FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. 20549 | |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | | |
| Estimated average burden | | | | | | | | | | |
| hours nor resnance | . 05 | | | | | | | | | |

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* <u>Edison Sheri H.</u> | | | | 2. Issuer Name and Ticker or Trading Symbol UNION PACIFIC CORP [UNP] | | | | | | | | | 5. Relationship of Reporting Person(s) to (Check all applicable) X Director 10% | | | | | | |
|--|---|--|---|--|--|--|--|-----------|--|------------|--|---|--|---|---|---|---------------------------------------|--|---------------------------------------|
| (Last) | (Fi | rst) (| Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/03/2023 | | | | | | | | | Office below | r (give title) | | Other (s below) | pecify |
| 1400 DOUGLAS ST. | | | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) OMAHA NE 68179 | | | | | | | | | | | | | Form | Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) (State) (Zip) | | | | Rul | Rule 10b5-1(c) Transaction Indication | | | | | | | | | | | | | | |
| | | | | | S s | Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | | | | | | | |
| | | Table | e I - Nor | า-Deriva | ative S | Seci | uritie | s Ac | quired, D | isp | osed | of, or E | ene | ficial | ly Owne | d | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | Execution Da | | | Code (Ins | tion Dispos | | rities Acquired (A ed Of (D) (Instr. 3, | | | Securiti Benefic Owned | 5. Amount of Securities Beneficially Dwned Following | | : Direct c r Indirect E str. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | Code | | | | v | Amoun | t (A) | or | Price | Reporte Transac (Instr. 3 | ction(s) | | | (Instr. 4) | | |
| | 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. Deem Execution if any (Month/D | n Date, | 4. Transac Code (In 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exerc Expiration D (Month/Day/ | ate | | 7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4) | | curity | . Price of Perivative Security Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | , | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisable | Exp Dat | oiration te | Title | or Nui of | mber ares | | | | | |
| Phantom Stock ⁽¹⁾ | \$0.0 | 07/03/2023 | | | A | | 218 | | (2) | | (2) | Commor Stock | 2 | 18 | \$0.0 | 1,236 | | D | |

Explanation of Responses:

- 1. Distribution ratio for Phantom Stock Units is 1:1.
- 2. Phantom Stock Units are payable in cash only commencing at retirement.

By: Trevor L. Kingston, Attorney-in-Fact For: Sheri H. 07/05/2023

** 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.