| F O R M 3 |

U.S. SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL	
OMB Number	3235-0104
Expires: December 31, 2001	
Estimated avg. burden hours per response	0.5

INITIAL 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(f) of the Investment Company Act 1940

1.Name and Address of Reporting Person*

Wildes Tina M.
(Last) (First) (MI)

4643 South Ulster Street, Suite 1300
(Street)

Denver Colorado 80237
(City) (State) (Zip)

2.Date of Event Requiring Statement (Month/Day/Year)
01/30/02

3.IRS Identification Number of Reporting Person, if an entity (voluntary)

4.Issuer Name and Ticker or Trading Symbol
UnitedGlobalCom, Inc. (UCOMA)
fka New UnitedGlobalCom, Inc.

5.Relationship of Reporting Person to Issuer (Check all Applicable)
X Director
X 10% Owner
X Officer (give title below)
Other (specify below)
Senior Vice President

6.If Amendment, Date of Original (Mon/Day/Year)

7.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 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)
Class A Common Stock	27,683	D	
Class A Common Stock	26,000	I	By spouse
Class A Common Stock	2,525	I	By 401(k) Plan & Spouse

Reminder: Report on a separate line for each class securities owned directly or indirectly.
*If the form is filed by more than one reporting person, see Instruction 5(b)(v).

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FORM 3 (continued)

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			
Class B Common	Immed.	n/a	Class A Common	16,956(1)	1 for 1	D	

Stock			Stock				
Stock Option (right to buy)	Immed.	07/22/03	Class A Common Stock	20,000	$2.25	D	
Stock Option (right to buy)	Immed.	12/19/02	Class A Common Stock	3,149	$5.9813	D	
Stock Option (right to buy)	Immed.	12/19/07	Class A Common Stock	47,404	$5.4375	D	
Stock Option (right to buy)	(2)	06/11/09	Class A Common Stock	84,000	$19.2813	D	
Stock Option (right to buy)	(3)	12/17/04	Class A Common Stock	6,458	$62.2875	D	
Stock Option (right to buy)	(3)	12/17/09	Class A Common Stock	43,542	$56.625	D	
Stock Option (right to buy)	Immed.	12/17/09	Class A Common Stock	24,000	$5.225	D	
Stock Option (right to buy)	Immed.	12/19/07	Class A Common Stock	4,000	$5.4375	I	By spouse
Stock Option (right to buy)	(3)	12/17/09	Class A Common Stock	10,000	$56.625	I	By spouse
Stock Option (right to buy)	(4)	12/06/10	Class A Common Stock	10,000	$14.8125	I	By spouse

Explanation of Responses:

(1) The Reporting Person is a party to a Founders Agreement. The securities reported herein do not include securities beneficially owned by other parties to said Agreement. The Reporting Person disclaims any beneficial ownership of such other parties' securities and this Report shall not be deemed an admission that the Reporting Person is the beneficial owner of such securities for the purposes of Section 16 or for any other purpose.

(2) The option is exercisable in 48 equal monthly installments commencing on June 11, 1999.

(3) The option is exercisable in 48 equal monthly installments commencing on December 17, 1999

(4) The option is exercisable in 48 equal monthly installments commencing on December 6, 2000.

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

/s/ Tina M. Wildes — January 24, 2002

**Signature of Reporting Person — Date

Tina M. Wildes

Note: File three copies of this form, one of which must be manually signed. If space provided is insufficient, see Instruction 6 for procedure.

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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.