FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

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

(Print or Ty	pe Response	s)															
1. Name and Address of Reporting Person* Rohman Thomas P.					2. Issuer Name and Ticker or Trading Symbol Atlantic Union Bankshares Corp [AUB]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) (Middle) C/O ATLANTIC UNION BANKSHARES CORP, 1051 E. CARY STREET, STE 1200					3. Date of Earliest Transaction (Month/Day/Year) 12/01/2020						Office	r (give title belo	ow)	Other (specify	below)		
RICHMOND, VA 23219				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(State)	(Zip)			Ta	ble I	- Non	-Der	ivative :	Securities .	Acqui	ired, Dispo	osed of, or I	Beneficially	Owned	
1.Title of S (Instr. 3)	1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year	Execu any	Deemed cution Date, if	(Instr. 8)		ction				Beneficial Reported	nt of Securities ally Owned Following Transaction(s)		Form:	7. Nature of Indirect Beneficial	
				(Mo	nth/Day/Y	ear)		ode	V	Amour	(A) or (D)	Price	(Instr. 3 and 4)			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common	Stock		12/01/2020				1	A		418	A S	\$ 0	12,238.0)508		D	
			Table II -					quire	conta the f	ained i orm dis	n this for	m are curre	not requesting ntly valid	OMB conf	formation spond unleader trol number	ess	C 1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		Execution D	Date, if	4. Transacti Code	on	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. Ta	itle and ount of erlying urities tr. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owner Form of Deriva Securi Direct or Indi	Benefici Ownersh y: (Instr. 4)	
					Code	V	(A)	(D)	Date Exer	cisable	Expiration Date	Title	Amount or Number of Shares				

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Rohman Thomas P. C/O ATLANTIC UNION BANKSHARES CORP 1051 E. CARY STREET, STE 1200 RICHMOND, VA 23219	X					

Signatures

/s/ Rachael R. Lape, Attorney-in-Fact	12/03/2020
**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) Direct issue from Issuer.

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.