FORM 5

Check this box if no longer subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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OMB Number: 3235-0362 **ANNUAL STATEMENT OF CHANGES IN BENEFICIAL** Estimated average burden **OWNERSHIP**

hours per response:

1.0

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Form 3 Holdings Reported.

Form 4	Transactions R	eported.	File				ne Securities Excha tment Company A						
1. Name and Address of Reporting Person* DUTTON DAN M			2. Issuer Name and Ticker or Trading Symbol UNIVERSAL FOREST PRODUCTS INC UFPI]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner			% Owner		
(Last) 2801 EAS	(Fir ST BELTLI	,	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/26/2009				/Year)	belo	er (give title w)		ner (specify ow)		
(Street) GRAND RAPIDS (City)	MI (Sta		.9525 Zip)	4. If Amen	4. If Amendment, Date of Original Filed (Month/Day/Year)					Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person			
		Tabl	e I - Non-Deriv	ative Sec	urities A	Acquire	ed, Disposed	of, or	Benefici	ally Own	ed		
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Da if any (Month/Day/	Cod	nsaction le (Instr.	4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5) Amount (A) or (D) Price			Securiti Benefic Owned	Year (Instr. 3 and (7. Nature of Indirect Beneficial Ownership	
							Amount	(A) or (D)	Price	Year (In		indirect (I) (Instr. 4)	(Instr. 4)
Common	Stock						Amount	(A) or (D)	Price	Year (In 4)		Indirect (I)	(Instr. 4)
			12/15/2009			A	Amount 7	(A) or (D)	Price \$37.72	Year (In 4)	str. 3 and	Indirect (I) (Instr. 4)	(Instr. 4)
Common Common		Ta	l ble II - Derivat			quired	7	A f, or B	\$37.72	Year (In 4) 8, 1, y Owned	369	Indirect (I) (Instr. 4)	(Instr. 4)

Date Exercisable

Explanation of Responses:

/s/ Christina A. Holderman, as

Amount or Number

of Shares

Attorney in Fact for Dan M.

Dutton

Expiration Date

** Signature of Reporting Person Date

02/03/2010

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.

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