#### PORTACCI MICHAEL T

Form 4

November 15, 2005

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

**OMB** Number:

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

Person

3235-0287

0.5

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** Section 16.

January 31, Expires: 2005

**OMB APPROVAL** 

Estimated average burden hours per

response...

Form 4 or Form 5 obligations may continue.

See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading PORTACCI MICHAEL T Issuer Symbol **COMMUNITY HEALTH** (Check all applicable) SYSTEMS INC [CYH] (Last) (First) (Middle) 3. Date of Earliest Transaction Director 10% Owner X\_ Officer (give title Other (specify (Month/Day/Year) below) 155 FRANKLIN ROAD, SUITE 400 11/15/2005 Senior Vice President (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line)

### BRENTWOOD, TN 37027

(City)	(State)	(Zip) Tab	ole I - Non-	Derivative Sec	urities Acqui	red, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securities A coor Disposed of (Instr. 3, 4 and (A of Amount (D	f (D) 15)	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)
Common Stock	11/15/2005	11/15/2005	M	75,000 A	\$ 13	135,804	D	
Common Stock	11/15/2005	11/15/2005	S	75,000 D	\$ 38.2112	60,804	D	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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### 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. Transactio Code (Instr. 8)	5. Number of orDerivative 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)	\$ 13	11/15/2005	11/15/2005	M		75,000	06/08/2001	06/08/2010	Common Stock	75,000
Stock Options (Right to Buy)	\$ 6.99						01/01/1998	01/01/2007	Common Stock	8,407
Stock Options (Right to Buy)	\$ 20.3						05/22/2004	05/22/2013	Common Stock	200,000
Stock Options (Right to Buy)	\$ 32.37						02/28/2006	02/28/2015	Common Stock	30,000

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
Treporting O Water France / France /	Director	10% Owner	Officer	Other			
PORTACCI MICHAEL T 155 FRANKLIN ROAD SUITE 400 BRENTWOOD, TN 37027			Senior Vice President				
Signatures							

Rachel A. Seifert, Attorney in Fact for Michael T. 11/15/2005 Portacci

> \*\*Signature of Reporting Person Date

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# **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).

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.