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# Return of Private Foundation

## or Section 4947(a)(1) Nonexempt Charitable Trust

### Treated as a Private Foundation

2009

Department of the Treasury  
Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

For calendar year 2009, or tax year beginning

, and ending

G Check all that apply:

☐ Initial return☐ Initial return of a former public charity☐ Final return☐ Amended return☐ Address change☐ Name changeUse the IRS  
label.Otherwise,  
print  
or type.See Specific  
Instructions.

Name of foundation

COMMUNITY HEALTH SYSTEMS FOUNDATION

Number and street (or P O box number if mail is not delivered to street address)

4000 MERIDIAN BOULEVARD

Room/suite

City or town, state, and ZIP code

FRANKLIN, TN 37067

A Employer identification number

20-3323391

B Telephone number

615-465-7000

C If exemption application is pending, check here ☐D 1. Foreign organizations, check here ☐2. Foreign organizations meeting the 85% test  
check here and attach computation ☐E If private foundation status was terminated  
under section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination  
under section 507(b)(1)(B), check here ☐

H Check type of organization:

☒ Section 501(c)(3) exempt private foundation☐ Section 4947(a)(1) nonexempt charitable trust☐ Other taxable private foundation

I Fair market value of all assets at end of year

(from Part II, col (c), line 16)

\$ 4,599,805. (Part I, column (d) must be on cash basis)

J Accounting method

☐ Cash☒ Accrual☐ Other (specify)**Part I Analysis of Revenue and Expenses**(The total of amounts in columns (b), (c), and (d) may not  
necessarily equal the amounts in column (a))(a) Revenue and  
expenses per books(b) Net investment  
income(c) Adjusted net  
income(d) Disbursements  
for charitable purposes  
(cash basis only)

Revenue

1 Contributions, gifts, grants, etc., received

1,000,000.

N/A

2 Check ☐ if the foundation is not required to attach Sch B3 Interest on savings and temporary  
cash investments

4 Dividends and interest from securities

22,161.

22,161.

STATEMENT 1

5a Gross rents

b Net rental income or (loss)

6a Net gain or (loss) from sale of assets not on line 10

b Gross sales price for all  
assets on line 6a

7 Capital gain net income (from Part IV, line 2)

0.

8 Net short-term capital gain

9 Income modifications

10a Gross sales less returns  
and allowances

b Less Cost of goods sold

c Gross profit or (loss)

11 Other income

12 Total. Add lines 1 through 11

1,022,161.

22,161.

Operating and Administrative Expenses

13 Compensation of officers, directors, trustees, etc

0.

0.

0.

14 Other employee salaries and wages

15 Pension plans, employee benefits

16a Legal fees

b Accounting fees

c Other professional fees

17 Interest

18 Taxes

19 Depreciation and depletion

20 Occupancy

21 Travel, conferences, and meetings

22 Printing and publications

23 Other expenses

STMT 2

60.

0.

0.

24 Total operating and administrative  
expenses. Add lines 13 through 23

60.

0.

0.

25 Contributions, gifts, grants paid

188,048.

188,048.

26 Total expenses and disbursements.

Add lines 24 and 25

188,108.

0.

188,048.

27 Subtract line 26 from line 12

a Excess of revenue over expenses and disbursements

834,053.

b Net investment income (if negative, enter -0-)

22,161.

c Adjusted net income (if negative, enter -0-)

N/A

SCANNED MAY 20 2010

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing			
	2 Savings and temporary cash investments	3,765,752.	4,599,805.	4,599,805.
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
11 Investments - land, buildings, and equipment basis ▶				
Less accumulated depreciation ▶				
12 Investments - mortgage loans				
13 Investments - other				
14 Land, buildings, and equipment: basis ▶				
Less accumulated depreciation ▶				
15 Other assets (describe ▶)				
16 Total assets (to be completed by all filers)	3,765,752.	4,599,805.	4,599,805.	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶)			
23 Total liabilities (add lines 17 through 22)	0.	0.		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted	3,765,752.	4,599,805.	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg., and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
30 Total net assets or fund balances	3,765,752.	4,599,805.		
31 Total liabilities and net assets/fund balances	3,765,752.	4,599,805.		

## Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	3,765,752.
2 Enter amount from Part I, line 27a	2	834,053.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	4,599,805.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	4,599,805.

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**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a				
b	NONE			
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7  
If (loss), enter -0- in Part I, line 7 } 2

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):  
If gain, also enter in Part I, line 8, column (c).  
If (loss), enter -0- in Part I, line 8 } 3

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2008	132,540.	3,701,773.	.035804
2007	145,403.	3,147,238.	.046200
2006	149,320.	1,936,114.	.077124
2005	45,450.	160,436.	.283291
2004			

2 Total of line 1, column (d)	2	.442419
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.110605
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	4,546,463.
5 Multiply line 4 by line 3	5	502,862.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	222.
7 Add lines 5 and 6	7	503,084.
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.	8	188,048.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)	1	443.
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0.
3	Add lines 1 and 2	3	443.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	443.
6	Credits/Payments.		
a	2009 estimated tax payments and 2008 overpayment credited to 2009	6a	2,473.
b	Exempt foreign organizations - tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	2,473.
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	2,030.
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax <input type="checkbox"/> 2,030. Refunded <input type="checkbox"/> 0.	11	0.

**Part VII-A Statements Regarding Activities**

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
1c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input type="checkbox"/> \$ 0. (2) On foundation managers. <input type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities	2	X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	5	X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> TN		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	X

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**Part VII-A Statements Regarding Activities** (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13	X	
14	The books are in care of ► COMMUNITY HEALTH SYSTEMS Located at ► 4000 MERIDIAN BOULEVARD, FRANKLIN, TN Telephone no. ► 615-465-7000 ZIP+4 ► 37067			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year	15		N/A

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here	N/A	1b
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?		1c
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? If "Yes," list the years ►	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)	N/A	2b
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ►		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)	N/A	3b
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?		4b

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**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (continued)

5a During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

N/A

5b

Organizations relying on a current notice regarding disaster assistance check here

☒

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

6b

X

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

7b

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

1 List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 3		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000

0

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**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	4,615,698.
b	Average of monthly cash balances	1b	
c	Fair market value of all other assets	1c	
d	<b>Total</b> (add lines 1a, b, and c)	1d	4,615,698.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	4,615,698.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	69,235.
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,546,463.
6	<b>Minimum investment return.</b> Enter 5% of line 5	6	227,323.

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	227,323.
2a	Tax on investment income for 2009 from Part VI, line 5	2a	443.
b	Income tax for 2009. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	443.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	226,880.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	226,880.
6	Deduction from distributable amount (see instructions)	6	0.
7	<b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	226,880.

**Part XII Qualifying Distributions** (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	188,048.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	188,048.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	0.
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	6	188,048.

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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**Part XIII** Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				226,880.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005				
c From 2006	36,010.			
d From 2007				
e From 2008				
f Total of lines 3a through e	36,010.			
4 Qualifying distributions for 2009 from Part XII, line 4: ► \$	188,048.			
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2009 distributable amount				188,048.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	36,010.			36,010.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010				2,822.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				



**Part XV** Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
<b>SEE STATEMENT 4</b>				
<b>Total</b>			<b>▶ 3a</b>	<b>188,048.</b>
<i>b Approved for future payment</i>				
<b>NONE</b>				
<b>Total</b>			<b>▶ 3b</b>	<b>0.</b>



<b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of:			
(1) Cash	1a(1)		X
(2) Other assets	1a(2)		X
<b>b</b> Other transactions:			
(1) Sales of assets to a noncharitable exempt organization	1b(1)		X
(2) Purchases of assets from a noncharitable exempt organization	1b(2)		X
(3) Rental of facilities, equipment, or other assets	1b(3)		X
(4) Reimbursement arrangements	1b(4)		X
(5) Loans or loan guarantees	1b(5)		X
(6) Performance of services or membership or fundraising solicitations	1b(6)		X
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		X
<b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.			

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.				
Sign Here	Signature of officer or trustee <i>L. Mark Byrd</i>		Date 5-14-10	Title VP Controller
	Preparer's signature <i>Frances Medard</i>		Date 4/24/10	Check if self-employed <input type="checkbox"/> Preparer's identifying number P00752421
Paid Preparer's Use Only	Firm's name (or yours if self-employed), address, and ZIP code DELOITTE TAX LLP 424 CHURCH STREET, SUITE 2400 NASHVILLE, TN 37219		EIN ▶ 86-1065772 Phone no. 615-259-1800	

Form **990-PF** (2009)

**Schedule B**(Form 990, 990-EZ,  
or 990-PF)Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

**2009**

Name of the organization

Employer identification number

COMMUNITY HEALTH SYSTEMS FOUNDATION

20-3323391

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☐

501(c)( ) (enter number) organization

☐

4947(a)(1) nonexempt charitable trust not treated as a private foundation

☐

527 political organization

Form 990-PF

☒

501(c)(3) exempt private foundation

☐

4947(a)(1) nonexempt charitable trust treated as a private foundation

☐

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**☒

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**☐

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.☐For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ \_\_\_\_\_**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions  
for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization

Employer identification number

COMMUNITY HEALTH SYSTEMS FOUNDATION

20-3323391

**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	COMMUNITY HEALTH SYSTEMS 4000 MERIDIAN BLVD FRANKLIN, TN 37067	\$ 1,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)



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FORM 990-PF	DIVIDENDS AND INTEREST FROM SECURITIES	STATEMENT	1
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SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
BANK OF AMERICA	22,161.	0.	22,161.
TOTAL TO FM 990-PF, PART I, LN 4	22,161.	0.	22,161.

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FORM 990-PF

OTHER EXPENSES

STATEMENT 2

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BANK CHARGES	60.	0.		0.
TO FORM 990-PF, PG 1, LN 23	60.	0.		0.

FORM 990-PF      PART VIII - LIST OF OFFICERS, DIRECTORS      STATEMENT      3  
                          TRUSTEES AND FOUNDATION MANAGERS

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
WAYNE T. SMITH	CHAIRMAN OF THE BOARD/PRES 1.00	0.	0.	0.
W.LARRY CASH	EXECUTIVE VICE PRESIDENT 1.00	0.	0.	0.
RACHEL A. SEIFERT	SENIOR VICE PRESIDENT/SECR 1.00	0.	0.	0.
MARTIN G. SCHWEINHART	SENIOR VICE PRESIDENT 1.00	0.	0.	0.
T. MARK BUFORD	VICE PRESIDENT 1.00	0.	0.	0.
JAMES W. DOUCETTE	VICE PRESIDENT & TREASURER 1.00	0.	0.	0.
LINDA K. PARSONS	VICE PRESIDENT 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		0.	0.	0.

FORM 990-PF

GRANTS AND CONTRIBUTIONS  
PAID DURING THE YEAR

STATEMENT 4

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
AMERICAN CANCER SOCIETY 2000 CHARLOTTE AVE. NASHVILLE, TN 37203-2003	MATCHING GRANT OR GIFT	PUBLIC	50.
AMERICAN HEART ASSOCIATION 1720 EPPS BRIDGE PKWY ATHENS, GA 30339	MATCHING GRANT OR GIFT	PUBLIC	50.
AMERICAN SADDLEBRED MUSEUM - 2009 ANNUAL CAMPAIGN 4083 IRON WORKS PARKWAY LEXINGTON, KY 40511	MATCHING GRANT OR GIFT	PUBLIC	100.
BAYLOR BEAR FOUNDATION ONE BEAR PLACE #97050 WACO, TX 76798-7050	MATCHING GRANT OR GIFT	PUBLIC	10,000.
BAYLOR UNIVERSITY GIFT PROCESSING - HIGHERS-SIMPSON ATHLETIC/ACAD. COMPLEX - ONE BEAR PLACE #97026 WACO, TX 76798	MATCHING GRANT OR GIFT	PUBLIC	200.
BAYLOR UNIVERSITY GIFT PROCESSING - HURRICANE IKE STUDENT FUND - ONE BEAR PLACE #97050 WACO, TX 76798-7050	MATCHING GRANT OR GIFT	PUBLIC	960.
BERKSHIRE BOTANICAL GARDEN P.O. BOX 826 NEW YORK, NY 01262-4897	MATCHING GRANT OR GIFT	PUBLIC	250.
BUNNY RESCUE 3893 BIGBY RD. COLUMBIA, TN 38401	MATCHING GRANT OR GIFT	PUBLIC	200.

COMMUNITY HEALTH SYSTEMS FOUNDATION

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CITYMEALS ON WHEELS 355 LEXINGTON AVENUE NEW YORK, NY 10017-6603	MATCHING GRANT OR GIFT	PUBLIC	334.
COMPASS COMMUNITY SERVICES 995 MARKET ST., 5TH FLOOR SAN FRANCISCO, CA 94103	MATCHING GRANT OR GIFT	PUBLIC	250.
CYSTIC FIBROSIS FOUNDATION 6931 ARLINGTON ROAD BETHESDA, MD 20814	MATCHING GRANT OR GIFT	PUBLIC	120.
FRANKLIN & MARSHALL COLLEGE P.O. BOX 3003 LANCASTER, PA 17604-3003	MATCHING GRANT OR GIFT	PUBLIC	10,000.
GEORGETOWN COLLEGE (CARLTON/DEASON SCHOLARSHIP FUND) - 400 EAST COLLEGE ST. GEORGETOWN, KY 40324-1696	MATCHING GRANT OR GIFT	PUBLIC	25,000.
HARBOR HOUSE 2231 LOWER HUNTERS TRACE LOUISVILLE, KY 40216	MATCHING GRANT OR GIFT	PUBLIC	200.
HARVARD MEDICAL SCHOOL ALUMNI FUND 401 PARK DR., STE. 22W BOSTON, MA 02215	MATCHING GRANT OR GIFT	PUBLIC	1,500.
HERITAGE FOUNDATION P.O. BOX 723 FRANKLIN, TN 37065	MATCHING GRANT OR GIFT	PUBLIC	250.
KEVIN CARTER FOUNDATION 1601 DODD TRL MURFREESBORO, TN 37128-7647	MATCHING GRANT OR GIFT	PUBLIC	1,500.
LABELS ARE FOR JARS 118 SOUTH BROADWAY LAWRENCE, MA 01843	MATCHING GRANT OR GIFT	PUBLIC	750.

COMMUNITY HEALTH SYSTEMS FOUNDATION

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LAFAYETTE COLLEGE 307 MARKLE HALL EASTON, PA 18042	MATCHING GRANT OR GIFT	PUBLIC	1,826.
LANCASTER COUNTRY DAY SCHOOL 725 HAMILTON ROAD LANCASTER, PA 17603	MATCHING GRANT OR GIFT	PUBLIC	3,000.
LEE UNIVERSITY P.O. BOX 3450 CLEVELAND, PA 37320-3450	MATCHING GRANT OR GIFT	PUBLIC	10,000.
LEGAL AID SOCIETY OF MIDDLE TENNESSEE AND THE CUMBERLANDS 300 DEADERICK ST. NASVHILLE, TN 37201	MATCHING GRANT OR GIFT	PUBLIC	200.
LENOX LIBRARY ASSOCIATION 18 MAIN ST. LENOX, MA 01240-2310	MATCHING GRANT OR GIFT	PUBLIC	250.
LUTHERAN LIFE COMMUNITIES FOUNDATION 800 WEST OAKTON STREET ARLINGTON HEIGHTS, IL 60004	MATCHING GRANT OR GIFT	PUBLIC	100.
MAKE-A-WISH FOUNDATION OF MIDDLE TENNESSEE 209 10TH AVE. SOUTH, STE. 527 NASHVILLE, TN 37203	MATCHING GRANT OR GIFT	PUBLIC	32,400.
MARCH OF DIMES 1101 KERMIT DR., STE. 201 NASHVILLE, TN 37217	MATCHING GRANT OR GIFT	PUBLIC	250.
MASSACHUSETTS GENERAL HOSPITAL 165 CAMBRIDGE ST., STE. 600 BOSTON, MA 02114	MATCHING GRANT OR GIFT	PUBLIC	200.
MAYFIELD/GRAVES COUNTY ARTGUILD 120 NORTH 8TH ST. MAYFIELD, KY 42066	MATCHING GRANT OR GIFT	PUBLIC	150.

COMMUNITY HEALTH SYSTEMS FOUNDATION		20-3323391
NASHVILLE RESCUE MISSION 639 LAFAYETTE ST. NASHVILLE, TN 37203	MATCHING GRANT OR GIFT	PUBLIC 1,200.
NASHVILLE SYMPHONY ONE SYMPHONY PLACE NASHVILLE, TN 38201	MATCHING GRANT OR GIFT	PUBLIC 500.
NEW YORK BOTANICAL GARDEN 2900 SOUTHERN BLVD BRONX, NY 10458	MATCHING GRANT OR GIFT	PUBLIC 500.
NEW YORK PRESBYTERIAN HOSPITAL EAST 68TH STREET BOX 123 NEW YORK, NY 10065	MATCHING GRANT OR GIFT	PUBLIC 600.
NORTHERN ILLINOIS UNIVERSITY FOUNDATION ALTGELD HALL 135 DEKALB, IL 60115-2882	MATCHING GRANT OR GIFT	PUBLIC 100.
NORTHWESTERN UNIVERSITY - WILDCAT FUND 1501 CENTRAL ST. EVANSTON, IN 60208	MATCHING GRANT OR GIFT	PUBLIC 1,628.
PARTNERSHIP FOR CHILDREN'S RIGHTS 271 MADISON AVE, 17TH FLOOR NEW YORK, NY 10016	MATCHING GRANT OR GIFT	PUBLIC 750.
RHS DIAMOND CLUB; RAVENWOOD HIGH SCHOOL PTO 1724 WILSON PIKE BRENTWOOD, TN 37027	MATCHING GRANT OR GIFT	PUBLIC 100.
ROCKEFELLER UNIVERSITY 1230 YORK AVENUE NEW YORK, NY 10021-6399	MATCHING GRANT OR GIFT	PUBLIC 700.
SAFE HORIZON 2 LAFAYETTE ST., 3RD FLOOR NEW YORK, NY 10007	MATCHING GRANT OR GIFT	PUBLIC 350.

COMMUNITY HEALTH SYSTEMS FOUNDATION

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SAINT ANN'S SCHOOL 129 PIERREPORNT ST. BROOKLYN, NY 11201	MATCHING GRANT OR GIFT	PUBLIC	750.
SEEDS OF PEACE 370 LEXINGTON AVE, STE 401 NEW YORK, NY 10017	MATCHING GRANT OR GIFT	PUBLIC	250.
SMITH COLLEGE 33 ELM STREET NORTHAMPTON, MA 01063	MATCHING GRANT OR GIFT	PUBLIC	730.
ST. ANDREW'S SCHOOL 350 NOXONTOWN RD. MIDDLETOWN, DE 19709-1605	MATCHING GRANT OR GIFT	PUBLIC	2,500.
ST. JUDE'S CHILDREN'S RESEARCH HOSPITAL 501 ST. JUDE PLACE MEMPHIS, TN 38105	MATCHING GRANT OR GIFT	PUBLIC	1,000.
STEPPINGSTONE SCHOLARS 230 S. BROAD ST., STE. 1102 PHILADELPHIA, PA 19102	MATCHING GRANT OR GIFT	PUBLIC	500.
STEVE MCNAIR FOUNDATION 1 WILLOW BEND DR HATTIESBURG, MS 39402	MATCHING GRANT OR GIFT	PUBLIC	100.
SUNRISE CHILDREN'S SERVICES 300 HOPE ST., P.O. BOX 1429 MT WASHINGTON, KY 40047-1429	MATCHING GRANT OR GIFT	PUBLIC	400.
SUSAN G. KOMEN FOR THE CURE 4009 HILLSBORO PIKE NASHVILLE, TN 37215	MATCHING GRANT OR GIFT	PUBLIC	100.
SUSAN G. KOMEN FOUNDATION 4009 HILLSBORO PIKE NASHVILLE, TN 37215	MATCHING GRANT OR GIFT	PUBLIC	50.



COMMUNITY HEALTH SYSTEMS FOUNDATION

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THE HAVERFORD SCHOOL 450 LANCASTER AVE. HAVERFORD, PA 19041	MATCHING GRANT OR GIFT	PUBLIC	1,000.
THE SALVATION ARMY 631 DICKERSON ROAD NASHVILLE, TN 37207-8625	MATCHING GRANT OR GIFT	PUBLIC	3,000.
THIRTEEN WNET 450 WEST 33RD STREET NEW YORK, NY 10001-2605	MATCHING GRANT OR GIFT	PUBLIC	500.
TPAC (TENNESSEE PERFORMING ARTS CENTER) P.O. BOX 190660 NASHVILLE, TN 37219	MATCHING GRANT OR GIFT	PUBLIC	1,300.
TRINITY UNIVERSITY - HEALTH CARE ADMINISTRATION DEPT. ONE TRINITY PLACE, BOX 58 SAN ANTONIO, TX 78212-7200	MATCHING GRANT OR GIFT	PUBLIC	3,000.
UNION SEMINARY - POVERTY INITIATIVE N. BROADWAY NEW YORK, NY 10027	MATCHING GRANT OR GIFT	PUBLIC	20,000.
UNITED WAY 250 VENTURE CIRCLE NASHVILLE, TN 37228	MATCHING GRANT OR GIFT	PUBLIC	25,100.
UNIVERSITY OF CHICAGO 5801 S. ELLIS AVE., STE. 007 CHICAGO, IL 60637	MATCHING GRANT OR GIFT	PUBLIC	1,000.
URBAN YOUTH IMPACT P.O. BOX 222592 WEST PALM BEACH, FL 33422	MATCHING GRANT OR GIFT	PUBLIC	10,000.
WANG FOUNDATION FOR SIGHT RESEARCH 1801 WEST END AVE. STE 1150 NASHVILLE, NY 37203	MATCHING GRANT OR GIFT	PUBLIC	750.

COMMUNITY HEALTH SYSTEMS FOUNDATION

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WESLEYAN COLLEGE 4760 FORSYTH ROAD 31210-4462	MACON, GA	MATCHING GRANT OR GIFT	PUBLIC	5,000.
WNYC 160 VARICK STREET 10013	NEW YORK, NY	MATCHING GRANT OR GIFT	PUBLIC	500.
THE METROPOLITAN OPERA LINCOLN CENTER 10023	NEW YORK, NY	MATCHING GRANT OR GIFT	PUBLIC	3,500.
THE NEW YORK BAR FOUNDATION ONE ELK STREET	ALBANY, NY 12207	MATCHING GRANT OR GIFT	PUBLIC	500.

TOTAL TO FORM 990-PF, PART XV, LINE 3A

188,048.