FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL										
1	OMB Number:	3235-0287									
	Estimated average burde	en									
	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

1. Name and Address of Reporting Person* <u>EISELE CHARLES R</u>							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				
(Last) (First) (Middle) 1400 DOUGLAS STREET						Date 0 /26/2		Tran	saction (M	onth/I	Day/Year)	X	X Officer (give title below) Other (sp below)  SVP STRAT PLNG&ADMIN							
(Street) OMAHA NE 68179 (City) (State) (Zip)					4. 1	If Ame	ndment, I	Date	of Original	Filed	(Month/Day	Line)	i. Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting Person							
		Tal	ole I - Nor	ı-Deri	vativ	e Se	curitie	s Ac	quired,	Dis	posed o	f, or Bo	enefi	cially	Owned					
Date					saction /Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Yea		Code (Instr						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)		rice	Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)	
Common	01/2	01/26/2006				A		1,100	A		\$0	66,	,851		D					
Common	26/200	06			A		2,000	A		\$ <mark>0</mark>	68,	851		D						
Common Stock <sup>(3)</sup>															238.0832			I I	Managed 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. Deemed Execution D if any (Month/Day)	ate,	4. Transa Code ( 8)		5. Numb of Derivati Securiti Acquire (A) or Dispose of (D) (II 3, 4 and	ve es d ed	Expiration (Month/Days		•	7. Title and Amour of Securities Underlying Derivative Securit (Instr. 3 and 4)		urity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal	le	Expiration Date	Title	or Nur of	ount mber ares						
Non- Qualified Stock Option (right to buy) <sup>(4)</sup>	\$86.05	01/26/2006			A		10,800		01/26/200	7 <sup>(4)</sup>	01/26/2016	Commo Stock	10	,800	\$0	10,80	0	D		

## Explanation of Responses:

- 1. Retention unit award with a distribution ratio of 1:1. This award is payable only in shares of common stock with a four year vesting period from grant date.
- 2. 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.
- 3. Includes holdings in employee benefit plans, Tax Reduction and Payroll Based Stock Plans, as of Transaction Date.
- 4. This option becomes exercisable in three equal installments starting one year from the grant date.

By: Michael M. Hemenway, 01/30/2006 Attorney-in-Fact For: Charles R. Eisele

\*\* 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.