Edgar Filing: UNION PACIFIC CORP - Form 4

| UNION PAC Form 4 October 02, 2 | | | | | | | | |
|--|---|---|-------------------------------------|---|--|--|--|---|
| FORN | 1 / | | DITIES | | | COMMISSIO | N.T. | PPROVAL |
| Check th | UNITED | | ashington | | | COMMISSIO | Number: | 3235-0287 January 31, |
| if no long subject to Section 1 Form 4 o | 6. SIAIEN | IENT OF CHA | | BENEF | ICIAL OV | WNERSHIP OI | Expires: Estimated burden hou response. | 2005 average urs per |
| Form 5 obligation may cont <i>See</i> Instru 1(b). | ns Section 17(inue. action | | Utility Hol | ding Con | npany Act | nge Act of 1934, of 1935 or Secti 940 | | |
| | Address of Reporting | Symbo | uer Name an I N PACIFI | | - | 5. Relationship Issuer | of Reporting Per | rson(s) to |
| (Last) | (First) (1 | | of Earliest T | | | (Ch | eck all applicabl | e) |
| 1400 DOUC | (Month | (Month/Day/Year) 10/01/2015 | | | X_ Director 10% Owner Officer (give title Other (specify below) below) | | | |
| | (Street) | | nendment, D Ionth/Day/Yea | - | l | 6. Individual or Applicable Line) _X_ Form filed by | y One Reporting P | erson |
| OMAHA, N | IE 68179 | | | | | Form filed by Person | More than One R | eporting |
| (City) | (State) | (Zip) Ta | ble I - Non- | Derivative | Securities A | cquired, Disposed | of, or Beneficia | lly Owned |
| | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Code | 4. Securiti onAcquired Disposed (Instr. 3, 4 | (A) or of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | Code V | | (D) Price | (Instr. 3 and 4) | | |
| Reminder: Rep | ort on a separate line | for each class of se | curities bene | Person inform require | ns who res ation cont ed to respo | or indirectly. spond to the colle ained in this form ond unless the fo ntly valid OMB co | n are not rm | SEC 1474 (9-02) |

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of | 2. | 3. Transaction Date | 3A. Deemed | 4. | 5. Number | 6. Date Exercisable and | 7. Title and Amount of | 8. Price |
|-------------|-------------|---------------------|--------------------|------------|------------|-------------------------|------------------------|------------|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | Transactio | onof | Expiration Date | Underlying Securities | Derivativ |
| Security | or Exercise | | any | Code | Derivative | (Month/Day/Year) | (Instr. 3 and 4) | Security |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | Securities | | | (Instr. 5) |

number.

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| | Derivative Security | | | | Acqui (A) or Dispo of (D) (Instr. and 5) | sed 3, 4, | | | | | |
|----------------------|------------------------|------------|------|---|---|--------------|---------------------|--------------------|-----------------|--|------|
| | | | Code | V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| Phantom Stock (1) | \$ 0 | 10/01/2015 | А | | 499 | | (2) | (2) | Common Stock | 499 | \$ 0 |

Reporting Owners

| Reporting Owner Name / Address | | Relationsh | | | |
|--|-----------|-------------|---------|-------|--|
| 1 0 | Director | 10% Owner | Officer | Other | |
| MCLARTY THOMAS F III 1400 DOUGLAS STREET OMAHA, NE 68179 | Х | | | | |
| Signatures | | | | | |
| By: Haathar & Fradrick Attor | now in Fo | ot For Thor | nas E | | |

By: Heather A. Fredrick, Attorney-in-Fact For: Thomas F. 10/02/2015 McLarty III **Signature of Reporting Person

Explanation of Responses:

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).

(1) Distribution ratio for Phantom Stock Units is 1:1.

(2) Phantom Stock Units are payable in cash only commencing at retirement.

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

Date