	01.	/03/2008	8						
<u>**</u> Signature of Reporting Person					Date							
Evenlenet	lan af	Deeree										

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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.