Edgar Filing: UNION PACIFIC CORP - Form 4

UNION PAC	CIFIC CORP										
Form 4											
August 04, 2											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMMISSION	OMB APPROVAL		
		hington,					OMB Number:	3235-0287			
Check the	, 200 200 IS					Expires:	January 31				
if no longer subject to Section 16. Form 4 or Form 5 Filed pursuant to Section 1				GES IN	BENEF	ICIA	LOW	NERSHIP OF	Estimated a	2005 average	
				SECUR	ITIES				burden hours per		
				f(a) of the	- Coourit	ion D	wahana	a A at of 1024	response	0.5	
obligation	ns Section 1						•	f 1935 or Section	ı		
may cont See Instru	inue.		of the In	•	•	· ·	•				
1(b).					•	•					
(Print or Type I	Responses)										
1 Name and A	ddress of Reportir	ng Person *	2 1	. N	Ti-less en	T 1.		5 Relationship of	Reporting Per	son(s) to	
1. Name and Address of Reporting Person *2. IssEISELE CHARLES RSymbol				suer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
			-	PACIFIC	CORP	[UN	P]	(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of	Earliest Tr	ansaction			(Cnec	к ан аррисави)	
		_		Day/Year)				Director 10% Owner			
1400 DOUGLAS STREET 08			08/03/20	08/03/2005				XOfficer (give titleOther (specify below) below) SVP STRAT PLNG&ADMIN			
(Street) 4. If Amer				endment, Date Original			6. Individual or Joint/Group Filing(Check				
			Filed(Mon	th/Day/Year)			Applicable Line) _X_ Form filed by C	na Paparting D		
OMAHA, N	IE 68179							Form filed by N Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficia	lly Owned	
1.Title of	2. Transaction D	1					5. Amount of	6.	7. Nature of		
Security (Instr. 3)	(Month/Day/Yea	/Day/Year) Execution Date, if any			n(A) or Di (Instr. 3,	-			Ownership Form: Direct	Direct Beneficial Ownership	
(1130.3)	Day/Year)	Code (Instr. 8)	(1150.5,	i una	5)	Owned	(D) or				
								Following Reported	Indirect (I) (Instr. 4)	(Instr. 4)	
						(A)		Transaction(s)	(111501. 4)		
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock	08/03/2005			М	8,000	A	\$ 59.82	68,077	D		
Common Stock	08/03/2005			F	6,722	D	\$ 71.19	61,355	D		
Common Stock	08/03/2005			F	560	D	\$ 71.19	60,795	D		
Common Stock (1)								235.8215	I	by Managed Account	

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

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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)	4. 5. Number Transaction Derivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Ame Underlying Secu (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Ai or Ni of Sh
Non-Qualified Stock Option (right to buy)	\$ 59.82	08/03/2005		М	8,000	01/29/1999(2)	01/29/2008	Common Stock	8

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer		Other		
EISELE CHARLES R 1400 DOUGLAS STREET OMAHA, NE 68179			SVP STRAT P	LNG&ADMIN			
Signatures							
By: Thomas E. Whitaker, Attor Eisele	rles R.	08/04/2005					

**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) Includes holdings in employee benefit plans, Tax Reduction and Payroll Based Stock Plans, as of Transaction Date.
- (2) This option was granted 01/29/98 and became exercisable in equal installments on 01/29/99 and 01/29/00.

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