

UNIVERSAL HEALTH SERVICES INC  
Form SC 13G/A  
October 10, 2006

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

SCHEDULE 13G      Amendment No. 5

(Name of Issuer)  
Universal Health Services, Inc

(Title of Class of Securities)  
Common Stock

(CUSIP Number)  
913903100

NAME OF REPORTING PERSON  
Private Capital Management

I.R.S. IDENTIFICATION NO.  
59-3654603

MEMBER OF A GROUP?  
(b) X

PLACE OF ORGANIZATION  
Delaware

NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH:  
SOLE VOTING POWER            0  
SHARED VOTING POWER        6,773,874  
SOLE DISPOSITIVE POWER      0  
SHARED DISPOSITIVE POWER        6,773,874

AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON  
6,773,874

PERCENT OF CLASS REPRESENTED BY AGGREGATE AMOUNT BENEFICIALLY  
OWNED  
12.7%

TYPE OF REPORTING PERSON  
IA

NAME OF REPORTING PERSON  
Bruce S. Sherman

I.R.S. IDENTIFICATION NO.

MEMBER OF A GROUP?  
(b) X

CITIZENSHIP  
U.S. Citizen

NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH:  
SOLE VOTING POWER            30,000  
SHARED VOTING POWER        6,773,874

Edgar Filing: UNIVERSAL HEALTH SERVICES INC - Form SC 13G/A

SOLE DISPOSITIVE POWER 30,000  
SHARED DISPOSITIVE POWER 6,773,874

AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON  
6,803,874

AGGREGATE AMOUNT BENEFICIALLY OWNED EXCLUDES CERTAIN SHARES  
(no)

PERCENT OF CLASS REPRESENTED BY AGGREGATE AMOUNT BENEFICIALLY  
OWNED  
12.8%

TYPE OF REPORTING PERSON  
IN

NAME OF REPORTING PERSON  
Gregg J. Powers

I.R.S. IDENTIFICATION NO.

MEMBER OF A GROUP?  
(b) X

CITIZENSHIP  
U.S. Citizen

NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH:  
SOLE VOTING POWER 0  
SHARED VOTING POWER 6,773,874  
SOLE DISPOSITIVE POWER 0  
SHARED DISPOSITIVE POWER 6,773,874

AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON  
6,773,874

AGGREGATE AMOUNT BENEFICIALLY OWNED EXCLUDES CERTAIN SHARES  
(no)

PERCENT OF CLASS REPRESENTED BY AGGREGATE AMOUNT BENEFICIALLY  
OWNED  
12.7%

ITEMS 1 - 10 OF GENERAL INSTRUCTIONS

Item 1.

(a)Name of Issuer: Universal Health Services, Inc  
(b)Address of Issuer: 367 South Gulph Road, King of Prussia, PA 19406

Item 2.

(a)Name of Person Filing: See Exhibit 1  
(b)Address of Person Filing: 8889 Pelican Bay Blvd., Naples, FL 34108  
(c)Citizenship: See Exhibit 1  
(d)Title of Class of Securities: Common Stock  
(e)CUSIP Number: 913903100

Edgar Filing: UNIVERSAL HEALTH SERVICES INC - Form SC 13G/A

Item 3.

The reporting person is filing as an Investment Adviser registered under section 203 of the Investment Advisers Act of 1940.

Item 4. Ownership

- (a) Amount Beneficially Owned: See Exhibit 1
- (b) Percent of Class: See Exhibit 1
- (c) Number of Shares as to which such person has:
  - (i) sole power to vote or to direct the vote:  
See Exhibit 1
  - (ii) shared power to vote or to direct the vote:  
See Exhibit 1
  - (iii) sole power to dispose or to direct the disposition of:  
See Exhibit 1
  - (iv) shared power to dispose or to direct the disposition of:  
See Exhibit 1

Item 5. Ownership of Five Percent or Less of Class:  
N/A

Item 6. Ownership of More than Five Percent on Behalf of Another Person: N/A

Item 7. Identification and Classification of the Subsidiary Which Acquired the Security Being Reported on By the Parent Holding Company: N/A

Item 8. Identification and Classification of Members of the Group:  
See Exhibit 1

Item 9. Notice of Dissolution of Group:  
N/A

Item 10. Certification:

By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were acquired in the ordinary course of business and were not acquired for the purpose of and do not have the effect of changing or influencing the control of the issuer of such securities and were not acquired in connection with or as a participant in any transaction having such purposes or effect.

SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Date: See Exhibit 2  
Signature: See Exhibit 2  
Name/Title: See Exhibit 2

Exhibit 1

Item 2.

- (a) Name of Person Filing
  - 1) Private Capital Management, L.P.
  - 2) Bruce S. Sherman
  - 3) Gregg J. Powers

(c) Citizenship

Edgar Filing: UNIVERSAL HEALTH SERVICES INC - Form SC 13G/A

- 1) Delaware
- 2) U.S.
- 3) U.S.

Item 4.

(a) Amount Beneficially Owned\*

- 1) 6,773,874
- 2) 6,803,874
- 3) 6,773,874

(b) Percent of Class

- 1) 12.7%
- 2) 12.8%
- 3) 12.7%

(c) Number of shares as to which such person has:

(i) sole power to vote or to direct the vote

- 1) 0
- 2) 30,000
- 3) 0

(ii) shared power to vote or to direct the vote\*\*

- 1) 6,773,874
- 2) 6,773,874
- 3) 6,773,874

(iii) sole power to dispose or to direct the disposition of

- 1) 0
- 2) 30,000
- 3) 0

(iv) shared power to dispose or to direct the disposition of

- 1) 6,773,874
- 2) 6,773,874
- 3) 6,773,874

\* Bruce S. Sherman is CEO of Private Capital Management (PCM) and Gregg J. Powers is President of PCM. In these capacities, Messrs. Sherman and Powers exercise shared dispositive power with respect to shares held by PCM's clients and managed by PCM. Messrs. Sherman and Powers disclaim beneficial ownership for the shares held by PCM's clients and disclaim the existence of a group.

\*\* Bruce S. Sherman and Gregg J. Powers as, respectively, the CEO and President of PCM, exercise shared voting authority with respect to shares held by those PCM clients that have delegated proxy voting authority to PCM. Such delegation may be granted or revoked at any time at the client's discretion.

Exhibit 2

Signature

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Date: October 10, 2006

Edgar Filing: UNIVERSAL HEALTH SERVICES INC - Form SC 13G/A

/s/ Bruce S. Sherman  
Bruce S. Sherman  
as CEO, PCM  
as, individual, as applicable

/s/ Gregg J. Powers  
Gregg J. Powers  
as President, PCM  
as, individual, as applicable