Edgar Filing: COMMUNITY HEALTH SYSTEMS INC - Form 4

COMMUNITY HEALTH SYSTEMS INC

Form 4

March 02, 2007

FORM 4

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

OMB Number: 3235-0287

Estimated average

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005

0.5

OMB APPROVAL

Form 4 or Form 5 obligations may continue.

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

burden hours per response...

See Instruction 1(b).

Stock

Stock

Common

03/01/2007

(Print or Type Responses)

| 1. Name and BUFORD | Address of Reporting Γ MARK | Symb COM | 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) 4000 MER | (First) (I | Middle) 3. Dat (Mont | 3. Date of Earliest Transaction (Month/Day/Year) 02/28/2007 | | | | Director 10% OwnerX Officer (give title Other (specify below) Vice President and Controller | | | |
| | (Street) | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| FRANKLI | N, TN 37067 | | | | | | Form filed by More than One Reporting Person | | | |
| (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | e 2A. Deemed Execution Date, any (Month/Day/Yea | Code r) (Instr. 8) | Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or | | | 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 | 02/28/2007 | 02/28/2007 | Code V F | Amount 1,764 | (D) | Price \$ 37.21 | 31,570 | D | | |
| Common | 02/28/2007 | 02/28/2007 | A | 22,000 | A | \$0 | 53,570 | D | | |

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

03/01/2007

F

1,764

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

51,806

D

Edgar Filing: COMMUNITY HEALTH SYSTEMS INC - Form 4

number.

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. Transactic Code (Instr. 8) | 5. Numonof Deri Securit Acquire (A) or Dispose (D) (Instr. 3 and 5) | vative les ed | 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) | \$ 20.3 | | | | | | 05/22/2004 | 05/22/2013 | Common Stock | 10,000 |
| Stock Options (Right to Buy) | \$ 32.37 | | | | | | 02/28/2006 | 02/28/2013 | Common Stock | 0 |
| Stock Options (Right to Buy) | \$ 38.3 | | | | | | 03/01/2007 | 03/01/2014 | Common Stock | 0 |
| Stock Options (Right to Buy) | \$ 37.21 | 02/28/2007 | | A | 7,500 | | 02/28/2008(1) | 02/28/2015 | Common Stock | 7,500 |

Reporting Owners

**Signature of Reporting Person

| Reporting Owner Name / Address | Relationships | | | | | | | |
|--|---------------|-----------|-------------------------------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| BUFORD T MARK 4000 MERIDIAN BOULEVARD FRANKLIN, TN 37067 | | | Vice President and Controller | | | | | |
| Signatures | | | | | | | | |
| Rachel A. Seifert, Attorney in Fact | for Thon | nas Mark | | | | | | |
| Buford | | | 03/02/2007 | | | | | |

Reporting Owners 2

Date

Edgar Filing: COMMUNITY HEALTH SYSTEMS INC - Form 4

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.