FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| STATEMENT | OF CHANGES | S IN BENEFIC | IAL OWNERS | HIP |
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| OMB APPRO |)VAL |
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| OMB Number: | 3235-0287 |
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| 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* MCCONNELL MICHAEL W | | | | 2. Issuer Name and Ticker or Trading Symbol UNION PACIFIC CORP [UNP] | | | | | | Relationship heck all appl X Direct | , | Person(s) to Iss | | | |
|--|--|------------|--|--|---|-----------------|--|---------------------|--|---|---|--|--|--|---------|
| (Last) (First) (Middle) BROWN BROTHERS HARRIMAN & CO. | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/01/2012 | | | | | | | Office below | r (give title) | Other (below) | specify |
| 140 BROADWAY | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | |
| (Street) NEW YO | ORK N | Y : | 10005-1101 | | | | | | | | X Form | , | | | |
| (City) | (S | tate) (| (Zip) | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | te | Execution Date | | Code (Instr. 5) | | | | Benefic | ies Fo ially (D Following (I) | rm: Direct or Indirect (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | Code | ' Amoun | t (A) c (D) | Price | Transac (Instr. 3 | | | ` ′ |
| | 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) | Conversion Date Exe or Exercise (Month/Day/Year) if a | | 3A. Deemed Execution Date if any (Month/Day/Yea | Code | Transaction of Code (Instr. Derivative | | 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 of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | · V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Phantom Stock ⁽¹⁾ | \$0 | 10/01/2012 | | A | | 701 | | (2) | (2) | Common Stock | 701 | \$0 | 24,600 | 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, 10/02/2012 Attorney-in-Fact For: Michael W. McConnell

** 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.