FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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

(Print or Ty	pe Response	s)														
1. Name and Address of Reporting Person* MCCANN PATRICK J				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)				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	OND, VA	(State)	(Zip)		7	ahla I	- Non	_Dori	ivativa S	acurities	Acqui	irad Dien	nsed of or l	Ranaficially	Dwned	
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deer Execution	med on Date,	3. Trans Code (Instr. 8					uired of (D)	Reported Transaction(s)		es Following (s)	6. Ownership Form:	Beneficial	
			(Month/Day/Year)			ode	V	Amount	(A) or (D)	Price	Ì	str. 3 and 4)			Ownership (Instr. 4)	
Common	Stock		10/01/2021				A		407 ⁽¹⁾	A	\$ 0	24,150			D	
Common Stock											201				By spouse	
	-		Table II - I				equire	conta the fo	ained in orm disp sposed o	this for plays a o	m are curre eficial	e not requ ntly valid	OMB con	formation spond unle trol numbe	ss	1474 (9-02)
1. Title of	12	2 Tuomas atio	,	<i>e.g.</i> , puts,	, calls, v	varran 5.	ts, opt				1	Stloond	Q Duina of	O Namahan	of 10.	11 Notes
	Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/	Execution Da Year) any	te, if Transaction Code Year) (Instr. 8)		Num of Deriv Secur Acqu (A) of Dispo of (D) (Instr	Number		and Expiration Date (Month/Day/Year)		Amo Und Secu	itle and ount of lerlying urities tr. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownersl Form of Derivati Security Direct (I or Indire	Beneficia Ownersh (Instr. 4)
								Date		Expiration Date	1 Title	Amount or Number				

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
MCCANN PATRICK J 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.