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**

Vashington,	D.C.	20549

## ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0362							
Estimated average b	ourden							
	OMB Number:							

Form 3	3 Holdings Rep	orted.												lliot	urs per r	esponse.		1.0	
Form 4	4 Transactions	Reported.	Fil	led pursuant t or Sectio															
1. Name and Address of Reporting Person* <u>COLE MICHAEL R</u>				2. Issuer Name and Ticker or Trading Symbol UNIVERSAL FOREST PRODUCTS INC UFPL 1							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner								
(Last) 2801 EA	(Fi	*	(Middle)	3. Statem					uer's Fiscal Year Ended (Month/Day/Year)					X Officer (give title Other (specify below)  Chief Financial Officer					
(Street) GRAND RAPIDS MI 49525				4. If Ame	4. If Amendment, Date of Original Filed (Month/Day/Year)						′ I	Individual or Joint/Group Filing (Check Applicable Line)      X Form filed by One Reporting Person     Form filed by More than One Reporting Person							
(City)	(S	tate)	(Zip)																
		Tab	le I - Non-Deri	1	uriti								/ Owne	d					
Date		2. Transaction Date (Month/Day/Year)			3. Transaction Code (Instr. 8)						Securities Beneficially		s Ily	Owners Form: I		7. Nature Indirect Beneficia	al		
			(Month/Day/	nth/Day/Year)		,	Amount		(A) or (D)	Price		Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		(D) or Indirect (I) (Instr. 4)		Ownership (Instr. 4)			
Common	Common Stock											16,067		D					
Common	non Stock 12/25/20		12/25/2010				J	29		A	(1)		8,981		I B		By P/S	Plan	
Common	Stock		12/15/2010				A	A 22 A \$37.18 2		2,029			I Def Comp Interest						
Common	Stock											450 I			By Foundation				
		T	able II - Deriva (e.g., p	itive Secu outs, calls									Owned						
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. Transaction Code (Instr. 8)	of Deriv Secu Acqu (A) o Disp of (D (Inst	5. Number of Expiration Date Expiration Date (Month/Day/Year) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)				9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownersh Form: Direct (D or Indirec (I) (Instr.	ip of In Bend Own ct (Inst	Nature ndirect eficial nership tr. 4)			
					(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amour or Number of Shares	er							
Phantom Stock Units	(2)	12/15/2010		A	10		(3)		(3)	Commo			\$37.18	870	)	D			
Phantom Stock	(2)	12/15/2010			11		(4)		(4)	Commo	n 11		\$37.18	1.05	8	D			

## **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.
- 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.

/s/ Christina A. Holderman, as Attorney in Fact for Michael R. 02/03/2011 Cole

\*\* 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.