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|OMB Number          3235-0104|
|Expires: December 31, 2001|
|Estimated avg. burden|
|hours per response....0.5|
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1.Name and Address of Reporting Person*			2.Date of Event Requiring Statement (Month/Day/Year)		4.Issuer Name and Ticker or Trading Symbol	
Howard	Gary	S.	01/30/02	UnitedGlobalCom, Inc. (UCOMA) fka New UnitedGlobalCom, Inc.		
(Last)	(First)	(MI)		5.Relationship of Reporting Person to Issuer (Check all Applicable)		
9197 South Peoria Street			3.IRS Identification Number of Reporting Person, if an entity (voluntary)	X Director 10% Owner		
(Street)				--- ---		
Englewood Colorado 80112			7.Individual or Joint/ Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person	Officer (give title below) Other (specify below)		
(City) (State) (Zip)				--- ---		
TABLE I - Non-Derivative Securities Beneficially Owned						

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[illegible]

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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 Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Own. Form of Deri. Sec. Dir. (D) or Ind. (I)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

Explanation of Responses:

**Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

/s/ Gary S. Howard

January 25, 2002

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
Gary S. Howard

Date

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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 OMD Number.