FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| l | OMB APPRO              | OVAL      |  |  |  |  |  |
|---|------------------------|-----------|--|--|--|--|--|
|   | OMB Number:            | 3235-0287 |  |  |  |  |  |
|   | Estimated average burd | en        |  |  |  |  |  |
| l | hours per response:    | 0.5       |  |  |  |  |  |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

| 1. Name and Address of Reporting Person*  CURRIE WILLIAM G |   |  |  |          |                                  | 2. Issuer Name <b>and</b> Ticker or Trading Symbol UNIVERSAL FOREST PRODUCTS INC |         |        |                                    |        |  |   |                |                       | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |                                  |  |   |   |  |  |
|--|---|--|--|----------|----------------------------------|--|---------|--------|------------------------------------|--------|--|---|----------------|-----------------------|---|----------------------------------|--|---|---|--|--|
| CORRI  | <u>L VVILLI</u>   | AWIG                                       |  |          | UFP                              | I ]  |         |        |                                    |        |  |   |                |                       | X   | Direc                            | ctor   |   | 10% O   | wner   |  |
| (Last)   | (Fir  | rst) (                                     | Middle)                                      |          |                                  | _  |         |        |                                    |        |  |   |                |                       |   | Office<br>belov                  | er (give title<br>v)   | X   | Other (below)                                       | specify  |  |
| 2801 EAST BELTINE N E                                      |   |  |  |          |                                  | 3. Date of Earliest Transaction (Month/Day/Year) 12/03/2009                      |         |        |                                    |        |  |   |                |                       |   | Chairman of the Board            |  |   |   |  |  |
| (Street)   |   |  |  |          | 4. If A                          | me   | ndment, | Date o | f Original                         | Filed  | (Month/Da  | ay/Ye   | ear)           |                       | 6. Indi<br>Line)  | vidual o                         | r Joint/Group  | Filin   | g (Check A  | pplicable  |  |
| GRAND<br>RAPIDS MI 49505                                   |   |  |  |          |                                  |  |         |        |                                    |        |  |   |                |                       | X Form filed by One Reporting Person                                    |                                  |  |   |   |  |  |
| - AATIDO   |   |  |  |          |                                  |  |         |        |                                    |        |  |   |                |                       | Form filed by More than One Reporting Person                            |                                  |  |   |   |  |  |
| (City)   | (St   | ate) (                                     | Zip)   |          |                                  |  |         |        |                                    |        |  |   |                |                       |   |                                  |  |   |   |  |  |
|  |   | Tabl                                       | e I - Nor                                    | n-Deriva | ative S                          | Sec  | curitie | s Acc  | quired,                            | Disp   | osed o   | f, o  | r Bei          | nefic                 | ially   | Owne                             | ed   |   |   |  |  |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Da |   |  |  |          | Execution Date,                  |  |         | Code ( | Transaction<br>Code (Instr.        |        | 4. Securities Acquired (A)<br>Disposed Of (D) (Instr. 3, 4<br>5) |   |                |                       | Securi<br>Benefi<br>Owned   | cially<br>I Following            | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4)  |   | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |  |  |
|  |   |  |  |          |                                  |  |         |        | Code                               | v      | Amount   |   | (A) or<br>(D)  | Pri                   | ce  |                                  | ted<br>action(s)<br>3 and 4)   |   |   | (Instr. 4)   |  |
| Common   | Stock   |  |  | 12/03    | 03/2009                          |  |         |        | S                                  |        | 3,610  | 0 D   |                | ,                     | \$38  | 218,742                          |  |   | I   | by Trust   |  |
| Common Stock 12/   |   |  |  |          | 1/2009                           |  |         |        | S                                  |        | 3,610  |   | D              | \$                    | 38.7  | 215,132                          |  |   | I   | by Trust   |  |
| Common Stock   |   |  |  |          |                                  |  |         |        |                                    |        |  |   |                |                       |   | 2                                | 2,450  |   | I   | by IRA   |  |
| Common   | Stock   |  |  |          |                                  |  |         |        |                                    |        |  |   |                |                       |   | 52,665 I by P/<br>Plan           |  |   |   |  |  |
| Common   | Common Stock  |  |  |          |                                  |  |         |        |                                    |        |  |   |                |                       |   | 2,000                            |  |   | I   | Def.<br>Comp.<br>Interest  |  |
|  |   | Та   | ıble II - I                                  |          |                                  |  |         | •      |                                    |        | sed of,<br>onvertib  |   |                |                       | •   | wned                             |  |   |   |  |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)        | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deem<br>Execution<br>if any<br>(Month/Da | Date,    | 4.<br>Transact<br>Code (In<br>8) |  |         |        | 6. Date E<br>Expiratio<br>(Month/D | n Date | •  | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr.<br>and 4) |                | f<br>g<br>e<br>Instr. | Der<br>Sec<br>(Ins  | Price of rivative curity str. 5) | 9. Number o<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction<br>(Instr. 4) | Owner<br>Form:<br>Direct<br>or Indi<br>(I) (Ins | Ownership   | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|  |   |  |  |          | Code \                           | ,  | (A)     | (D)    | Date<br>Exercisal                  |        | Expiration<br>Date   | Titl  | or<br>No<br>of | umbei                 |   |                                  |  |   |   |  |  |

**Explanation of Responses:** 

/s/ Christina A. Holderman, as attorney-in-fact for William G. 12/07/2009 Currie

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.