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

Washington, D.C. 20549

STATEMENT	OF CHANG	GES IN BEN	NEFICIAL C	WNERSHIP

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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

Name and Address of Reporting Person* MILLER ALAN B					<u>U</u>	2. Issuer Name and Ticker or Trading Symbol UNIVERSAL HEALTH SERVICES INC [UHS]										able)	g Perso	10% O	wner
(Last) (First) (Middle) UNIVERSAL HEALTH SERVICES, INC. 367 SOUTH GULPH ROAD				3. Date of Earliest Transaction (Month/Day/Year) 12/14/2016								X	Officer (give title below) Chairman and CEO						
(Street) KING O	A P		19406		4.	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Indiv Line) X							ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	itate)	(Zip)											<u> </u>					
			ble I - No			_			-	d, Di	_				_				
1. Title of Security (Instr. 3) 2. Transa Date (Month/E				Execution Date,		Cod	Transaction Disposed Of (D) (Instr. 3, 4 a					s Form lly (D) o ollowing (I) (In		7. Nature of Indirect Beneficial Ownership (Instr. 4)					
								Cod	e V	Amount	(A (D	or	Price	Transacti (Instr. 3 a	on(s)			(111311.4)	
Class B Common Stock 12/1			L4/201	2016		М		350,00	350,000		\$101.55	5 1,168,621			D				
Class B Common Stock 12/14			L4/201	2016		F		227,74	227,744 D \$		\$101.55	5 940,877			D				
			Table II -								posed of converti				Owned				
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	Execution D		Date, Transaction Code (Inst		n Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amour of Securities Underlying Derivative Security (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	O N	mount r lumber f Shares		Transaction(s) (Instr. 4)			
Option To Purchase Class B Common	\$36.95	12/14/2016			М			350,000	(1))	01/17/2017	Class Comm Stock	on 3	350,000	\$0	0		D	

Explanation of Responses:

1. The options vested on 01/18/2014, 01/18/2015, and 01/18/2016.

/s/ Alan B. Miller

12/15/2016

** 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.