### Edgar Filing: UNIVERSAL HEALTH SERVICES INC - Form 4

#### UNIVERSAL HEALTH SERVICES INC

Form 4

November 18, 2004

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL** 

OMB 3235-0287 Number:

January 31, Expires: 2005

Estimated average burden hours per

response... 0.5

if no longer subject to Section 16. Form 4 or

Check this box

Form 5 obligations may continue.

See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \*

HOTZ ROBERT H

2. Issuer Name and Ticker or Trading Symbol

UNIVERSAL HEALTH SERVICES INC [UHS]

(Check all applicable)

5. Relationship of Reporting Person(s) to

(Last)

(First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year)

11/17/2004

\_X\_\_ Director Officer (give title

Issuer

10% Owner Other (specify

HOULIHAN LOKEY HOWARD & **ZUKIN, 245 PARK AVENUE,** 

20TH FLOOR

(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

NEW YORK, NY 10167

(City) (State) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year)

Execution Date, if

(Month/Day/Year)

(Zip)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5)

5. Amount of Securities Beneficially Owned Following

Transaction(s)

Reported

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership (Instr. 4) (Instr. 4)

(A)

(Instr. 3 and 4) Code V Amount (D) Price

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 (9-02)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 2.		3. Transaction Date	3A. Deemed	4.	5.	6. Date Exercisable and		7. Title and Amount of		8. Price of
Derivative Security	Conversion or Exercise	(Month/Day/Year)	Execution Date, if any	Transacti Code	onNumber of	(Month/Day/Year) vative rities pired or osed O) r. 3, d 5)		Underlying Securities (Instr. 3 and 4)		Derivative Security
(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					(Instr. 5)
				Code V	(A) (D)	Date Exercisable	Expiration Date		Amount or Number of Shares	
Phantom Stock	(1)	11/17/2004		A	84	(2)	(2)	Class B Common Stock	84	\$ 44.47

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

HOTZ ROBERT H HOULIHAN LOKEY HOWARD & ZUKIN 245 PARK AVENUE, 20TH FLOOR NEW YORK, NY 10167



# **Signatures**

Robert H. Hotz 11/18/2004

\*\*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)** 1 for

These shares of Phantom Stock are payable in cash, pursuant to the UHS Deferred Compensation Plan for UHS Board of Directors (the (2) "Plan"). 1/5 of these shares of Phantom Stock are payable annually based on the closing price of the Common Stock on December 31 for each of 2008, 2009, 2010, 2011 and 2012.

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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