| SEC Form 4 | |
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed purcuant to Section 16(a) of the Securities Exchange Act of 1024

OMB Number: 3235-0287 Estimated average burden

| | | | 1 lieu pursualit to Section 10(a) of the Sectimites Exchange Act of 1334 | | | | | |
|---|---------|-------|--|-------|---|---|--|--|
| | • • | | or Section 30(h) of the Investment Company Act of 1940 | | | | | |
| L. Name and Address of Reporting Person [*] COLE MICHAEL R (Last) (First) (Middle) | | | 2. Issuer Name and Ticker or Trading Symbol <u>UNIVERSAL FOREST PRODUCTS INC</u> [UFPI] | | tionship of Reporting F (all applicable) Director Officer (give title below) | erson(s) to Issuer 10% Owner Other (specify below) | | |
| (Last) (First) (Middle) 2801 EAST BELTLINE, N.E. | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/30/2019 | | Chief Financi | Chief Financial Officer | | |
| Street) GRAND | | 10505 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | Line) | vidual or Joint/Group Fi | | | |
| RAPIDS | MI | 49525 | | | Form filed by One R Form filed by More th Person | | | |
| (City) | (State) | (Zip) | | | | | | |

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 | (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
|---------------------------------|--|---|------|---|---|---------------|-------|---|-----------------------------------|---|--|--|
| | | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | (Instr. 4) | | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 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) | 4. Transa Code (8) | | of Expir | | Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (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. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|--|---|------------------------------|---|----------|-----|-------------------------------------|--------------------|--|--|---|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Phantom Stock Units | (1) | 08/30/2019 | | A | | 37 | | (2) | (2) | Common Stock | 37 | \$39.1 | 27,755 | D | |

Explanation of Responses:

1. 1-for-1

2. 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.

Remarks:

Christina A. Holderman, Attorney-in-Fact for Michael

R. Cole

09/03/2019

** 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.

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