United Continental Holdings, Inc.

Form 4

February 24, 2015

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB

3235-0287 Number: January 31, Expires:

2005

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

See Instruction

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

1(b).

Stock

(Print or Type Responses)

| 1. Name and Address of Reporting Person * COMPTON JAMES E | | | Symbol | r Name and Ticker or Trading Continental Holdings, Inc. | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | | |
|---|---|---------------------|------------------------------|---|---|--|--|--|--|--|--|--|
| (Last) (First) (Middle) P. O. BOX 66100 HDQLD | | | 3. Date of (Month/D 02/21/20 | | Director 10% Owner Officer (give title Other (specify below) below) Vice Chair & Chief Rev Officer | | | | | | | |
| | | (Street) | | endment, Date Original nth/Day/Year) | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | | | | |
| | CHICAGO, (City) | | Zip) Tobl | lo I. Non Donivotivo Commities As | Form filed by More than One Reporting Person | | | | | | | |
| | (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | |
| | 1.Title of | 2. Transaction Date | 2A. Deemed | 3. 4. Securities Acquired | | | | | | | | |
| | Security | (Month/Day/Year) | Execution Date, if | Transaction(A) or Disposed of (D) | | | | | | | | |
| | (Instr. 3) | | any (Month/Day/Voor) | Code (Instr. 3, 4 and 5) | Beneficially (D) or Beneficial | | | | | | | |
| | | | (Month/Day/Year) | (Instr. 8) | Owned Indirect (I) Ownership Following (Instr. 4) (Instr. 4) | | | | | | | |
| | | | | (A) or Code V Amount (D) Price | Reported Transaction(s) (Instr. 3 and 4) | | | | | | | |
| | Common Stock | 02/21/2015 | | $F_{(1)} = 4,322 D = \frac{\$}{68.01}$ | 68,117 D | | | | | | | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

68.01

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. Transactio Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) | 8 | ate | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | of ng s | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|--|---|---------------------|--------------------|---|---------------|---|---|
| | | | | Code V | (Instr. 3, 4, and 5) (A) (D) | Date Exercisable | Expiration Date | or Title Nu of | umber | | |

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

COMPTON JAMES E P. O. BOX 66100 HDQLD CHICAGO, IL 60666

Vice Chair & Chief Rev Officer

Signatures

/s/ Jennifer L. Kraft for James E.

Compton 02/24/2015

**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) This transaction represents the withholding of shares to pay tax withholding obligations associated with the vesting of the restricted stock award granted on February 21, 2013. This award vests in three equal annual installments.

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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