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UAL CORP /DE/  
Form 4  
April 24, 2003

**FORM 4**

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

OMB APPROVAL  
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\_\_\_ Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See instruction 1(b).  
*(Print or Type Responses)*

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP  
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

1. Name and Address of Reporting Person  Maher, Francesca M.		2. Issuer Name and Ticker or Trading Symbol  UAL Corporation (UAL)			6. Relationship of Reporting Person(s) to Issuer (Check all applicable) ___ Director ___ 10 % Owner <input checked="" type="checkbox"/> Officer (give title below) ___ Other (specify below)  <u>Senior Vice President-General Counsel and Secretary</u>					
(Last)(First) (Middle)  UAL Corporation-WHQLD P.O. Box 66100		3. IRS Identification Number of Reporting Person, if an entity (Voluntary)		4. Statement for Month/Day/Year  04/24/2003		7. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form Filed by One Reporting Person ___ Form filed by More than One Reporting Person				
(Street)  Chicago, IL 60666				5. If Amendment, Date of Original (Month/Day/Year)						
(City)(State) (Zip)		Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1. Title of Security (Instr. 3)	2. Transaction Date (Month / Day / Year)	2A. Deemed Execution Date, if any (Month / Day / Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock, \$.01 par value	Various dates between 9/30/02 and 3/17/03 (1)		J (1)		1,669.138	D	The price range at which the stock was sold was \$3.6497 to \$0.8209 (1)	2,636.9112	I	By ESOP Trustee
								1,649.5193	D	
								4,320	I	By Spouse

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).

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(Over)  
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FORM 4 (continued)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned  
(e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month / Day / Year)	3a. Deemed Execution Date, if any (Month / Day / Year)	4. Transaction Code (Instr. 8)			6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable					

Explanation of Responses: (1) Beginning on September 30, 2002 and ending on March 17, 2003, State Street, the trustee under UAL's Employee Stock Ownership Plan (ESOP), sold a total of 40,670,008 shares of UAL common stock held by the ESOP for varying prices that ranged between \$3.6497 to \$0.8209. When ESOP shares are sold, each participant's account in the ESOP is reduced proportionally based on the participant's percentage interest in the ESOP. The participants in the ESOP, including Francesca M. Maher, have no discretion with respect to the terms of any sale of ESOP shares, including the timing.

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations.

/s/ Mary Jo Georgen

4/24/03

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 provided is insufficient, see Instruction 6 for procedure.

\*\* Signature of Reporting Person for  
Francesca M. Maher

Date

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