FORM 4

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

OMB APPROVAL

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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).

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

		s)														
1. Name and Address of Reporting Person * SMOOT RAYMOND D JR				2. Issuer Name and Ticker or Trading Symbol UNION FIRST MARKET BANKSHARES CORP [ubsh]							5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director 10% Owner Officer (give title below) Other (specify below)				
(Last) (First) (Middle) 1447 LUSTERS GATE ROAD				3. Date of Earliest Transaction (Month/Day/Year) 03/04/2014												
(Street) BLACKSBURG, VA 24060				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)			Tabl	e I - No	n-Deri	vative S	Securiti	es Acquir	ed, Disposed	of, or Bene	ficially Own	ed	
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year					f Cod (Ins	3. Transaction Code Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)	Owned Follow Transaction(s)			6. Ownership Form:	7. Nature of Indirect Beneficial	
			(Month/Day/Yea			ode	V A	Amount (A) or (D)		Price	(Instr. 3 and 4)			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common	Stock										2	26,737			D	
Common	Stock		03/04/2014				S	1	,852	A	\$ 26.17	24,885			D	
Reminder:	Report on a s	separate line for each	n class of securities b	peneficial	lly owned	direct	P	erson	s who			collection			ned SEC	1474 (9-02)
Reminder:	Report on a s	separate line for each					P ir d	erson this f isplay	s who form a s a cu	re not i	equired valid ON	to respond IB control n	unless the		ned SEC	1474 (9-02)
1. Title of	•	3. Transaction Date	Table II - 3A. Deemed Execution Date, if	Derivat (e.g., pu 4. Transac Code	ive Secur ts, calls, v 5. Notion of Deri') Secu Acqu (A) (C) Disp of (E	vative rities aired or osed	cquired	erson this fi isplay , Dispo ons, co	s who form a s a cu osed of, nvertibesisable a ate	re not i rrently or Bendele secur	equired valid ON eficially (ities)	to respond MB control n Owned and Amount erlying es and 4)	unless the umber.		of 10. Owners! Form of Derivati Security Direct (l or Indire	11. Naturof Indire Benefici Ownersl (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction	Table II - 3A. Deemed Execution Date, if any	Derivat (e.g., pu 4. Transac Code	ive Secur ts, calls, v 5. Ni beri) Secu Acqu (A) o Disp of (L (Inst	inties A warrar imber vative rities in the control of the control	cquired atts, opti 6. Date Expira (Mont	erson this t isplay , Dispo ons, co e Exerc ation Da h/Day/	s who form a s a cu sed of, nvertib cisable a ate Year)	re not i rrently or Bendele secur	required valid ON reficially (rities) 7. Title of Under Securities	to respond MB control n Dwned and Amount erlying ies	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction	of 10. Owners! Form of Derivati Security Direct (l or Indirects)	11. Naturof Indire Benefici Owners! (Instr. 4

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
SMOOT RAYMOND D JR						
1447 LUSTERS GATE ROAD	X					
BLACKSBURG, VA 24060						

Signatures

/s/ Raymond D. Smoot, Jr.	03/05/2014
**Signature of Reporting Person	Date

Explanation of Responses:

 \star 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) Acquisition of derivative securities, per non-qualified stock option agreement.

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.