SEC	Form	4
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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

Section :	nis box if no long 16. Form 4 or F ns may continu on 1(b).	form 5	STAT		ed pur	suant	to Sec	tion 16	GES IN E	curit	ies Exchan	nge Act (ERSH	ΗP	Estim	Numbe ated av per res	erage burder	3235-0287 n 0.5
1. Name and Address of Reporting Person*					2. Is <u>C</u>	or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol COMMUNITY HEALTH SYSTEMS INC [CYH]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) 4000 MERIDIAN BOULEVARD				3. [3. Date of Earliest Transaction (Month/Day/Year) 02/16/2014									X Officer (give title Other (specify below) below) President and CFO					
(Street) FRANKLIN TN 37067				= 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(Sta	ate) (2	Zip)												Person				
1. Title of Security (Instr. 3) 2. Trans Date				saction				te, 3. Code (I						or 5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock			02/1	16/2014				Code	v	Amount			Price \$41.2	Transaction(s) (Instr. 3 and 4)		D			
Common o		-	Table II -				uritie	s Ac		isp						,730		D	
1. Title of Derivative 2. 3. Transaction 3A. Deem Execution Security Conversion Date Execution Security or Exercise (Month/Day/Year) if any		3A. Deeme Execution	(e.g., puts, cal ed 4. Date, Code (Instr		call	IIS, warrants, o 5. Number 6. I of Ex		6. Date Exe	ed, Disposed of, ptions, convertib ate Exercisable and iration Date nth/Day/Year)					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)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	or Nur	ount nber ihares					
Stock Options (Right to Buy)	\$37.21								02/28/2008	3 (2/27/2015	Comm Stock		,000		60,00	00	D	
Stock Options (Right to Buy)	\$40.41								07/25/2008	3 (07/24/2015	Comm Stock),000		200,000		D	
Stock Options (Right to Buy)	\$32.28								02/27/2009) (02/26/2018	Comm Stocł		,000		60,00	00	D	
Stock Options (Right to Buy)	\$18.18								02/25/2010) (02/24/2019	Comm Stock		,000		20,00)0	D	
Stock Options (Right to Buy)	\$33.9								02/24/2011	. (02/23/2020	Comm Stock		,000		25,00)0	D	
Stock Options (Right to Buy)	\$37.96								02/23/2012	2 (02/22/2021	Comm Stock		,000		25,00)0	D	
Stock Options (Right to Buy)	\$21.07								02/16/2013	3 (02/15/2022	Comm Stock		,000		20,00)0	D	
Performance Based Restricted	\$0.00								02/27/2014	1) (2/26/2023	Comm Stock		,000		50,00	00	D	

Explanation of Responses:

1. 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 earlings 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:

Christopher G. Cobb, Attorney

in Fact for W. Larry Cash

02/19/2014

Date

** Signature of Reporting Person

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.