FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL 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).

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* <u>DINKINS MICHAEL</u>							2. Issuer Name and Ticker or Trading Symbol COMMUNITY HEALTH SYSTEMS INC									elationship ck all appli Directo	cable)	ıg Per	son(s) to Iss	
(Last) (First) (Middle) 4000 MERIDIAN BOULEVARD					3. [CYH] 3. Date of Earliest Transaction (Month/Day/Year) 05/28/2019										Officer below)	(give title	Other (: below)	specify	
(Street) FRANKLIN TN 37067 (City) (State) (Zip)					4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		•	le I - No	n-Deriv	/ative	Sec	curitie	es Ac	car	uired.	Disi	osed o	of. or B	enef	iciall	/ Owned				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					action	ar) i	2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transac Code (li 8)	tion	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) or	5. Amou Securiti Benefic Owned	unt of 6. ies Fe ially (E		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership
										Code	v	Amount	(A) (D)	or F	rice	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
Common Stock 05/28/2						2019				P		4,00	4,000 A		\$3.168	22	22,028		D	
		Т	able II -									sed of onverti				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transaction Code (Instr. 8)		n of		6. Date Exercisal Expiration Date (Month/Day/Year				le and 7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		1	3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Da:	te ercisable		epiration	Title	or	ount nber res					
Restricted Stock Units	\$0.00								03	3/01/2019	02	2/28/2028	Commor Stock	24,	745		24,745	5	D	
Restricted Stock Units	\$0.00								03	3/01/2020	02	2/28/2029	Commor Stock	34,	068		34,068	3	D	

Explanation of Responses:

Remarks:

Christopher G. Cobb, Attorney 05/29/2019 in Fact for Michael Dinkins

** 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.