

Form **990-PF**Department of the Treasury
Internal Revenue Service**Return of Private Foundation**

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf

OMB No 1545-0052

2016

Open to Public Inspection

For calendar year 2016 or tax year beginning

, and ending

| | | |
|---|--|--|
| Name of foundation COMMUNITY HEALTH SYSTEMS FOUNDATION | | A Employer identification number 20-3323391 |
| Number and street (or P.O. box number if mail is not delivered to street address) 4000 MERIDIAN BOULEVARD | | B Telephone number 615-465-7000 |
| City or town, state or province, country, and ZIP or foreign postal code FRANKLIN, TN 37067 | | C If exemption application is pending, check here <input type="checkbox"/> |
| G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change | | D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> |
| H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation | | E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> |
| I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 5,289,081. (Part I, column (d) must be on cash basis) | J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ | F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/> |

| 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) |
|--|---|------------------------------------|---------------------------|-------------------------|---|
| 1 | Contributions, gifts, grants, etc., received | | | N/A | |
| 2 | Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B | | | | |
| 3 | Interest on savings and temporary cash investments | | | | |
| 4 | Dividends and interest from securities | | | | |
| 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 | 0. | 0. | | |
| 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 1 | 35. | 0. | | 0. |
| 24 | Total operating and administrative expenses. Add lines 13 through 23 | 35. | 0. | | 0. |
| 25 | Contributions, gifts, grants paid | 639,893. | | | 639,893. |
| 26 | Total expenses and disbursements. Add lines 24 and 25 | 639,928. | 0. | | 639,893. |
| 27 | Subtract line 26 from line 12: | | | | |
| a | Excess of revenue over expenses and disbursements | <639,928.> | | | |
| b | Net investment income (if negative, enter -0-) | | 0. | | |
| c | Adjusted net income (if negative, enter -0-) | | | N/A | |

624 17

| 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 | 5,929,009. | 5,289,081. | 5,289,081. |
| | 2 Savings and temporary cash investments | | | |
| | 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 - see the instructions. Also, see page 1, item I) | 5,929,009. | 5,289,081. | 5,289,081. | |
| Liabilities | 17 Accounts payable and accrued expenses | 2,300. | 2,300. | |
| | 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) | 2,300. | 2,300. | |
| 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 | 5,926,709. | 5,286,781. | |
| | 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 | 5,926,709. | 5,286,781. | |
| | 31 Total liabilities and net assets/fund balances | 5,929,009. | 5,289,081. | |

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 | 5,926,709. |
| 2 Enter amount from Part I, line 27a | 2 | <639,928.> |
| 3 Other increases not included in line 2 (itemize) ▶ | 3 | 0. |
| 4 Add lines 1, 2, and 3 | 4 | 5,286,781. |
| 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 | 5,286,781. |

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 | | { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 | | 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 the 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)) |
|--|--|--|---|
| 2015 | 756,655. | 6,127,019. | .123495 |
| 2014 | 491,760. | 6,740,047. | .072961 |
| 2013 | 387,925. | 7,210,393. | .053801 |
| 2012 | 285,168. | 7,556,847. | .037736 |
| 2011 | 245,179. | 7,814,468. | .031375 |
| 2 Total of line 1, column (d) | | | 2 .319368 |
| 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 .063874 |
| 4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5 | | | 4 5,405,513. |
| 5 Multiply line 4 by line 3 | | | 5 345,272. |
| 6 Enter 1% of net investment income (1% of Part I, line 27b) | | | 6 0. |
| 7 Add lines 5 and 6 | | | 7 345,272. |
| 8 Enter qualifying distributions from Part XII, line 4 | | | 8 639,893. |

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.

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) | | | |
| b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b | | 1 | 0. |
| 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 | 0. |
| 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 | 0. |
| 6 Credits/Payments: | | | |
| a 2016 estimated tax payments and 2015 overpayment credited to 2016 | 6a | | |
| 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 | | 0. |
| 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 | | 0. |
| 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | | |
| 11 Enter the amount of line 10 to be: Credited to 2017 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/> | 11 | | |

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 |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the 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 |
| c 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 | | 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 | | X |
| 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | X |
| b If "Yes," has it filed a tax return on Form 990-T for this year? | | |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T | | 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? | 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 | 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 | 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 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV | | X |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | | X |

N/A

Part VII-A Statements Regarding Activities (continued)

| | Yes | No |
|--|-----|----|
| 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) | | X |
| 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) | | X |
| 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | X | |
| Website address N/A | | |
| 14 The books are in care of COMMUNITY HEALTH SYSTEMS Telephone no. 615-465-7000 | | |
| Located at 4000 MERIDIAN BOULEVARD, FRANKLIN, TN ZIP+4 37067 | | |
| 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year 15 N/A | | |
| 16 At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? | Yes | No |
| See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country N/A | | X |

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 instructions)? | N/A | |
| Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/> | | |
| 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 2016? | | X |
| 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 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| If "Yes," list the years N/A | | |
| 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 | |
| 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 2016 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 2016.) | N/A | |
| 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | | X |
| 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 2016? | | X |

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 4945(d)(4)(A)? (see instructions)

☐ 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

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

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

6b

X

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes ☒ No**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

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 2 | | 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

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
|---|---------------------|------------------|
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Total number of others receiving over \$50,000 for professional services

0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

| | Expenses |
|-------|----------|
| 1 N/A | |
| | |
| 2 | |
| | |
| 3 | |
| | |
| 4 | |
| | |

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

| | Amount |
|--|--------|
| 1 N/A | |
| | |
| 2 | |
| | |
| All other program-related investments. See instructions. | |
| 3 | |
| | |
| | |
| | |

Total. Add lines 1 through 3

0.

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 | 0. |
| b | Average of monthly cash balances | 1b | 5,487,830. |
| c | Fair market value of all other assets | 1c | |
| d | Total (add lines 1a, b, and c) | 1d | 5,487,830. |
| 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 | 5,487,830. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 82,317. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 5,405,513. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 270,276. |

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 | 270,276. |
| 2a | Tax on investment income for 2016 from Part VI, line 5 | 2a | |
| b | Income tax for 2016. (This does not include the tax from Part VI.) | 2b | |
| c | Add lines 2a and 2b | 2c | 0. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 270,276. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 270,276. |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0. |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 270,276. |

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 | 639,893. |
| 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 | 0. |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| a | Suitability test (prior IRS approval required) | 3a | 0. |
| b | Cash distribution test (attach the required schedule) | 3b | 0. |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 639,893. |
| 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 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 639,893. |

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.

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2015 | (c) 2015 | (d) 2016 |
|---|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2016 from Part XI, line 7 | | | | 270,276. |
| 2 Undistributed income, if any, as of the end of 2016 | | | | |
| a Enter amount for 2015 only | | | 0. | |
| b Total for prior years: | | 0. | | |
| 3 Excess distributions carryover, if any, to 2016: | | | | |
| a From 2011 | | | | |
| b From 2012 | | | | |
| c From 2013 | | | | |
| d From 2014 | 125,952. | | | |
| e From 2015 | 450,304. | | | |
| f Total of lines 3a through e | 576,256. | | | |
| 4 Qualifying distributions for 2016 from Part XII, line 4: ▶ \$ 639,893. | | | | |
| a Applied to 2015, 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 2016 distributable amount | | | | 270,276. |
| e Remaining amount distributed out of corpus | 369,617. | | | |
| 5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a).) | 0. | | | 0. |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | 945,873. | | | |
| 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 2015. Subtract line 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017 | | | | 0. |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) | 0. | | | |
| 8 Excess distributions carryover from 2011 not applied on line 5 or line 7 | 0. | | | |
| 9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a | 945,873. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2012 | | | | |
| b Excess from 2013 | | | | |
| c Excess from 2014 | 125,952. | | | |
| d Excess from 2015 | 450,304. | | | |
| e Excess from 2016 | 369,617. | | | |

| | |
|----------|---|
| Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) |
|----------|---|

N/A

- 1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling

- b**
- Check box to indicate whether the foundation is a private operating foundation described in section
- ☐
- 4942(j)(3) or
- ☐
- 4942(j)(5)

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

| Recipient Name and address (home or business) | 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 |
|--|--|--------------------------------------|-------------------------------------|-----------------|
| a Paid during the year | | | | |
| AGNES IRWIN SCHOOL 275 S. ITHAN AVENUE BRUN MAWR, PA 19010 | | PUBLIC | MATCHING GRANT OR GIFT | 2,500. |
| ALZHEIMER'S ASSOCIATION - MID SOUTH CHAPTER 4825 TROUSDALE DRIVE SUITE 220 NASHVILLE, TN 37220 | | PUBLIC | MATCHING GRANT OR GIFT | 500. |
| AMERICAN CANCER SOCIETY 2000 CHARLOTTE AVE NASHVILLE, TN 37203 | | PUBLIC | MATCHING GRANT OR GIFT | 5,000. |
| AMERICAN DIABETES ASSOCIATION ATTN: TOUR DE CURE, 220 GREAT CIRCLE ROAD, STE 134 NASHVILLE, TN 37228 | | PUBLIC | MATCHING GRANT OR GIFT | 1,300. |
| AMERICAN HEALTH LAWYERS ASSOCIATION - PUBLIC INTEREST MISSION 1620 EYE STREET, NW, 6TH FLOOR WASHINGTON, DC 20006 | | PUBLIC | MATCHING GRANT OR GIFT | 310. |
| Total | SEE CONTINUATION SHEET(S) | | | 639,893. |
| b Approved for future payment | | | | |
| NONE | | | | |
| | | | | |
| | | | | |
| | | | | |
| Total | | | | 0. |

COMMUNITY HEALTH SYSTEMS FOUNDATION

20-3323391

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient Name and address (home or business) | 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 |
|---|--|--------------------------------------|-------------------------------------|-----------------|
| AMERICAN HEART ASSOCIATION 1818 PATTERSON STREET NASHVILLE, TN 37203 | | PUBLIC | MATCHING GRANT OR GIFT | 5,300. |
| AMERICAN RED CROSS, WHERE IT'S NEEDED MOST 2025 E STREET NW WASHINGTON, DC 20006 | | PUBLIC | MATCHING GRANT OR GIFT | 500. |
| ASPCA 424 EAST 92ND STREET NEW YORK, NY 10128 | | PUBLIC | MATCHING GRANT OR GIFT | 5,000. |
| BEST BUDDIES TENNESSEE 116 WILSON PIKE CIRCLE SUITE 201 BRENTWOOD, TN 37027 | | PUBLIC | MATCHING GRANT OR GIFT | 300. |
| BOY SCOUTS OF AMERICA- MIDDLE TENNESSEE 3414 HILLSBORO PIKE NASHVILLE, TN 37215-1412 | | PUBLIC | MATCHING GRANT OR GIFT | 1,750. |
| BOYS HOME OF VIRGINIA 414 BOYS HOME ROAD COVINGTON, VA 24426 | | PUBLIC | MATCHING GRANT OR GIFT | 25,000. |
| BRENTWOOD ACADEMY 219 GRANNY WHITE PIKE BRENTWOOD, TN 37027 | | PUBLIC | MATCHING GRANT OR GIFT | 5,000. |
| BRENTWOOD FAMILY YMCA 8207 CONCORD ROAD BRENTWOOD, TN 372027 | | PUBLIC | MATCHING GRANT OR GIFT | 500. |
| BRENTWOOD MIDDLE SCHOOL PARENTS CLUB 5324 MURRAY LANE BRENTWOOD, TN 37027 | | PUBLIC | MATCHING GRANT OR GIFT | 350. |
| CHRIST SCHOOL 500 CHRIST SCHOOL ROAD ARDEN, NC 28704 | | PUBLIC | MATCHING GRANT OR GIFT | 1,500. |
| Total from continuation sheets | | | | 630,284. |

COMMUNITY HEALTH SYSTEMS FOUNDATION

20-3323391

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient Name and address (home or business) | 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 |
|---|--|--------------------------------------|-------------------------------------|----------|
| COLUMBIA STATE COMMUNITY COLLEGE FOUNDATION PO BOX 680102 FRANKLIN, TN 37068-0102 | | PUBLIC | MATCHING GRANT OR GIFT | 200,000. |
| COMMUNITY FOUNDATION - MICHAEL & KELLY LYND FAMILY FUND 3833 CLEGHORN AVENUE NASHVILLE, TN 37215 | | PUBLIC | MATCHING GRANT OR GIFT | 20,000. |
| COMMUNITY FOUNDATION - RON & DIANE SHAFFER CHARITABLE FUND 3833 CLEGHORN AVENUE NASHVILLE, TN 37215 | | PUBLIC | MATCHING GRANT OR GIFT | 25,000. |
| COMMUNITY FOUNDATION - T. MARK & DENA COBB BUFORD FUND 3833 CLEGHORN AVENUE NASHVILLE, TN 37215 | | PUBLIC | MATCHING GRANT OR GIFT | 25,000. |
| COMMUNITY FOUNDATION OF MIDDLE TN- DENNIS GREENO & JOAN SIGNORILLE SCHOLARS PO BOX 440225 NASHVILLE, TN 37244 | | PUBLIC | MATCHING GRANT OR GIFT | 500. |
| COMMUNITY FOUNDATION OF MIDDLE TN- SHIKSHA CHARITABLE FUND 3833 CLEGHORN AVENUE NASHVILLE, TN 37215-2519 | | PUBLIC | MATCHING GRANT OR GIFT | 5,000. |
| COMMUNITY FOUNDATION OF MIDDLE TN- THE WILLIS FAMILY ADVISED FUND 3833 CLEGHORN AVENUE NASHVILLE, TN 37215-2519 | | PUBLIC | MATCHING GRANT OR GIFT | 15,000. |
| COMMUNITY FOUNDATION OF MIDDLE TN 3833 CLEGHORN AVENUE NASHVILLE, TN 37215 | | PUBLIC | MATCHING GRANT OR GIFT | 45,000. |
| COMMUNITY FOUNDATION OF MIDDLE TN-ROBIN & JOHN MCCLELLAN CHARITABLE FUND 3833 CLEGHORN AVENUE NASHVILLE, TN 37215 | | PUBLIC | MATCHING GRANT OR GIFT | 12,500. |
| CYCLE FOR SURVIVAL-MEMORIAL SLOAN KETTERING CANCER CENTER 633 THIRD AVENUE NEW YORK, NY 10017 | | PUBLIC | MATCHING GRANT OR GIFT | 250. |
| Total from continuation sheets | | | | |

COMMUNITY HEALTH SYSTEMS FOUNDATION

20-3323391

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient Name and address (home or business) | 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 |
|--|--|--------------------------------------|-------------------------------------|---------|
| DAMON RUNYON CANCER RESEARCH FOUNDATION ONE EXCHANGE PLAZA, 55 BROADWAY, SUITE 302 NEW YORK, NY 10006 | | PUBLIC | MATCHING GRANT OR GIFT | 250. |
| DANCING FOR SAFE HAVEN 1234 3RD AVENUE SOUTH NASHVILLE, TN 37210 | | PUBLIC | MATCHING GRANT OR GIFT | 4,850. |
| DREXEL UNIVERSITY 3141 CHESTNUT STREET PHILADELPHIA, PA 19104 | | PUBLIC | MATCHING GRANT OR GIFT | 15,000. |
| EPIC 238 FAIRVIEW AVENUE PARAMUS, NJ 07652 | | PUBLIC | MATCHING GRANT OR GIFT | 5,000. |
| FIDELITY CHARITABLE - KEN & LADONNA KING FUND P.O. BOX 770001 CINCINNATI, OH 45277 | | PUBLIC | MATCHING GRANT OR GIFT | 2,000. |
| FIDELITY CHARITABLE, PHYLLIS A. AND HARVEY KLEIN FUND P.O. BOX 770001 CINCINNATI, OH 45277-0053 | | PUBLIC | MATCHING GRANT OR GIFT | 25,000. |
| FRANKLIN AND MARSHALL COLLEGE 415 HARRISBURG AVE LANCASTER, PA 17603 | | PUBLIC | MATCHING GRANT OR GIFT | 3,500. |
| GATTON ANNUAL FUND- UNIVERSITY OF KENTUCKY OFFICE OF PHILANTHROPY, WILLIAM B. STURGILL BUILDING LEXINGTON, KY 40506-0015 | | PUBLIC | MATCHING GRANT OR GIFT | 250. |
| GIGI'S PLAYHOUSE- NASHVILLE LLC 4926 THOROUGHbred LANE BRENTWOOD, TN 37027 | | PUBLIC | MATCHING GRANT OR GIFT | 300. |
| HABITAT FOR HUMANITY- WILLIAMSON-MAURY 511 WEST MEADE BLVD FRANKLIN, TN 37064 | | PUBLIC | MATCHING GRANT OR GIFT | 1,008. |
| Total from continuation sheets | | | | |

COMMUNITY HEALTH SYSTEMS FOUNDATION

20-3323391

Part XV. Supplementary Information

| 3 Grants and Contributions Paid During the Year (Continuation) | | | | |
|--|---|--------------------------------|----------------------------------|---------|
| 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) | | | | |
| HARDING ACADEMY 170 WINDSOR DRIVE NASHVILLE, TN 37205 | | PUBLIC | MATCHING GRANT OR GIFT | 2,500. |
| HAYWOOD STREET CONGREGATION PO BOX 2982 ASHEVILLE, NC 28802 | | PUBLIC | MATCHING GRANT OR GIFT | 4,000. |
| HELEN KELLER INTERNATIONAL 352 PARK AVENUE SOUTH, SUITE 1200 NEW YORK, NY 10010 | | PUBLIC | MATCHING GRANT OR GIFT | 12,000. |
| HIGH HOPES, INC. 301 HIGH HOPES CT FRANKLIN, TN 37064 | | PUBLIC | MATCHING GRANT OR GIFT | 300. |
| HOMEBOUND MEALS PROGRAM 381 W. MAIN STREET HENDERSONVILLE, TN 37075 | | PUBLIC | MATCHING GRANT OR GIFT | 500. |
| HOSPICE OF THE BLUE GRASS 2312 ALEXANDRIA DRIVE LEXINGTON, KY 40504 | | PUBLIC | MATCHING GRANT OR GIFT | 250. |
| JUVENILE DIABETES RESEARCH FOUNDATION - MIDDLE TENNESSEE CHAPTER 105 WESTPARK DRIVE, STE. 415 BRENTWOOD, TN 37207 | | PUBLIC | MATCHING GRANT OR GIFT | 500. |
| KATHY S. HARKEY BREAST CANCER FOUNDATION 25403 I-45 N SUITE D THE WOODLANDS, TX 77380 | | PUBLIC | MATCHING GRANT OR GIFT | 500. |
| KATHY S. HARKEY BREAST CANCER FOUNDATION 26211 I-45 N SUITE D THE WOODLANDS, TX 77380 | | PUBLIC | MATCHING GRANT OR GIFT | 1,000. |
| KENROSE ELEMENTARY SCHOOL 1702 RAINTREE PARKWAY BRENTWOOD, TN 37027 | | PUBLIC | MATCHING GRANT OR GIFT | 250. |
| Total from continuation sheets | | | | |

COMMUNITY HEALTH SYSTEMS FOUNDATION

20-3323391

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

| 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) | | | | |
| LAFAYETTE COLLEGE 730 HIGH STREET EASTON, PA 18042 | | PUBLIC | MATCHING GRANT OR GIFT | 5,000. |
| MACEDONIAN MINISTRY 3445 PEACHTREE ROAD, SUITE 175 ATLANTA, GA 30152 | | PUBLIC | MATCHING GRANT OR GIFT | 4,000. |
| MELANOMA RESEARCH FOUNDATION- FUNDRAISING EFFORTS OF LAUREN GREENWOOD 1411 K STREET NW, STE. 800 WASHINGTON, DC 20005 | | PUBLIC | MATCHING GRANT OR GIFT | 250. |
| MERCY ACADEMY C/O MS. LESLIE HIBDON, DIRECTOR OF ADVANCEMENT 5801 FEGENBUSH LANE LOUISVILLE, KY 40228 | | PUBLIC | MATCHING GRANT OR GIFT | 24,500. |
| MODEST NEEDS FOUNDATION 115 E. 30TH STREET, 1ST FLOOR NEW YORK, NY 10016 | | PUBLIC | MATCHING GRANT OR GIFT | 650. |
| NASHVILLE OPERA 3622 REDMONT ST NASHVILLE, TN 37209 | | PUBLIC | MATCHING GRANT OR GIFT | 2,550. |
| NASHVILLE PHILANTHROPIC TRUST 165 TOWNSHIP LINE ROAD JERKINTOWN, PA 19046 | | PUBLIC | MATCHING GRANT OR GIFT | 25,000. |
| NASHVILLE RESCUE MISSION 616 7TH AVENUE SOUTH NASHVILLE, TN 37203 | | PUBLIC | MATCHING GRANT OR GIFT | 525. |
| NASHVILLE RESCUE MISSION 639 LAFAYETTE STREET NASHVILLE, TN 37203 | | PUBLIC | MATCHING GRANT OR GIFT | 250. |
| NASHVILLE SALVATION ARMY 631 DICKERSON ROAD NASHVILLE, TN 37207-8625 | | PUBLIC | MATCHING GRANT OR GIFT | 5,000. |
| Total from continuation sheets | | | | |

COMMUNITY HEALTH SYSTEMS FOUNDATION

20-3323391

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient Name and address (home or business) | 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 |
|---|--|--------------------------------------|-------------------------------------|--------|
| NATIONAL MS SOCIETY - MID-SOUTH CHAPTER 214 OVERLOOK CIRCLE BRENTWOOD, TN 37027 | | PUBLIC | MATCHING GRANT OR GIFT | 1,000. |
| NATIONAL MS SOCIETY- TNS BIKE DONATION CAMPAIGN 214 OVERLOOK CIRCLE, SUITE 153 BRENTWOOD, TN 37207 | | PUBLIC | MATCHING GRANT OR GIFT | 500. |
| NORTHWESTERN UNIVERSITY 1201 DAVIS STREET EVANTOWN, IL 60208-4410 | | PUBLIC | MATCHING GRANT OR GIFT | 1,200. |
| OPEN TABLE OF NASHVILLE, INC. 210 MORTON AVENUE NASHVILLE, TN 37211 | | PUBLIC | MATCHING GRANT OR GIFT | 1,250. |
| PERFORMING ARTS PROJECT 7572 PRESERVATION ROAD TALLAHASSEE, FL 32312 | | PUBLIC | MATCHING GRANT OR GIFT | 800. |
| PROGRESS, INC. 319 EZELL PIKE NASHVILLE, TN 37217 | | PUBLIC | MATCHING GRANT OR GIFT | 2,000. |
| PROJECT REDESIGN PO BOX 159276 NASHVILLE, TN 37215 | | PUBLIC | MATCHING GRANT OR GIFT | 500. |
| RENAISSANCE CHARITABLE FOUNDATION-DEWEY & PEGGY COOMER SCHOLARSHIP 6100 W. 96TH STREET STE 105 INDIANAPOLIS, IN 46278 | | PUBLIC | MATCHING GRANT OR GIFT | 5,000. |
| ROBERT CHURCHWELL MUSEUM MAGNET ELEMENTARY SCHOOL MUSIC DEPARTMENT 1625 DR. D.B. TODD BLVD NASHVILLE, TN 37208 | | PUBLIC | MATCHING GRANT OR GIFT | 500. |
| RONALD MCDONALD HOUSE CHARITIES OF NASHVILLE, TN INC 2144 FAIRFAX AVENUE NASHVILLE, TN 37212 | | PUBLIC | MATCHING GRANT OR GIFT | 1,000. |
| Total from continuation sheets | | | | |

COMMUNITY HEALTH SYSTEMS FOUNDATION

20-3323391

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

| Recipient Name and address (home or business) | 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 |
|---|--|--------------------------------------|-------------------------------------|---------|
| ROYAL POINCIANA CHAPEL 60 COCOANUT ROW PALM BEACH, FL 33480 | | PUBLIC | MATCHING GRANT OR GIFT | 2,500. |
| SAFE HAVEN FAMILY SHELTER 1234 THIRD AVENUE SOUTH NASHVILLE, TN 37210 | | PUBLIC | MATCHING GRANT OR GIFT | 2,000. |
| SCALES ELEMENTARY PARENT TEACHER ORGANIZATION 6430 MURRAY LANE BRENTWOOD, TN 37027 | | PUBLIC | MATCHING GRANT OR GIFT | 250. |
| SECOND HARVEST FOOD BANK 331 GREAT CIRCLE ROAD NASHVILLE, TN 37228 | | PUBLIC | MATCHING GRANT OR GIFT | 4,500. |
| SHIPLEY SCHOOL 814 YARROW STREET BRYN MAWR, PA 19010 | | PUBLIC | MATCHING GRANT OR GIFT | 13,500. |
| ST. JUDE CHILDREN'S RESEARCH HOSPITAL PO BOX 167 MEMPHIS, TN 38101-9922 | | PUBLIC | MATCHING GRANT OR GIFT | 300. |
| ST. JUDE RESEARCH HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS, TN 38105 | | PUBLIC | MATCHING GRANT OR GIFT | 500. |
| TENNESSEE BAPTIST CHILDREN'S HOMES, INC. PO BOX 2206 BRENTWOOD, TN 37204-2206 | | PUBLIC | MATCHING GRANT OR GIFT | 500. |
| TENNESSEE REGION AMERICAN RED CROSS 401 SOUTH MONROE LITTLE ROCK, AR 72203-8015 | | PUBLIC | MATCHING GRANT OR GIFT | 500. |
| UNITED WAY OF WILLIAMSON COUNTY 209 GOTHIC CT. #107 FRANKLIN, TN 37067 | | PUBLIC | MATCHING GRANT OR GIFT | 600. |
| Total from continuation sheets | | | | |

COMMUNITY HEALTH SYSTEMS FOUNDATION

20-3323391

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

| Recipient Name and address (home or business) | 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 |
|--|--|--------------------------------------|-------------------------------------|---------|
| UNITED WAY TOCQUEVILLE SOCIETY RE: TOCQUEVILLE SOCIETY, 250 VENTURE CIRCLE NASHVILLE, TN 37228 | | PUBLIC | MATCHING GRANT OR GIFT | 10,000. |
| UNIVERSITY OF TN FOUNDATION (TN TERRACE ANNUAL FUND) PO BOX 15016 KNOXVILLE, TN 37996 | | PUBLIC | MATCHING GRANT OR GIFT | 4,000. |
| URBAN YOUTH IMPACT 2823 N AUSTRALIAN AVENUE WEST PALM BEACH, FL 33407 | | PUBLIC | MATCHING GRANT OR GIFT | 1,000. |
| US SQUASH 555 EIGHTH AVENUE, SUITE 1102 NEW YORK, NY 10018 | | PUBLIC | MATCHING GRANT OR GIFT | 5,000. |
| VANGUARD CHARITABLE ENDOWMENT (A0833802) P.O. BOX 55766 BOSTON, MA 02205 | | PUBLIC | MATCHING GRANT OR GIFT | 25,000. |
| WOUNDED WARRIOR PROJECT ATTN: DONOR SERVICES, 4899 BELFORT ROAD, SUITE 300 JACKSONVILLE, FL 32256 | | PUBLIC | MATCHING GRANT OR GIFT | 5,250. |
| YANCEY COUNTY RESCUE SQUAD, INC. PO BOX 621 BURNSVILLE, NC 28714 | | PUBLIC | MATCHING GRANT OR GIFT | 500. |
| YMCA OF MIDDLE TENNESSEE (CAMP WIDJIWAGAN) 1000 CHURCH STREET NASHVILLE, TN 37203 | | PUBLIC | MATCHING GRANT OR GIFT | 500. |
| | | | | |
| | | | | |
| Total from continuation sheets | | | | |

FORM 990-PF

OTHER EXPENSES

STATEMENT 1

| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|-----------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| SUPPLY ORDER FEE | 35. | 0. | | 0. |
| TO FORM 990-PF, PG 1, LN 23 | 35. | 0. | | 0. |

FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 2

| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | COMPEN- SATION | EMPLOYEE BEN PLAN CONTRIB | EXPENSE ACCOUNT |
|--|--|-------------------|---------------------------------|--------------------|
| WAYNE T. SMITH | CHAIRMAN OF THE BOARD/CEO 1.00 | 0. | 0. | 0. |
| W.LARRY CASH | PRESIDENT 1.00 | 0. | 0. | 0. |
| RACHEL A. SEIFERT | EXECUTIVE VICE PRESIDENT & SECRETARY 1.00 | 0. | 0. | 0. |
| MARTIN G. SCHWEINHART | EXECUTIVE VICE PRESIDENT 1.00 | 0. | 0. | 0. |
| EDWARD W. LOMICKA | VICE PRESIDENT & TREASURER 1.00 | 0. | 0. | 0. |
| KEVIN J. HAMMONS | SENIOR VICE PRESIDENT 1.00 | 0. | 0. | 0. |
| CHRISTOPHER G. COBB | ASSISTANT SECRETARY 1.00 | 0. | 0. | 0. |
| TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII | | 0. | 0. | 0. |