

**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

| OMB APPROVAL                                 |           |
|--|-----------|
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|  |         |          |  |  |  |   |  |  |
|--|---------|----------|--|--|--|---|--|--|
| 1. Name and Address of Reporting Person*<br><b>HAMMONS KEVIN J</b> |         |          | 2. Issuer Name and Ticker or Trading Symbol<br><b>COMMUNITY HEALTH SYSTEMS INC [ CYH ]</b> |  |  | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)<br><input checked="" type="checkbox"/> Director 10% Owner<br><input checked="" type="checkbox"/> Officer (give title below) Other (specify below)<br><b>Senior VP and CAO</b> |  |  |
| (Last)   | (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year)<br><b>02/23/2014</b>                      |  |  | 6. Individual or Joint/Group Filing (Check Applicable Line)<br><input checked="" type="checkbox"/> Form filed by One Reporting Person<br><input type="checkbox"/> Form filed by More than One Reporting Person  |  |  |
| 4000 MERIDIAN BOULEVARD  |         |          | 4. If Amendment, Date of Original Filed (Month/Day/Year)                                   |  |  |   |  |  |
| (Street)<br><b>FRANKLIN TN 37067</b>                               |         |          |  |  |  |   |  |  |
| (City) (State) (Zip)   |         |          |  |  |  |   |  |  |

**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                    | 02/23/2014                           |  | F                              |   | 645   | D          | \$41.89 | 28,583  | 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 |   |  |  |   |  |
| Stock Options (Right to Buy)               | \$38.3   |                                      |  |                                |   |  |     | 03/01/2007   | 02/28/2014      | Common Stock  | 3,000                                      | 3,000  | D   |  |
| Stock Options (Right to Buy)               | \$37.21  |                                      |  |                                |   |  |     | 02/28/2008   | 02/27/2015      | Common Stock  | 1,500                                      | 1,500  | D   |  |
| Stock Options (Right to Buy)               | \$40.41  |                                      |  |                                |   |  |     | 07/25/2008   | 07/24/2015      | Common Stock  | 8,000                                      | 8,000  | D   |  |
| Stock Options (Right to Buy)               | \$32.28  |                                      |  |                                |   |  |     | 02/27/2009   | 02/26/2018      | Common Stock  | 1,500                                      | 1,500  | D   |  |
| Stock Options (Right to Buy)               | \$33.9   |                                      |  |                                |   |  |     | 02/24/2011   | 02/23/2020      | Common Stock  | 1,000                                      | 1,000  | D   |  |
| Stock Options (Right to Buy)               | \$37.96  |                                      |  |                                |   |  |     | 02/23/2012   | 02/22/2021      | Common Stock  | 1,000                                      | 1,000  | D   |  |
| Stock Options (Right to Buy)               | \$21.07  |                                      |  |                                |   |  |     | 02/16/2013   | 02/15/2022      | Common Stock  | 4,000                                      | 4,000  | D   |  |

Explanation of Responses:

Remarks:

Christopher G. Cobb, Attorney 02/24/2014  
in Fact for Kevin J. Hammons

\*\* 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.

