UNITED THERAPEUTICS Corp

Stock

Common

Common

Stock (1)

Form 4

December 28, 2015

December 2	8, 2015											
FORM	1 <u>4</u>								PPROVAL			
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check the if no long subject to Section 1	ger o STATEM 16.	, and the second	BENEF		AL OWI	NERSHIP OF	Expires: Estimated a burden houresponse	rs per				
Form 4 or Form 5 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 * 2. Issued Symbol				uer Name and Ticker or Trading l				5. Relationship of Reporting Person(s) to Issuer				
UNITED [UTHR]				TED THERAPEUTICS Corp HR]				(Check all applicable)				
(Last) (First) (Middle) 3. Date of (Month/D				ransaction			X Director 10% Owner X Officer (give title Other (specify below)					
C/O UNITED THERAPEUTICS 12/23/2015 President & Co-CEO CORPORATION, 1040 SPRING STREET)					
(Street) 4. If Amer Filed(Mon				ate Origina	1		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
SILVER SPRING, MD 20910 — Form filed by Mo						Iore than One Re	porting					
(City)	(State)	(Zip)	Table I - Non-l	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Dat any (Month/Day/Y	Code	4. Securi or(A) or D (Instr. 3,	ispose	ed of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)				
Common			Code V	Amount		Price	(Instr. 3 and 4)					
Stock	12/23/2015		M	5,000	A	\$ 65.8	5,559	D				
Common Stock	12/23/2015		D	5,000	D	\$ 159.9	559	D				

19,760

6,773

I

I

By trust

By Jeffs

Family

LLC

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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 1474 (9-02)

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4. 5. Number		6. 1	6. Date Exercisable and		7. Title and Amount of	
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction Derivative			Expiration Date		Underlying Securities	
Security	or Exercise		any	Code Securities		(M	(Month/Day/Year)		(Instr. 3 and 4)	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8) Acquired						
	Derivative				(A) or					
	Security			Disposed of						
				(D)						
				(Instr. 3, 4,		,				
				and 5)						
										Amount
						Da	ate	Expiration	Title	or Namel
						Ex	ercisable	Date	Title	Number
				C-1- V	(A) (D)					of
				Code V	(A) (D)	,				Shares
Share										
Tracking	\$ 65.8	12/23/2015		M	5.00	0 03	2/15/2012	03/15/2021	Common	5,000
C	\$ 05.6	12/23/2013		1V1	3,00	03	3/13/2012	03/13/2021	Stock	3,000
Award										

Reporting Owners

Reporting Owner Name / Address	Relationships						
and the second of the second o	Director	10% Owner	Officer	Other			
JEFFS ROGER C/O UNITED THERAPEUTICS CORPORATION 1040 SPRING STREET SILVER SPRING, MD 20910	X		President & Co-CEO				

Signatures

/s/ John S. Hess, Jr. under Power of
Attorney

**Signature of Reporting Person

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) Shares held by a family limited liability company of which the reporting person and his spouse are managing members.

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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