Edgar Filing: UNIVERSAL HEALTH SERVICES INC - Form 4

UNIVERSAL HEALTH SERVICES INC

Form 4

Stock

Class B

Common Stock

12/05/2014

December 1	0, 2014									
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL		
Washington, D.C. 20549								OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or STATEMENT OF CHANGES IN BENEFICIAL OWN SECURITIES							Expires: January 20 Estimated average burden hours per response			
Form 5 obligations may continue. See Instruction 1(b). 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 30(h) of the Investment Company Act of 1940										
(Print or Type	Responses)									
1. Name and Address of Reporting Person * MILLER ALAN B							5. Relationship of Reporting Person(s) to Issuer			
	INC [UHS]					(Check all applicable)				
	AL HEALTH S, INC., 367 SOU	(Mont 12/0:	(Month/Dav/Year)				_X_ Director _X_ 10% Owner _X_ Officer (give title Other (specify below) Chairman and CEO			
GCLITIK	(Street)		Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)			
X_ Form filed by One Reporting Person KING OF PRUSSIA, PA 19406 ——Form filed by More than One Reporting Person										
(City)	(State)	(Zip)	able I - Non-l	Derivative :	Securi	ities Acqui	ired, Disposed of,	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	(Month/Day/Year) Execution Date, if Transactionor Disposed of (D) any Code (Instr. 3, 4 and 5) (Month/Day/Year) (Instr. 8)			(D)	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Class B			Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(Instr. 4)		
Common Stock	12/04/2014		G V	2,000	D	\$ 0	515,782	D		
Class B Common	12/05/2014		M	50,000	A	\$ 31.18	565,782	D		

F

30,552 D \$ 535,230

D

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Class B Common Stock	12/05/2014	S	33,228	D	\$ 107.51	502,002	D
Class B Common Stock	12/09/2014	M	15,000	A	\$ 31.18	517,002	D
Class B Common Stock	12/09/2014	F	9,135	D	\$ 108.28	507,867	D

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

Persons who respond to the collection of SEC 1474 information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

(9-02)

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

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. 5. Number of TransactionDerivative Code Securities (Instr. 8) 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	\$ 31.18	12/05/2014		M	50,000	<u>(1)</u>	12/16/2014	Class B Common Stock	50,000
Option To Purchase Class B Common Stock	\$ 31.18	12/09/2014		M	15,000	<u>(1)</u>	12/16/2014	Class B Common Stock	15,000

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner Office	or Other			

Reporting Owners 2

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

X
X
Chairman and CEO

Signatures

/s/ Alan B.
Miller

**Signature of Date

**Signature of Reporting Person

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) The option vested on 12/16/2013.

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.

Signatures 3