FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

<b>STATEMENT</b>	OF CHANGES	S IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). 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*  Miller Marc D					2. Issuer Name and Ticker or Trading Symbol UNIVERSAL HEALTH SERVICES INC UHS ]						[ (Che	S. Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner  Officer (nine title Check (appoint))				
(Last) (First) (Middle) UNIVERSAL HEALTH SERVICES, INC.					3. Date of Earliest Transaction (Month/Day/Year) 03/17/2021							X Officer (give title below) Other (specify below)  President and CEO				
367 SOUTH GULPH ROAD				L												
(Street) KING O PRUSSI	D,	A	19406		4. If Amendment, Date of Original Filed (Month/Day/Year)					Line	dividual or Joint/Group Filing (Check Applicable )  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)													
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
Date				action 2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Ins	ion   Di				Securities F Beneficially (		Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code V Amount (A) or (D)			Price	Transacti	Transaction(s) (Instr. 3 and 4)		(msu. 4)				
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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Yea	Code	Transaction Derivative Code (Instr. Securities		e s I (A) sed str.	6. Date Exercisable and Expiration Date (Month/Day/Year)  (Month/Day/Year)  7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)			ies g Security	8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned Following Reported	Owners Form: Direct (I or Indirect) (I) (Instr	Beneficial Ownership ect (Instr. 4)	
				Code	· V	(A)	(D)	Date Exercisable	Expir Date	ration	Title	Amount or Number of Shares		Transaction (Instr. 4)	n(s)	
Option To Purchase Class B Common Stock	\$138.8	03/17/2021		A <sup>(1)</sup>		125,000		(2)	03/16	6/2026	Class B Common Stock	125,000	\$138.8	125,000	) D	
Option To Purchase Class B Common Stock	\$152.68 <sup>(3)</sup>	03/17/2021		A <sup>(1)</sup>		140,425		(2)	03/16	6/2026	Class B Common Stock	140,425	\$152.68	140,425	5 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.
- 3. Options were granted at 110% of the market price on the date of the grant.

/s/ Steve Filton, Attorney in Fact for Marc D. Miller

03/19/2021

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.