

COMMUNITY HEALTH SYSTEMS INC  
 Form 4  
 December 11, 2008

**FORM 4**

UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
 Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287  
 Expires: January 31, 2005  
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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 OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
 Smith Martin Dewayne

2. Issuer Name and Ticker or Trading Symbol  
 COMMUNITY HEALTH SYSTEMS INC [CYH]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)  
 4000 MERIDIAN BLVD  
 (Street)

3. Date of Earliest Transaction (Month/Day/Year)  
 12/10/2008

\_\_\_\_ Director \_\_\_\_\_ 10% Owner  
 Officer (give title below) \_\_\_\_\_ Other (specify below)  
 Division Pres.; Division Ops

FRANKLIN, TN 37067

(City) (State) (Zip)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 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 (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 Ownership (Instr. 4)	
				(A) or (D)	Price			
				Code	V	Amount	(D)	Price
Common Stock	12/10/2008		A	10,000	A	\$ 0	22,834	D

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

**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 control number.**

SEC 1474 (9-02)

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

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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 Underlying Securities (Instr. 3 and 4)		
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Options (Right to Buy)	\$ 27.7					05/21/2003	05/21/2012	Common Stock	2,000
Stock Options (Right to Buy)	\$ 20.3					05/22/2004	05/22/2013	Common Stock	10,000
Stock Options (Right to Buy)	\$ 20.3					05/22/2004	05/22/2013	Common Stock	2,000
Stock Options (Right to Buy)	\$ 25.7					12/09/2004	12/09/2013	Common Stock	5,000
Stock Options (Right to Buy)	\$ 25.13					05/25/2005	05/25/2014	Common Stock	2,000
Stock Options (Right to Buy)	\$ 32.37					02/28/2006	02/28/2013	Common Stock	5,000
Stock Options (Right to Buy)	\$ 38.3					03/01/2007	03/01/2014	Common Stock	3,000
Stock Options (Right to Buy)	\$ 37.21					02/28/2008	02/28/2015	Common Stock	1,500
Stock Options (Right to Buy)	\$ 32.28					02/27/2009	02/27/2018	Common Stock	1,500

Stock Options (Right to Buy)	\$ 40.41				07/25/2008	07/25/2015	Common Stock	8,000
Stock Options (Right to Buy)	\$ 15.11	12/10/2008	A	10,000	12/10/2009 <sup>(1)</sup>	12/10/2018	Common Stock	10,000

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Smith Martin Dewayne 4000 MERIDIAN BLVD FRANKLIN, TN 37067			Division Pres.; Division Ops	

## Signatures

Rachel A. Seifert, Attorney in Fact for Martin D. Smtih 12/11/2008

\_\_Signature of Reporting Person

Date

## Explanation of Responses:

- \* 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).
- (1) Vesting occurs in 1/3 increments on the first, second and third anniversary of the date of grant.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.