FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ı	ONID APPROVAL												
	OMB Number:	3235-0287											
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	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

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1. Name and Address of Reporting Person* PORTACCI MICHAEL T					CC	2. Issuer Name <b>and</b> Ticker or Trading Symbol COMMUNITY HEALTH SYSTEMS INC CYH									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
(Last) (First) (Middle) 4000 MERIDIAN BOULEVARD						3. Date of Earliest Transaction (Month/Day/Year) 04/26/2010									X Officer (give title Other (specify below)  Division President					
(Street) FRANKLIN TN 37067					4. If	Line									X Form filed by One Reporting Person Form filed by More than One Reporting					
(City) (State) (Zip)															Person					
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/					ion	on 2A. Deemed Execution Date,			3. Transaction Code (Instr. 8)  4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and Code (Instr. 8)						5. Amour Securitie Beneficia Owned F	s ully	Form (D) or	: Direct I r Indirect E	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						(mone		reary	Code V Amount		(A) or (D) Price			Reported Transaction(s) (Instr. 3 and 4)		(1) (1113.11.4)				
Common Stock 04/26/20					010	010			S		30,290	D	\$40.52	58(1)	99,	99,370		D		
		Т	able I	I - Deriva											wned	,			1	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any		4. Transaction Code (Instr. 8)		5. Number of		6. Date Exerci Expiration Da (Month/Day/Ye		sable and te	7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		nt 8	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amoun or Numbe of Shar	r						
Performance Based Restricted	\$0.00								(2)		(2)	Common Stock	40,00	00		40,000	)	D		
Stock Options (Right to Buy)	\$20.3								05/22/20	04	05/22/2013	Common Stock	200,0	00		200,000		D		
Stock Options (Right to Buy)	\$32.37								02/28/20	06	02/28/2013	Common Stock	30,00	00		30,000		D		
Stock Options (Right to Buy)	\$38.3								03/01/20	07	03/01/2014	Common Stock	20,00	00		20,000		D		
Stock Options (Right to Buy)	\$37.21								02/28/20	08	02/28/2015	Common Stock	10,00	00		10,000		D		
Stock Options (Right to Buy)	\$32.28								02/27/20	09	02/26/2018	Common Stock	20,00	00		20,000		D		
Stock Options (Right to Buy)	\$40.41								07/25/20	08	07/25/2015	Common Stock	100,0	00		100,00	0	D		
Stock Options (Right to Buy)	\$18.18								02/25/20	10	02/25/2019	Common Stock	10,00	00		10,000	)	D		
Stock Options (Right to	\$33.9								02/24/20	11	02/24/2020	Common Stock	10,00	00		10,000	)	D		

## Explanation of Responses:

- $1. \ These \ shares \ were \ sold \ in \ a \ series \ of \ transactions \ at \ an \ average \ sales \ price \ of \ \$40.5258 \ per \ share.$
- 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 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.

## Remarks:

Rachel A. Seifert, Attorney in 04/27/2010 Fact for Michael T. Portacci

\*\* 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.