FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

vvasimigtori	, D.O. 200-t	•

l	OMB APPROVAL										
l	OMB Number:	3235-0287									
l	Estimated average burd	en									
l	hours per response:	0.5									

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*						2. Issuer Name and Ticker or Trading Symbol United Continental Holdings, Inc. [UAL]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>Foland Jeffrey T.</u>						Office Continental Holdings, Inc. [OAL]										Direc	ctor	100	% Owne	er	
															X	Offic	er (give title	Oth	er (spe	ecify	
(Last)	(Fii	ret) (Middle)		3. Da	3. Date of Earliest Transaction (Month/Day/Year)									Λ	belov	ow) below)				
	`	,	wiidaic)		02/25/2014											EV	/P- Mktg,	Tech and S	rgy		
P. O. BOX 66100 HDQLD																					
						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street)			1											Line)							
CHICAGO IL		(60666												X	Forn	orm filed by One Reporting Person				
																	n filed by Mor	e than One F	eportir!	ng	
(City)	(St	ate) (Zip)												Person						
		Tabl	e I - Nor	า-Deriva	ative	Sec	uritie	s Acc	quired,	Dis	posed o	f, o	r Ben	eficia	ally	Owne	ed				
1. Title of S	Security (Inst	r. 3)		2. Transa	ction									5. Am	ount of	6. Ownershi	o 7.1	7. Nature			
=: o: ocou; (o o,				Date (Month/Day/Year)) if	Execution Date, if any (Month/Day/Year)		Code (Instr. 5)		l Of (D) (Instr. 3, 4			Bene Own		cially d Following	Form: Direc (D) or Indire (I) (Instr. 4)	ct Bei	of Indirect Beneficial Ownership		
								Code	v	Amount		(A) or Dr			Repor Transa	ted action(s)		(Ins	(Instr. 4)		
									Code	L_	Amount		(D)	Price		(Instr.	3 and 4)				
Common Stock 02/25/					/2014			F ⁽¹⁾		1,090) D \$		\$47	52,856		2,856	D				
		Та	ıble II - [Derivati	ve Se	cur	ities	Acqu	ired, D	ispo	sed of,	or E	enefi	ciall	y Ov	vned		,			
			(e.g., pu	ıts, ca	alls,	warra	ants,	option	s, c	onvertib	le s	ecuri	ties)							
1. Title of	2.	3. Transaction Date (Month/Day/Year)	3A. Deem		4.	.4:	5. Number		6. Date Exercisable and 7. Title and						ice of	9. Number o			11. Nature of Indirect Beneficial Ownership (Instr. 4)		
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security		Execution if any (Month/Da		Code (Ins				Expiration Date (Month/Day/Year)			Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	Secu (Inst	ırity :	derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownersh Form: Direct (I) or Indire (I) (Instr.		Be Ow ct (In:	
Code V		V	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nur of	ount mber ares											

Explanation of Responses:

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 25, 2011. This award vests in three equal annual installments.

Remarks:

/s/ Jennifer L. Kraft for Jeffrey

T. Foland

<u>02/27/2014</u> erson Date

** Signature of Reporting Person

Signature of Reporting Person

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.