FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANG	ES IN BE	NEFICIAL	OWNERS	HIP

Igion, D.C. 20549	OMB APPROVAL

	OMB Number:	3235-0287								
ı	Estimated average burden									
ı	hours nor resnance	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* FILTON STEVE					<u>U</u>	2. Issuer Name and Ticker or Trading Symbol UNIVERSAL HEALTH SERVICES INC [UHS]									(Che	5. Relationship of Reportin (Check all applicable) Director Officer (give title			g Person(s) to Issuer 10% Owner Other (specify		
(Last) (First) (Middle) UNIVERSAL HEALTH SERVICES, INC. 367 SOUTH GULPH ROAD						3. Date of Earliest Transaction (Month/Day/Year) 06/04/2014										X Officer (give title Officer (specify below) Senior Vice President & CFO					
(Street) KING O	D/	A	19406		4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)																		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Execution Date,		, Tr	Transaction Disposed Code (Instr. 5)		ties Acquired (A) or d Of (D) (Instr. 3, 4 and			5. Amount of Securities Beneficially Owned Following		Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)					
							C	ode V	,	Amount (A) (D)) or)	Price	Transact (Instr. 3	ion(s)			(111501. 4)			
Class B C	Common Sto	ock		06/04	4/201	2014			М		70,000		A	\$31.1	3 272	272,859		D			
Class B Common Stock 06/04/2					4/201	2014			F		43,537 D		\$92.83	3 229	229,322		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. Deeme Execution if any (Month/Day	Date,	4. Transa Code (l 8)		n of E		Expi	6. Date Exercisable : Expiration Date (Month/Day/Year)			and 7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)		e O s Fe lly D oi (!)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exer	cisable		xpiration ate	Title	O N	Amount or Jumber of Shares						
Option To Purchase Class B Common Stock	\$31.18	06/04/2014			M			70,000		(1)	1	2/16/2014	Class Comm Stock	ion 7	70,000	\$0	0		D		

Explanation of Responses:

 $1.\ Options\ vested\ ratably\ on\ 12/16/2010,\ 12/16/2011,\ 12/16/2012\ and\ 12/16/2013.$

/s/ Charles F. Boyle, Attorneyin-Fact for Mr. Filton

06/06/2014

** 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.