## Edgar Filing: LAWSON RODGER A - Form 4

LAWSON RO Form 4 April 05, 201												
FORM	Λ									PPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287				
Check this									Expires:	January 31,		
subject to				GES IN BENEFICIAL OWNERSHIP (				<b>NERSHIP OF</b>	Estimated a	2005		
				SECUR	SECURITIES					irs per		
Form 5	Filed p	oursuant to S	Section 16	b(a) of the	e Securiti	es Ex	cchang	ge Act of 1934,	response	0.0		
obligation may contin <i>See</i> Instrue	s Section 1	7(a) of the		ility Hold	ing Com	pany	Act o	f 1935 or Sectio	n			
1(b).	ction	( )			1.	, 						
(Print or Type R	esponses)											
1. Name and Address of Reporting Person *       2. Issuer         LAWSON RODGER A       Symbol				lssuer Name <b>and</b> Ticker or Trading bol				5. Relationship of Reporting Person(s) to Issuer				
UN			-	DHEALT	H GROU	IP IN	C	(Check all applicable)				
(Last)	(First)	irst) (Middle) 3. Date of Ea			Earliest Transaction			X Director 10% Owner				
(Month			(Month/Da	Ionth/Day/Year)				Officer (give title Other (specify below) below)				
C/O UNITEI			04/01/20	)11				below)	below)			
GROUP, 990	00 BREN ROA	AD EAST										
			th/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>					
Filed(Month												
MINNETON	IKA, MN 553	43							More than One Re			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned		
1.Title of	2. Transaction I	Date 2A. Dee	emed	3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Ye	ear) Execution	Execution Date, if		onAcquired				Form: Direct	Indirect		
(Instr. 3)		any (Month)	CodeDisposed of (D)/Day/Year)(Instr. 8)(Instr. 3, 4 and 5)			Beneficially Owned		Beneficial Ownership				
		(WORLD	Day/Tear)	ear) (Instr. 8) (Instr. 3, 4 and 5)						(Instr. 4)		
				(A)				Reported				
						or		Transaction(s) (Instr. 3 and 4)				
G				Code V	Amount	(D)	Price	(Insu: 5 and 4)				
Common Stock	04/01/2011			А	477 <u>(1)</u>	А	\$0	6,746	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. Transactic Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Under Secur	unt 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						
	Director	Director 10% Owner O		Other			
LAWSON RODGER A C/O UNITEDHEALTH GROUP 9900 BREN ROAD EAST MINNETONKA, MN 55343	Х						
Signatures							
Dannette L. Smith, Attorney-in-Fa Lawson	04/05/2011						
<u>**</u> Signature of Reporting F		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).
- Represents deferred stock units that are granted as regular quarterly compensation for service as a director of UnitedHealth Group. (1) Deferred stock units are immediately vested, but must be retained by the director until departure from the Board.

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.