FORM 4

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

Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject

OMB APPROVAL										
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Estimated average burden										
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City   (State)   (Zip)						or Se	ction 3	U(n) 01	tne in	vestmer	it Con	npany Act o	1 1940								
(City) (State) (Zip)  Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)  Table II - Derivative Securities Acquired (Bolow)  Table II - Derivative Securities Acquired (A) or Code (Instr. 3)  Table II - Derivative Securities Acquired (Bolow)  Table II - Derivative Securities (Bolow)  Table II - Derivative Securi						<u>UN</u>	UNIVERSAL HEALTH REALTY									k all app	licable)	ng Pei	. ,	``	
(Street) NEW YORK NY 10023  Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned  1. Title of Security (Instr. 3)    2. Transaction Date (Month/Day/Year)   2. Transaction (Month/Day/Year)   2. Transaction Date (Month/Day/Year)   2. Transaction (Month/Day/Year)   2. Transaction (Month/Day/Year)   3. Transaction Date (e.g., puts, calls, warrants, options, convertible securities)   3. Transaction Date (Month/Day/Year)   3. Transaction Date (Month/Day/Year)   3. Transaction Date (Month/Day/Year)   3. Transaction Date (Month/Day/Year)   4. Source of the deciral part of	10 WEST 66TH STREET					Date of Earliest Transaction (Month/Day/Year)													specify		
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year)  3. Transaction (D) (Instr. 3, 4 and 5)  4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)  4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)  4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)  4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)  4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)  4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)  4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)  4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)  4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)  5. Amount of Securities Beneficially Ownerd (D) (Instr. 4)  5. Amount of Securities Acquired (D) or Indirect (D) o	(Street) NEW YORK NY 10023					4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	Y Form filed by One Reporting Person Form filed by More than One Reporting						
Date (Month/Day/Year)   Execution Date, if any (Month/Day/Year)   Code   V   Amount   Code (Instr. 3)   Shares Of Beneficial Interest   D6/02/2021   A   400(1)   A   \$0   1,600   D    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)   Transaction Date (Month/Day/Year)   Security (Instr. 3)   Securities   Secur			Table	I - Nor	n-Deriva	tive S	ecur	ities	Acq	uired,	Disp	osed of	, or E	Benef	icially	y Own	ed				
Shares Of Beneficial Interest    Code   V   Amount   (A) or (D)   Price   Transaction(s) (Instr. 3 and 4)	Date			Exec ay/Year)   if any		ecution Date, ny		Transaction Code (Instr.		Disposed Of (D) (Instr. 3			Securit Benefic Owned	Securities Seneficially Dwned Following		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership				
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)  1. Title of Derivative Conversion Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  Security  (Month/Day/Year)  3. Transaction Date (Month/Day/Year)  4. Transaction Or Exercise Price of Derivative Securities (Month/Day/Year)  (Instr. 3)  (Instr. 4)  5. Number of Oberivative Securities (Month/Day/Year)  5. Number of Derivative Securities (Month/Day/Year)  (Instr. 5)  (Instr. 4)  10. Ownership Form: Direct (D) Owned Following Reported Transaction(s) (Instr. 4)  (Instr. 4)										Code	v	Amount	(A) (D)	or P	rice	Transaction(s)				(111511. 4)	
(e.g., puts, calls, warrants, options, convertible securities)  1. Title of Derivative Security (Instr. 3)  Price of Derivative Security	Shares Of Beneficial Interest 06/02/					2021			A		400(1)	I	\	\$0	1	,600		D			
Derivative Security (Instr. 3) Pirce of Derivative Security Security    Conversion of Exercise (Month/Day/Year)   Derivative Security   Derivative Security   Securit			Tal													Owne	t				
Amount	Derivative Security (Instr. 3) Price of Derivative Derivative Security (Instr. 3) Price of Derivative Security Price of Derivative Security (Month/Day/Year) Security (Month/Day/Year) Execution Date (Month/Day/Year) if any (Month/Day/Year)		on Date,	4. 5. of Code (Instr. 8) 5. A((A		of Deriva Secur Acqui (A) or Dispo of (D) (Instr.	ative rities ired osed	Expiration Dat		te	Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Derivativ Security (Instr. 5)		derivative Securities Beneficially Owned Following Reported Transaction(s)		Ownership Form: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

## **Explanation of Responses:**

1. These restricted shares of beneficial interest were granted pursuant to the Amended and Restated Universal Health Realty Income Trust 2007 Restricted Stock Plan and shall vest on the second anniversary of the grant date.

Date Exercisable

/s/ Charles F. Boyle, attorneyin-fact for Ms. Capozzalo

Number

of Shares

06/03/2021

\*\* Signature of Reporting Person Date

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

- \* 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.

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