

OMB APPROVAL	
OMB Number:	3235-0287
Estimated average burden hours per response:	0.5

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

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* <u>Simon Lynn T</u>  (Last) (First) (Middle) 4000 MERIDIAN BOULEVARD  (Street) FRANKLIN TN 37067  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>COMMUNITY HEALTH SYSTEMS INC</u> [ <u>CYH</u> ]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) <u>President and CMO</u>
	3. Date of Earliest Transaction (Month/Day/Year) <u>03/01/2022</u>	
4. If Amendment, Date of Original Filed (Month/Day/Year) <u>03/02/2022</u>		

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	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			
Common Stock	03/01/2022		F <sup>(1)</sup>		53,453 <sup>(1)</sup>	D	\$10.18 <sup>(1)</sup>	351,974 <sup>(1)</sup>	D	

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date					

**Explanation of Responses:**

1. This Amendment corrects (i) the number of shares of Common Stock forfeited by Reporting Person on 3/1/22 at the closing price of the Company's Common Stock on that date (\$10.18/share) as a result of tax withholding associated with the 3/1/22 restricted stock vesting events as well as (ii) the number of shares of Common Stock beneficially owned by Reporting Person. On a Form 4 filed on 3/2/22, the number of shares withheld from Reporting Person as payment of the tax liability resulting from the 3/1/22 vesting events related to prior grants of restricted stock was incorrectly reported as 53,543, rather than the correct figure of 53,453. As a result, the number of shares of Common Stock beneficially owned by Reporting Person was incorrectly reported in Table 1, Column 5 as 351,884, rather than the correct figure of 351,974.

**Remarks:**

Christopher G. Cobb,  
Attorney In Fact for Lynn T. Simon     11/04/2022

\*\* 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.

POWER OF ATTORNEY

Know all by these presents, that the undersigned officer and/or director (herein, the Filer) of COMMUNITY HEALTH SYSTEMS, INC., (the Company) hereby constitutes and appoints each of JUSTIN D. PITT, KEVIN J. HAMMONS, CHRISTOPHER G. COBB and CAROL R. CLIFTON, signing singly, the Filers true and lawful attorney-in-fact to:

1. execute for and on behalf of the Filer, a FORM ID (or any such form as may be adopted) for the purpose of obtaining on behalf of Filer, a CIK, CCC and other filing codes and related items from the Securities and Exchange Commission (the SEC) as necessary to permit each such Filer to make filings on the SECs Electronic Data Gathering, Analysis and Retrieval system, and to perform all acts necessary in order to obtain such codes and related items as he or she shall deem appropriate;
2. execute for and on behalf of the Filer, in the Filers capacity as an officer and/or director of the Company, Forms 3, 4, and 5 in accordance with Section 16(a) of the Securities Exchange Act of 1934 and the rules thereunder;
3. do and perform any and all acts for and on behalf of the Filer which may be necessary or desirable to complete and execute any such Form 3, 4, or 5, complete and execute any amendment or amendments thereto, and timely file such form with the United States Securities and Exchange Commission and any stock exchange or similar authority; and
4. take any other action of any type whatsoever in connection with the foregoing which, in the opinion of such attorney-in-fact, may be of benefit to, in the best interest of, or legally required by the Filer in his or her capacity as an officer and/or director of the Company, it being understood that the documents executed by such attorney-in-fact on behalf of the Filer pursuant to this Power of Attorney shall be in such form and shall contain such terms and conditions as such attorney-in-fact may approve in such attorney-in-fact's discretion. The Filer hereby grants to each such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever requisite, necessary, or proper to be done in the exercise of any of the rights and powers herein granted, as fully to all intents and purposes as the undersigned might or could do if personally present, with full power of substitution or revocation, hereby ratifying and confirming all that such attorney-in-fact, or such attorney-in-fact's substitute or substitutes, shall lawfully do or cause to be done by virtue of this power of attorney and the rights and powers herein granted. The Filer acknowledges that the foregoing attorneys-in-fact, in serving in such capacity at the request of the Filer, are not assuming, nor is the Company assuming, any of the Filers responsibilities to comply with Section 16 of the Securities Exchange Act of 1934. This Power of Attorney shall remain in full force and effect until the Filer is no longer required to file Forms 3, 4, and 5 with respect to the Filer's holdings of and transactions in securities issued by the Company, unless earlier revoked by the Filer in a signed writing delivered to the foregoing attorneys-in-fact.

IN WITNESS WHEREOF, the Filer has caused this Power of Attorney to be executed as of this 20th day of April, 2022.

/s/ Lynn T. Simon, M.D.  
Lynn T. Simon, M.D.