Instruction 1(b).

FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

Check this box if no longer subject to	STATEMENT OF CHANGES IN BENEFICIAL	<b>OWNERSHIP</b>
Section 16. Form 4 or Form 5	O IN TERMENT OF OTHER TOPICE	O TTTTL TOTAL
obligations may continue. See		

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

1. Name and Address of Reporting Person*  Marquez Michael					<u>U</u>	2. Issuer Name and Ticker or Trading Symbol UNIVERSAL HEALTH SERVICES INC [ UHS ]								eck all appli Directo Y Officer	all applicable) Director Officer (give title		g Person(s) to Issuer 10% Owner Other (specif	
(Last) (First) (Middle) UNIVERSAL HEALTH SERVICES, INC. 367 SOUTH GULPH ROAD						3. Date of Earliest Transaction (Month/Day/Year) 03/11/2010								Senior Vice President				
(Street)  KING OF PA 19406				_   4.   _	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	e) X Form f Form f					
(City)	(S	tate)	(Zip)															
1. Title of Security (Instr. 3) 2. Tran		2. Trans	nsaction i		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transa Code (	3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		5. Amou Securitie Benefici Owned F	nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) or (D)	Price	Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Class B Common Stock				03/1	1/2010	0			М		10,000	) A	\$25.59	5 37,062			D	
Class B Common Stock				03/1	03/11/2010				F		8,389	D	\$33.5	28,673			D	
Class B Common Stock 03/1			03/1	1/2010	2010			S		2,000	D	\$33.5	6 26	,673		D		
		-	Table II -								osed of, converti			Owned				
Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	ise (Month/Day/Year) /e	Execution Date,		4. Transactio Code (Inst				6. Date Exercisable a Expiration Date (Month/Day/Year)		e	and 7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		Ownersh Form: Direct (D or Indire (I) (Instr.	Ownership	Beneficial Ownership ct (Instr. 4)
					Code	le V	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares					
Option To Purchase Class B Common	\$25.595	03/11/2010			M			10,000	(1)		08/02/2012	Class B Common Stock	10,000	\$0	10,000	0	D	

## Explanation of Responses:

1. The option vested ratably on each of 8/2/2008 and 8/2/2009.

/s/ Michael Marquez

\*\* Signature of Reporting Person Date

03/12/2010

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.