#### UNION PACIFIC CORP

Form 4

Common

Common

Stock (2)

Common

Common

Stock

Stock

Stock

December 07, 2006

FORM	ĺ 4								OMB AF	PPROVAL		
Washington, D.C. 20549									OMB Number:	3235-0287		
Check th if no long	zer	TE OF CHAI	IODG	TAT:	ATERCIAN OF	Expires:	January 31, 2005					
subject to Section 1 Form 4 o	6. <b>STATEME</b>	NT OF CHAP			BENEFI ITIES	CIA	LOW	NERSHIP OF	Estimated a burden hou response	verage		
Form 5 obligations may continue. See Instruction 1(b).  Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940												
(Print or Type I	Responses)											
1. Name and Address of Reporting Person * 2. Issu DAVIDSON RICHARD K Symbo				and	Ticker or	Tradin	g	5. Relationship of Reporting Person(s) to Issuer				
		UNION	N PAC	IFIC	CCORP	[UNF	<b>'</b> ]	(Checl	k all applicable	·)		
(Last)	(First) (Midd	,			ansaction			V. D.	100			
1400 DOUC	GLAS STREET	(Month/l 12/06/2	-	ar)				_X_ Director _X_ Officer (give below) CHAIRMA		Owner er (specify		
(Street) 4. If An Filed(M					te Original			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person _Form filed by More than One Reporting				
OMAHA, N	NE 68179							Person	ore than One Re	porting		
(City)	(State) (Zip	) Tab	le I - No	on-D	erivative S	Securi	ties Ac	quired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	an	ecution Date, if	3. Transa Code (Instr.	8)	4. Securit n(A) or Dis (D) (Instr. 3, 4)	sposed	of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock (1)	12/06/2006		G	V	12,640	D	\$0	186,480	I	by Trust		

86,694

27,542

54,729

146,598

508,851.9699 I

D

Ι

I

I

(1)

II

by GRAT

by GRAT

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Common Stock			by GRAT III
Common Stock (3)	5,496.6018	I	by Managed Account
Common Stock	11,920	I	by Spouse (4)

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.

SEC 1474

(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

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. Transa Code (Instr.	8)	5. In Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)
				Code	v	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships								
1	Director	10% Owner	Officer	Other					
DAVIDSON RICHARD K 1400 DOUGLAS STREET OMAHA, NE 68179	X		CHAIRMAN OF THE BOAR						

# **Signatures**

By: Trevor L. Kingston, Attorney-in-Fact For: Richard K.

Davidson

12/07/2006

\*\*Signature of Reporting Person

Date

Reporting Owners 2

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### **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 charitable contribution to a non-affiliated entity.
- (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) Includes holdings in employee 401(k) benefit plan as of Transaction Date.
- (4) The reporting person disclaims beneficial ownership of these securities.

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.