FORM 4	4
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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

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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 or Type Respor	nses)		1									
1. Name and Address of Reporting Person [*] BEALE G WILLIAM			2. Issuer Name a UNION BANK			C ,		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) 211 N. MAIN ST	3. Date of Earliest Transaction (Month/Day/Year) 02/02/2009						X Officer (give title below) Other (specify below) President & CEO					
(Street) BOWLING GREEN, VA 22427			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)			Table I - Non-Derivative Securities Acqu						ired, Disposed of, or Beneficially Owned			
1.Title of Security 2. Transaction (Instr. 3) Date (Month/Day/Yet)		Date (Month/Day/Year)		Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form:	Beneficial	
			(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)		Ownership (Instr. 4)	
Common Stock		02/02/2009		А		1,502 (<u>1)</u>	А	\$ 15.63 (2)	41,633 (3)	D		
Common Stock									25,316	Ι	By Spouse	
Common Stock									1,714	I	By self as custodian for children	
Common Stock									15,495	Ι	By Trustee of ESOP	
Common Stock									8,355	Ι	By Trustee of non- qualified plan	

 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

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

(<i>e.g.</i> , 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	Transact	ion	Num	ber	and Expiration Date		e Amount of		Derivative	Derivative	Ownership	of Indirect	
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day/Year)		(Month/Day/Year) Under		rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Deriv	ative	e		Securities		(Instr. 5)	Beneficially	Derivative	Ownership	
	Derivative					Secu	rities	s		(Instr. 3 and			Owned	Security:	(Instr. 4)	
	Security					Acqu	ired			4)			Following	Direct (D)		
						(A) o	r						Reported	or Indirect		
						Dispo	osed						Transaction(s)	(I)		
						of (D)						(Instr. 4)	(Instr. 4)		
						(Instr	. 3,									
						4, and	15)									
											Amount	1				
								D /	.		or					
									Expiration		Number					
								Exercisable	Date		of					
				Code	V	(A)	(D)				Shares					

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
BEALE G WILLIAM 211 N. MAIN STREET P.O. BOX 446 BOWLING GREEN, VA 22427	Х		President & CEO					

Signatures

/s/ G. William Beale	02/04/2009
**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) Performance stock awards based upon data for the period 2005-2008.
- (2) Price per share at close of business on 1/30/2009.
- (3) Includes 3,129 shares of restricted stock; reduced by 1,644 shares that vested on 2/2/2009.

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.