FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

	OMB APPROVAL									
l	OMB Number:	3235-0287								
	Estimated average burden									
I	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* FILTON STEVE					2. Issuer Name and Ticker or Trading Symbol UNIVERSAL HEALTH SERVICES INC [UHS]							[(CI	neck all appli Direct	nship of Reporting applicable) Director Officer (give title		son(s) to Iss 10% Ov Other (s	/ner	
(Last)	(F	irst)	(Middle)											X below)			below)	pecity
UNIVERSAL HEALTH SERVICES, INC. 367 SOUTH GULPH ROAD				3. Date of Earliest Transaction (Month/Day/Year) 03/26/2014									Seni	or Vice P	reside	ent & CFC		
(Street) KING O	F D		10.400		4. If	f Ame	ndment, [Date (of Original F	iled	(Month/Da	ay/Year)	6. I Lin	,			(Check Ap	
PRUSSI	A PA	1	19406											Form to		re thar	One Repo	rting
(City)	(S	tate)	(Zip)															
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transa Date (Month/Date)			Execution Date,		3. 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1				Benefici	es Formally (D) (Following (I) (I	Form (D) o	rm: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
						Code	v	Amount	(A) o (D)	r Price	Transac (Instr. 3	tion(s)			(IIISU. 4)			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
		ansaction of ode (Instr. Derivative			6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and of Securitie Underlying Derivative (Instr. 3 and			ties g e Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)					
				c	ode	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amount or Number of Shares					
Option To Purchase Class B Common Stock	\$78.17	03/26/2014			A		70,000		(1)	0	3/25/2019	Class B Common Stock	70,000	\$78.17	70,00	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/ Charles F. Boyle, Attorney-03/28/2014 in-Fact for Mr. Filton

** 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.