FORM 4

Check this box if no longer subject 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

STATEMENT	OF	CHANGE	•

OMB APPROVAL

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S 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* NEWSOME GARY D				<u>CC</u>	2. Issuer Name and Ticker or Trading Symbol COMMUNITY HEALTH SYSTEMS INC CYH								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director Officer (give title Other (specify						
(Last) 4000 MEI	C) (First) (Middle) D MERIDIAN BOULEVARD						of Earliest ²	Transa	action (Mo	nth/D	oay/Year)	X	Officer (give title below) Division President - Group Ops			. ,			
(Street) FRANKLIN TN 37067 (City) (State) (Zip)				-				·		(Month/Day <i>i</i>	Line)	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
			le I - Noi			_				Dis	posed of	-					[
Dat				Date	saction //Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securitie Disposed (es Acquired Of (D) (Instr	(A) or . 3, 4 and 5) Securitie Beneficia	eneficially wned Following		: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D)	Price	Transact	Transaction(s) (Instr. 3 and 4)				
Common S	Stock			02/2	28/2008				M		33,000	A	\$0.00	92,	,179		D		
Common S	Stock			02/2	8/200	3/2008			F		5,555	D	\$32.01	l 86,	,624		D		
Common Stock				03/0	01/2008				F		3,324	D	\$31.07	7 83,	300		D		
		-									osed of, onvertib			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transaction Code (Instr. 8)		n of E		6. Date Exercis Expiration Date (Month/Day/Ye		е	7. Title an of Securit Underlyin Derivative (Instr. 3 ai	ies g Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownershi (Instr. 4)	t I
					Code	v	(A)	(D)	Date Exercisal	ole	Expiration Date	Title	Amount or Number of Shares						
Performance Based Restricted Stock	\$0.00	02/27/2008			A		35,000		03/01/200	6 ⁽¹⁾	03/01/2014	Common Stock	35,000	\$0.00	65,00	0	D		
Stock Options (Right to Buy)	\$20.3								05/22/20	04	05/22/2013	Common Stock	0		200,00	00	D		
Stock Options (Right to Buy)	\$32.37								02/28/20	06	02/28/2013	Common Stock	0		30,00	0	D		
Stock Options (Right to Buy)	\$38.3								03/01/20	07	03/01/2014	Common Stock	0		20,00	0	D		
Stock Options (Right to Buy)	\$37.21								02/28/20	08	02/28/2015	Common Stock	10,000		10,00	0	D		
Stock Options	\$32.28	02/27/2008			A		20,000		02/27/200	Q(2)	02/27/2018	Common	20,000	\$0.00	20.00	0	D		_

Explanation of Responses:

- 1. Each performance based restricted share represents a contingent right to receive one share of CYH common stock. There are two elements to the lapsing of the restriction; first, the Company must achieve specified targeted amount of earnings per share from continuing operations, and if the performance objective is met, the vesting restrictions will lapse in 1/3 increments on the first, second and third anniversary of
- 2. Vesting occurs in 1/3 increments on the first, second and third anniversary of the date of grant.

Remarks:

Buy)

Rachel A. Seifert, Attorney in Fact for Gary D. Newsome

02/29/2008

** 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.	