Edgar Filing: UNIVERSAL HEALTH REALTY INCOME TRUST - Form 4

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UNIVERSAL Form 4 June 13, 2014	, HEALTH REAL	TY INCOME TI	RUST						
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL	
Check this box if no longer subject to Section 16. Form 4 or							OMB Number:	3235-0287	
							Expires:January 31, 2005Estimated average burden hours per response0.5		
Form 5 obligations may contir <i>See</i> Instruct 1(b).	Section 17(a)	of the Public Uti 30(h) of the Inv	ility Hold	ing Com	pany	Act of	f 1935 or Section	n	
(Print or Type Re	esponses)								
DALTON JAMES E JR Symbol UNIV			2. Issuer Name and Ticker or Trading ymbol 'NIVERSAL HEALTH REALTY NCOME TRUST [UHT]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
			te of Earliest Transaction th/Day/Year) 2/2014				Director Officer (give below)	title 10% below) Trustee	Owner er (specify
	4. If Amer	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
NASHVILLI	th/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State) (Z	^{iip)} Table	e I - Non-De	erivative S	ecurit	ies Acq	uired, Disposed of	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed	3. Transactic Code (Instr. 8)	4. Securi onAcquirec Disposec (Instr. 3,	ties l (A) o l of (D 4 and (A) or	or 1) 5)	5. Amount of Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of
Shares Of Beneficial Interest	06/12/2014		A <u>(1)</u>	Amount	(D) A	Price \$ 0	5,370	D	

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of 2. 3. Transaction Date 3A. Deemed 5. 6. Date Exercisable and 7. Title and 8. Price of 9. Nt 4. Derivative Conversion (Month/Day/Year) Execution Date, if TransactionNumber **Expiration Date** Amount of Derivative Deriv Security or Exercise any Code of (Month/Day/Year) Underlying Security Secu (Instr. 3) Price of (Month/Day/Year) (Instr. 8) Securities (Instr. 5) Derivative Bene (Instr. 3 and 4) Derivative Securities Own Security Acquired Follo (A) or Repo Disposed Trans of (D) (Insti (Instr. 3, 4, and 5) Amount or Date Expiration Title Number Exercisable Date of Code V (A) (D) Shares

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Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
DALTON JAMES E JR								
6505 EDINBURGH DRIVE				Trustee				
NASHVILLE, TN 37221								
Signatures								
/s/ Charles F. Boyle, Attorney- Dalton	06/13/2014							
**Signature of Reporting F	Date							

Explanation of Responses:

- * 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).
- (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.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.