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

_	_	_	_	_		
				Washington,	D.C.	2054

Vashington,	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

OMB APPROVAL								
OMB Number:	3235-0362							
Estimated average burden								
hours per response.	1.0							

Form 3	3 Holdings Rep	orted.																
_	Transactions		Fi	iled pursuant or Secti					urities Excha Company Ac		of 1934							
1. Name and Address of Reporting Person* SENK GLEN T				2. Issuer Name and Ticker or Trading Symbol URBAN OUTFITTERS INC [URBN] 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner														
(Last) 5000 SO	`	irst) AD STREET	(Middle)		3. Statement for Issuer's Fiscal Year Ended (Month/t 01/31/2007						ear)	X Officer (give title Other (specify below) President, Anthropologie						
(Street) PHILADELPHIA PA 19112				4. If Ame	4. If Amendment, Date of Original Filed (Month/Day/Year) 5. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting													
(City)	(S	tate)	(Zip)									Persor	1					
		Tab	le I - Non-Deri	ivative Se	curiti	ies A	Acquire	ed, D	isposed	of, or E	Beneficial	ly Owned						
Date		2. Transaction Date (Month/Day/Year	2A. Deeme Execution if any (Month/Da	Date,		Transaction Code (Instr.		4. Securities Acquired (A) or Dispose Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned at end of		6. Ownership Form: Direct (D) or		7. Nature of Indirect Beneficial Ownership			
			1,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Amo	unt	(A) or (D)	Price	Issuer's F	Issuer's Fiscal Year (Instr. 3 and			(Instr. 4)			
Common	Stock				(1)		(1)				400,0		00 ⁽²⁾ D					
Common Stock						(1)(3))				5,064(3)		I		By Profit Sharing Fund Trust			
		7	Table II - Deriv (e.g.,	ative Seco								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)			te	of Secu Underly	ing ve Security	8. Price of Derivative Security (Instr. 5)			Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares							
Employee Stock Options - right to buy	\$14.35			(1)			01/31/20	005 ⁽⁴⁾	06/20/2014	Commo Stock	n 1,600,000		1,600	,000	D			
Employee Stock	¢21 11			(1)			01/19/20	nne ⁽⁵⁾	11/17/2015	Commo	n 100,000		100	000				

Explanation of Responses:

right to

- 1. Report of fiscal year-end holdings only.
- $2.\ Shares$ represent restricted stock granted by the issuer's Board of Directors.
- 3. This line item reports the balance of shares in the Profit Sharing Trust after covering certain administrative costs of the Trustee.
- 4. Options vested in their entirety on January 31, 2005. All common shares acquired upon exercise of these options are required to be held by the Reporting Person for one year after the date of exercise of the option, except that the Reporting Person may sell such number of shares as is required to satisfy his tax obligations resulting from such exercise.
- 5. Options vested in their entirety on January 18, 2006. All common shares acquired upon exercise of these options are required to be held by the Reporting Person until 11/18/10.

03/0<u>7/2007</u>

** Signature of Reporting Person

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.