Edgar Filing: UNITED THERAPEUTICS Corp - Form 4

UNITED TH Form 4 April 10, 201	IERAPEUTICS	Corp										
	1 /									PPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE CON Washington, D.C. 20549							OMMISSION	OMB 3235-02 Number:				
Check th if no long	TOP.						Expires:	January 31, 2005				
subject to Section 1 Form 4 o	6. SIAIE A	STATEMENT OF CHANGES IN BENEFICIAL OWNE SECURITIES								Estimated average burden hours per response 0.		
Form 5 obligatio may cont <i>See</i> Instru 1(b).	ns Section 170	(a) of the	Public U		ling Con	ipany	Act of	e Act of 1934, 1935 or Section 0	n			
(Print or Type I	Responses)											
1. Name and Address of Reporting Person <u>*</u> CAUSEY CHRISTOPHER			2. Issuer Name and Ticker or Trading Symbol UNITED THERAPEUTICS Corp [UTHR]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
	D THERAPEUT TION, 1040 SPF		04/06/2	017				below)	Delow)			
				endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
SILVER SP	RING, MD 2091	10						Form filed by M Person	Iore than One Re	porting		
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	curities Acquired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)	any		med on Date, if Day/Year)	3. 4. Securi Transaction(A) or Di Code (Instr. 3, (Instr. 8)		4 and 5)		5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				
Common Stock	04/06/2017			M <u>(1)</u>	500	A	\$ 51.77	1,475	D			
Common Stock	04/06/2017			D <u>(1)</u>	500	D	\$ 122	975	D			
Common Stock	04/06/2017			M <u>(1)</u>	750	A	\$ 54.77	1,725	D			
Common Stock	04/06/2017			D <u>(1)</u>	750	D	\$ 122	975	D			

Edgar Filing: UNITED THERAPEUTICS Corp - Form 4

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)

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. 5. Number Transaction Code Derivative (Instr. 8) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. l De Sec (In	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Share Tracking Award	\$ 51.77	04/06/2017		M <u>(1)</u>		500	06/28/2011	06/28/2020	Common Stock	500	
Share Tracking Award	\$ 54.77	04/06/2017		M <u>(1)</u>		750	06/29/2012	06/29/2021	Common Stock	750	

Reporting Owners

Reporting Owner Name / Address		Relationships						
	Director	10% Owner	Officer	Other				
CAUSEY CHRISTOPHER C/O UNITED THERAPEUTICS CORPORATION 1040 SPRING STREET SILVER SPRING, MD 20910	X							
Signatures								
/s/ John S. Hess, Jr. under Power of Attorney	04/10/2017	7						
**Signature of Reporting Person	Date							
Explanation of Poononcool								

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 exercise of share tracking awards was pursuant to a Rule 10b5-1 trading plan entered into by the reporting person.

Edgar Filing: UNITED THERAPEUTICS Corp - Form 4

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.