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. | 20549 |
|-------------|------|-------|

| ANNUAL STATEMENT OF CHANGES IN BENEFICIAL |
|--|
| OWNERSHIP |

| | OMB APPRO | VAL |
|---|------------------------|-----------|
| | OMB Number: | 3235-0362 |
| l | Estimated average burd | en |
| | hours per response: | 1.0 |

T Form 2 Holdings Poported

Instruction 1(b)

| stock | | 06/23/2003 | | (2) G | 12,000(3) | D | \$0.00 | 1,065,984 | I | By Spouse by Hayne Foundation | |
|---------------------------------|--|--|--|--|--|---|--|--|---|--|--|
| itock | | | | (2) | | | | 1,065,984 | I | By Spouse | |
| | | 1 | | | | - | | | + | | |
| stock | | | | (2) | | | | 3,492,306 | I | By Irrevocable Trust | |
| itock | | | | (2) | | | | 3,492,306 | I | By Irrevocable Trust | |
| itock | | | | (1)(2) | | | | 23,640(1) | I | By Profit Sharing Fund | |
| | | (MORTRI DAYI YEAR) | | Code (Instr. 8) | Amount | (A) or (D) | Price | Owned at end of Issuer's Fiscal Year (Instr. 3 and 4) | Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| 1. Title of Security (Instr. 3) | | 2. Transaction Date | 2A. Deemed Execution Date, | 3. Transaction | 4. Securities Acc | quired (A) | | 5. Amount of Securities | 6. Ownership | 7. Nature of Indirect | |
| (Sta | | | rative Seaur | tion Annui | red Dienese | d of o | Donofici | | | | |
| LPHIA PA | 1 | 19112 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | · . | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting | | | |
| | , | Middle) | 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 01/31/2007 | | | | //Year) | X Officer (give title Other (specify below) CEO | | | |
| | | | 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 X 10% Owner | | | |
| GI Git | (Firm (Firm CH BROA) LPHIA PA (Statement (| Address of Reporting Person* RICHARD A (First) (TH BROAD STREET LPHIA PA (State) (Table or the properties of the properties of the person | (First) (Middle) CH BROAD STREET LPHIA PA 19112 (State) (Zip) Table I - Non-Deriverity (Instr. 3) 2. Transaction Date (Month/Day/Year) ock | (First) (Middle) (First) (Middle) TH BROAD STREET 3. Statement: 01/31/2007 4. If Amendm (State) (Zip) Table I - Non-Derivative Securion Date (Month/Day/Year) (Month/Day/Year) Ock | Address of Reporting Person* RICHARD A (First) (Middle) CH BROAD STREET A. If Amendment, Date of Order of Control of C | Address of Reporting Person* RICHARD A (First) (Middle) TH BROAD STREET 2. Issuer Name and Ticker or Trading Symbol URBAN OUTFITTERS INC [1] 3. Statement for Issuer's Fiscal Year Ended (No1/31/2007) 4. If Amendment, Date of Original Filed (Month Partity (Instr. 3)) Table I - Non-Derivative Securities Acquired, Dispose Execution Date (Month/Day/Year) (Month/Day/Year) RICHARD A 2. Issuer Name and Ticker or Trading Symbol URBAN OUTFITTERS INC [1] 3. Statement for Issuer's Fiscal Year Ended (No1/31/2007) 4. If Amendment, Date of Original Filed (Month Month/Day/Year) Assertites Acquired, Dispose (Figure 1) Amount Ock (1)(2) | Address of Reporting Person* RICHARD A (First) (Middle) TH BROAD STREET 3. Statement for Issuer's Fiscal Year Ended (Month/Day 01/31/2007 4. If Amendment, Date of Original Filed (Month/Day/Year) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or rity (Instr. 3) 2. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) 2. Issuer Name and Ticker or Trading Symbol URBAN OUTFITTERS INC [URBN] 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) (Month/Day/Year) 4. If Amendment, Date of Original Filed (Month/Day/Year) of (Month/Day/Year) 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 4. If Amendment, Date of Original Filed (Month/Day/Year) of (Month/Day/Year) of (Month/Day/Year) 4. If Amendment, Date of Original Filed (Month/Day/Year) of (Month/D | Address of Reporting Person* RICHARD A (First) (Middle) TH BROAD STREET A. If Amendment, Date of Original Filed (Month/Day/Year) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficial Filed (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (A) Or (D) (Instr. 3, 4 and 5) (A) Or (D) (Price) | Check all applicable X Director X Officer (give to below) | Address of Reporting Person RICHARD A (First) (Middle) TH BROAD STREET 2. Issuer Name and Ticker or Trading Symbol URBAN OUTFITTERS INC [URBN] 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) (State) (Zip) 3. Statement, Date of Original Filed (Month/Day/Year) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned Person (Month/Day/Year) 2. Issuer Name and Ticker or Trading Symbol URBAN OUTFITTERS INC [URBN] 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 4. If Amendment, Date of Original Filed (Month/Day/Year) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned Amount (A) or Disposed of Securities Beneficially Owned at end of Securities Beneficially Owned at end of Securities Beneficially Owned at end of Securities Securit | |

Explanation of Responses:

- 1. This line item reports the balance of shares in the Profit Sharing Trust after covering certain administrative costs of the Trustee.
- 2. Report of fiscal year-end holdings only.
- 3. Number of shares subject to original transaction was 1,300. Number reported reflects impact of subsequent stock splits.

03/07/2007 Richard A. Hayne

** 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.