FORM 4	ŀ
--------	---

Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

(Print or Type Pa

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

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

SEC 1474 (9-02)

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

1. Name and Address of Reporting Pe Asbury John C	2. Issuer Name ar Atlantic Union			0,		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) C/O ATLANTIC UNION BAN CORP, 1051 E. CARY STREE	3. Date of Earliest 7 02/24/2022	Transaction	ı (Mo	onth/Day/Y	(ear)	X Officer (give title below) Other (specify below) PRESIDENT AND CEO					
(Street) RICHMOND, VA 23219	4. If Amendment, I	Date Origin	al Fil	ed(Month/D	ay/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)	Tal	ole I - Non-	-Deri	ivative Sec	curities	Acqu	uired, Disposed of, or Beneficially Owned			
1. Title of Security 2. Transaction (Instr. 3) Date (Month/Day/N)			(Instr. 8)	tion 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Ownership of Form: H	7. Nature of Indirect Beneficial		
		(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common Stock	02/24/2022		А		13,227 (1)	А	\$ 0	164,228	D		
Common Stock								457.252 ⁽²⁾	Ι	By Trustee of ESOP	

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

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

(e.g., puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.	4	5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	on 1	Number		and Expiration Date Amount of		unt of	Derivative	Derivative	Ownership	of Indirect	
Security	or Exercise	(Month/Day/Year)	any	Code	(of		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)]	Deriv	ative			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				5	Secur	ities			(Instr	: 3 and		Owned	Security:	(Instr. 4)
	Security				1	Acqui	ired			4)			Following	Direct (D)	
						(A) 01							1	or Indirect	
]	Dispo	sed						Transaction(s)	(I)	
						of (D)							(Instr. 4)	(Instr. 4)	
						(Instr.	· · · ·								
					4	4, and 5)									
											Amount				
								Dete	E		or				
								Date Exercisable	Expiration	Title	Number				
								Exercisable	Date		of				
				Code	V	(A)	(D)				Shares				

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Asbury John C C/O ATLANTIC UNION BANKSHARES CORP 1051 E. CARY STREET, STE 1200 RICHMOND, VA 23219			PRESIDENT AND CEO				

Signatures

/s/ Rachael R. Lape, Attorney-in-Fact

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) Award of time-based restricted stock subject to a vesting schedule.
- (2) Includes shares allocated to the reporting person in connection with an employee stock ownership plan.

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.