## FORM 4

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

Washington, D.C. 20549

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OMB APP	ROVAL
OMB Number:	3235-0287
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0.5

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* SEIFERT RACHEL A				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)  Director 10% Owner						
					CYI	Η]								Officer	(give title		Other (s		
(Last) (First) (Middle) 4000 MERIDIAN BOULEVARD					3. Date of Earliest Transaction (Month/Day/Year) 10/27/2015									below) below)  Executive VP and Secretary					
(Street) FRANKLIN TN 37067				4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person						
(City) (State) (Zip)														Form filed by More than One Reporting Person					
		Tab	le I - Noi	า-Deriv	ative	Se	curiti	ies Ad	quired,	Dis	posed of	, or Ber	eficia	lly Owned					
Date				/Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year)		, Transaction Disposed O Code (Instr.		ies Acquired (A) or Of (D) (Instr. 3, 4 and		Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
					Code V Amount (A) OI		(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)						
Common S	tock			10/27	7/2015				M		5,000	A	\$18.	18 167	,113		D		
		T												y Owned					
1. Title of 2. 3. Transaction 3A. Deemed Execution Date Execution Date,			ed					ercis	cisable and 7. Title and Am			8. Price of Derivative	9. Number of derivative		10. Ownership	11. Nature of Indirect			
Security (Instr. 3)	or Exercise Price of Derivative Security	(Month/Day/Year)	nth/Day/Year) if any (Month/Day		Code (Instr. 8)				(Month/Day/Year		ır)	Underlyin Derivative (Instr. 3 aı	Security	Security (Instr. 5)	Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	ally g I	Form: Direct (D) or Indirect (I) (Instr. 4)	t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisabl		Expiration Date	Title	Amoun or Numbe of Shares	r					
Stock Options (Right to Buy)	\$18.18	10/27/2015			M			5,000	02/25/201	.0	02/24/2019	Common Stock	5,000	\$0.00	2,500		D		
Stock Options (Right to Buy)	\$32.28								02/27/200	19	02/26/2018	Common Stock	10,00	0	10,00	00	D		
Stock Options (Right to Buy)	\$33.9								02/24/201	.1	02/23/2020	Common Stock	7,500	)	7,500	0	D		
Stock Options (Right to Buy)	\$37.96								02/23/201	.2	02/22/2021	Common Stock	7,500		7,500	0	D		
Stock Options (Right to Buy)	\$21.07								02/16/201	.3	02/15/2022	Common Stock	7,500		7,500	0	D		
Performance Based Restricted	\$0.00								(1)		(1)	Common Stock	33,33	4	33,33	34	D		
Performance Based	\$0.00								03/01/2016	(2)	02/28/2025	Common	   35,00		35,00	00	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 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 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:

<u>Christopher G. Cobb, Attorney</u> in Fact for Rachel A. Seifert

10/27/2015

\*\* 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.