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UNION PAC	CIFIC CORP												
Form 4	5 2012												
November 05	ГЛ		SECUD		а . I					т	PPROVAL		
	UNITED	SIAIES				ND EX D.C. 2(NGE	COMMISSIO	Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction Section 17(a) of the Pu 30(h) of				GES SEC 5(a) o ility F	IN H URI f the Hold	BENER ITIES Securi	ge Act of 1934, of 1935 or Section	Expires: January Estimated average burden hours per response					
1(b).													
(Print or Type R	Responses)												
1. Name and Address of Reporting Person <u>*</u> KORALESKI JOHN J			2. Issuer Name and Ticker or Trading Symbol						5. Relationship of Reporting Person(s) to Issuer				
(Last)	(Last) (First) (Middle) 3. Date of Earliest Transaction				-	(Check all applicable)							
(Mo				3. Date of Earliest Transaction (Month/Day/Year) 11/04/2013					_X_ Director 10% Owner _X_ Officer (give title Other (specify below) below) PRESIDENT & CEO				
	(Street)		4. If Amer Filed(Mon			-	al		6. Individual or . Applicable Line) _X_ Form filed by	One Reporting Po	erson		
OMAHA, N	E 68179								Form filed by Person	More than One Ro	eporting		
(City)	(State)	(Zip)	Table	e I - No	on-De	erivative	Secur	ities Ac	quired, Disposed	of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any		Code (Instr	. 8)	4. Secu nAcquira Disposa (Instr. 3 Amoun	ed (A) c ed of (E 6, 4 and (A) or))	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common Stock (1)	11/04/2013			G	V	2,500	D	\$0	92,036	Ι	by Trust		
Common Stock									103,149	D			
Common Stock (2)									88,934.0845	Ι	(1)		
Common Stock									102,250	I	By Family LLC		
Common Stock									139,000	Ι	By Family LLC 2		

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Common Stock (3)	2,301.748	Ι	by Daughter
Common Stock	15,104	Ι	by GRAT I
Common Stock	15,104	Ι	by GRAT II
Common Stock (4)	4,657.8266	I	by Managed Account

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

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. Deemed Execution Date, if any (Month/Day/Year)	Execution Date, if TransactionNumber Expiration Dat ny Code of (Month/Day/Y		ate	Amor Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
Repo	rting O	wners									
Depenting	Our Nom	Adama	Rela	ationships							

Date

	Director	10% Owner	Officer	Other		
KORALESKI JOHN J 1400 DOUGLAS STREET OMAHA, NE 68179	Х		PRESIDENT	& CEO		
Signatures						
By: Trevor L. Kingston, Attorney-in-Fact For: John J. 11/05/2013 Koraleski						

**Signature of Reporting Person

Reporting Owner Name / Address

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) The reporting person made a gift of shares to a donor-advised charitable fund.
- (2) Represents conversion of restricted stock units to fully vested stock units with a distribution ratio of 1:1 Payable only in shares of common stock at termination of employment or a date certain.
- (3) The reporting person disclaims beneficial ownership of these securities. Includes shares acquired through dividend reinvestment.
- (4) Includes holdings in Union Pacific's Payroll-based and Tax-reduction stock ownership plans and 401(k) plan as of Transaction Date.

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.