

Foland Jeffrey T.  
Form 3  
October 05, 2010

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,  
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section  
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Foland Jeffrey T.		(Month/Day/Year)	United Continental Holdings, Inc. [UAL]	
(Last)	(First)	(Middle)	10/01/2010	
P.O. BOX 66100 - HDQLD			4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
(Street)			(Check all applicable)	
CHICAGO, IL 60666			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner	6. Individual or Joint/Group Filing(Check Applicable Line)
(City)	(State)	(Zip)	<input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Form filed by One Reporting Person
			(give title below) (specify below)	<input type="checkbox"/> Form filed by More than One Reporting Person
			EVP - President, Mileage Plus	

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	5,800	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)

**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 control number.**

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable      Expiration Date	Title      Amount or Number of			

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				Shares		(I) (Instr. 5)	
Restricted Stock Units	Â (1)	Â (1)	Common Stock	41,361	\$ (2)	D	Â
Option (Right to Buy)	Â (3)	03/30/2019	Common Stock	25,800	\$ 4.86	D	Â
Option (Right to Buy)	Â (4)	08/01/2017	Common Stock	6,000	\$ 45.69	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Foland Jeffrey T. P.O. BOX 66100 - HDQLD CHICAGO, IL 60666	Â	Â	Â EVP - President, Mileage Plus	Â

## Signatures

/s/ Lydia J. Mathas for Jeffrey T.  
Foland

10/05/2010

\_\_Signature of Reporting Person

Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, *see* Instruction 5(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).
- (1) 24,161 restricted stock units vest in three equal annual installments beginning on April 1, 2011 and the remaining 17,200 restricted stock units vest in equal installments on April 1, 2011 and April 1, 2012.
  - (2) Each restricted stock unit represents the economic equivalent of one share of common stock and may be settled in cash or common stock upon vesting at the sole discretion of the Human Resources Subcommittee of the Company's Board of Directors.
  - (3) The option vests in three equal annual installments. The first installment vested on April 1, 2010. The second and third installment vest on April 1, 2011 and April 1, 2012, respectively.
  - (4) The option vests in three equal annual installments. The first two installments vested on February 1, 2009 and February 1, 2010, respectively. The third installment vests on February 1, 2011.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.