Edgar Filing: UNIVERSAL HEALTH SERVICES INC - Form 4/A

UNIVERSAL HEALTH SERVICES INC Form 4/A

September 28	8, 2007										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB APPROVAL				
							OMB Number:	3235-0287			
Check thi if no long									Expires:	January 31, 2005	
subject to Section 1 Form 4 or	6. SIAIE N.	STATEMENT OF CHANGES IN BENEFICIAL OWNE SECURITIES							Estimated average burden hours per response		
Form 5 obligatior may conti <i>See</i> Instru 1(b).	ns Section 17(a	a) of the l	Public Ut		ling Con	npany	y Act of	e Act of 1934, 1935 or Section 0	n		
(Print or Type R	Responses)										
Marquez Michael Sz			2. Issuer Name and Ticker or Trading Symbol UNIVERSAL HEALTH SERVICES				-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
			INC [U]	HS]				(Chec	k all applicable)	
(Mo			(Month/D	3. Date of Earliest Transaction (Month/Day/Year) 09/28/2007				Director 10% Owner X Officer (give title Other (specify below) below) Vice President			
SERVICES, GULPH RO	, INC., 367 SOUT AD	ГН						V I	ee l'resident		
Filed(M			Filed(Mor	f Amendment, Date Original ed(Month/Day/Year) /28/2007				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
KING OF P	RUSSIA, PA 194	106	07/20/2					Form filed by M Person	Iore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)		3. 4. Securities Acquired Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or			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	09/28/2007			Code V F	614 <u>(1)</u>		Price \$ 53.09	14,618 <u>(1)</u>	D		

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

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 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. Transact Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

**Signature of Reporting Person

Reporting Owner Name / Address		Relationships					
	Director	10% Owner	Officer	Other			
Marquez Michael UNIVERSAL HEALTH SERVICES, IN 367 SOUTH GULPH ROAD KING OF PRUSSIA, PA 19406	C.		Vice President				
Signatures							
/s/ Steve Filton, attorney-in-fact 09/2	8/2007						

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 number of shares in columns 4 and 5 were listed incorrectly on Mr. Marquez's original Form 4.

Date

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.