FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

l	OMB APPROVAL										
l	OMB Number:	3235-0287									
l	Estimated average burden										
l	hours per response:	0.5									

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* FOWLER TIMOTHY J						2. Issuer Name <b>and</b> Ticker or Trading Symbol UNIVERSAL HEALTH REALTY INCOME TRUST [ UHT ]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (checify)			wner	
UHS OF DELAWARE, INC. 3525 PIEDMONT ROAD, N.E.				0	3. Date of Earliest Transaction (Month/Day/Year) 02/13/2008							X Officer (give title Other (specify below)  Vice President				
(Street) ATLANTA GA (City) (State)			30305 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing Line)  X Form filed by One Report Form filed by More than Person								porting Perso	n		
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					2A. Deemed Execution Date,			Code (Instr. 5)			ed (A) or	5. Amoui	nt of 6. Of 5. S Formally (D) (ollowing (1) (II	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Table II - Derivativ					e Seci	uritio	es Aco	Code V		(D)	Price	Transact (Instr. 3 a	ion(s)		(	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	(e.g., 3A. Deemed Execution Date, if any (Month/Day/Year)	4. Trans	4. Transaction Code (Instr.		umber vative urities uired or oosed 0) (Instr. and 5)	6. Oate Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s; (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	or Number of Shares					
Phantom Stock <sup>(1)</sup>	(2)	02/13/2008		J <sup>(3)</sup>			83.232	(4)	(5)	Shares Of Beneficial Interest	83.232	\$35.2643	0	D		

## Explanation of Responses:

- 1. Shares of phantom stock are based on interests held under the Universal Health Services, Inc. Amended and Restated Supplemental Deferred Compensation Plan (the "Plan").
- 2. 1-for-1.
- 3. On February 19, 2007, Mr. Fowler received a cash distribution in the amount of \$2,929.94 in settlement of 83 shares of phantom stock credited to his sub-account under the Plan.
- 4. Immediately.
- 5. Shares of phantom stock are settled in cash following a fixed period or retirement from Universal Health Services, Inc. pursuant to the terms of the Plan.

<u>/s/ Timothy J. Fowler</u> <u>02/26/2008</u>

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.