FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
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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

(Last)	e and Address of Reporting Person* RTH JULIA B (First) (Middle) MERIDIAN BOULEVARD							2. Issuer Name and Ticker or Trading Symbol COMMUNITY HEALTH SYSTEMS INC [CYH] 3. Date of Earliest Transaction (Month/Day/Year) 03/01/2017								Reporting le) ve title	ng Person(s) to Issuer 10% Owner Other (specify below)		wner
(Street) FRANKLIN TN 37067 (City) (State) (Zip) Table I - Non-Deriva									d (Month	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person									
Dat			Date				2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (/ Disposed Of (D) (Instr. 3 and 5)			5. Amount of Securities Beneficially Owned Following		Form		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	V	Amoun	t (A)	or	Price	Reported Transaction (Instr. 3 an				
Common Stock 03					01/201	17			M		1,47	,474 A		5 0.00 ⁽¹⁾	55,891		D		
Common Stock 03				03/	3/01/2017				M		1,43	1,430 A		5 0.00 ⁽¹⁾	57,321		D		
Common Stock 03/0				01/201	17			M		4,495 A		. 5	5 0.00 ⁽¹⁾	61,816		D			
			Tabl						quired, Dis						d				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution any (Month/D	Date, if	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable an Expiration Date (Month/Day/Year)		nd	7. Title and Amoun' Securities Underlyin Derivative Security and 4)		/ing	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following	e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable	Ex Da	piration te	Title	N	mount or umber of hares		Reported Transactio (Instr. 4)	tion(s)		
Restricted Stock Units	\$0.00	03/01/2017			М			1,474	03/01/2015	02	/29/2024	Commo Stock		1,474	\$0.00	0		D	
Restricted Stock Units	\$0.00	03/01/2017			М			1,430	03/01/2016	02	/28/2025	Commo Stock		1,430	\$0.00	1,429	,	D	
Restricted Stock Units	\$0.00	03/01/2017			М			4,495	03/01/2017	02	/28/2026	Commo Stock		4,495	\$0.00	8,989)	D	
Restricted Stock Units	\$0.00	03/01/2017			A		18,498		03/01/2018 ⁽²	02	/28/2027	Commo Stock		18,498	\$9.19 ⁽¹⁾	18,49	8	D	
Stock Units (SU)	\$0.00								(3)	Γ	(3)	Commo Stock	3	3,546.635		33,546.6	635	D	

Explanation of Responses:

- 1. The security converts to common stock on a one-to-one basis.
- 2. The Restricted Stock Units vest in 1/3 increments on the first, second and third anniversary date of the date of grant. Upon vesting, the Reporting Person will be issued that number of shares of the Common Stock of the Company.
- 3. The Stock Units were accrued under the Company's Directors' Fees Deferral Plan in lieu of a portion of the Reporting Person's Director Fees and are settled 100% in the Company's common stock upon cessation as a director or upon a date specified by the director.

Remarks:

NOTE: The number of restricted stock units and stock units accrued under the Company's Directors' Fees Deferral Plan for each award listed on Table II granted prior to April 29, 2016, was adjusted pursuant to the Employee Matters Agreement between the Issuer and Quorum Health Corporation ("QHC"), dated as of April 29, 2016, to preserve the aggregate intrinsic value of the original award as a result of the spin-off from the Issuer of QHC, effective April 29, 2016.

<u>Christopher G. Cobb, Attorney</u> <u>03/02/2017</u> in Fact for Julia B. North

** 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.