FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | |
| Estimated average burden | | | | | | | |
| 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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| Name and Address of Reporting Person* TODEDANO UDI | | | | | 2. Issuer Name and Ticker or Trading Symbol UNIVERSAL STAINLESS & ALLOY PRODUCTS INC [USAP] | | | | | | | | | ck all app Direc | ionship of Reporting all applicable) Director Officer (give title | | Person(s) to Issuer 10% Owner Other (specify | |
|--|---|--|--|--------|---|-----|-----------------------|---|--------|---|--|-----------------------------|-------|--|---|---------------------------------------|--|---|
| (Last) (First) (Middle) 600 MAYER STREET | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/04/2004 | | | | | | | | | | below) | | below) | |
| (Street) BRIDGEVILLE PA 15017 | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Line) | Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting | | | | |
| (City) | (City) (State) (Zip) | | | | | | | | | | | | | Pers | on | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea | | | | ear) i | 2A. Deemed Execution Date, if any (Month/Day/Year) | | , 1 | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 5) | | | | | ies ially | Form (D) o | n: Direct r ect (I) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | Code | v | Amount | (A) or (D) | Price | | Reported Transaction(s) (Instr. 3 and 4) | | | | (|
| Common Stock 08/04/2004 | | | |)4 | 1 | | | S | | 5,500 | D \$13.6289 | | 289 | 19,295 | | | I | By Trust FBO Children ⁽¹⁾ |
| 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) | Derivative Conversion Date Execution Date, Gecurity or Exercise (Month/Day/Year) if any | | | Code | Fransaction of Code (Instr. Deriv | | ired sed . 3, 4 | Expiration (Month/D) (Month/D) sed | | | 7. Title and Amount of Securities Underlying Derivative Security (Insti 3 and 4) | | | | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | Owners Form: Direct or Indi (I) (Inst | Ownership Form: Direct (D) or Indirect (I) (Instr. | Beneficial Ownership ect (Instr. 4) |
| | | | | Code | . v | (A) | (D) | Date Exerc | isable | Expiration Date | Title | or Numbe of Shares | r | | | | | |

Explanation of Responses:

1. The reporting person disclaims beneficial ownership of all securities held by the trust, and this report should not be deemed an admission that the reporting person is the beneficial owner of such securities for purposes of Section 16 or any other purpose.

<u>Paul A. McGrath (AIF)</u> <u>08/05/2004</u>

** 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.