Instruction 1(b).

FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

OMB APPROVAL										
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Estimated average burden										
hours per response:										

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

Name and Address of Reporting Person* <u>Capozzalo Gayle L</u>					<u>UN</u>	2. Issuer Name and Ticker or Trading Symbol UNIVERSAL HEALTH REALTY INCOME TRUST [ UHT ]									ck all app Direc	or 10% Owner		wner		
(Last) (First) (Middle) 10 WEST 66TH STREET APARTMENT 5F					3. Date of Earliest Transaction (Month/Day/Year) 06/08/2022									Office below	er (give title		Other (below)	specify		
(Street) NEW YO			0023 Zip)		4. If <i>I</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Inc Line)	Form	vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
		Table	I - Nor	ı-Deriva	tive S	Secu	rities	Acq	uired,	Dis	osed of	, or E	Bene	iciall	y Own	ed				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					Exe if ar	Deemed ecution Date, ny onth/Day/Year)		3. Transaction Code (Instr. 8)  4. Securitie Disposed (5)		ies Acquired (A Of (D) (Instr. 3,		, 4 and Secu Bene		cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) (D)	or F	rice	Transa	ction(s) 3 and 4)			(11041. 4)	
Shares Of Beneficial Interest 06/08.					2022				A		546 <sup>(1)</sup>		4	\$ <mark>0</mark>	0 2,146			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)	2. Conversion or Exercise Price of Derivative Security	Conversion or Exercise (Month/Day/Year) Price of Derivative  Date (Month/Day/Year)  Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) o Disp of (D	osed ) r. 3, 4	Expiration Da (Month/Day/Yo		te	7. Title and Amount of Securities Underlying Derivative Security (Insi 3 and 4)		orr.	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y C F D o (I	0. 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 Amended and Restated Universal Health Realty Income Trust 2007 Restricted Stock Plan and shall vest on the second anniversary of the grant date.

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

06/10/2022

\*\* 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.