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

		00540
Vashington,	D.C.	20549

STATEMENT	OF	CHANGES	IN BE	NEFICIAL	OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0287							
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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					2. Issuer Name and Ticker or Trading Symbol UNIVERSAL HEALTH SERVICES INC [UHS]								Relationship heck all app X Direc	licable)	ng Per	rson(s) to Is 10% Ov Other (s	vner		
(Last) THE VII	(Fir LLAGES H	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/15/2024								below			below)	specify		
3619 KIESSEL ROAD				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)								
(Street) THE VILLAC	SES FL	3	2163			X Form filed by One Reporting Person Form filed by More than One Reporting Person													
(City)	(Sta	ate) (Z	Zip)		$ _{\Box}$	Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See In													
		Table	I - Non	ı-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or l	Ben	efici	ally Own	ed			
1. Title of Security (Instr. 3) 2. Transar Date (Month/Date)				Execution D		Date,	3. Transaction Code (Instr. 8)						nd Securit Benefic Owned	ties cially Following	Form (D) o	Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)		Price		rted action(s) . 3 and 4)			(Instr. 4)
Class B Common Stock		05/15/	/2024			A ⁽¹⁾		1,097	97 A		\$0	0 5,048			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)	Derivative Conversion Date Execution D. Security or Exercise (Month/Day/Year) if any		on Date,		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		,	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	re es ally ng d tion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Nur of	ount nber ires					

Explanation of Responses:

1. These restricted stock units were granted pursuant to the Universal Health Services, Inc. Amended and Restated 2020 Omnibus Stock and Incentive Plan and all units shall vest on May 15, 2025.

/s/ Steve Filton, attorney-infact for Dr. Sussman

05/16/2024

** 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.