FORM 4

Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to	STATEMENT OF CHANGES IN BENEFICIAL	OWNERSHIP
Section 16. Form 4 or Form 5		
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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* HOTZ ROBERT H				<u>U</u>	2. Issuer Name and Ticker or Trading Symbol UNIVERSAL HEALTH SERVICES INC [UHS]									k all applic	cable)	ig Pers	son(s) to Issi 10% Ow		
(Last)	,	irst) XY HOWARD &	(Middle) ZUKIN		3. Date of Earliest Transaction (Month/Day/Year) 03/23/2016									Officer below)	(give title		Other (s below)	pecify	
245 PARK AVENUE, 20TH FLOOR				4.	If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street) NEW Y	ORK N	Y	10167										ine) X	ine)					
(City)	(S	tate)	(Zip)																
		Tab	le I - Non-De	rivativ	e Se	curities	s Ac	quired, C	Disp	osed c	of, or Be	nefici	ally	Owned					
Date				2A. Deeme Execution if any (Month/Day		Date,	Code (In	ransaction Disposed Of Code (Instr. 5)		ties Acquired (A) I Of (D) (Instr. 3, 4		l and Securitie Benefici Owned F		s ally following	Form (D) o	Form: Direct	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	(A) or (D)	Pric	rice Reported Transact (Instr. 3 a		tion(s)			(Instr. 4)		
		-	Table II - Deri (e.g.					uired, Di						wned		,	,		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		Derivative Security		9. Numbe derivative Securities Beneficia Owned Following Reported Transactie (Instr. 4)	e s Illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable		xpiration vate	Title	Amou or Numb of Share	er						
Option To Purchase Class B Common Stock	\$118.62	03/23/2016		A		15,000		(1)	0	3/22/2021	Class B Common Stock	15,00	00	\$118.62	15,00	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 Mr. Hotz

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.