Edgar Filing: MISSAD MATTHEW J - Form 4

| MISSAD MATTHEW J | | | | | | | |
|---|---|---|--|---|--|--|--|
| Form 4 | | | | | | | |
| FORM 4 UNITED STAT | TES SECURITIES AND EXCHANGE | ~~~~~~~~ | OMB A | PPROVAL | | | |
| UNITED STAT | COMMISSION | OMB Number: | 3235-0287 | | | | |
| Check this box if no longer | | | | | | | |
| subject to STATEMENT Section 16. Form 4 or | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | | | |
| obligations may continue. Section 17(a) of t | to Section 16(a) of the Securities Exchar the Public Utility Holding Company Act 0(h) of the Investment Company Act of 19 | of 1935 or Sectior | 1 | | | | |
| (Print or Type Responses) | | | | | | | |
| 1. Name and Address of Reporting Person MISSAD MATTHEW J | 2. Issuer Name and Ticker or Trading Symbol UNIVERSAL FOREST | 5. Relationship of Reporting Person(s) to Issuer | | | | | |
| | PRODUCTS INC [UFPI] | (Check all applicable) | | | | | |
| (Last) (First) (Middle) 2801 EAST BELTLINE, N.E. | 3. Date of Earliest Transaction (Month/Day/Year) 10/31/2007 | Director 10% Owner X Officer (give title Other (specify below) below) Executive Vice President | | | | | |
| (Street) | 4. If Amendment, Date Original Filed(Month/Day/Year) | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | | |
| GRAND RAPIDS, MI 49525 | | Form filed by M Person | ore than One Re | eporting | | | |
| (City) (State) (Zip) | Table I - Non-Derivative Securities A | cquired, Disposed of | , or Beneficial | lly Owned | | | |
| (Instr. 3) any | Deemed 3. 4. Securities cution Date, if TransactionAcquired (A) or Code Disposed of (D) onth/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) (A) or | Securities I Beneficially (Owned I | 6. Ownership Form: Direct [D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| Common Stock | Code V Amount (D) Price | | D | | | | |
| Common Stock | | 1,540 | ſ | by P/S Plan | | | |
| Common Stock | | 1,500 | [| by Children | | | |

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

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number.

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) | a 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transact Code (Instr. 8) | 6) of Sec Ac (A) Dis of (In | | 3 | Date | 7. Title and A Underlying S (Instr. 3 and | Securities | 8. Price of Derivative Security (Instr. 5) |
|---|---|---|---|--------------------------------------|---|-----|---------------------|--------------------|---|--|---|
| | | | | Code V | V (A | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| Phantom Stock Units | <u>(1)</u> | 10/31/2007 | | А | 19 |) | (2) | (2) | Common Stock | 19 | \$ 35.81 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|---------------------------------------|---------------|-----------|---------------------------------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| MISSAD MATTHEW J | | | | | | | |
| 2801 EAST BELTLINE, N.E. | | | Executive Vice President | | | | |
| GRAND RAPIDS, MI 49525 | | | | | | | |
| Signatures | | | | | | | |

/s/ Christina D. Holderman as Attorney in Fact for Matthew J. Missad
<u>**Signature of Reporting Person</u>
Date

Explanation of Responses:

- * 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).
- (1) 1-for-1
- (2) The phantom stock units were accrued under the Company's Deferred Compensation Plan and are payable in cash or shares of the Company's common stock until the reporting person's death, disability or retirement.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.