FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington,	D.C.	20549	
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OIVID APPROVAL									
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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

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1. Name and Address of Reporting Person* Bonick Martin					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 10% Owner						
(Last) 4000 MEF	t) (First) (Middle) 0 MERIDIAN BOULEVARD					3. Date of Earliest Transaction (Month/Day/Year) 02/27/2014							\dashv	X Officer (give title below) Other (specify below) Division President					
(Street)	IN TN	3		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting							
(City)	(Sta	ite) (2	Zip)											Person					
		Tab	le I - Nor	n-Deriv	ative	e Se	curities	Ac	quired,	Dis	osed of	, or Ben	eficial	y Owned					
Date				action 2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.) 8) 4. Securities Acquire Disposed Of (D) (Instr.)		es Acquired Of (D) (Instr	I (A) or . 3, 4 and	5) Securitie Beneficia Owned F	Securities Beneficially Owned Following		Direct Indirect Estr. 4)	Nature of ndirect Beneficial Ownership					
								Code	v	Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a	ion(s)			Instr. 4)		
Common Stock 02/27					7/2014		F		373	D \$42.2		25 5,	5,947		D				
		٦	Table II - I								sed of, o			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	ed 4. Date, Transactior Code (Instr. 8)			n of		6. Date Exercisa Expiration Date (Month/Day/Year		of Secu Underly Derivati		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisal	ole	Expiration Date	Title	Amount or Number of Shares						
Performance Based Restricted	\$0.00	03/01/2014			A		25,000		03/01/201	5 ⁽¹⁾	02/29/2024	Common Stock	25,000	\$0.00	25,000		D		
Performance Based Restricted	\$0.00	03/01/2014			A		10,000		03/01/201	.5 ⁽²⁾	02/29/2024	Common Stock	10,000	\$0.00	10,000)	D		
Stock Options (Right to	\$16.66								12/14/20	12	12/13/2021	Common Stock	1,000		1,000		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, or net revenue 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 the date of grant. If the objectives are not met, the shares will be forfeited.

2. Each performance based restricted share represents a contingent right to receive one share of CYH common stock. The lapsing of the restrictions is dependent on the Company meeting certain cost savings ("synergies") from the Health Management Associates, Inc. merger transaction. The performance target may be met in part in the first year or in whole or in part over the first two years. There is also a time vesting element to the maximum targets of the award. If the objectives are not met, the shares will be forfeited.

Remarks:

Christopher G. Cobb, Attorney in Fact for Martin Bonick

03/03/2014

** 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.