FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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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*  FILTON STEVE							2. Issuer Name and Ticker or Trading Symbol UNIVERSAL HEALTH SERVICES INC [ UHS ]								ationship of Reportin c all applicable) Director Officer (give title below)		g Person(s) to Issuer  10% Owner  Other (specify below)		
(Last) (First) (Middle) UNIVERSAL HEALTH SERVICES, INC. 367 SOUTH GULPH ROAD							3. Date of Earliest Transaction (Month/Day/Year) 12/08/2017								Executive Vice President & CFO				
(Street) KING OF PA 19406					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								e) X Form f Form f	Form filed by More than One Reporting Person Ferson				
(City)	(S	tate)	(Zip)																
		Tak	le I - No	n-Deri	vativ	e Se	curit	ties Ac	quired,	Dis	posed o	f, or Be	neficial	y Owned	I				
1. Title of Security (Instr. 3)  2. Transa Date (Month/L						ar) E	any	emed ion Date, /Day/Year	Code (I	Transaction Disposed Code (Instr.		es Acquire Of (D) (Inst		Benefici	es ally Following	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D)	Price	Transac (Instr. 3	tion(s)			msu. 4)	
Class B C	8/2017	2017			M		70,000	) A	\$110.3	34 327	,492		D						
Class B Common Stock 12/08/2						2017			F		50,158	B D	\$110.3	34 277	277,334		D		
		-	Table II -								osed of, convertil			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	ate Executio	Date,		ansaction ode (Instr.		of I		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	e s lly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares						
Option To Purchase Class B Common Stock	\$53.38	12/08/2017			M			70,000	(1)		01/15/2018	Class B Common Stock	70,000	\$0	0		D		

## **Explanation of Responses:**

 $1. \ Option \ vested \ ratably \ on \ each \ of \ 1/16/2014, \ 1/16/2015, \ 1/16/2016 \ and \ 1/16/2017.$ 

/s/ Steve Filton

12/11/2017

\*\* 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.