FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

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* <u>Miller Marc D</u>						2. Issuer Name and Ticker or Trading Symbol UNIVERSAL HEALTH SERVICES INC								Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner					
(1-1) (5:1-1) (4:1-1)					-   01	UHS]								X Office below	fficer (give title		Other (specify below)		
(Last) (First) (Middle) UNIVERSAL HEALTH SERVICES, INC. 367 SOUTH GULPH ROAD						3. Date of Earliest Transaction (Month/Day/Year) 12/09/2015								President					
(Street)  KING OF PRUSSIA  PA  19406				4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable lee)  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City) (State) (Zip)																			
		Tab	le I - No	n-Deri	vativ	e Se	curit	ties Ac	quired,	Dis	posed o	f, or Be	neficial	ly Owne	k				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					ar) E	any	emed ion Date, /Day/Year	Code (	Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		Benefic	es ially Following	Form	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price	Transac (Instr. 3	tion(s)			(111501.4)	
Class B Common Stock 12/09/2					9/2015	:015			М		45,000	) A	\$43.6	7 90	90,513		D		
Class B Common Stock 12/09/2					9/2015	2015			F		29,262	2 D	\$120.	28 61	61,251		D		
		-	Table II -								osed of, converti			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemo Execution if any (Month/Da	Date,	4. Transa Code (l 8)				6. Date E Expiratio (Month/D	n Dat	of Securities		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transacti (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amount or Number of Shares						
Option To Purchase Class B Common	\$43.67	12/09/2015			М			45,000	(1)		01/18/2016	Class B Common Stock	45,000	\$0	0		D		

## **Explanation of Responses:**

1. The option vested on 1/19/2014 and 1/19/2015.

/s/ Steve Filton, Attorney in Fact for Marc D. Miller

12/10/2015

\*\* 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.