FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287

Estimated average burden hours per response: 0.5

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 Person [*] Williams Sherry			2. Issuer Name and Ticker or Trading Symbol Atlantic Union Bankshares Corp [AUB]		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last)	(First) (Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/12/2023	x	Officer (give title below)	Other (specify below)				
C/O ATLANTIC UNION BANKSHARES				EVP & CRO						
1051 EAST CARY STREET, STE 1200			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(Street)	VA	23219			, ,	an One Reporting Person				
			Rule 10b5-1(c) Transaction Indication							
(City)	(State)	(Zip)	Check this box to indicate that a transaction was made pursuant to a cont affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.	ract, instruc	tion or written plan that is in	tended to satisfy the				

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

in the of occurry (mont of	2. Transaction Date (Month/Day/Year)	 Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			Securities Beneficially Owned Following Reported	(Instr. 4)	7. Nature of Indirect Beneficial Ownership
		Code	v		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)

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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Phantom Stock	(1)	05/12/2023		A		14.124		(1)	(1)	Common Stock	14.124	\$23.6	89.692	Ι	By Trustee of Non- Qualified Plan (deferred comp)

Explanation of Responses:

1. Each share of phantom stock is the economic equivalent of one share of common stock. The shares of phantom stock become payable, in cash or common stock, at the time elected by the reporting person in the reporting person's deferred compensation election form; provided, that if the reporting person elected to receive distributions under the Company's non-qualified deferred compensation plan in installments, such amounts are payable only in cash.

> /s/ Rachael R. Lape, Attorney-in-05/16/2023 Fact

> > Date

** Signature of Reporting Person

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

* 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).

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

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 Number.