FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

vest @

shares/year Employee stock

options

vest @

shares/year

700

\$ 27.87

700

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

Instructio	on 1(b).			1	nve	estm	ent	Com	pany Ac	toi	1940)								
(Print or Type	Responses)																			
1. Name and Address of Reporting Person* BEALE G WILLIAM				2. Issuer Name and Ticker or Trading Symbol UNION BANKSHARES CORP [UBSH]							5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director X_ Officer (give title below) Other (specify below) President & CEO								
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 01/21/2005																
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group FilingCheck Applicable Line) X_Form filed by One Reporting Person Form filed by More than One Reporting Person									
(City)		(State)	(Zip)					Table	I - Non-I	Deriva	tive	Securitie	s Acquir	ed, D	Disposed (of, or Benef	icially Owi	ned		
(Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, it any (Month/Day/Year		, if	3. Tra Code (Instr.		4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5) (A) or Amount (D)		(D) O	(D) Owned Followi Transaction(s) (Instr. 3 and 4)		ecurities Beneficially ing Reported		6. Owner Form: Direct or Indi (I) (Instr.	rship Indi Ben (D) Own rect (Ins	lature of rect eficial nership tr. 4)			
Common St	tock, \$2 Pa	ar Value	01/21/2005				P		12 (1)	A \$	3.51	40				I	Spo	ouse	
Common Stock, \$2 Par Value												2	,090)			I	for	stodian	
Common St	tock, \$2 Pa	ar Value										36,8	6,88	,881			D			
1. Title of Derivative Security 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Yea		3A. Deemed Execution Date,	4. 5. if Transaction Nu Code of (Instr. 8) De Sec Ac (A) Dis of of of the control			5. Num of Deri Secu Acqu (A) of Disp of (I	nber vative urities uired or oosed	6. Date I Expiration	options, convertible securities 5. Date Exercisable and Expiration Date Onoth/Day/Year) 7.		7. Title of Und Securit	itle and Amount (Inderlying parities (Instr. 5) In a and 4) 8. Price of Derivative Security (Instr. 5) Bene Own Folke Repc Tran		Derivative Securities Beneficial Owned Following Reported	titive Own titles Form locially Der d Sec ving Directed or Inaction(s) (I)	Ownership orm of Derivative ecurity: Direct (D) r Indirect	11. Natu of Indire Beneficia Ownersh (Instr. 4)			
				Co	de	V	(Inst 4, an		Date Exercisa	ble	Exp Date	oiration e	Title		Amount or Number of Shares					
Employee stock options vest @ 500 shares/year	\$ 12.8125							(-)		2002	01/	25/2011	Comn Stock Par Valu	non z, \$2	1,000		1,000		D	
Employee stock options	\$ 16								01/02/2	2003	01/	02/2012	Comn	-	2,100		3,100		D	

Par

Value

Common

Stock, \$2

Par

Value

3,500

6,600

D

01/23/2004 01/23/2013

Employee stock options vest @ 700	\$ 33.98				01/29/2005	01/29/2014	Common Stock, \$2 Par Value		10,100	D	
shares/year											l

Reporting Owners

B 41 0 N /	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
BEALE G WILLIAM	X		President & CEO						

Signatures

G. William Beale	02/08/2005
**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) Voluntary purchase by Administrator of DRIP/SPP.

 $Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, {\it see} \ Instruction 6 for procedure. \\$

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.