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Orfe Janis

| Form 4 April 22, 2009 | | | | | | | | | | | |
|--|---------------------------------------|------------------|--|---|--|--|---------------------------|---|--|-----------------------|--|
| · · · · · · · · · · · · · · · · · · · | Л | | | | | | | | OMB AF | PROVAL | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | | OMB Number: | 3235-0287 | | |
| Check this box if no longer subject to Section 16. Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act | | | | | e Act of 1934, | January 31Expires:200Estimated averageburden hours perresponse0. | | | | | |
| obligations may continu <i>See</i> Instructi 1(b). | ie. | | | ility Hold vestment | • | · · | | 1935 or Section 0 | 1 | | |
| (Print or Type Res | ponses) | | | | | | | | | | |
| | | | 2. Issuer Name and Ticker or Trading Symbol UNION BANKSHARES CORP [ubsh] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Month | | | | ate of Earliest Transaction nth/Day/Year) 21/2009 | | | | Director 10% Owner X Officer (give title Other (specify below) below) EVP | | | |
| | (Street) 4. If Amend Filed(Month | | | | - | l | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| BOWLING GREEN, VA 22427 — Form filed by Mo Person | | | | | | | | | | | |
| (City) | (State) | (Zip) | Table | e I - Non-D | erivative | Secur | ities Acq | uired, Disposed of | , or Beneficial | ly Owned | |
| | . Transaction Date Month/Day/Year) | Execution any | ned | 3. Transactio Code (Instr. 8) | 4. Securit n(A) or Di (Instr. 3, | ties Ad spose 4 and (A) or | cquired d of (D) 5) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of | |
| Common 0 Stock 0 | 4/21/2009(1) | | | Code V P | Amount 10 | (D) A | Price \$ 19.11 | 720 (2) | D | | |
| Common Stock | | | | | | | | 699 | Ι | By Trustee of ESOP | |

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

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

 (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactic Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Amou Unde Secur | le and int of rlying ities . 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|--|---|---------------------|--------------------|-----------------------|---|---|---|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Add | ress | Relationships | | | | | | |
|--|------------|---------------|---------|-------|--|--|--|--|
| Reporting O when I tunie / I tuni | Director | 10% Owner | Officer | Other | | | | |
| Orfe Janis | | | | | | | | |
| P. O. BOX 446 | | EVP | | | | | | |
| 211 NORTH MAIN STREE | | | | | | | | |
| BOWLING GREEN, VA 22 | | | | | | | | |
| Signatures | | | | | | | | |
| /s/ Janis Orfe | 04/22/2009 | | | | | | | |
| <u>**</u> 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) Voluntary purchase by administrator of DRSPP.
- (2) Includes 489 shares of restricted stock.

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.