## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

3235-0287 OMB Number: 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*  Ely James S. III						2. Issuer Name <b>and</b> Ticker or Trading Symbol COMMUNITY HEALTH SYSTEMS INC									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>Ely Jar</u>	<u>nes 5. 111</u>					Ή]									X Directo	or		10% O	wner	
														_	Officer below)	(give title		Other (: below)	specify	
(Last) (First) (Middle) 4000 MERIDIAN BLVD						3. Date of Earliest Transaction (Month/Day/Year) 05/19/2012									below)			below)		
					4. 11	f Ame	endmei	nt, Date	of Original	Filed	(Month/Da	ay/Yea	.)		ndividual or	Joint/Group	Filing	(Check Ap	plicable	
(Street) FRANKLIN TN 37067													Line	,	iled by One	e Repo	orting Perso	on		
															Form f	iled by Mor		one Repo		
(City)	(S	tate)	(Zip)												Persor	1				
		Tab	le I - Non	Deriv	ative	Se	curit	ies Ad	cquired,	Disp	osed c	of, or	Ben	eficial	ly Owned	ł				
1. Title of Security (Instr. 3) 2. Transa					action		2A. Deemed					ities Acquired (A) o			5. Amou			wnership m: Direct	7. Nature of Indirect	
Date (Mor				(Month/E	Day/Ye	ar) 🗀	Execution Date if any (Month/Day/Yea		Code (I		5)	sed Of (D) (Instr. 3, 4			Benefici	Securities Beneficially Owned Following		r Indirect	Beneficial Ownership	
									Code	v	Amount	(	A) or Price		Reported Transaction(s)				(Instr. 4)	
						_			_				) 		(Instr. 3	-		_		
Common	)/2012	2012 05/21/20		21/2012	2 M		2,384	4	A	\$0.00	) 11,	,133	D							
		T	able II - D ()						uired, D s, option						Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution E if any (Month/Day	ate,	4. Transaction Code (Instr. 3)				6. Date Exercisa Expiration Date (Month/Day/Year			Amou Secur Under Deriva	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall 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 Exercisabl		xpiration ate	Title		Amount or Number of Shares						
Restricted Stock Units	\$0.00	05/19/2012	05/21/20	12	М			2,384	05/19/2010	0.5	5/18/2020	Comn		2,384	\$0.00	0		D		
Restricted Stock Units	\$0.00								02/24/2011	1 02	2/23/2020	Comn		1,377		1,377		D		
Restricted Stock Units	\$0.00								02/23/2012	2 02	2/22/2021	Comn Stoc		2,459		2,459		D		
Restricted Stock Units	\$0.00								02/16/2013	3 02	2/15/2022	Comn		6,645		6,645		D		

**Explanation of Responses:** 

Remarks:

Christopher G. Cobb, Attorney 05/21/2012 in Fact for James S. Ely

\*\* Signature of Reporting Person

Date

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

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).