Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	OVAL			
OMB Number:	3235-0287			
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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

1. Name ar	<u>U</u>	2. Issuer Name and Ticker or Trading Symbol UNIVERSAL HEALTH SERVICES INC UHS]								eck all appli Directo V Officer	ationship of Reportin k all applicable) Director Officer (give title below)		g Person(s) to Issuer 10% Owner Other (specify below)						
(Last) (First) (Middle) UNIVERSAL HEALTH SERVICES, INC. 367 SOUTH GULPH ROAD							3. Date of Earliest Transaction (Month/Day/Year) 05/19/2015								Senior Vi	ce Pre	,		
(Street) KING OF PRUSSIA PA 19406						4. If Amendment, Date of Original Filed (Month/Day/Year)								e) X Form f Form f					
(City)	(S	tate)	(Zip)																
		Tak	le I - No	n-Deri	vativ	e Se	curit	ies Ac	quired,	Dis	sposed o	f, or Be	neficial	y Owned	l				
1. Title of Security (Instr. 3) 2. Transc Date (Month/L						Execution Date,		Code (I	Transaction Disposed Of (D) (5) Securition Beneficit Owned I	5. Amount of Securities Beneficially Owned Following Reported		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Transac (Instr. 3	tion(s)			(Instr. 4)	
Class B Common Stock 05/19/						2015			M		35,000) A	\$43.6	7 123	123,627		D		
Class B Common Stock 05/19/2						2015			F		22,061	l D	\$125.7	76 101	101,566		D		
		-	Table II -	Deriva (e.g., p	ative puts,	Secu call:	ıritie S, Wa	∍s Acq arrants	uired, E , optio	Disp ns, o	osed of, converti	or Bend ble secu	eficially ırities)	Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	se (Month/Day/Year)	Execution Date, if any		4. Transaction Code (Instr. 8)		n of		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. Numbe derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisal	ble	Expiration Date	Title	Amount or Number of Shares						
Option To Purchase Class B Common	\$43.67	05/19/2015			М			35,000	(1)		01/18/2016	Class B Common Stock	35,000	\$0	0		D		

Explanation of Responses:

1. Options vested as follows: 17,500 on 1/19/2014 and 17,500 on 1/19/2015.

/s/ Steve Filton, Attorney-in-Fact for Ms. Osteen

05/21/2015

** 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.