| FORM | 4 |
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## Check this box if no longer subject to Section 16. Form 4 or

Form 5 obligations may continue.

See Instruction 1(b).

(Print or Type Responses)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** 

OMB Number: 3235-0287 Expires: February 28, 2018 Estimated average burden hours per response ..... 0.5

| 1. Name and Address of R           | 2. Issuer Name <b>and</b> Ticker or Trading Symbol |                             |   |   |        |   |   | 5. Relationship of Reporting Person(s) to Issuer<br>(Check all applicable) |  |   |  |  |              |
|------------------------------------|--|-----------------------------|---|---|--------|---|---|--|--|---|--|--|--------------|
| Lute, Jane H.                      | UNION PACIFIC CORPORATION (UNP)                    |                             |   |   |        |   |   |  | X Director   | 10% Owner   |  |  |              |
| (Last)<br>1400 Douglas St          | (First)  | (Middle)                    | Transac                                       | Date of Earliest<br>Transaction Required<br>to be Reported<br>Month/Day/Year)<br>07/03/2017 |        |   | <ol> <li>If Amendment,<br/>Date Original<br/>Filed(Month/Day/Year)</li> </ol> |  |  |   | Officer (give title below)                     | Other (specify below)                                    |              |
| Ometer NE (9170                    | (Street)   |                             |   |   |        |   |   |  | <ul> <li>6. Individual or Joint/Group Filing (Check App <u>X</u> Form filed by One Reporting Person Form filed by More than One Reporting</li> </ul> |   |  | on   |              |
| Omaha, NE 68179<br>(City)          | (State)  | (Zip)                       |   | Tablal  |        | on Doning   | the Co  |  |  |   | -  |  | orung Person |
|                                    |  |                             |   | I able I  | l - IN | on-Deriva   | uve See   | curities Ac  | cquirea, D   | isposed   | of, or Beneficially                            | Owned  |              |
| 1. Title of Security<br>(Instr. 3) |  | 2. Trans-<br>action<br>Date | 2A.<br>Deemed<br>Execution<br>Date, if<br>any | 3. Trans-<br>action<br>Code<br>(Instr. 8)   |        | 4. Securities Acquired (A)<br>or Disposed of (D)<br>(Instr. 3, 4 and 5) |   |  |  | 5. Amount of<br>Securities<br>Beneficially<br>Owned Following<br>Reported<br>Transaction(s) | 6. Owner-<br>ship<br>Form:<br>Direct<br>(D) or | 7. Nature of<br>Indirect<br>Beneficial<br>Owner-<br>ship |              |
|                                    |  | (Month/<br>Day/<br>Year)    | (Month/<br>Day/<br>Year)                      | Code  | v      | Amour   | nt  | (A) or<br>(D)  | Price  |   | (Instr. 3 and 4)                               | Indirect<br>(I)<br>(Instr. 4)                            | (Instr. 4)   |
|                                    |  |                             |   |   |        |   |   |  |  |   |  |  |              |
|                                    |  |                             |   |   |        |   |   |  |  |   |  |  |              |
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|                                    |  |                             |   |   |        |   |   |  |  |   |  |  |              |

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).

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 control Number.

## FORM 4 (continued)

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

| 1. Title of Derivative Security<br>(Instr. 3) | (Instr. 3)<br>Sion or action Deem<br>Exercise Date Execution |                          |   | Code Acquired (A) or<br>(Instr. 8) Disposed of (D) |   |                 |       | 6. Date Exer-<br>cisable and<br>Expiration Date<br>(Month/Day/ |                         | 7. Title and Amount of<br>Underlying Securities<br>(Instr. 3 and 4) |                                  | of<br>Deriv-<br>ative          | of deriva-<br>tive Se-<br>curities   | 10. Owner-<br>ship<br>Form of<br>Deriv-                                 | of<br>Indirect<br>Benefi-            |
|---|--|--------------------------|---|--|---|-----------------|-------|--|-------------------------|---|----------------------------------|--------------------------------|--|---|--------------------------------------|
|   | Deri-<br>vative<br>Security                                  | (Month/<br>Day/<br>Year) | Date,<br>if any<br>(Month/<br>Day/<br>Year) |  |   | (Instr. 3, 4 a  | nd 5) | Year)<br>Date<br>Exer-<br>cisable                              | Expira-<br>tion<br>Date | Title   | Amount or<br>Number of<br>Shares | Secur-<br>ity<br>(Instr.<br>5) | Benefici-<br>ally Own-<br>ed foll-<br>owing<br>Reported<br>Transac-<br>tion(s)<br>(Instr. 4) | ative<br>Security:<br>Direct<br>(D) or<br>Indirect<br>(I)<br>(Instr. 4) | cial<br>Owner-<br>ship<br>(Instr. 4) |
| Phantom Stock (1)                             | \$0.0000   | 07/03/17                 |   | Code<br>A  | - | (A)<br>303.0000 | (D)   |  |                         | Common Stock  | 303.0000                         | \$0.0000                       | 1,639.0000   | D   |                                      |
|   |  |                          |   |  |   |                 |       | (2)  | (2)                     |   |                                  |                                |  |   |                                      |
|   |  |                          |   |  |   |                 |       |  |                         |   |                                  |                                |  |   |                                      |
|   |  |                          |   |  |   |                 |       |  |                         |   |                                  |                                |  |   |                                      |
|   |  |                          |   |  |   |                 |       |  |                         |   |                                  |                                |  |   |                                      |
|   |  |                          |   |  |   |                 |       |  |                         |   |                                  |                                |  |   |                                      |
|   |  |                          |   |  |   |                 |       |  |                         |   |                                  |                                |  |   |                                      |
|   |  |                          |   |  |   |                 |       |  |                         |   |                                  |                                |  |   |                                      |
|   |  |                          |   |  |   |                 |       |  |                         |   |                                  |                                |  |   |                                      |
|   |  |                          |   |  |   |                 |       |  |                         |   |                                  |                                |  |   |                                      |
|   |  |                          |   |  |   |                 |       |  |                         |   |                                  |                                |  |   |                                      |

Explanation of Responses: See continuation page(s) for footnotes

\*\* 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.

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.

By: Heather A. Fredrick, Attorney-in-Fact For: Jane H. Lute

07/05/2017

\*\* Signature of Reporting Person

Date

Lute, Jane H.

1400 Douglas St

Omaha, NE 68179

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