FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| 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

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* COX L CATHY | | | | | | 2. Issuer Name and Ticker or Trading Symbol UNITED COMMUNITY BANKS INC | | | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|--------------------------------------------|-------------------------------------------------------------|------|-----------------------------------------|-------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|---------------|--------------------------------|----------------------------------------------------------------|------------------|--------|---------------------------------------------------------------------------------------------------|----------------------|--------|-----------------------------------------------------------------------------------------------|-------|-------------------------------------------------------------------------------------------------------------------------|---------------|--------------------------------------------------------------------------|--------------------------------------------------------------------|
| | | | | | UC | UCBI] | | | | | | | | | | | Direc | er (give title | | 10% O | wner (specify |
| (Last) | (Fi | rst) (| Middle) | | | | | | | | | | | | | | belov | | | below) | |
| C/O YOUNG HARRIS COLLEGE | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) | | | | | | | | | | | | | | | |
| P.O. BOX 98 | | | | | | 05/01/2013 | | | | | | | | | | | | | | | |
| (Street) | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| YOUNG | C | | 30582 | | | | | | | | | | | | | X | Forn | n filed by On | e Rep | orting Pers | on |
| HARRIS | GA | A 3 | | | | | | | | | | | | | | | Forn | n filed by Mo | re tha | an One Rep | orting |
| (City) | (St | ate) (| Zip) | | | | | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | | ar) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Co | Transaction Disposed Code (Instr. 5) | | | ities Acquired (A) d Of (D) (Instr. 3, 4 | | | 4 and Securi Benefi | | cially d Following | Forn (D) c | wnership n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | | | Co | de V | , | Amount | | (A) or (D) | Pric | Transa | | action(s) 3 and 4) | | | (Instr. 4) |
| Common Stock | | | | | | | | | | | | | | | | 2,932.085 | | | D | | |
| Restricted Stock Units 05/01/2 | | | | | | 2013(1) | | | | A | | 2,339 |) | A | \$0 | | 4 | 4,903 | | D | |
| 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) | | Expir | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | str. 3 | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | , (| 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | V (A) (D) | | Date Exerc | Date Expir Exercisable Date | | xpiration ate | Title | or Nui of | ount mber ares | | | | | | | |

Explanation of Responses:

1. 2013 RSUs cliff vest on April 1, 2016.

Remarks:

Lois J. Rich as Attorney in Fact 05/02/2013

** Signature of Reporting Person Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.

KNOW ALL BY THESE PRESENTS, THAT THE UNDERSIGNED HEREBY CONSTITUTES AND
APPOINTS (A) REX S. SCHUETTE; (B) LOIS J. RICH; AND (C) LORRAINE G. MCKAY,
SIGNING SINGLY, THE UNDERSIGNED'S TRUE AND LAWFUL ATTORNEY-IN-FACT TO:

- (1) Execute for and on behalf of the undersigned, in the undersigned's capacity as an officer and/or director of United Community Banks, Inc. (the "Company"),

 Forms 3, 4, and 5 in accordance with Section 16(a) of the Securities Exchange Act of 1934 and the rules thereunder;
- (2) Do and perform any and all acts for and on behalf of the undersigned which may be necessary or desirable to complete and execute any such Form 3, 4, or 5, complete and execute any amendment or amendments thereto, and timely file such form with the United States Securities and Exchange Commission and any stock exchange or similar authority; and
- (3) Take any other action of any type whatsoever in connection with the foregoing which, in the opinion of such attorney-in-fact, may be of benefit to, in the best interest of, or legally required by, the undersigned, it being understood that the documents executed by such attorney-in-fact on behalf of the undersigned pursuant to this Power of Attorney shall be in such form and shall contain such terms and conditions as such attorney-in-fact may approve in such attorney-in-fact's discretion.

The undersigned hereby grants to each such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever requisite, necessary, or proper to be done in the exercise of any of the rights and powers herein granted, as fully to all intents and purposes as the undersigned might or could do if personally present, with full power of substitution or revocation, hereby ratifying and confirming all that such attorney-in-fact, or such attorney-in-fact's substitute or substitutes, shall

lawfully do or cause to be done by virtue of this power of attorney and the rights and powers herein granted. The undersigned acknowledges that the foregoing attorneys-in-fact, in serving in such capacity at the request of the undersigned, are not assuming, nor is the Company assuming, any of the undersigned's responsibilities to comply with Section 16 of the Securities Exchange Act of 1934.

This Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 3, 4, and 5 with respect to the undersigned's holdings of and transactions in securities issued by the Company, unless earlier revoked by the undersigned in a signed writing delivered to the foregoing attorneys-in-fact.

IN WITNESS WHEREOF, THE UNDERSIGNED HAS CAUSED THIS POWER OF ATTORNEY
TO BE EXECUTED AS OF THIS 2ND DAY OF MAY 2008.

/s/ L. CATHY COX

Signature

L. CATHY COX

Print Name