FORM	4
------	---

	1
Check this box if no	Ī
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

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

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 Responses)												
1. Name and Address of Report Gorman Robert Michael	2. Issuer Name a Atlantic Union			0.		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director10% Owner XOfficer (give title below)Other (specify below) EVP						
(Last) (First C/O ATLANTIC UNIO CORP, 1051 E. CARY S	3. Date of Earliest 02/22/2021	Transactio	n (M	onth/Day/	Year)							
(Stree RICHMOND, VA 23219	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	e) (Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		(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)	Form:	7. Nature of Indirect Beneficial		
		(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)	· · · ·	Ownership (Instr. 4)		
Common Stock	02/22/2021		F		483	D <u>(1)</u>	\$ 36.44	38,797	D			
Common Stock	02/22/2021		F		393	D <u>(1)</u>	\$ 36.44	38,404	D			
Common Stock	02/22/2021		F		542	D <u>(1)</u>	\$ 37.09	37,862	D			
Common Stock								1,643.597	Ι	By Trustee of ESOP		

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

SEC 1474 (9-02)

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 control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(a q) nuts calls warrants ontions convertible securities)

(e.g., puts, cans, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.	5	i.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	n N	Number		and Expiration Date Amo		Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	0	of (Month/Day/Year)		Unde	rlying	Security	Securities	Form of	Beneficial		
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	D	Deriva	ative			Securities		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				S	Securities		(Instr. 3 and			Owned	Security:	(Instr. 4)		
	Security				A	Acquired		4)			Following	Direct (D)			
					(/	(A) or					Reported	or Indirect			
					Disposed		sed						Transaction(s)	(I)	
					0	of (D)							(Instr. 4)	(Instr. 4)	
						(Instr. 3,									
					4, and 5)		5)								
											Amount				
								Date	Expiration		or				
								Exercisable	*	Title	Number				
								LACICISADIC	Date		of				
				Code V	/ ((A)	(D)				Shares				

Reporting Owners

	Relationships						
Reporting Owner Name / Address		10% Owner	Officer	Other			
Gorman Robert Michael C/O ATLANTIC UNION BANKSHARES CORP 1051 E. CARY STREET, STE 1200 RICHMOND, VA 23219			EVP				

Signatures

/s/ Rachael R. Lape, Attorney-in-Fact	
**Signature of Reporting Person	

02/24/2021 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) Shares withheld on vesting of restricted stock award to cover tax withholding.

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.