Instruction 1(b)

FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
		_00.0	

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0362								
Estimated average burden									
II									

Form 3	3 Holdings Rep	orted.												aro per r	соропос.	1.0	
Form 4	4 Transactions	Reported.	Fil	ed pursuant t or Sectio	o Secton 30(h	tion 16 n) of th	6(a) of the ne Investm	Secu	urities Excha Company A	ange Act ct of 1940	of 1934						
1. Name and Address of Reporting Person* <u>UHLIG-EASTIN CHAD C.</u>					2. Issuer Name and Ticker or Trading Symbol UNIVERSAL FOREST PRODUCTS INC							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) 2801 EAST BELTLINE NE					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/28/2019							X Officer (give title Other (specify below) Exec Vice Pres, ProWood					
(Street) GRAND RAPIDS MI 49525 (City) (State) (Zip)				4. If Amer	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					
		Tab	le I - Non-Deri	vative Sec	curiti	es A	cquire	d, D	isposed	of, or I	3enefici	ally Owne	ed				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)			or Disposed	Securiti Benefici	es ally	of 6. Own Iy Forn		7. Nature of Indirect Beneficial Ownership		
			(WOITHI/Day	(Month/Day/Year)			Amou	unt	(A) or (D) Price		Issuer's	Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		ect (I) :. 4)	(Instr. 4)		
Common Stock											6,	708		D			
Common	Stock		12/15/2019				A		137	A	\$48.19	\$48.19 14,373			I	Def Comp Interest	
Common	Stock 12/28		12/28/2019		J		J		132	A	(1)	3,879		I		401(k) Plan	
		Т	able II - Deriva (e.g., p	tive Secu outs, calls			•		•			-					
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)	Date, Transaction of Expiration Date (Month/Day/Year)		ite	7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficial Ownership ct (Instr. 4)				
					(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares						
Phantom Stock Units	(2)	12/15/2019		A	237		(3)		(3)	Commo: Stock	n 237	\$48.19	25,156		D		
Phantom	(2)	12/15/2010		Δ.			(4)		Common 7 040 10		COF		D				

Explanation of Responses:

- 1. Reflects non-discretionary transactions affected in account pursuant to the Company's Profit Sharing and 401(k) Retirement Plan
- 2. 1-for-1
- 3. The phantom stock units were accrued under the Company's Deferred Compensation Plan and are payable in shares of the Company's common stock until the reporting person's death, disability or retirement.
- 4. The phantom stock units were accrued under the Company's Deferred Stock Bonus Plan and are payable in shares of the Company's common stock until the reporting person's death, disability or retirement

Remarks:

<u>Christina A. Holderman,</u> <u>Attorney-in-Fact for Chad C</u>

01/30/2020

Uhlig-Eastin

** 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.