FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

1	OWIB APPROVAL										
	OMB Number:	3235-0287									
1	Estimated average hurden										

0.5

hours per response:

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

1. Name and Address of Reporting Person*						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) 02/07/2019							7	below)		belov F HR OFFIC	v)`	
(Street) OMAHA (City)			68179 (Zip)		4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
	`	,		n-Deri	vativ	e Se	curitie	s Ac	quired	Dis	posed of	f, or Ber	neficially	/ Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/L					Execution Date,		3. Transaction Code (Instr. r) 8) 4. Securities Acqu				5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a	ion(s)		(Instr. 4)	
Common Stock ⁽¹⁾ 02/07/						/2019		A		11,142	A	\$0.0	67,	098	D			
Common Stock 02/07/						2019			D		1,964	D	\$0.0	65,134		D		
Common Stock 02/07/						2019			F		1,793	D	\$161.5	7 63,	341	D		
Common Stock ⁽²⁾														3,121	.2714	I	By Deferral Account	
			Table II -						,		osed of, convertib		,	Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal	ble	Expiration Date	Title	Amount or Number of Shares					
Non- Qualified Stock Option (right to	\$161.57	02/07/2019			A		19,758		02/07/202	0 ⁽³⁾	02/07/2029	Common Stock	19,758	\$0.0	19,75	B D		

Explanation of Responses:

- 1. Performance retention unit award with a distribution ratio of 1:1. This award is payable only in shares of common stock with a three year vesting period from the grant date. The amount of shares in column 4 is the maximum number of shares that the reporting person is eligible to receive. The actual number of shares paid out at vesting, if any, depends on applicable performance criteria being met.
- 2. Represents conversion of restricted stock units to fully vested stock units with a distribution ratio of 1:1 Payable only in shares of common stock at termination of employment or a date certain.
- 3. This option becomes exercisable in three equal installments starting one year from the grant date.

By: Trevor L. Kingston, Attorney-in-Fact For: Elizabeth 02/11/2019 F. Whited

** 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.