FORM 4

Check this box if no longer subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burden									
1	hours nor resnance.	0.5								

Section obligati	n 16. Form 4 or ions may contil tion 1(b).		OIA	Filed		to Section 16(a					1934			ll l		rerage burde sponse:	0.5
Name and Address of Reporting Person* Pember Marvin G.						2. Issuer Name and Ticker or Trading Symbol UNIVERSAL HEALTH SERVICES INC [UHS]						5. Relationship of Reporting (Check all applicable) Director X Officer (give title				10% Owne	
(Last) (First) (Middle) UNIVERSAL HEALTH SERVICES, INC. 367 SOUTH GULPH ROAD					3. Date of Earliest Transaction (Month/Day/Year) 03/18/2015						Senior Vice President						
(Street) KING OF PRUSSIA PA 19406				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S		(Zip)	-Deriv	ative Se	ocurities Ac	auire	d Dier	nosed o	of or Be	nefic	الدن	, Owned				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					action	quired, Disposed of, or Benefit 3. Transaction Code (Instr. 8) 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				red (A) o) or 5. Amount o		nt of s ally ollowing	Form (D) o	: Direct or Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
							Cod	e V	Amount	(A) (D)	Pri	ce	Transacti (Instr. 3 a	ion(s)	(ins		(Instr. 4)
		-				urities Acq s, warrants							Owned				
Derivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		Date, Ti	ransaction of Excode (Instr. Derivative (N			6. Date Exercisable and Expiration Date (Month/Day/Year)			nd Amo ties ng e Secur ind 4)	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)	Beneficia Ownershi (Instr. 4)		

Date Exercisable

(1)

Expiration Date

03/17/2020

Title

Class B

Common

Explanation of Responses:

\$117.29

Option To Purchase Class B

Common Stock

1. Option vests ratably on each of 3/18/2016, 3/18/2017, 3/18/2018 and 3/18/2019.

03/18/2015

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

Amount Number

of Shares

50,000

\$117.29

03/19/2015

50,000

D

** 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).

Code

Α

(A)

50,000

(D)

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.