FORM 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | $D \subset$ | 205/10 |
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| wasiiiigton, | D.C. | 20549 |

OWNERSHIP

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| ABBULAL CTATERIEST | OF OUR MORE IN DENERIOUS |
| ANNUAL STATEMENT | OF CHANGES IN BENEFICIAL |

| OMB APPROVAL | | | | | | | | |
|---------------------|----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-036 | | | | | | | |
| Estimated average b | ourden | | | | | | | |

1.0

hours per response:

| Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). |
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| |

Check this box if no longer subject to

Form 3 Holdings Reported.

| Form 4 | 1 Transactions I | Reported. | Fil | ed pursuant t or Sectio | | | | | urities Excha Company Ad | | | | | | | | | |
|--|---|--|---|---|---|-------|---|------|---|----------------|--|---|--|---|---|--|--|-------|
| 1. Name and Address of Reporting Person* STROUSE ROBERT H | | | | | 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) (First) (Middle) C/O 1809 WALNUT STREET | | | | | 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 01/31/2006 | | | | | | ⁄ear) | Officer (give title Other (specify below) below) | | | | | | ecify |
| (Street) PHILADELPHIA PA 19103 | | | | 4. If Amer | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year) | | | 2A. Deemed Execution D | 2A. Deemed Execution Date, | | | 4. Securities Acquired Of (D) (Instr. 3, 4 and | | ired (A) or Dispose | | | 5. Amour Securities Beneficia Owned at | nt of s illy | 6. Ownership Form: Direct (D) or | rship Direct | 7. Nature of Indirect Beneficial Ownership | | |
| | | , | 'ear) 8) | | (A) or (D) | Price | | | Issuer's Fiscal Year (Instr. 3 and 4) | | Indirect (I) (Instr. 4) | | (Instr. 4) | | | | | |
| | | Т | able II - Deriva (e.g., p | tive Secu outs, calls | | | | | | | | | 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) | 5. Number of Expiration Date | | 7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | | 9. Number of derivative Securities Beneficially Owned Owned Transaction(s) (Instr. 4) | | 10. Ownersh Form: Direct (D or Indire (I) (Instr. | nip c E)) (| Beneficial Ownership t (Instr. 4) | | | |
| | | | | | (A) | (D) | Date Exercisa | able | Expiration Date | Title | Amou or Numb of Share | er | | | | | | |
| Director Stock Options Right-to- Buy | \$4.26 | | | (1) | | | 06/25/2 | 003 | 06/24/2012 | Commo Stock | n 80,00 | 0 | | 80,00 | 000 D | | | |
| Director Stock Options Right-to- Buy | \$4.32 | | | (1) | | | 06/04/2 | 004 | 06/04/2013 | Commo Stock | n 80,00 | 0 | | 80,00 |) D | | | |
| Director Stock Options Right-to- Buy | \$13.72 | | | (1) | | | 06/02/2 | 005 | 06/01/2014 | Commo Stock | n 80,00 | 0 | | 80,00 | 00 | D | | |
| Director Stock Options Right-to- buy | \$27.45 | | | (1) | | | 12/13/2 | 005 | 06/12/2015 | Commo Stock | n 50,00 | 0 | | 50,00 | 00 | D | | |

Explanation of Responses:

1. Report of fiscal year-end holdings only.

Robert H. Strouse

02/28/2006

** 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.