FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average bu	urden									
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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1. Name and Address of Reporting Person* MILLER DAVID LEWIS					CC	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 Officer (give title Other (specify				
(Last) 4000 MEF	nst) (First) (Middle) 00 MERIDIAN BOULEVARD					3. Date of Earliest Transaction (Month/Day/Year) 02/27/2016									Conficer (give line Confer (specify below) President and COO				
Street) FRANKLIN TN 37067					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line) X	X Form filed by One Reporting Person Form filed by More than One Reporting				
(City)	(Sta	ate) (2	Zip)												Person				
		Tab	le I - Noi	n-Deriv	vative	e Se	curiti	es A	cquired,	Dis	posed o	f, or Be	nefic	ially	Owned				
Date						action 2A. D Exect Day/Year) if any (Mont			e, Transaction Disposed Code (Instr.		ties Acquir I Of (D) (Ins	ed (A) o str. 3, 4 a	or and 5)	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of ndirect Beneficial Ownership Instr. 4)	
									Code	v	Amount	(A) or (D) Pr		се	Transaction(s) (Instr. 3 and 4)				msu. 4)
Common Stock 02/27					7/201	/2016		F		3,497	,497 D \$		15.12	352	352,141		D		
		7	Гable II -	Deriva (e.g., p	ative s	Seci call:	uritie s, wa	s Ac rrant	quired, [is, optio	Disp ns, d	osed of, converti	or Ben ble secu	eficia ırities	lly O s)	wned				
Derivative Conversion C		3. Transaction Date (Month/Day/Year)	d 4. Date, Transaction Code (Instr 8)			n of		6. Date Exercisab Expiration Date (Month/Day/Year)			of Securities			8. Price of Derivative Security (Instr. 5)	tive derivative ty Securitie		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	Amou or Numb of Sha	er					
Stock Options (Right to Buy)	\$37.96								02/23/202	2	02/22/2021	Common Stock	10,0	000		10,000	0	D	
Performance Based Restricted	\$0.00								(1)		(1)	Common Stock	66,6	667		66,66	7	D	
Performance Based Restricted	\$0.00								03/01/2016	(2)	02/28/2025	Common Stock	100,	000		50,000	0	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 award was granted on 3/01/14. The performance target on the remaining portion of the award may be met in whole or in part in the second year following the grant. 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.
- 2. 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 performance-based 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 time-vesting restrictions will lapse in 1/3 increments on the first, second and third anniversary of the date of grant. If the performance objectives are not met, the shares will be forfeited.

Remarks:

<u>Christopher G. Cobb, Attorney</u> in Fact for David L. Miller

03/01/2016

** 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.