Sargent Timothy Willis Form 3 May 20, 2011

FORM 3

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

OMB APPROVAL

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INITIAL STATEMENT OF 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

burden hours per response... 0.5

(Print or Type Responses)

1. Name and Add Sargent Tin	^	-	2. Date of Event Requiring Statement (Manth/Day/Veer)	3. Issuer Name and Ticker or Trading Symbol UNION BANKSHARES INC [UNB]						
(Last)	(First)	(Middle)	(Month/Day/Year) 05/18/2011	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)			
P.O. BOX 199							•			
(Street)					eck all applicat	ole)	6. Individual or Joint/Group			
MORRISVILI	LE, VTÂ	05661-0199	_X_ Director 10 Owner Officer Ot (give title below) (specify b			ther	Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Beneficially Owned							
1.Title of Security (Instr. 4)			2. Amount of So Beneficially Ow (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Natu Owner (Instr.	*			
Common Stoc	k		640		D	Â				
Reminder: Report owned directly or	*	e line for each cl	lass of securities beneficiall	y s	SEC 1473 (7-02	2)				
	informa required	tion contained d to respond ເ	d to the collection of d in this form are not unless the form displays control number.	s a						

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security		4. Conversion or Exercise	5. Ownership Form of	6. Nature of Indirect Beneficial Ownership (Instr. 5)
			(Instr. 4)		Price of	Derivative	
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security: Security Direct (D) or Indirect (I)	Direct (D) or Indirect	

(Instr. 5)

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Sargent Timothy Willis

P.O. BOX 199 \hat{A} \hat{A} \hat{A} \hat{A}

MORRISVILLE, VTÂ 05661-0199

Signatures

/s/ Timothy Sargent 05/19/2011

**Signature of Date
Reporting Person

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 5(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).

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.

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