FORM	4
------	---

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

(Drint or Type De

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

1. Name and Address of Reporting I BEALE G WILLIAM	2. Issuer Name and Ticker or Trading Symbol Union Bankshares Corp [UBSH]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X_ Director10% Owner			
(Last) (First) C/O UNION BANKSHARES CORPORATION, 1051 EAS STREET, SUITE 1200	3. Date of Earliest Transaction (Month/Day/Year) 02/25/2016						X_Officer (give title below) President and	_Other (specify CEO	below)	
(Street) RICHMOND, VA 23219	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) (State)	(Zip)	Ta	ble I - Noi	1-Dei	ivative So	ecuriti	ies Acqu	ired, Disposed of, or Beneficially	Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D (Instr. 3, 4 and 5)		d of (D)	Reported Transaction(s)	Form:	7. Nature of Indirect Beneficial	
		(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock	02/25/2016		А		10,831 (<u>1</u>)	А	\$ 22.62	88,644	D	
Common Stock								9,446	I	By Trustee of Non- Qualified Plan (deferred comp)
Common Stock								25,530	Ι	By spouse
Common Stock								24,262 (2)	Ι	By Trustee of ESOF

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

SEC 1474 (9-02)

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	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transacti	ion	Num	umber and Expiration Date A			Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of	(Month/Day/Year) U			Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Deriv	ative	tive		Securities		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Secur	rities	es ((Instr. 3 and			Owned	Security:	(Instr. 4)
	Security					Acqu	ired	1 Z		4)			Following	Direct (D)	
						(A) o	A) or					Reported	or Indirect		
						Disposed						Transaction(s)	(I)		
						of (D	D)					(Instr. 4)	(Instr. 4)		
						(Instr	· · · ·								
						4, and	d 5)								
											Amount				
								Dete	Down in the se		or				
									Expiration	Title	Number				
								Exercisable	Date		of				
				Code	V	(A)	(D)				Shares				

Reporting Owners

Relationships	

	Reporting Owner Name / Address	Director	10% Owner	Officer	Other
C 1	EALE G WILLIAM 7/0 UNION BANKSHARES CORPORATION 051 EAST CARY STREET, SUITE 1200 11CHMOND, VA 23219	Х		President and CEO	

Signatures

/s/ Rachael L. Lape, as attorney-in-fact for G. William Beale	02/29/2016	
**Signature of Reporting Person	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.
- (2) Includes shares allocated to the reporting person in connection with an employee stock ownership plan.

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.