FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL										
OMB Number:	3235-028									

37 Estimated average burden hours per response: 0.5

## 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

Santoru (Last) ETHICS	nd Address of im Richa (F AND PUB	3. E	Issuer Name and Ticker or Trading Symbol     UNIVERSAL HEALTH SERVICES INC [     UHS ]  3. Date of Earliest Transaction (Month/Day/Year)     05/27/2008										eck all app	blicable) ctor er (give title		10% Owner Other (specify below)						
(Street)	NGTON D	tate)	20005 (Zip)	n-Deriv											up Filing (Check Ap ne Reporting Perso ore than One Repo		n					
Date				2. Trans Date (Month/		ar)   E	2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transact Code (In 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			A) or B, 4 and	Secur Benef	cially d Following	Forr (D) (	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									-	Code	v	Amount	(A) (D)	or	Price	Trans	action(s) 3 and 4)			(		
Class B C	Common St	ock		05/27	7/2008	В				M		2,500	) .	1	\$59.7	8	2,500		D			
Class B C	Common St	ock		05/27	7/2008	В				F		2,339	) ]	)	\$63.8	9	161		D			
1. Title of Derivative	2. Conversion	3. Transaction	3A. Deemo	(e.g., p	outs,	call	s, wa	s Acc arrants	s, o	red, Di options	s, C	onverti	ble se	curit	cially ies)	8. Price of	f 9. Numb		10. Ownership	11. Nature		
Security (Instr. 3)	conversion or Exercise Price of Derivative Security	(Month/Day/Year)	if any (Month/Da	·	Transaction Code (Insti					onth/Day		r)	Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			Security (Instr. 5)	Securitie Benefici Owned Followin Reported Transact (Instr. 4)	es ally ig d tion(s)	Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)		
					Code	v	(A)	(D)	Dat Exe	te ercisable		xpiration ate	Title	or Nu of	ımber							
Option To Purchase Class B Common	\$59.78	05/27/2008			M			2,500		(1)	05	5/16/2012	Class I Commo Stock		,500	\$0	7,50	00	D			

## **Explanation of Responses:**

1. The options vested as to 1,000 shares on May 16, 2008.

/s/ Steve Filton, attorney-in-

**fact** 

\*\* Signature of Reporting Person

Date

01/16/2009

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.