SEC Form 4

FORM 4

Check this box if no longer subject to

Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

Filed purpuent to Section 16(a) of the Securities Evolution Act of 1024
Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934
or Section 30(h) of the Investment Company Act of 1940
OF Section 30(11) OF the investment Company Act of 1940

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP hours per response: 0.5 2. Issuer Name and Ticker or Trading Symbol 5. Relationship of Reporting Person(s) to Issuer

1. Name and Addro Simon Lynn	•		2. Issuer Name and Ticker or Trading Symbol <u>COMMUNITY HEALTH SYSTEMS INC</u> [CYH]						ationship of Reporting (all applicable) Director	Dwner				
(Last) 4000 MERIDIA	(First) AN BOULE	(Middle)	3. [3. Date of Earliest Transaction (Month/Day/Year) 03/01/2016						X Officer (give title Other (specify below) below) President and CQO				
(Street) FRANKLIN (City)	TN (State)	37067 (Zip)	4. It	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 Form filed by More than One Reporting Person				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned														
1. Title of Security	y (Instr. 3)	2. Transaction Date (Month/Day/Ye	Execution Date,		action Instr.	4. Securities Disposed Of			5. Amount of Securities Beneficially Owned Following Reported	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	Transaction(s) (Instr. 3 and 4)		(1150.4)		
Common Stock			03/01/201	6	М		13,334	A	\$0.00	111,290	D			
Common Stock			03/01/201	6	F		12,586	D	\$15.43	98,704	D			
Common Stock			03/01/201	6	A		35,000	A	\$0.00	133,704	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)		Transaction of Code (Instr. Derivative		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	Title	Amount or Number of Shares				
Performance Based Restricted	\$0.00	03/01/2016		M ⁽¹⁾			13,334	(1)	(1)	Common Stock	13,334	\$0.00	0	D	
Stock Options (Right to Buy)	\$31.75							12/08/2011	12/07/2020	Common Stock	5,000		5,000	D	
Stock Options (Right to Buy)	\$37.96							02/23/2012	02/22/2021	Common Stock	5,000		5,000	D	
Stock Options (Right to Buy)	\$21.07							02/16/2013	02/15/2022	Common Stock	4,000		4,000	D	

Explanation of Responses:

1. Pursuant to the terms governing the award, the Company has achieved the cost savings ("synergies") from the Health Management Associates, Inc. ("HMA") merger transaction that were required to be achieved during the first two years following the HMA merger transaction, and, accordingly, the performance-based restrictions on the remaining portion of the award have lapsed as of the second anniversary of the date of grant. All such shares will now be reported on Table 1 as directly owned shares of Restricted Stock. There is also a time-vesting element. The time-vesting restrictions lapse in equal installments on the second and third anniversary of the date of grant.

Remarks:

Christopher G. Cobb, Attorney 03/02/2016 in Fact for Lynn T. Simon

** 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.