FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 1(b)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* KENNEDY JAMES A C				2. Issuer Name and Ticker or Trading Symbol <u>United Airlines Holdings, Inc.</u> [UAL]						(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
INDIVIDED I STAINLES II C					<u> </u>								X Directo	r		10% Ov	ner
				3. Date of Earliest Transaction (Month/Day/Year) 05/27/2021							Officer below)	(give title		Other (s below)	pecify		
P. O. BOX 66100 HDQLD					35,27,2321												
					4. If Amendment, Date of Original Filed (Month/Day/Year)						6. 1	6. Individual or Joint/Group Filing (Check Applicable					
(Street)						,		3		(,,	Line))	·			
CHICAG	GO IL		60666										X Form fi	led by One	Repor	ting Persor	1
												Form filed by More than One Ro Person				ting	
(City)	(S	tate)	(Zip)														
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
4 700 - 66									<u> </u>				5. Amour				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				ate	Execution Date,		Transaction Disposed Of (D) Code (Instr. 5)			Acquired (A) or (D) (Instr. 3, 4 and		s ally	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
							y, i cai ,			1	Reported	ı " ''`			Instr. 4)		
								Code	٧	Amount	(A) or (D)	Price	Transacti (Instr. 3 a				
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/Yea	Cod	saction e (Instr.			6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Cod	e V	(4)		Date Exercisal		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)			
Chaus				Cou	- V	(A)	(D)	EACICISAL	ne L	Date			-		-		
Share Units	(1)	05/27/2021		A		2,904 ⁽²⁾		05/27/202	22 (05/27/2022	Common Stock	2,904	\$0.00	2,904		D	

Explanation of Responses:

- 1. Each share unit represents the economic equivalent of one share of common stock. Upon vesting, the share units are settled (i) 50% in cash based on average of the high and low sale prices of a share of the Company's common stock on the date of settlement (or the average of the high and low sale prices of the common stock on the preceding trading day if the settlement date is not a trading day) and (ii) 50% in shares of the Company's common stock, with any odd or fractional units rounded toward the share units to be settled in cash.
- 2. Additional share units accrue when and as dividends are paid on the Company's common stock. The number of share units accrued will be equal to the dollar amount of dividends that would be payable if the share units were actual shares of common stock, divided by the average of the high and low sale prices of a share of the Company's common stock on the date dividends are paid.

Remarks:

/s/ Sarah Hagy for James A.C. <u>Kennedy</u>

06/01/2021

** Signature of Reporting Person

Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.