FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

**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

Name and Address of Reporting Person*     OSTEEN DEBRA K						2. Issuer Name and Ticker or Trading Symbol UNIVERSAL HEALTH SERVICES INC UHS ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify				
(Last)		rst)	(Middle)											X below			below)	pecity
(Last) (First) (Middle) UNIVERSAL HEALTH SERVICES, INC. 367 SOUTH GULPH ROAD						3. Date of Earliest Transaction (Month/Day/Year) 03/23/2016								,	Senior Vi	ce Pre	esident	
(Street) KING OF PRUSSIA PA 19406				4. 11	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 Person					
(City)	(Si	tate)	(Zip)											. 3730				
		Tab	le I - Nor	-Deriv	ative	e Se	curities	s Ac	quired,	Dis	osed o	f, or Bei	neficial	ly Owned	d			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Execution Date,			Code (I	unsaction de (Instr. 5)  4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)				Benefic	es Formally (D) (Sollowing (I) (I		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code				v	Amount	(A) or (D)	Price	Transac (Instr. 3	tion(s)			(au. +)	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, I Gecurity or Exercise (Month/Day/Year) if any				ransaction of ode (Instr. Derivative			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				C	Code	v	(A)	(D)	Date Exercisabl		xpiration vate	Title	Amount or Number of Shares					
Option To Purchase Class B Common Stock	\$118.62	03/23/2016			A		70,000		(1)	0	3/22/2021	Class B Common Stock	70,000	\$118.62	70,00	0	D	

## **Explanation of Responses:**

1. Option vests ratably on each of 3/23/2017, 3/23/2018, 3/23/2019 and 3/23/2020.

/s/ Steve Filton, Attorney-in-

Fact for Ms. Osteen

03/24/2016

\*\* 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.