FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APP	OMB APPROVAL						
WNEDSHID	OMB Number:	3235-0287						

1	OMB Number:	3235-0287
	Estimated average burden hours per response:	en
1	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).

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* BERGER MILES L					2. Issuer Name and 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 X Other (specify					
(Last) (First) (Middle) BERGER MANAGEMENT SERVICES, LLC 737 N. MICHIGAN AVE., SUITE 1570						3. Date of Earliest Transaction (Month/Day/Year) 06/07/2012									below) A below) Trustee					
(Street) CHICAGO IL 60611 (City) (State) (Zip)				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transa Date (Month/Date)				Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Transaction Disposed Code (Instr. 5)		ties Acquired (A) I Of (D) (Instr. 3,			nd S B O R	. Amount of ecurities eneficially wned Follov eported	ving	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
										V	Amount	(A) or D)	Price		ransaction(s nstr. 3 and 4				
Shares Of Beneficial Interest 06/07/					7/2012				A		300 ⁽¹⁾ A		\$	6,800		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)	Derivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		Date, (ransaction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ative rities ired osed . 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Exercisable Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Number of Title Shares		ount nber	8. Price Deriva Securi (Instr. !	tive deriva ty Secur 5) Benef Owne Follow Repor	ities icially d ving ted action(s	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

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

/s/ Charles F. Boyle, Attorney-06/11/2012 in-Fact for Mr. Berger

** 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.