Edgar Filing: Pember Marvin G. - Form 4

Form 4										
August 15, 20								OMB APPROVAL		
	UNITED	STATES		RITIES A			E COMMISSION	OMB Number:	3235-0287	
Check this if no longe subject to Section 16 Form 4 or	er STATEN 5.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							January 31, 2005 average urs per . 0.5	
Form 5 obligation: may contin <i>See</i> Instruct 1(b).	s Section 17((a) of the H	Public U		ding Cor	npany Ac	ange Act of 1934, t of 1935 or Sectio 1940	on		
(Print or Type Ro	esponses)									
1. Name and Address of Reporting Person <u>*</u> Pember Marvin G.			2. Issuer Name and Ticker or Trading Symbol UNIVERSAL HEALTH SERVICES INC [UHS]			Issuer ES				
(Last) UNIVERSA SERVICES, GULPH ROA	L HEALTH INC., 367 SOU			f Earliest T Day/Year) 2011	ransaction		Director X Officer (giv below) Senio		% Owner ler (specify nt	
			4. If Amendment, Date Original Filed(Month/Day/Year)			Applicable Line) _X_ Form filed by	 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)	(State)	(Zip)		le I - Non-I			Acquired, Disposed o		-	
	2. Transaction Date Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8)	4. Securit nAcquired Disposed (Instr. 3, 4	(A) or of (D)	Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(D) Price	(Instr. 3 and 4)			
Reminder: Repo	rt on a separate line	e for each cla	ass of sec	urities benef	ficially ow	ned directly	or indirectly.			

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transacti Code (Instr. 8)	5. Number of tiorDerivative 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 Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option To Purchase Class B Common Stock	\$ 38.12	08/11/2011		A	30,000		<u>(1)</u>	08/11/2016	Class B Common Stock	30,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
reporting of the runner runner and	Director	10% Owner	Officer	Other			
Pember Marvin G. UNIVERSAL HEALTH SERVICES, INC. 367 SOUTH GULPH ROAD KING OF PRUSSIA, PA 19406			Senior Vice President				
Signatures							
/s/ Steve Filton, Attorney-in- Fact for Mr. Pember		08/15/201	1				
<u>**</u> Signature of Reporting Person		Date					

Explanation of Responses:

* 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).

(1) Options vest ratably on each of 8/11/2012, 8/11/2013, 8/11/2014 and 8/11/2015.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.