FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

wasnington,	D.C.	20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPRO	VAL
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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* SEIFERT RACHEL A					CC	2. Issuer Name and Ticker or Trading Symbol COMMUNITY HEALTH SYSTEMS INC [CYH]								(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below)				ner
(Last) (First) (Middle) 4000 MERIDIAN BOULEVARD						3. Date of Earliest Transaction (Month/Day/Year) 02/16/2015									Executive VP and Secretary				
(Street) FRANKLIN TN 37067					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	G. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting				
(City) (State) (Zip)												Person							
			le I - Noi			_				, Dis	posed o				_				
1. Title of Security (Instr. 3)			Date	nsaction n/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		e, Transaction Disposed Code (Instr.		ties Acquired (A) d Of (D) (Instr. 3, 4			Beneficia Owned F Reported	s Illy ollowing	Form (D) or	: Direct I r Indirect I str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	V	Amount	(D)		Price	Transaction(s) (Instr. 3 and 4)					
Common S	Stock				5/2015				F		1,871			\$48.14		,829		D	
		Т									osed of, convertib				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Executior if any (Month/Da	Date,	4. Transa Code (8)	action of Exp		Expiratio	te Exercisable and ation Date of Securiti Underlying Derivative (Instr. 3 an		ecurities erlying vative Se	curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ve control (control (10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisal	ble	Expiration Date	Title	O N O	umber					
Stock Options (Right to Buy)	\$32.28								02/27/20	009	02/26/2018	Com Sto	ock 1	0,000		10,000	0	D	
Stock Options (Right to Buy)	\$18.18								02/25/20	010	02/24/2019	Com Sto	imon ock	7,500		7,500)	D	
Stock Options (Right to Buy)	\$33.9								02/24/20	011	02/23/2020		imon ock	7,500		7,500)	D	
Stock Options (Right to Buy)	\$37.96								02/23/20	012	02/22/2021	Com	mon ock	7,500		7,500)	D	
Stock Options (Right to Buy)	\$21.07								02/16/20	013	02/15/2022	Com	imon ock	7,500		7,500)	D	
Performance Based Restricted	\$0.00								03/01/201	15 ⁽¹⁾	02/29/2024	Com	imon ock 5	0,000		50,000	0	D	

Explanation of Responses:

1. Each performance based restricted share represents a contingent right to receive one share of CYH common stock. The lapsing of the restrictions is dependent on the Company meeting certain cost savings ("synergies") from the Health Management Associates, Inc. merger transaction. The performance target may be met in part in the first year or in whole or in part over the first two years. There is also a time vesting element to the maximum targets of the award. If the objectives are not met, the shares will be forfeited.

Remarks:

Christopher G. Cobb, Attorney in Fact for Rachel A. Seifert

02/18/2015

** 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.