FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OIVIB APPROVAL									
	OMB Number:	3235-0287								
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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

					01 000		or tire	mvesamem	Compe	ally 7 loc	01 10-10						
1. Name and Address of Reporting Person* TAGUE JOHN P					2. Issuer Name and Ticker or Trading Symbol UAL CORP /DE/ [UAUA]						5. R (Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
IAGU	E JUHN I	<u>Ľ</u>						_ [- 1				Directo	r		10% Ow	ner
				$-\vdash$										(give title		Other (s	pecify
(Last)	(F	irst)	(Middle)				Trans	action (Mon	th/Day	y/Year)			below)			below)	
P.O. BO	X 66100			10	2/23/2	2006							EVP-M	larketing,	Sale	s & Reven	ue
1.0. DO	1 00100																
				— 4.	. If Ame	endment, [Date o	f Original Fil	led (Mo	Ionth/Da	y/Year)		dividual or J	oint/Group	Filing	(Check App	licable
(Street)												Line	,				
CHICAC	GO II	_	60666									-	X Form fi	led by One	Repo	rting Person	
				I									Form fi Person		e than	One Report	ing
(City)	(S	itate)	(Zip)										Person				
		Та	ble I - Non-D	erivati	ve Se	ecurities	s Ac	quired, D	ispo	osed o	f, or Be	neficiall	y Owned				
1. Title of	Security (Ins	tr. 3)	2. 1	ransactio	on	2A. Deem	ed	3.	4	4. Securit	ties Acquire	ed (A) or	5. Amour	nt of	6. Ov	nership 7	7. Nature of
1. The or occurry (mon. o)				(Month/Day/Year)		Execution Date, if any (Month/Day/Yea		Code (Instr.		d Of (D) (Instr. 3, 4 and		5) Securities Beneficially				Indirect Beneficial	
			I (MC									Owned F	ollowing (l) (In			Ownership	
										(A) o	,		Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
							Code	V Amount		(a) (b)	Price	(Instr. 3 a					
			Table II Day		- 6		A	uinad Die			D	- £ : - : - II	O				
			Table II - Dei										Owned				
			(e.ç	ı., puis	s, cai	is, warr	anıs	, options	, cor	nverui	oie secu	irities)					
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Number of		6. Date Exercisable and			7. Title and		8. Price of	9. Number of		10.	11. Nature
Derivative Conversion Security or Exercise (Month/Day/Year) Price of Derivative Security Date (Month/Day/Year) (Month/Day/Year) Execution Date, if any (Month/Day/Year)		e, Transaction Code (Instr.				Expiration Date of Securities (Month/Day/Year) Underlying				Derivative Security	derivative Securities		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial			
		(Month/Day/Year)			Acquired (A) or Disposed of (D) (Instr.		Derivative Secu (Instr. 3 and 4)			Security	(Instr. 5)	Beneficially		Ownership			
										nd 4)		Owned Following		(Instr. 4)			
Jecuny				3, 4 and 5)									Reported		(1) (11150. 4)		
									$\overline{}$			Amount	1	Transaction(s) (Instr. 4)	on(s)		
							Ш		Ι.			or		(1115111.4)			
				Code	v	(A)	(D)	Date Exercisable		oiration e	Title	Number of Shares					
Option							П		İ		C		i				
(right to	\$35.91	02/23/2006		A		109,667		(1)	02/0	01/2016	Common Stock	109,667	\$0	109,66	57	D	

Explanation of Responses:

1. Options vest in equal installments on August 1, 2006; February 1, 2007; February 1, 2008; February 1, 2009; and February 1, 2010.

/s/ Paul D. Zier for John P.

02/24/2006

<u>Tague</u>

** 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.