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

											mpany Act									
1. Name and Address of Reporting Person* PENNANT CAPITAL MANAGEMENT, LLC				2. Issuer Name and Ticker or Trading Symbol UNIVERSAL STAINLESS & ALLOY PRODUCTS INC [USAP]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner								
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 08/02/2012								Officer (give title Other (special below) below)							
(Last) (Filst) (Middle)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person						
(Street)	Γ NJ	0	7901	I										X Form filed by More than One Reporting Person						
(City)	(Sta	ate) (Z	Zip)																	
		Tabl	eI-	Non-Deriv	ative	Se	curit	ies Ad	quired	, Dis	sposed of	f, or Be	enefi	cially	y Own	ed				
Date			2. Transaction Date (Month/Day/	Year)	n 2A. Deemed Execution Dat		Date,	3. Transaction Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, and 5)			5. Amor Securiti Benefic Owned Followi	ies ially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) or (D)	Price	е	Reported Transaction(s) (Instr. 3 and 4)			(
Common	Stock		08/02/201			2		P		2	A	\$33	3.82	\$1,042,545		I		See footnote.(1)		
		Та	ble l	II - Derivat (e.g., p							osed of, convertib				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	cise (Month/Day/Year) if any (Month/Day/Year ve		ution Date, y	4. Transaction Code (Inst				Expirat (Month	ion D		Amount of Securities Underlying Derivative Security (Inst 3 and 4)				9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	i lly	10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4)	Beneficial Ownership	
					Code		/ (A) (D)	Date Exercis	sable	Expiration Date		Amour or Numbe of Shares	er						
		FREPORTING PERSON		EMENT, I	LLC															
(Last) (First) (Middle) 1 DEFOREST AVENUE																				
SUITE 2	00					_														
(Street)	Γ	NJ	(07901																
(City)		(State)	(.	Zip)																

1. Name and Address of Reporting Person* FOURNIER ALAN								
(Last) (First) (Middle)								
C/O PENNANT CAPITAL MANAGEMENT, LLC								
1 DEFOREST AVENUE, SUITE 200								
(Street)								
SUMMIT	NJ	07901						
(City)	(State)	(Zip)						

Explanation of Responses:

1. The reported securities are directly owned by certain private investment vehicles managed by Pennant Capital Management, LLC and may be deemed beneficially owned by Pennant Capital Management, LLC as investment manager of such private investment vehicles. The reported securities may also be deemed beneficially owned by Alan Fournier as Managing Member of Pennant Capital Management, LLC. The Reporting Persons disclaim beneficial ownership of the reported securities except to the extent of their pecuniary interest therein, and this report shall not be deemed an admission that such Reporting Persons are the beneficial owners of the securities for purposes of Section 16 of the Securities Exchange Act of 1934, as amended, or for any other purpose.

Pennant Capital Management,

LLC, By: /s/ Alan Fournier, 08/06/2012

Principal

/s/ Alan Fournier 08/06/2012

** Signature of Reporting Person Date

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

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.

^{*} 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).