FORM 5

Check this box if no longer subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

OWNERSHIP

Washington,	D.C.	20549

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OMB APPROVAL									
OMB Number:	3235-0362								
Estimated average burden									
hours per response:	1.0								

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

Form 3 Holdings Reported.

1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise (Month/Day/Ye Price of Derivative Security			ble II - Derivat (e.g., p 3A. Deemed Execution Date, if any (Month/Day/Year)				optionts, options ber 6. Date Expirat (Month et al., 1987)		Disposed of, ons, converti e Exercisable and ation Date h/Day/Year)			8. De Se (In	Price of erivative ecurity 1str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e C s F Ally C C	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownersh t (Instr. 4)
Common Stock		12/15/2011		A		1		45	A \$28.7		73	3,074			Ι	Def Comp Interest	
Common	Stock		12/31/2011			J		2	210	A	(1)) 3,796 I P			P/S Plan		
Common	Stock												1	.35		I	By Trust
Common Stock				-		Amour	Amount (A		A) or D) Price		Year (Instr. 3 and 4) 7,547		(Instr. 4)		(
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	n 2A. Deemed Execution Date,		3. Transaction Code (Instr.						sed 5. Amou Securitie Benefici		unt of 6. ies Ovially Fo		ership n: Direct or ect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
(City)	(Sta		Zip)	vative Sec	uritia	es Ac	auire	ad Die	snosed :	of or	Renefic	·iallv	, Owne	-d			
(Street) GRAND RAPIDS MI 49525				4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(Last) (First) (Middle) 2801 EAST BELTLINE NE				3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2011							Exec VP UCP and UFPD						
1. Name and Address of Reporting Person* GRANGER JOSEPH F				2. Issuer Name and Ticker or Trading Symbol UNIVERSAL FOREST PRODUCTS INC [ufpi]										Owner er (specify			

Explanation of Responses:

1. Reflects non-discretionary transactions affected in account pursuant to the terms of the Company's Profit Sharing and 401(k) Retirement Plan.

/s/ Christina A. Holderman, Att-in-Fact for Joseph F.

<u>Granger</u>

** Signature of Reporting Person

02/01/2012

son 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.