

UNION BANKSHARES INC
Form 5
January 19, 2016

FORM 5

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

OMB APPROVAL
OMB Number: 3235-0362
Expires: January 31, 2015
Estimated average burden hours per response... 1.0

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
Form 3 Holdings Reported Form 4 Transactions Reported

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *
Mercia Susan F Hovey

2. Issuer Name and Ticker or Trading Symbol
UNION BANKSHARES INC
[UNB]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)

3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year)
12/31/2015

____ Director 10% Owner
____ Officer (give title below) Other (specify below)
No longer 10% owner

PO BOX 357, 924 POND ROAD

(Street)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Reporting

(check applicable line)

HINESBURG, VT 05461-0357

Form Filed by One Reporting Person
 Form Filed by More than One Reporting Person

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	01/14/2015	Â	J(1)	422,908 D \$ 0 0		I	Sole Trustee and beneficiary Genevieve L. Hovey Trust
Common Stock	01/14/2015	Â	J(2)	1,897 D \$ 0 0		D	Â

Common Stock	01/14/2015	Â	J ⁽³⁾	213,351	A	\$ 0	218,634	I	Settlor, Trustee and beneficiary S.H. Mercia Trust
Common Stock	Â	Â	Â	Â	Â	Â	173,625	I	Co-Trustee and beneficiary Susan Hovey Trust

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

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SEC 2270 (9-02)

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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. of D Se B O E Is Fi (I
					(A) (D)	Date Exercisable Expiration Date	Title	Amount or Number of Shares	

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Mercia Susan F Hovey PO BOX 357 924 POND ROAD HINESBURG, VT 05461-0357	Â	Â X	Â	No longer 10% owner

Signatures

/s/ Susan F. Hovey
Mercia 12/27/2015

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) 211,454 shares were distributed to the S.H. Mercia Trust and 211,454 shares (that Ms. Mercia previously disclaimed beneficial ownership as she did not have a pecuniary interest) were distributed to an adult family member not living in Ms. Mercia's household.
- (2) Shares transferred to the S.H. Mercia Trust
- (3) Increase in shares reflects 211,454 shares distributed from the Genevieve L. Hovey Trust and the transfer of 1,897 shares that were previously directly owned by Ms. Mercia.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.