## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
Ì	OMB Number:	3235-0287								
Estimated average burden										
	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*  Simon Lynn T  (Last) (First) (Middle)  4000 MERIDIAN BOULEVARD						2. Issuer Name and Ticker or Trading Symbol COMMUNITY HEALTH SYSTEMS INC [ CYH ]  3. Date of Earliest Transaction (Month/Day/Year) 02/16/2015								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title below)  President and CQO				vner	
(Street) FRANKLIN TN 37067  (City) (State) (Zip)					4. If	Amen	dment,	t, Date of Original Filed (Month/Day/Year)						dividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				n	
		Tab	le I - No	n-Deriv	ative	Sec	uritie	es Ac	quired,	Dis	posed of	, or Ben	eficially	y Owned					
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)			Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			5. Amour Securitie Beneficia Owned F Reported	s ally following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				(		
Common Stock				02/16	/2015				F		1,410	D	\$48.14	69,015			D		
		Т	1	(e.g., p							osed of, convertib	le secui	ities)	1					
Derivative Conversion Security Or Exercise (Month/Day/Year) Execution Date, if any		4. Transaction Code (Instr. 8)		n of E		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e O s Fe lly D or	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares						
Stock Options (Right to Buy)	\$31.75								12/08/20	11	12/07/2020	Common Stock	5,000		5,000	)	D		
Stock Options									02/23/20	10	02/22/2021	Common	5,000		5,000	)	D		
(Right to Buy)	\$37.96									12	02/22/2021	Stock							
	\$37.96 \$21.07								02/16/20		02/15/2022	Common Stock	4,000		4,000		D		_

## **Explanation of Responses:**

1. 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:

Restricted

<u>Christopher G. Cobb, Attorney</u> <u>in Fact for Lynn T. Simon</u>

02/18/2015

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.