FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, D | D.C. 20549 |
|---------------|------------|
|---------------|------------|

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|-----------|-------------------|---------------|------------------|
| | | | |

| | OMB APPROVAL | | | | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | | | |
| | Estimated average burden | | | | | | | | | | |
| - | hours ner resnonse. | 0.5 | | | | | | | | | |

of Indirect

Beneficial

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 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) 1. Name and Address of Reporting Person* 2. Issuer Name and Ticker or Trading Symbol United Continental Holdings, Inc. [UAL] **Bonds Michael P** Director 10% Owner Officer (give title Other (specify below) below) 3. Date of Earliest Transaction (Month/Day/Year) (Last) (First) (Middle) 02/23/2017 **EVP HR and Labor Relations** P. O. BOX 66100 HDQLD 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable (Street) Line) **CHICAGO** IL60666 Form filed by One Reporting Person Form filed by More than One Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) 1. Title of Security (Instr. 3) 2. Transaction 2A. Deemed 5. Amount of 6. Ownership 7. Nature Transaction Execution Date. Securities Form: Direct of Indirect Code (Instr. 8) (Month/Day/Year) if any Beneficially (D) or Indirect Beneficial (Month/Day/Year) Owned Following Ownership (I) (Instr. 4) Reported (Instr. 4) (A) or (D) Code Amount Price (Instr. 3 and 4) Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 1. Title of 11. Nature 3. Transaction 9. Number of 10. derivative Ownership

3A. Deemed 5. Number 6. Date Exercisable and 7. Title and 8. Price of Expiration Date **Execution Date** Transaction Amount of Derivative (Month/Day/Year) Derivative (Month/Day/Year) Code (Instr. Securities

| (Instr. 3) | Price of Derivative Security | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | (Month/Day/Year) | 8) | | Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | | Underlying Derivative Security (Instr. 3 and 4) | | (Instr. 5) | Beneficially Owned Following Reported Transaction(s) (Instr. 4) | Direct (D) or Indirect (I) (Instr. 4) | Ownership (Instr. 4) |
|---------------------|------------------------------------|---|------------------|------|---|--|-----|---------------------|--------------------|---|--|------------|--|---|-------------------------|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Restricted Stock | (1) | 02/23/2017 | | A | | 9,764 | | (2) | (2) | Common Stock | 9,764 | \$0.00 | 9,764 | D | |

Explanation of Responses:

- 1. Each restricted stock unit ("RSU") represents the economic equivalent of one share of UAL common stock and shall be settled in shares of UAL common stock upon vesting.
- 2. The RSUs vest in three installments of 3,254 RSUs on February 28, 2018, 3,255 RSUs on February 28, 2019 and 3,255 RSUs on February 28, 2020.

Remarks:

Derivative

Security

Conversion

or Exercise

Date

/s/ Jennifer L. Kraft for 02/27/2017 Michael P. Bonds

Security

Securities

Form:

** Signature of Reporting Person Date

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

if any

- * 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.