UNITED THERAPEUTICS Corp

Form 4 May 16, 2016

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

OMB APPROVAL

Expires:

January 31, 2005

0.5

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obligations

may continue.

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 See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * ZACCARDELLI DAVID	2. Issuer Name and Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer		
	UNITED THERAPEUTICS Corp [UTHR]	(Check all applicable)		
(Last) (First) (Middle) C/O UNITED THERAPEUTICS CORP., 1040 SPRING STREET	3. Date of Earliest Transaction (Month/Day/Year) 05/13/2016	Director 10% Owne _X Officer (give title Other (spectobelow) EVP & Chief Operating Officer		
(Street)	4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person		
SILVER SPRING, MD 20910		Form filed by More than One Reporting Person		

(City)	(State)	(State) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactio Code (Instr. 8)	4. Securit onor Dispos (Instr. 3,	ed of (` ′	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	05/13/2016		Code V $\mathbf{M}^{(1)}$	Amount 10,750	(D)	Price \$ 47.5	12,292	D			
Common Stock	05/13/2016		M(1)	11,500	A	\$ 61.06	23,792	D			
Common Stock	05/13/2016		M(1)	64,000	A	\$ 65.8	87,792	D			
Common Stock	05/13/2016		M(1)	25,000	A	\$ 94.96	112,792	D			
Common Stock	05/13/2016		D(1)	10,750	D	\$ 111.48	102,042	D			

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Common Stock	05/13/2016	D <u>(1)</u>	11,500	D	\$ 111.48	90,542	D
Common Stock	05/13/2016	D(1)	64,000	D	\$ 111.48	26,542	D
Common Stock	05/13/2016	D(1)	25,000	D	\$ 111.48	1,542	D

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

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(9-02)

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. Transaction Code (Instr. 8)	5. Number of onDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		rivative Expiration Day/Y curities (Month/Day/Y quired (A) Disposed of) str. 3, 4,		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Share Tracking Award	\$ 47.5	05/13/2016		M(1)		10,750	03/15/2013	03/15/2022	Common Stock	10,750
Share Tracking Award	\$ 61.06	05/13/2016		M(1)		11,500	03/15/2014	03/15/2023	Common Stock	11,500
Share Tracking Award	\$ 65.8	05/13/2016		M(1)		64,000	03/15/2012	03/15/2021	Common Stock	64,000
Share Tracking Award	\$ 94.96	05/13/2016		M(1)		25,000	03/14/2015	03/14/2024	Common Stock	25,000

Reporting Owners

Reporting Owner Name / Address	Keiauonsnips							
	Director	10% Owner	Officer	Other				
ZACCARDELLI DAVID			EVP & Chief					
C/O UNITED THERAPEUTICS CORP.			Operating					

Reporting Owners 2

Dolotionshin

1040 SPRING STREET SILVER SPRING, MD 20910 Officer

Signatures

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

05/16/2016

**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) Exercise of a cash-settled share tracking award pursuant to a Rule 10b5-1 trading plan entered into by the reporting person.

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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