FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

wasinigton,	D.C. 20343

OMB APPROVAL

OMB Number: 3235-0287 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).

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* MILLER ALAN B (Last) (First) (Middle) UNIVERSAL HEALTH SERVICES, INC. 367 SOUTH GULPH ROAD				2. Issuer Name and Ticker or Trading Symbol UNIVERSAL HEALTH SERVICES INC UHS]									Relaced No. 12 Relace	wner (specify				
					3. Date of Earliest Transaction (Month/Day/Year) 03/08/2016										below) below) Chairman and CEO			
(Street) KING OF	A PA		19406		4. If An	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Appl Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(St		Zip)	Dorive	ativo S	o o uriti	ns A o	nuirod	Dice	acced o	f o	r Pon	ofici	ally	Own	nd		
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			I (A) 01) or 5. 4 and S B		ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
						Code	v	Amount		(A) or (D)	Price	9	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Class B C	ommon Sto	ock		03/08	/2016			G	V	5,000)	D	\$	0	7:	11,807	D	
Class B C	ommon Sto	ock													10	00,000	I	AMK 2014 LLC
Class B C	ommon Sto	ock													5	5,763	I	By The Abby Miller King 2011 Family Trust
Class B C	ommon Sto	ock													10	00,000	I	MDM 2014 LLC
Class B C	ommon Sto	ock													10	00,000	I	MS 2014 LLC
Class B C	ommon Sto	ock													5	9,900	I	The Marc Daniel Miller 2011 Family Trust
Class B Common Stock													55,763		I	The Marni Spencer 2011 Family Trust		
		Ta	able II - C							sed of, onvertib				y O	wned			
Derivative Conversion Date Execusive Or Exercise (Month/Day/Year) if any		3A. Deeme Execution if any (Month/Da	ed 4. 1 Date, Transactio Code (Inst		5. Number of		6. Date E Expiratio (Month/D	xercis n Date	able and	7. Title and Amount of Securities Underlying Derivative Security (Instrand 4)			Deri Sec	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(: (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code V	(A) (D)				Expiration Date	Amou or Numb of Title Share		nber					

Explanation of Responses:

/s/ Alan B. Miller

03/09/2016

** 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.