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

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) 10/01/2021							Office	er (give title belo	ow)	Other (specify b	elow)	
(Street) 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 PersonForm filed by More than One Reporting Person						
(City) (State) (Zip)				Table I - Non-Derivative Securities Acqu						ired, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	Execution any	ution Da	on Date, if	Cod (Ins	le	ction				Beneficial Reported	ally Owned Following d Transaction(s)		Ownership Form:	Beneficial
			(Month/Day/Year)			ode	V	Amoun	(A) or (D)	Price	(Instr. 3 a				Ownership (Instr. 4)	
Stock		10/01/2021				,	A		407 (1) A	\$ 0	13,679.7	7987		D	
							quire	conta the f	ained in orm dis sposed o	n this for splays a o	m are curre eficial	e not requ ntly valid	uired to res OMB con	spond unle	ss	11/1 (7 02)
2. Conversion or Exercise Price of Derivative Security	Date	n 3A. Deemed Execution Da Year) any	ate, if	4. Transac Code	tion	5. Numb of Deriv Secur Acqu (A) o Dispo of (D (Instr	per rative rities ired rosed) . 3, 15)	6. Da and I (Mon	ate Exerc Expiration onth/Day/	cisable on Date Year) Expiratior	7. T Amo Und Secu (Ins: 4)	ount of lerlying urities tr. 3 and		Derivative Securities Beneficially Owned Following Reported	Owners: Form of Derivati Security Direct (1) or Indirect (s) (I)	Beneficial Ownership (Instr. 4)
	and Address of Thomas P. ANTIC U 051 E. CA DND, VA 2 Conversion or Exercise Price of Derivative	Thomas P. (First) ANTIC UNION BAN 051 E. CARY STREE (Street) DND, VA 23219 (State) (State) (State) (State) 2. Conversion or Exercise Price of Derivative 3. Transactio Date (Month/Day/	Address of Reporting Person* Thomas P. (First) (Middle) ANTIC UNION BANKSHARES 051 E. CARY STREET, STE 1200 (Street) (Street) (State) (Zip) (State) (Zip) (State) (Month/Day/Year) (A Stock 10/01/2021 Report on a separate line for each class of security Table II - 2. Conversion or Exercise Price of Derivative (Month/Day/Year) (Month/Day/Year)	Address of Reporting Person Atla Thomas P. O (First) (Middle) ANTIC UNION BANKSHARES 051 E. CARY STREET, STE 1200 (Street) 4. If A DOND, VA 23219 O (State) 2. Transaction Date (Month/Day/Year) A Stock 10/01/2021 Report on a separate line for each class of securities be any (Month/Day/Year) Table II - Derivative (e.g., p.	Address of Reporting Person* Thomas P. 2. 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Reporting Owners

	Relationships					
Reporting Owner Name / Address		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	10/05/2021	
**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.