FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Vashington, | D.C | 20549 | |
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| vasilliquui, | D.C. | 20049 | |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | OMB APPROVAL | | | | | | | | | | |
|-----|--------------------|-----------|--|--|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | | | |
| | Estimated average | burden | | | | | | | | | |
| - 1 | hours per response | 0.5 | | | | | | | | | |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* Rocker Kenyatta G | | | 2. Issuer Name and Ticker or Trading Symbol UNION PACIFIC CORP [UNP] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify | | | | | | | |
|---|--|--|--|---|---|---|--------|--|----------------------------|----------|--------------------|---|---|--|---|--|--------|---|--|
| (Last) (First) (Middle) 1400 DOUGLAS STREET | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/10/2022 | | | | | | | | | X Officer (give title Other (specify below) EVP MARKETING & SALES | | | | | |
| (Street) OMAHA (City) | | | 58179 Zip) | | 4. If <i>i</i> | Amend | ment, | Date o | of Origin | nal File | ed (Month/Da | ıy/Year | | 6. Indi Line) X | Form | r Joint/Grou filed by On filed by Mo on | e Repo | orting Pers | on |
| (Oity) | (00 | | | n-Deriva | tive \$ | Secu | rities | Acc | quirec | I, Dis | sposed of | , or E | 3enefi | cially | y Own | ed | | | |
| 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) Disposed Of (D) (Instr. 3, 4 5) | | | | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Direct of Indirect | 7. Nature of Indirect Beneficial Ownership | | | | |
| | | | | | | , | | Í | Code | v | Amount | (A) o | r Price | • | Report Transa (Instr. 3 | ed ction(s) 3 and 4) | | | (Instr. 4) |
| Common | Stock | | | 09/10/2 | 022 | | | | A ⁽¹⁾ | | 8.1758 | A | \$23 | 1.88 | 44,0 | 74.0953 |] | D | |
| Common | Stock | | | 09/10/2 | 022 | | | | A ⁽¹⁾ | | 3.1851 | A | \$23 | 1.88 | 970 |).1749 | | | by Spouse |
| Common | Stock | | | | | | | | | | | | | | | 350 | | I 1 | By Deferral Account |
| Common | Stock ⁽²⁾ | | | | | | | | | | | | | | 1,9 | 014.06 | | I 1 | by Managed Account |
| | 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) 1. Title of Derivative Security (Instr. 3) 2. Conversion Date (Month/Day/Year) 3. Transaction Date (Execution Date, if any (Month/Day/Year) | | | | tion Date, | | ransaction of ode (Instr. Derivat | | vative prities pired r osed) r. 3, 4 | 6. Date Expira (Mont | tion D | | te Amount of | | 8. Price of Derivative Security (Instr. 5) | | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | ly C | IO. Dwnership Form: Direct (D) or Indirect I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exerc | isable | Expiration Date | Title | Amour or Number of Shares | r | | | | | |

Explanation of Responses:

- 1. Purchase pursuant to the 2021 Employee Stock Purchase Plan.
- 2. Includes holdings in Union Pacific's Payroll-based and Tax-reduction stock ownership plans and 401(k) plan.

By: Trevor L. Kingston, Attorney-in-Fact For:

09/12/2022

Kenyatta G. Rocker

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