FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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

1. Name and Address of Reporting Person* <u>Gibbs Lawrence S.</u>						2. Issuer Name and Ticker or Trading Symbol UNIVERSAL HEALTH SERVICES INC UHS								Relationship of Reporting Person(s) to Issuer Check all applicable)  X Director 10% Owner					
(Last)	`	(First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 01/16/2013									Officer below)	(give title		Other (s below)	pecify
599 LEXINGTON AVENUE #20						If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street) NEW YORK NY 10022														ine)  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																			
1. Title of Security (Instr. 3)  2. Transar Date (Month/Date)						ur) E	xecution f any	a. Deemed recution Date, any onth/Day/Year)				ities Acquired (A) or d Of (D) (Instr. 3, 4 an			5. Amour Securitie Beneficia Owned F Reported	s illy ollowing	Form	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership
								Code	V	Amount	(A) or (D)	Pric	e:e	Transact (Instr. 3 a	ion(s)			Instr. 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 Da if any (Month/Day/Y	Co	t, Transaction				6. Date Exe Expiration I (Month/Day	Date		7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		Derivative Security		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Co	ode \	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amou or Numb of Share	er					
Option To Purchase Class B Common Stock	\$53.38	01/16/2013		I	A		15,000		(1)	0	1/15/2018	Class B Common Stock	15,00	00	\$53.38	15,000	)	D	

## **Explanation of Responses:**

/s/ Steve Filton, Attorney-in-Fact for Mr. Gibbs

01/17/2013

\*\* 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.

<sup>1.</sup> Option vests ratably on each of 1/16/2014, 1/16/2015, 1/16/2016 and 1/16/2017.