FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL
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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

1. Name and Address of Reporting Person [*] Pennant Capital Management, LLC					UN	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 Officer (give title Other (specify						
1 DEFOREST AVENUE,					3. Date of Earliest Transaction (Month/Day/Year) 09/02/2015]	belo		e	belov			
				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) SUMMIT NJ 07901												Form filed by One Reporting Person X Form filed by More than One Reporting Person								
(City)	(St	ate) (2	Zip)																	
		Tabl	el-N	Non-Deriv	vative	Sec	curitie	s Ace	quired,	Dis	posed o	f, or E	Benefi	iciall	y Own	ed				
1. Title of Security (Instr. 3) Date (Month/Day/Y				//Year)	Exe if a	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (<i>I</i> Disposed Of (D) (Instr. 3 and 5)					cially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) (D)	or Pr	ice	Report Transa				(1130.4)	
Common	Stock			09/02/2	015				s		850	I		\$ <mark>13</mark>	84	8,219		I See footnote ⁽¹⁾		
		Та	ble II	- Derivat							osed of, onvertib				Owned	I				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu if any	Execution Date, if any		4. Transaction Code (Instr. 8)				6. Date Exerci Expiration Da (Month/Day/Y		Amount of		r.	Price f erivative ecurity nstr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transacti (Instr. 4)	e Ownershi 5 Form: Ily Direct (D) or Indirec 9 (I) (Instr. 4)		Beneficial Ownership	
					Code	v	/ (A)	(D)	Date Exercisa	able	Expiration Date	Title	or Numb of Share	ber						
		f Reporting Person I Manageme		<u>LC</u>																
(Last) 1 DEFOI SUITE 2	REST AVE	(First) NUE,	(N	liddle)																
(Street) SUMMI	Г	NJ	0′	7901																
(City)		(State)	(Z	lip)																

1. Name and Add FOURNIEF	ress of Reporting Pe RALAN	erson*								
(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. These securities are directly owned by certain private investment vehicles managed by Pennant Capital Management, LLC ("Pennant") and may be deemed beneficially owned by Pennant 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. 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,
 09/04/2015

 Principal
 /s/ Alan Fournier
 09/04/2015

 ** 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.