SEC Form 4	
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).
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Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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Estimated average burden hours per response: 0.5

1. Name and Address of Reporting Person [*] <u>HARTON H LYNN</u>			2. Issuer Name and Ticker or Trading Symbol UNITED COMMUNITY BANKS INC		tionship of Reporting Person(s) to Issuer all applicable) Director 10% Owner		
(Last) (First) (Middle)		(Middle)	UCB]		Officer (give title below)	Other (specify below)	
C/O UNITED COMMUNITY BANKS, INC. 200 EAST CAMPERDOWN WAY		· · · · · · · · · · · · · · · · · · ·	3. Date of Earliest Transaction (Month/Day/Year) 12/10/2024		President & CE	EO	
(Street) GREENVILLE	SC	29601	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	idual or Joint/Group Filing (Form filed by One Report Form filed by More than (ting Person	
(City)	(State)	(Zip)			Person		

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)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
			Code V Amount (A) or (D)		Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		
Common Stock	12/10/2024		G ⁽¹⁾		611	D	\$ <mark>0</mark>	165,111	D	
Common Stock	12/10/2024		G ⁽¹⁾		611	A	\$0	144,123	I	By Herbert Lynn Harton Revocable Trust dated 3/16/15

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									
	3. Transaction	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and	8. Price of	9. Number of	10.

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)	Code (Transaction Code (Instr. 8) Acqu (A) or Dispo of (D) (Instr		Code (Instr. 8)		Transaction Code (Instr. 8) A (/ D (I		of Expiration Date (Month/Day/Year) S Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		of Expirat		Expiration Date (Month/Day/Year)		e and unt of rities rlying ative ative rity (Instr. 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares										

Explanation of Responses:

1. On December 10, 2024, the Reporting Person transferred 611 shares of Issuer's common stock directly held by the Reporting Person to a family trust of which the Reporting Person is trustee. The Reporting Person and immediate family members are the sole beneficiaries of the trust.

Remarks:

/s/ Melinda Davis Lux,	
Attorney in Fact	

12/11/2024

** 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.