

OMB APPROVAL	
OMB Number:	3235-0287
Estimated average burden hours per response:	0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* <u>Peterson Matthew Jay</u> (Last) (First) (Middle) <u>367 SOUTH GULPH ROAD</u> (Street) <u>KING OF PRUSSIA PA 19406</u> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>UNIVERSAL HEALTH SERVICES INC [UHS]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input type="checkbox"/> 10% Owner <input type="checkbox"/> Officer (give title below) <input checked="" type="checkbox"/> Other (specify below) <input type="checkbox"/> <u>Executive Vice President, UHS</u>
	3. Date of Earliest Transaction (Month/Day/Year) <u>03/18/2020</u>	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

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 Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Class B Common Stock								23.2353 ⁽¹⁾	D	

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)	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 Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (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)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date					
Option To Purchase Class B Common Stock	\$67.69	03/18/2020		A ⁽²⁾		25,000		(3)	03/17/2025	Class B Common Stock	\$67.69	25,000	D	
Option To Purchase Class B Common Stock	\$74.46 ⁽⁴⁾	03/18/2020		A ⁽²⁾		29,610		(3)	03/17/2025	Class B Common Stock	\$74.46	29,610	D	

Explanation of Responses:

- 23.2353 Class B shares purchased on January 9, 2020 at a discounted rate of \$129.114 pursuant to the Universal Health Services 2005 Employee Stock Purchase Plan.
- Option granted to purchase shares of Class B Common Stock under the Company's Third Amended and Restated 2005 Stock Incentive Plan.
- Option vests ratably on each of 3/18/2021, 3/18/2022, 3/18/2023 and 3/18/2024.
- Options were granted at 110% of the market price on the date of the grant.

/s/ Steve Filton, Attorney-in-Fact for Mr. Peterson 03/20/2020

** 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.

POWER OF ATTORNEY

I, Matthew J. Peterson, do hereby designate Steve Filton to act as my lawful attorney-in-fact to execute and have delivered on my behalf, with the Securities and Exchange Commission and the New York Stock Exchange, certain forms as they pertain to my reporting of holdings of Universal Health Services, Inc., Common Stock.

Such necessary forms shall consist of a Form 4, Statement of Changes in Beneficial Ownership and Form 5, Annual Statement of Changes in Beneficial Ownership.

I hereby ratify and confirm all that said attorney shall lawfully do or cause to be done by virtue hereof.

/s/ Matthew J. Peterson

Signed and dated on this 3rd day of October, 2019.

The undersigned, Steve Filton hereby affirms that he is the person named herein as attorney-in-fact and that his original signature is affixed hereto.

/s/ Steve Filton

Signed and dated on this 3rd day of October, 2019.

COMMONWEALTH OF PENNSYLVANIA COUNTY OF MONTGOMERY

On this 3rd day of October, in the year 2019, before me, Douglas R. Tewksbury, personally appeared Matthew J. Peterson and Steve Filton, personally known to me and have executed this document in my presence.

/s/ Douglas R. Tewksbury

(SEAL) Signature of Notary Public
COMMONWEALTH OF PENNSYLVANIA

NOTARIAL SEAL
DOUGLAS R. TEWKSBURY, Notary Public
Upper Merion Twp., Montgomery County
My Commission Expires October 25, 2020