FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP 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

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

					or Sect	ion 30(h) of the	Ínvestmer	nt Con	npany Act	of 194	40							
1. Name and Address of Reporting Person* FILTON STEVE						2. Issuer Name and Ticker or Trading Symbol <u>UNIVERSAL HEALTH SERVICES INC</u> [  UHS ]							ck all applic	cable) or		o Own	ner	
(Last) (First) (Middle) UNIVERSAL HEALTH SERVICES, INC. 367 SOUTH GULPH ROAD					3. Date of Earliest Transaction (Month/Day/Year) 03/04/2019								X Officer (give title Other (specify below)  Executive Vice President & CFO					
	Street) KING OF PRUSSIA PA 19406			4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person							
(City)	(City) (State) (Zip)																	
		Tab	le I - Nor	n-Deriva	ative Se	curities Ac	quired,	Dis	osed o	f, or	r Bene	eficially	y Owned					
Date				2. Transa Date (Month/Da		2A. Deemed Execution Date, if any (Month/Day/Year	3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount		(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Class B Common Stock				03/04/	/2019		M	М		)	A	\$140.8	347	7,334	D			
Class B Common Stock 03/0				03/04/	/2019		F		52,096	52,096		\$140.8	3 295	,238	D			
		•				urities Acqu s, warrants							Owned					
1. Title of Derivative Security	vative Conversion Date Execution Date, 1		Date, Tr	ransaction		Expiration	Date Exercisable and Diration Date			tle and a		8. Price of Derivative Security	9. Number derivative Securities	Owner	ship	11. Nature of Indirect Beneficial		

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)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 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. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Option To Purchase Class B Common Stock	\$78.17	03/04/2019		М			70,000	(1)	03/25/2019	Class B Common Stock	70,000	\$0	0	D		

## **Explanation of Responses:**

1. Option vests ratably on each of 3/26/2015, 3/26/2016, 3/26/2017 and 3/26/2018.

/s/ Steve Filton

03/04/2019

\*\* 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.