FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	nd Address of N STEVE	<u>U</u>	2. Issuer Name and Ticker or Trading Symbol UNIVERSAL HEALTH SERVICES INC [UHS]								neck all appl Direct	or 10% (give title Other		10% Ow Other (s below)	/ner			
(Last) UNIVER		3. Date of Earliest Transaction (Month/Day/Year) 09/11/2009									,	reside	ent & CFC					
(Street) KING OF PRUSSIA PA 19406					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								e) X Form Form	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(S	tate)	(Zip)															
		Tak	ole I - No	n-Deriv	vativ	e Se	curit	ies Ac	quired,	Dis	posed o	f, or Be	neficia	ly Owne	t			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						ear) i	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Transaction Code (Instr.		ties Acquii I Of (D) (In	ed (A) or str. 3, 4 and	Benefic	es ially Following	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A) or (D) Pric		Transac (Instr. 3	ction(s)			,su. 4,
Class B Common Stock 09/11/						2009			М		35,00	0 A	\$48.	35 13	133,706		D	
Class B Common Stock 09/11/						2009			F		27,58	6 D	\$61.	98 10	106,120		D	
		-	Table II -	Deriva (e.g., p	ative puts,	Secu call:	ıritie S, Wa	es Acq arrants	uired, E , optio	oisp	osed of, converti	or Ber ble sec	eficially urities)	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 Date, if any (Month/Day/Year)		4. Transaction Code (Instr 8)		of Deri Sec Acq (A) o Disp of (I	umber vative urities uired or oosed D) (Instr. and 5)	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 Transactic (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	ole I	Expiration Date	Title	Amount or Number of Shares					
Option To Purchase Class B Common	\$48.85	09/11/2009			М			35,000	(1)		03/15/2010	Class B Common Stock	35,000	\$0	0		D	

Explanation of Responses:

 $1. \ Options \ vested \ on \ 3/15/2006, \ 3/15/2007, \ 3/15/2008 \ and \ 3/15/2009.$

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

09/14/2009

** 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.