Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to	S
Section 16. Form 4 or Form 5	
obligations may continue. See	

TATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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							COMMUNITY HEALTH SYSTEMS INC [CYH]									eck all ap Dire	plica ector cer (g Pers	10% Ov Other (s below)	vner	
(Last) (First) (Middle) 155 FRANKLIN ROAD SUITE 400					3. Date of Earliest Transaction (Month/Day/Year) 12/15/2004 4. If Amendment, Date of Original Filed (Month/Day/Year)									6.11	Executive Officer - Reporting							
(Street) BRENTWOOD TN 37027				_ -	T. I. Anchument, Date of Original Fliet (Month/Day/real)									Line	X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)		(State)	(Zip)																			
Table I - Non-Deriv 1. Title of Security (Instr. 3) 2. Tran Date (Month					saction	1	2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transaction Code (Instr.			ırities A	d (A) or r. 3, 4 and	or 5. Amo 4 and Securit Benefic Owned			Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amoun	nt	(A) or (D)	Price	Trans	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock					15/200)4				G	V	1,80	00	D	\$0		16,799		D			
			Table II - I (sed o				Owne	d					
1. Title of Derivative Security (Instr. 3)	2. Conversio or Exercis Price of Derivative Security		3A. Deemed Execution E if any (Month/Day	ate, Trans		action Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisal Expiration Date (Month/Day/Year		Date	le and	of Sec Under Deriva	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price Derivativ Security (Instr. 5)	ve	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 Exercisable		oiration e	Title	0	mount r lumber f Shares							
Stock Options (Right to buy)	\$6.99								06/0	08/1999	06/	08/2008	Comm		6,809			6,809		D		
Stock Options (Right to buy)	\$13								06/0	08/2001	06/	08/2010	Comm Stoc		260,000			260,00	0	D		
Stock Options (Right to	\$20.3								05/2	22/2004	05/	22/2013	Comm		200,000			200,00	0	D		

Explanation of Responses:

Rachel A. Seifert, Attorney in

Fact

** Signature of Reporting Person

Date

12/20/2004

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.