| FORM | 5 |
|------|---|
|------|---|

| | Check this box if no longer |
|------------|---------------------------------|
| | subject to Section 16. Form 4 |
| | or Form 5 obligations may |
| | continue. See Instruction 1(b). |
| — 1 | Form 3 Holdings Reported |

Form 4 Transactions

Reported

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

OMB APPROVAL OMB Number: 3235-0362 Estimated average burden hours per response... 1.0

ANNUAL 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 HICKS RONALI | | 2. Issuer Name and UNION FIRST CORP [ubsh] | | <i>c .</i> | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Officer (give title below)Other (specify below) | | | | |
|-------------------------------------|----------|--|--|--------------------|---------|--|---|---|--|--------------------------|--|
| (Last) 1107 WESTWOO | (First) | (Middle) | 3. Statement for Iss (Month/Day/Year) 12/31/2010 | uer's Fiscal Yea | r Ended | | | | | | |
| | (Street) | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | 6. Individual or Joint/Group Reporting (check applicable line) | | | | |
| FREDERICKSBURG, VA 22401 | | | | | | | | _X_Form Filed by One Reporting Person Form Filed by More than One Reporting Person | | | |
| (City) | (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) | | Code (Instr. 8) | | | | 5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership | |
| Common Stock | | | | | | | | 64,606 | D | | |
| Common Stock | | | | | | | | 2,154 | Ι | By spouse | |
| Common Stock | | | | | | | | 12,698 | Ι | By self as Trustee | |

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

Persons who respond to the collection of information contained in this SEC 2270 (9-02) 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. Titl | e and | 8. Price of | 9. Number | 10. | 11. Nature |
| Derivative | Conversion | Date | Execution Date, if | Transaction | Numb | ber | and Expirati | and Expiration Date | | nt of | Derivative | of | Ownership | of Indirect |
| Security | or Exercise | (Month/Day/Year) | any | Code | of | | (Month/Day | (Month/Day/Year) | | lying | Security | Derivative | Form of | Beneficial |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | Deriv | ative | | | Securi | ities | (Instr. 5) | Securities | Derivative | Ownership |
| | Derivative | | | | Secur | ities | | | (Instr. | 3 and | | Beneficially | Security: | (Instr. 4) |
| | Security | | | | Acqu | ired | | | 4) | | | Owned at | Direct (D) | |
| | | | | | (A) or | r | | | | | | End of | or Indirect | |
| | | | | | Dispo | osed | | | | | | Issuer's | (I) | |
| | | | | | of (D) |) | | | | | | Fiscal Year | (Instr. 4) | |
| | | | | | (Instr | nstr. 3, | | | | | (Instr. 4) | | | |
| | | | | | 4, and 5) | | | | | | | | | |
| | | | | | | | | | | Amount | | | | |
| | | | | | | | D. | . | | or | | | | |
| | | | | | | | | Expiration | Title | Number | | | | |
| | | | | | | | Exercisable Date | | | of | | | | |
| | | | | | (A) | (D) | | | | Shares | | | | |

Reporting Owners

| | Relationships | | | | | | |
|---|---------------|--------------|---------|-------|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| HICKS RONALD L 1107 WESTWOOD DRIVE FREDERICKSBURG, VA 22401 | Х | | | | | | |

Signatures

**Signature of Reporting Person



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).

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.