FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Nashington, I	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287 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* SUSSMAN ELLIOT J MD MBA				<u> </u>	2. Issuer Name and Ticker or Trading Symbol <u>UNIVERSAL HEALTH SERVICES INC</u> [UHS]						[(Ch	eck all applic	or 10% O		0% Ow	ner
(Last) (First) (Middle) HEALTH IN THE VILLAGES 1020 LAKE SUMTER LANDING					3. Date of Earliest Transaction (Month/Day/Year) 03/17/2021							below)	(give title		Other (s elow)	респу
(Street) THE VILLAGES FL 32162 (City) (State) (Zip)					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					
		Tab	le I - Non-I	 Derivati	ve Se	curities	s Ac	quired, Di	sposed o	of, or Be	neficial	y Owned				
Date			. Transacti Date Month/Day	Execution Date,		Code (Ins	Transaction Disposed Of (D) (Instr. 3, Code (Instr. 5)			Beneficia	s 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	Transact (Instr. 3 a	ion(s)			(Instr. 4)		
		-	Fable II - De					uired, Dis , options,				Owned	,			,
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Dat if any (Month/Day/Ye	Cod	saction of E		6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and An of Securities Underlying Derivative Sec (Instr. 3 and 4)		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4		Beneficial Ownership t (Instr. 4)		
				Cod	e V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Option To Purchase Class B Common Stock	\$138.8	03/17/2021		A ⁽¹⁾		10,000		(2)	03/16/2026	Class B Common Stock	10,000	\$138.8	10,000		D	

Explanation of Responses:

- 1. Option granted to purchase shares of Class B Common Stock under the Company's 2020 Omnibus Stock and Incentive Plan.
- $2. \ Option \ vests \ ratably \ on \ each \ of \ 3/17/2022, \ 3/17/2023, \ 3/17/2024 \ and \ 3/17/2025.$

/s/ Steve Filton, attorney-in-fact 03/19/2021 for Mr. Sussman

** Signature of Reporting Person

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.