MILLER ALAN B

Form 4

January 17, 2012

# FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** Number:

3235-0287

0.5

January 31, Expires: 2005

**OMB APPROVAL** 

Estimated average

burden hours per

response...

5. Relationship of Reporting Person(s) to

(Check all applicable)

Issuer

subject to Section 16. Form 4 or Form 5 obligations may continue.

Check this box

if no longer

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section See Instruction

30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

UNIVERSAL HEALTH SERVICES

Symbol

1(b).

(Print or Type Responses)

MILLER ALAN B

1. Name and Address of Reporting Person \*

			INC [UHS]						(Check an applicable)				
(Last) (First) (Middle)  UNIVERSAL HEALTH SERVICES, INC., 367 SOUTH			(Month/D	3. Date of Earliest Transaction (Month/Day/Year) 01/16/2012				_X_ Director _X_ 10% Owner _X_ Officer (give title Other (specify below) Chairman and CEO					
	SERVICES, GULPH RO		OUTH										
(Street) 4. If Amendment, Date 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							
	KING OF P	RUSSIA, PA	19406							Person	by More than One Reporting		
	(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
	1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ar) Execution	med on Date, if Day/Year)	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)  (A) or Code V Amount (D) Price				d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
	Class B Common Stock	01/16/2012			F		2,330	D	\$ 36.93	346,533	D		
	Class B Common Stock									27,982	I	By The Abby Miller King 2010 GRAT	
	Class B Common									22,698	I	By The Abby	

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Stock			Miller King 2010 GRAT (A)
Class B Common Stock	27,982	I	By The Marc Daniel Miller 2010 GRAT
Class B Common Stock	22,698	I	By The Marc Daniel Miller 2010 GRAT (A)
Class B Common Stock	27,982	I	By The Marni Spencer 2010 GRAT
Class B Common Stock	22,698	I	By The Marni Spencer 2010 GRAT (A)
Class B Common Stock	2,560	I	By Wife

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 1474

(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exercisable and	7. Title and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orNumber	Expiration Date	Amount of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/Year)	Underlying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e	Securities	(Instr. 5)	Bene
	Derivative				Securities		(Instr. 3 and 4)		Own
	Security			Acquired				Follo	
					(A) or				Repo
					Disposed				Trans
					of (D)				(Instr
					(Instr. 3,				
					4, and 5)				

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Date Expiration Title Exercisable Date

Code V (A) (D)

Exercisable Date

Amount or Number of Shares

## **Reporting Owners**

Reporting Owner Name / Address

Director 10% Owner Officer Other

MILLER ALAN B UNIVERSAL HEALTH SERVICES, INC. 367 SOUTH GULPH ROAD KING OF PRUSSIA, PA 19406

X X Chairman and CEO

## **Signatures**

/s/ Steve Filton, Attorney-in-Fact for Alan B.
Miller

01/17/2012

\*\*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).

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.

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