1. Name and Address of Reporting Person
   SHAPIRO EDWARD
   (Last) SHAPIRO
   (First) EDWARD
   (Middle) *
   P. O. BOX 66100 HDQLD
   (Street) CHICAGO
   (City) IL
   (State) 60666
   (Zip)

2. Issuer Name and Ticker or Trading Symbol
   United Airlines Holdings, Inc. [ UAL ]

5. Relationship of Reporting Person(s) to Issuer
   Director
   10% Owner
   Officer (give title below)
   Other (specify below)

3. Date of Earliest Transaction (Month/Day/Year)
   12/31/2020

4. If Amendment, Date of Original Filed (Month/Day/Year)

6. Individual or Joint/Group Filing (Check Applicable Line)
   X Form filed by One Reporting Person
   Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

<table>
<thead>
<tr>
<th>1. Title of Security (Instr. 3)</th>
<th>2. Transaction Date (Month/Day/Year)</th>
<th>3. Transaction Code (Instr. 8)</th>
<th>4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)</th>
<th>5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)</th>
<th>6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)</th>
<th>7. Nature of Indirect Beneficial Ownership (Instr. 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common Stock</td>
<td>12/31/2020</td>
<td>A</td>
<td>784.1</td>
<td>(A)</td>
<td>D</td>
<td>V (A)</td>
</tr>
</tbody>
</table>

Explanation of Responses:
1. The share units convert to shares of common stock on a 1-for-1 basis.
2. Represents 2020 quarterly retainer and meeting fees that the Reporting Person elected to defer into a share account pursuant to the terms of the Company's 2006 Director Equity Incentive Plan ("DEIP").
3. The shares units will be settled in common stock following the Reporting Person's separation from service in accordance with the terms of the DEIP.

Remarks:

/s/ Sarah Hagy for Edward L. Shapiro

01/05/2021

** 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).
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.