FORM	4
------	---

Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print of Type Responses)			T									
1. Name and Address of Reporting Person [*] PEAY D ANTHONY			2. Issuer Name a Union Banksha			0.	nbol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner			
(Last) (I C/O UNION BANKS CORPORATION, 105 SUITE 1200	3. Date of Earliest Transaction (Month/Day/Year) 07/31/2015						X_Officer (give title below) Other (specify below) EVP					
(S RICHMOND, VA 232	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (S	State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	(Instr. 8)		(A) or D (Instr. 3,	4 and 3 (A) or	l of (D) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock		07/31/2015		Code $A^{(1)}$	V	Amount 6,078	(D) A	Price \$ 24.68	31,777	(Instr. 4) D		
Common Stock									100	Ι	By spouse	
Common Stock									12,413.88	I	By Trustee of ESOP	

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

Persons who respond to the collection of information SEC 1474 (9-02) 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	2.	3. Transaction	3A. Deemed	4.	5.		6. Date Exer	rcisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	Nu	mber	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	of	of (Month/Day/Year) U		Unde	rlying	Security	Securities	Form of	Beneficial	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Der	rivative			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				Sec	Securities (1		(Instr. 3 and		Owned	Security:	(Instr. 4)		
	Security				Aco	quired			4)			Following	Direct (D)	
						(A) or					T T	or Indirect		
					Disposed							Transaction(s)		
						of (D)						(Instr. 4)	(Instr. 4)	
					(Instr. 3,									
					4, and 5)									
										Amount				
							Date	Expiration		or				
							Exercisable		Title	Number				
							Exercisable	Date		of				
				Code V	(A) (D)				Shares				

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
PEAY D ANTHONY C/O UNION BANKSHARES CORPORATION 1051 E. CARY STREET, SUITE 1200 RICHMOND, VA 23219			EVP				

Signatures

/s/ Rachael R. Lape, by power of attorney for D. Anthony Peay

**Signature of Reporting Person

08/04/2015 Date

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) Award of time-based restricted stock subject to a vesting schedule.

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.