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# Form **990**

Department of the Treasury Internal Revenue Service

#### **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047 2008

Open to Public Inspection

A Fo	r the 2	2008 cai	endar yea	r, or tax year beginning	09-01-2008	and ending 08-31-2	2009	D Foundation (d	
_	•		Please	C Name of organization Hendrick Provider Netwo	rk			D Employer Id	entification number
Add	tress cha	ange	use IRS label or	Doing Business As				75-266040 E Telephone n	
- Nai	me char		print or type. See	Doing Business As					
_ Init	al retur	rn	Specific	Number and street (or P	O box if mail is r	not delivered to street ac	ldress) Room/suit	(325) 670- e <b>G Gross recei</b> p	
– Ter	minatio		Instruc- tions.	PO Box 3117				G Gross receip	<b>JUS</b> \$ 5,168,351
– <sub>Am</sub>	ended r	return		City or town, state or cou	untry, and ZIP +	1			
– App	olication	pending		Abilene, TX 79604					
			F Nar	ne and address of Princ	unal Officer		Wax 1- #	<b></b>	- f
				ncaster	.ipai o ilicci			his a group returr iates?	TYes ▼No
				N 19th St e,TX 79604					
Та	x-exem	npt status		) (3) <b>◄</b> (insert no )	947(a)(1) or <b></b>	527		all affiliates includ	
<u> </u>		<u>'</u>						'No," attach a list oup Exemption Ni	t See instructions )
W	eb site	e: F www	ehendricl	k org			H(c) 010	oup Exemption N	amber <b>F</b>
( Typ	e of ora	anization	Corporat	tion trust association	other 🕨		L Year of	Formation 1995 M	State of legal domicile TX
, ,		,	, 00.,				1		
D-		C							
Рa	rt I	Summ		e organization's missio	n or most sign	ificant activities			
13				il care to the communit	_		Many nationt	s are on medical	f Services are
auvellidilice	I	•		te best health practices	•	-	Many patient	s are on medicale	2 Services are
₹									
2	2	Check th	nis box 🦵	ıf the organizatıon disc	ontinued its of	erations or dispose	d of more than	25% of its asset	ts
_	3	Number	of voting i	members of the governi	ng body (Part	VI, line 1a)		. 3	7
ő A	4	Number	ofındeper	ndent voting members o	f the governin	g body (Part VI, line	1b)	. 4	0
eankina.	5	Total nur	mber of er	nployees (Part V , line 2	2a)			5	62
				olunteers (estimate if ne				6	0
ŧ	7a	Total gro	ss unrela	ted business revenue f	rom Part VIII,	line 12, column (C)		7a _	0
	ь	Net unre	lated bus	iness taxable income fr	om Form 990-	T, line 34		7b	
							P	rior Year	Current Year
	8	Contrib	utions an	d grants (Part VIII, line	a 1 h)			41,786	0
를	9			revenue (Part VIII, line				2,848,719	5,160,846
Revenue	10	Investn	nent incoi	me (Part VIII, column (	(A), lines 3, 4,	and 7d)			-4,212
ä	11	Otherre	evenue (P	art VIII, column (A ), lı	nes 5, 6d, 8c,	9c, 10c, and 11e)			7,505
	12	Total re	evenue—a	dd lines 8 through 11 (	must equal Pa	rt VIII, column (A),	line		
		12)						2,890,505	5,164,139
	13			ar amounts paid (Part I)		·			0
	14		•	or for members (Part IX		•	_		0
8	15	Salaries	s, other co	ompensation, employee	benefits (Part	IX, column (A), line	es 5-	2,711,786	6,510,862
Expenses	16a	•	ional fund	Iraising fees (Part IX, c	olumn (A ), line	11e)			0
충	ь	(Total fur	ndraising ex	penses, Part IX, column (D),	. line 25 <sup>0</sup>	)			
ш	17	•	_	(Part IX, column (A), lır		11f-24f)		992,746	2,271,163
	18		-	·	-	·	))	3,704,532	8,782,025
	19	Revenu	e less ex	penses Subtract line 1	8 from line 12			-814,027	-3,617,886
5 % X							Begin	ning of Year	End of Year
a de la companya de l	20	Totalas	ssets (Pa	rt X, line 16)				1,037,572	2,469,291
net Assector Fund Balances	21			Part X, line 26)				272,093	928,409
¥ 55	22			nd balances Subtract III	ne 21 from line	20		765,479	1,540,882
	t III	•	ture Bl					, , , , , ,	1,510,002
				erjury, I declare that I have e	examined this reti	ırn, ıncludına accompany	ving schedules and	statements, and to	the best of my knowledge
				correct, and complete Decla					
Plea		****						10-07-15	
Sign Iero		Signat	ture of office	er			Dat	e	
	-			Chief Financial Officer					
		Iype o	or print nam	ie and titie					
		Preparer's		ge Gerich		Date	Check If self-	Preparer's PTIN	(See Gen Inst)
Paid		signature	▼ M Palg	ge Gericii			empolyed 🕨	-	
	arer's		me (or your	s & BKD LLP	L		<u> </u>	ETNI M.	
Jse (	Only	ıf self-em address, a	ployed), and ZIP + 4	2800 Post Oak Blvd Ste	e 3200			_ EIN ▶	
				HOUSTON, TX 77056				Phone no 🕨 (	713) 499-4600
	l	1							

# Form 990 (2008) Part III Statement of Program Service Accomplishments (See the instructions.)

1	Briefly describe the organization To provide medical care to the oregardless of ability to pay		d surrounding a	reas Many patients are on r	nedicaid Services are provide	d to promote best health practices
2	Did the organization under the prior Form 990 or 99	0-EZ?			which were not listed on	┌ Yes ┌ No
3	If "Yes," describe these r  Did the organization ceas services?			t changes in how it cond	ducts any program	ΓYes Γ⁄No
	If "Yes," describe these of	:hanges on Schedul	· · · · · · · · · · · · · · · · · · ·			, ,
4	Describe the exempt purp Section 501(c)(3) and (4 others, the total expense	) organizations and	4947(a)(1) t	rusts are required to re	port the amount of grant	
4a					) (Revenue soncology services, and internate provided by physicians emp	I medicine services for patients in the
4b	(Code	) (Expenses \$		including grants of \$	) (Revenue \$	)
4c	(Code	) (Expenses \$		including grants of \$	) (Revenue \$	)
4d	Other program services (Expenses \$	•	lule O ) ling grants o	f \$	) (Revenue \$	)
4e	Total program service e	xpenses \$	7,655,88	5 Must equal Part IX,	Line 25, column (B).	

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C,	4	Yes	
5	Section $501(c)(4)$ , $501(c)(5)$ , and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I.	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"	9		N o
10	Complete Schedule D, Part $IV  extstyle  exts$	10		No
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,	11	Yes	
12	Parts VI, VIII, IX, or X as applicable	12		No
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part $I$ . •	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>	17		No
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Νο
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Νο
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule  J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

#### Part IV Checklist of Required Schedules (Continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part			
		28a		Νo
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		Νo
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		Νo
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," complete Schedule M	30		Νo
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," complete Schedule N, Part II	32		Νo
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Νo
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Νο
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal			
	of U.S. Information Returns. Enter -0- if not applicable	11		
h	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable		V	
22	gaming (gambling) winnings to prize winners?	. 1c	Yes	
Za	Statements filed for the calendar year ending with or within the year covered by this			
	return	62		
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns? <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.	2Ь	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this	3-		No
h	return?	. 3a 3b		NO
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	35		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country	_		
	See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1,</b> Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
Ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, <i>Disclosure by Tax-Exempt Entity Regarding Prohibited</i> Tax Shelter Transaction?	<i>f</i> 5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		No
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gi			
_	were not tax deductible?	6Ь		
7	Organizations that may receive deductible contributions under section 170(c).			N
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			l Na
d	file Form 8282?	. 7c		No
u	74			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	70		N.
f	benefit contract?	. 7e		No No
a	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			110
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, ha	ve		
	excess business holdings at any time during the	8		
9	year?	<u> </u>	ī	
a	Did the organization make any taxable distributions under section 4966?	9a		
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12   10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations Enter			
	Gross income from members or shareholders			
	11a			
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
12-	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	. 12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the	. 12a		
U	year 12b			

Section A. Governing Body and Management

10

11

Yes

Νo

# Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . . .

			Yes	No
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
3	Enter the number of voting members of the governing body 1a 7			
b	Enter the number of voting members that are independent 1b 0			
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νo
	Does the organization have members or stockholders?	6	Yes	
3	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes	
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	the governing body?	8a	Yes	
b	each committee with authority to act on behalf of the governing body?	8b	Yes	
3	Does the organization have local chapters, branches, or affiliates?	9a		Νo
ь	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			

#### Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 $\cdot$ .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b		Νo
	Describe the process in Schedule O			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

#### Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed TX
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply own website. another's website. upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

Stephen Kımmel 1900 Pıne Street Abilene, TX 79601 (325) 670-2000

## Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

#### Section A Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

Check this box if the organization did not compensate any officer, director, trustee or key employee

- \* List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- \* List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- \* List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- \* List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

		Posit t	(C lion (li hat a	chec		I			(E)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Prector	Highest compensated amployee  Key employee  Officer  Institutional Trustee			Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
Whitney Mascorro , Chairman	40 0	Х		Х				403,963	0	17,207
Toby Williams , director	40 0	Х						90,844	0	54
Krystin Baker , director	40 0	Х						78,829	0	0
Tim Lancaster , President	2 0	Х		Х				0	730,820	19,148
Stephen Kımmel , Vice President	2 0	Х		Х				0	563,301	28,690
Joe Pearson , secretary/treasurer	15 0	Χ		Х				0	255,353	21,576
Steven Faehnle , director	10 0	Х						0	0	0
Joseph Tadvick , physician	40 0					Х		447,553	0	22,619
Edward Holt , physician	40 0					Х		300,463	0	11,237
Randy Daniell , physician	40 0					Х		268,965	0	26,460
James Dunn , physician	40 0					Х		114,350	0	117
Gregory Kroeger , former director	40 0						Х	463,041	0	22,619

#### Part VII Continued

		<b>(C)</b> Position (check all that apply)							(E)	(F)
<b>(A)</b> Name and Title	(B) Average hours per week	Individual Trustee or Director	Three compensation from the organization (W-		Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations				
					<u> </u>					
1b Total							+	2,168,008	1,549,474	169,727

Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►6

			Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete <i>Schedule J for such individual</i>	3	Yes	
4	For any individual listed online 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No

#### Section B. Independent Contractors

from the organization . . . .

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	<b>(B)</b> Description of services	(C) Compensation
2 Total number of independent contractors (including those in 1) who received more than \$3	100,000 in compensation	

#### Statement of Revenue

				(A) Total Revenue	<b>(B)</b> Related or Exempt Function Revenue	<b>(C)</b> Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
	1a	Federated campaigns 1	.a				
ants Ints	b	Membership dues					
Contributions, gifts, grants and other similar amounts	c	1 Fundraising events	с ———				
<u>≅</u> ,⊒	d	Related organizations1					
ons, sim	e f	Government grants (contributions) 1.  All other contributions, gifts, grants, and	<u> </u>				
ibati Sperior	'	similar amounts not included above					
ng di	g	Noncash contributions included i lines 1a-1f \$					
O a	h	Total (Add lines 1a-1f)	·	0			
			Business Code				
al III	2a	NET PATIENT SERVICE REVENUE	900,099	5,160,846	5,160,846		
ey eye	b		_				
ee F	С						
er Fi	d		_				
3	e						
Program Serwce Revenue	f	All other program service revenu	e				
Δ̈́	g	Total. Add lines 2a-2f					
	3	Investment income (including div	ıdends, ınterest				
		other similar amounts)		0			
	4	Income from investment of tax-exempt	bond proceeds	0			
	5	Royalties	<u>.</u> .	0			
		(ı) Real	(II) Personal				
	6a	Gross Rents Less rental					
	ь	expenses					
	d	Rental income or (loss)  Net rental income or (loss)					
			(II) O ther				
	7a	Gross amount from sales of	(II) O ther				
		assets other than inventory Less cost or	4,212				
	b	other basis and sales expenses					
	c	Gain or (loss)	-4,212	-4,212			-4 212
	d	Net gain or (loss)	. •	-4,212			-4,212
Ф	8a	Gross income from fundraising events (not including \$					
Other Revenue		of contributions reported on line 1c) See Part IV, line 18 Attach Schedule G if total exceeds					
Ξ.	ь	\$15,000					
Ě	c	Net income or (loss) from fundrai		0			
-	9a	Gross income from gaming activities See part IV, line 19 Complete Schedule G if total					
		exceeds \$15,000	a				
	ь	Less direct expenses					
	с	Net income or (loss) from gaming		0			
	10a	Gross sales of inventory, less returns and allowances	a				
	b	Less cost of goods sold					
	с	Net income or (loss) from sales of	· ·	0			
		Miscellaneous Revenue	Business Code 900,099	7 505			7 505
	11a	Miscellaneous Revenue	- 900,099	7,505			7,505
	b		-				
	С		_				
	d	All other revenue					
	e	Total. Add lines 11a-11d	\$ 7,505				
	12	Total Revenue. Add lines 1h, 2g,		5,164,139	5,160,846		3,293
		8c, 9c, 10c, and 11e	<b>.</b>				

#### Part IX Statement of Functional Expenses

Δ	Section 501(c)(3) and 501(c)(4) orgalizations must complete column (A) but are not re				 ).
	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	0	·		· ·
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,032,754	1,032,754		
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	4,863,938	4,274,400		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	52,670	44,493	8,177	
9	Other employee benefits	258,800	215,986	42,814	
10	Payroll taxes	302,700	268,628	34,072	
11	Fees for services (non-employees)				
а	Management	33,000	33,000		
b	Legal	68,442		68,442	
c	Accounting	10,501		10,501	
d	Lobbying	0			
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	0			
g	Other	140,018	140,018		
12	Advertising and promotion	37,649	37,425	224	
13	Office expenses	222,387	186,655	35,732	
14	Information technology	56,307	52,787	3,520	
15	Royalties	0			
16	Occupancy	367,365	291,037	76,328	
17	Travel	18,872	10,942	7,930	
18	Payments of travel or entertainment expenses for any Federal, state or local public officials	0			
19	Conferences, conventions and meetings	0			
20	Interest	9	9		
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	74,201	63,493	10,708	
23	Insurance	104,910	104,560	350	
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	MEDICAL SUPPLIES	439,183	439,183		
b	Minor Equipment	252,133	205,551	46,582	
С	Recruiting & Placement	237,142	133,707	103,435	
d	Bad Debt	47,610	47,610		
е	Professional Development	44,531	30,452	14,079	
f	All other expenses	116,903	43,195	73,708	
25	Total functional expenses. Add lines 1 through 24f	8,782,025	7,655,885	1,126,140	0
26	Joint Costs. Check  if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X	Balance	Sheet
	Dalalice	SHEEL

					(A)		(B	-
	ا ا				Beginning of year		End of	
	1	Cash—non-interest-bearing			126,315	<del>-  </del>		650
	2	Savings and temporary cash investments			5,385	2		347,765
	3	Pledges and grants receivable, net				3		
	4	Accounts receivable, net			533,646	4		742,024
	5	Receivables from current and former officers, directors, trustees, other related parties <i>Complete Part II of Schedule L</i>		ployees or		5		
	6	Receivables from other disqualified persons (as defined under sec persons described in section 4958(c)(3)(B) Complete Part II of So				6		
	7	Notes and loans receivable, net				7		
	8	Inventories for sale or use				8		284,657
22	9	Prepaid expenses and deferred charges			178,974	9		406,236
क्	10a							
Assets		Land, buildings, and equipment cost basis	10a	766,662				
	ь	Less accumulated depreciation <i>Complete Part VI of</i> Schedule D	10ь	147,650	117,008	10c		619,012
	11	Investments—publicly traded securities				11		
	12	Investments—other securities See Part IV, line 11 Complete Par Schedule D			76,244	12		68,947
	13	Investments—program-related See Part IV, line 11 Complete Part of Schedule D.	t VIII			13		
	14	Intangible assets				14		
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule				15		
	16	D			1,037,572			2,469,291
	16	Total assets. Add lines 1 through 15 (must equal line 34)			272,093	$\vdash$		928,409
	17	Accounts payable and accrued expenses .			272,093			920,409
	18	Grants payable				18		
	19	Deferred revenue				19		
Ø	20	Tax-exempt bond liabilities				20		
ij	21	Escrow account liability Complete Part IV of Schedule D				21		
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
ï		persons Complete Part II of Schedule L		i		22		
	23	Secured mortgages and notes payable to unrelated third parties				23		
	24	Unsecured notes and loans payable				24		
	25	Other liabilities Complete Part X of Schedule D				25		
	26	Total liabilities. Add lines 17 through 25			272,093	26		928,409
ě		Organizations that follow SFAS 117, check here ▶   and complete through 29, and lines 33 and 34.	te lines	s 27				
an	27	Unrestricted net assets			684,768	27		1,460,170
Balance	28	Temporarily restricted net assets				28		
ē	29	Permanently restricted net assets			80,711	29		80,712
Fund		Organizations that do not follow SFAS 117, check here 🕨 🦵 and	comple	te				<u> </u>
٥	30	lines 30 through 34.  Capital stock or trust principal, or current funds				30		
ets						31		
Assets	31 32	Paid-in or capital surplus, or land, building or equipment fund.				32		
	1	Retained earnings, endowment, accumulated income, or other fun	us		765,479			1,540,882
Š	33	Total liabilities and not accept found belonged			1,037,572	33		
	34	Total liabilities and net assets/fund balances			1,037,572	34		2,469,291
Pa	rt XI	Financial Statements and Reporting						
							Yes	No
1	Acco	ounting method used to prepare the Form 990	ccrual	C other			1.03	

art XT	Financial	Statements	and	Reporting

1	Accounting method used to prepare the Form 990		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Νο
С	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Νo
ь	If "Yes," did the organization undergo the required audit or audits?	3b	

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OMB No 1545-0047

#### **SCHEDULE A** (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

### **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

		n <b>e organizat</b> i vider Network	ion					Em	ployer ide	nt if icat io	n number
Henui	ICK PIOV	idei Network						75	-266040	3	
Pa	rt I	Reason	for Public C	harity Status (to be co	mpleted	by all or	ganızatıo				
				ation because it is (Please						,	
1	Γ	A church, d	onvention of ch	nurches, or association of ch	nurches de	scribed in	Section 1	L70(b)(1)	(A)(i).		
2	Γ	A school d	escribed in <b>Sec</b> l	tion 170(b)(1)(A)(ii). (Attac	ch Schedu	ıle E )					
3	Γ	A hospital	or a cooperativ	e hospital service organizati	on descril	bed in <b>Sec</b>	t ion 170(l	o)(1)(A)(i	ii). (Attac	h Schedul	le H)
4	Γ		research organi name, city, and	zation operated in conjuncti state	on with a l	hospital d	escribed i	n <b>Section</b>	170(b)(1)	( <b>A</b> )(iii). E	nter the
5	Г	•		for the benefit of a college or	universit	y owned o	roperated	by a gove	rnmental	unit desc	rıbed ın
				(Complete Part II )							
6	$\sqcap$			overnment or governmental	unıt descr	ıbed ın <b>Se</b>	ction 170	(b)(1)(A)	(v).		
7		Anorganiz	ation that norm	ally receives a substantial p	art of its s	support fro	m a gove	rnmental u	· · ınıt or fror	n the gene	eral public
		_		o)(1)(A)(vi) (Complete Par			_			_	·
8	Γ	A commun	ıty trust descrit	oed in <b>Section 170(b)(1)(A)</b>	(vi) (Com	nplete Par	tII)				
9	<b>V</b>	An organiz	ation that norm	ally receives (1) more than	331/3% 0	fits supp	ort from c	ontribution	ıs, membe	rship fees	s, and gross
		receipts fro	om activities re	lated to its exempt functions	s—subject	to certair	n exceptio	ns, and (2	) no more	than 331/	′3% of
		ıts support	from gross inve	estment income and unrelate	ed busines	s taxable	ıncome (l	ess section	on 511 ta:	x) from bu	sınesses
		acquired by	y the organizati	on after June 30, 1975 See	Section 5	09(a)(2).	(Complete	e Part III	)		
10	Γ	An organiz	atıon organızed	and operated exclusively to	test for p	ublic safe	ty See <b>Se</b>	ction 509	( <b>a)(4).</b> (S	ee instruc	tions )
11	Γ	one or more the box tha	e publicly suppo	and operated exclusively foorted organizations describe type of supporting organiza	d in section	on 509(a) omplete li	(1) or sec	tıon 509(a hrough 11	a)(2) See	Sect ion 5	
e	Γ	other than section 50	foundation man 9(a)(2)	rtify that the organization is agers and other than one or	more publ	licly suppo	orted orga	nizations :	described	ın sectior	n 509(a)(1) or
f		check this		d a written determination fro	m the IRS	that it is	a Type I,	TypeII o	r Type III	supportir	ng organization,
g				as the organization accepted	d any gift	or contrib	utıon from	any of the	<u></u>		,
_		following pe	ersons?								
			•	r indirectly controls, either a		_	th persons	describe	d ın (ıı)		Yes No
			· -	ng body of the the supported	_	tion?				11g	
		• •		erson described in (i) above						11g(	
		• •		ty of a person described in (						11g(	iii)
h		Provide the	following infori	mation about the organizatio	ns the org	janization	supports				
	/il Nis	ame of	(ii) EIN	(iii) Type of organization	/is/\ T	c the	(v) Did v	ou notify	/wi> 1	's the	(vii) A mount of
		orted	(11) LIN	(described on lines 1-9	(IV) I organiz	ation in		inization		s the ation in	support?
	Organ	ıızatıon		above or IRC section		listed in	ın col (i	i) of your	col (i) c	rganızed	
				(See Instructions))	yourgo	-	supp	ort?	ın the	US?	
						ment?	V	l N-	V	l N-	-
					Yes	No	Yes	No	Yes	No	
							-	-		<del>                                     </del>	+
								-		<del>                                     </del>	
										-	

Total

Part II	Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
	(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Pι	ıblic Support		, ,	,				
Cale	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not							
	include any "unusual grants ")							
2	Tax revenues levied for the organization's							
	benefit and either paid to or expended on							
_	its behalf The value of services or facilities					<del> </del>		
3	furnished by a governmental unit to the							
	organization without charge							
4	Total. Add line 1-3					1		
5	The portion of total contribution by each							
5	person (other than a government unit or							
	publicly supported organization) included							
	on line 1 that exceed 2% of the amount							
	shown on line 11, column							
	· (f)							
6	Public Support subtract line 5 from line							
	4							
	otal Support		1		T			
	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) :	2008	(f) Total
7	A mounts from line 4							
8	Gross income from interest, dividends,							
	payments received on securities loans,							
	rents, royalties and income from similar							
_	sources							
9	Net income from unrelated business							
	activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss							
10	from the sale of capital assets (Explain in							
	Part IV )							
11	Total Support (Add lines 7 through 10)							
12	Gross receipts from related activities, etc	(See instructio	ns )		•	12		
13	First Five Years. If the Form 990 is for the	organization's f	irst second thu	d fourth or fifth	ntay vearas a F		3)	
	organization, check this box and <b>stop here</b>		mat, second, tim	u, rouren, or mer	rtax year as a s	/O1(C)(C	• •	<b>▶</b> □
								•
Co	omputation of Public Support Perc	entage						
14	Public Support Percentage for 2008 (line 6	5 column (f) dıvı	ded by line 11 c	olumn (f))		14		
15	Public Support Percentage for 2007 School	dule A , Part IV -	A, line 26f			15		
16a	33 1/3% Test - 2008. If the organization di	d not check the	box on line 13.	and line 14 is 3	3 1/3% or more.		this box	
	and <b>stop here.</b> The organization qualifies a				,			<b>▶</b> □
b	33 1/3% Test - 2007. If the organization d				15 is 33 1/3% d	r more,	check th	
	box and stop here. The organization qualifi	es as a publicly	supported orga	nızatıon				<b>▶</b> □
17a	10% Facts and Circumstances Test - 2008.							
	more, and if the organization meets the "fa		•					· —
	organization meets the "facts and circums							<b>►</b> □
Ь	10% Facts and Circumstances Test - 2007.							
	more, and if the organization meets the "fa		•					_
4.0	the organization meets the "facts and circu							n ▶
18	<b>Private Foundation.</b> If the organization did	not check the b	oux on line 13, 1	oa, 100, 1/a or	1/D, Check this	oox an	u see	<b>▶</b> □
	ınstructions							F-1

#### Part III Support Schedule for Organizations Described in IRC 509(a)(2)

	(Complete only if you check	CG CHC DOX OH	mic y or rure					
Se	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	<b>(e)</b> 2	8008	(f) Total
1	Gifts, grants, contributions, and			· ·	` ,	•		
_	membership fees received (Do not	5,648	5,290	5,318	41,786			58,042
	include any "unusual grants`")							
2	Gross receipts from admissions,							
_	merchandise sold or services performed,							
	or facilities furnished in any activity that	2,150,140	2,477,731	2,601,118	2,848,719	5	5,160,846	15,238,554
	is related to the organization's tax-							
	exempt purpose							
3	Gross receipts from activities that are							
_	not an unrelated trade or business under							
	section 513							
4	Tax revenues levied for the							
-	organization's benefit and either paid to							
	or expended on its behalf							
5	The value of services or facilities							
	furnished by a governmental unit to the							
	organization without charge							
6	Total Add lines 1-5	2,155,788	2,483,021	2,606,436	2,890,505	5	,160,846	15,296,596
_	Amounts included on lines 1, 2, and 3	_,,			_, ,		,,	
/a	received from disqualified persons							
	Amounts included on lines 2 and 3						+	
D	received from other than disqualified							
	persons that exceed the greater of 1% of							
	:							
	the total of lines 9, 10c, 11, and 12 for							
	the year or \$5,000						+	
	Total of lines 7a and 7b							
8	Public Support (Substract line 7c from							15,296,596
	line 6)							
<u>T0</u>	tal Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	<b>(d)</b> 2007	<b>(e)</b> 2		(f) Total
Cale 9	ndar year (or fiscal year beginning in) A mounts from line 6	(a) 2004 2,155,788	<b>(b)</b> 2005 2,483,021	(c) 2006 2,606,436	( <b>d)</b> 2007 2,890,505		5,160,846	<b>(f)</b> Total 15,296,596
	, , , , , , , , , , , , , , , , , , , ,		<del>'</del>					
9	A mounts from line 6	2,155,788	<del>'</del>					15,296,596
9	A mounts from line 6 Gross income from interest, dividends,		<del>'</del>					
9	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans,	2,155,788	<del>'</del>					15,296,596
9	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	2,155,788	<del>'</del>					15,296,596
9 10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less	2,155,788	<del>'</del>					15,296,596
9 10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,155,788	<del>'</del>					15,296,596
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses	2,155,788	<del>'</del>					15,296,596
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b	2,155,788	<del>'</del>					15,296,596 2,169
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business	2,155,788	<del>'</del>					15,296,596 2,169
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b,	2,155,788	<del>'</del>					15,296,596 2,169
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly	2,155,788	<del>'</del>					15,296,596 2,169
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	2,155,788	<del>'</del>					15,296,596 2,169
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss	2,155,788	<del>'</del>					15,296,596 2,169
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets	2,155,788 2,169 2,169	2,483,021	2,606,436	2,890,505		5,160,846	2,169 2,169
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	2,155,788 2,169 2,169	2,483,021	2,606,436	2,890,505		5,160,846	15,296,596 2,169 2,169 183,724
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and	2,155,788 2,169 2,169	2,483,021	2,606,436	2,890,505		5,160,846	2,169 2,169
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12)	2,155,788 2,169 2,169 172,076	2,483,021	2,606,436	2,890,505 1,543	5	7,505	15,296,596 2,169 2,169 183,724 15,482,489
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the o	2,155,788 2,169 2,169 172,076	2,483,021	2,606,436	2,890,505 1,543	5	7,505	15,296,596 2,169 2,169 183,724 15,482,489 ation,
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12)	2,155,788 2,169 2,169 172,076	2,483,021	2,606,436	2,890,505 1,543	5	7,505	15,296,596 2,169 2,169 183,724 15,482,489
9 10a b c 11 12 13 14	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here	2,155,788 2,169 2,169 172,076 rganization's firs	2,483,021	2,606,436	2,890,505 1,543	5	7,505	15,296,596 2,169 2,169 183,724 15,482,489 ation,
9 10a b c 11 12 13 14	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here	2,155,788 2,169 2,169 172,076 rganization's firs	2,483,021 2,320 t, second, third	2,606,436 280 , fourth, or fifth	2,890,505 1,543	01(c)(3	7,505	15,296,596 2,169 2,169 183,724 15,482,489 ation,
9 10a b c 11 12 13 14	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here  mputation of Public Support Perce	2,155,788  2,169  2,169  172,076  rganization's firse  entage column (f) divide	2,483,021  2,320  t, second, third	2,606,436 280 , fourth, or fifth	2,890,505 1,543	01(c)(3	7,505	15,296,596 2,169 2,169 183,724 15,482,489 ation,
9 10a b c 11 12 13 14	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here	2,155,788  2,169  2,169  172,076  rganization's firse  entage column (f) divide	2,483,021  2,320  t, second, third	2,606,436 280 , fourth, or fifth	2,890,505 1,543	01(c)(3	7,505	15,296,596 2,169 2,169 183,724 15,482,489 ation,
9 10a b c 11 12 13 14 Co 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here  mputation of Public Support Percet Public Support Percentage for 2008 (line 8) Public Support Percentage for 2007 Schedien	2,155,788  2,169  2,169  172,076  rganization's first column (f) dividuale A , Part IV - A	2,483,021  2,320  t, second, third	2,606,436 280 , fourth, or fifth	2,890,505 1,543	01(c)(3	7,505	15,296,596 2,169 2,169 183,724 15,482,489 ation,
9 10a b c 11 12 13 14 Co 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here  mputation of Public Support Perce	2,155,788 2,169 2,169 2,169 172,076 rganization's firs entage column (f) dividuale A, Part IV-A	2,483,021  2,320  2,320  2, 320  2, 320  2, 320  2, 320	2,606,436 280 , fourth, or fifth	1,543 tax year as a 5	01(c)(3	7,505	15,296,596 2,169 2,169 183,724 15,482,489 ation,
9 10a b c 11 12 13 14 Co 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here  mputation of Public Support Percet Public Support Percentage for 2008 (line 8) Public Support Percentage for 2007 Schede	2,155,788  2,169  2,169  172,076  rganization's first  entage column (f) dividuale A, Part IV - A  Percentage ne 10c column (	2,483,021  2,320  2,320  2,320  2,100  2,320  2,320  2,320  3, line 27g	2,606,436  280  , fourth, or fifth	1,543 tax year as a 5	01(c)(3 15 16	7,505	15,296,596 2,169 2,169 183,724 15,482,489 ation, 98 799 % 100 %

19a 33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line

17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3% Tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and

20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

**▶**▼

Part IV	<b>Supplemental Information.</b> Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)
	Facts and Circumstances Test

Schedule A (Form 990 or 990-EZ) 2008

#### **SCHEDULE C**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

#### **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Open to Public Inspection

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities)

- ◆ Section 501(c)(3) organizations complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990EZ, Part VI, line 47 (Lobbying Activities)

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) complete Part II-A Do not complete Part II-B
- ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

Irick Provider Network					
			75-2660403		
			n 501(c) and section	527	
			ivities in Part IV		
Political expenditures				\$	
Volunteer hours					
		t under section	<b>1 501(c)(3).</b> (See the	instructions	
Enter the amount of any excise	tax incurred by the organization ι	under section 4955		\$	
Enter the amount of any excise	tax incurred by organization man	agers under sectioi	n 4955	\$	
If the organization incurred in a	a section 4955 tax, did it file Form	n 4720 for this year	?	☐ Yes	☐ No
Was a correction made?				☐ Yes	┌ No
If "Yes," describe in Part IV					
		ot under section	1 501(c), except sect	ion 501(c)(	3).
Enter the amount directly expe	nded by the filing organization for	section 527 exemp	ot function activities	\$	
Enter the amount of the filing o 527 exempt funtion activities	rganızatıon's ınternal funds contrıl	buted to other orga	nizations for section	\$	
Total of direct and indirect exe 1120-POL, line 17b $$	mpt function expenditures Add lir	nes 1 and 2 and ent	er here and on Form	\$	
Did the filing organization file ${f F}$	orm 1120-POL for this year?			☐ Yes	┌ No
were made Enter the amount p political contributions received	aid and indicate if the amount was I and promptly and directly deliver	paid from the filing ed to a separate po	i organization's own interna Hitical organization, such a	l funds or were s a separate	ments
(a) Name	( <b>b)</b> Address	(c) EIN	(d) A mount paid from filing organization's internal funds If none, enter - 0-	(e) A mount of contributions and promp directly delived separate porganization enter -	receive tly and ered to olitical If none
	<del>                                     </del>	-	+	1	
	Provide a description of the organizations. (See Provide a description of the organization and the organization incurred by the organization incurred in a second s	Provide a description of the organization's direct and indirect political expenditures  Volunteer hours  I-B To be completed by all organizations exemptor Schedule C for details.)  Enter the amount of any excise tax incurred by the organization man of the organization incurred in a section 4955 tax, did it file Form Was a correction made?  If "Yes," describe in Part IV  I-C To be completed by all organizations exemptose the instructions for Schedule C for details.)  Enter the amount directly expended by the filing organization for Enter the amount of the filing organization's internal funds contributed or the filing organization for Enter the amount of the filing organization's internal funds contributed or the filing organization for Enter the amount of the filing organization expenditures Add limitation or the filing organization file Form 1120-POL for this year?  State the names, addresses and Employer Identification Number were made Enter the amount paid and indicate if the amount was political contributions received and promptly and directly deliver segregated fund or a political action committee (PAC) If addition	Provide a description of the organization's direct and indirect political campaign act Political expenditures  Volunteer hours  I-B To be completed by all organizations exempt under section for Schedule C for details.)  Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section If the organization incurred in a section 4955 tax, did it file Form 4720 for this year Was a correction made?  If "Yes," describe in Part IV  I-C To be completed by all organizations exempt under section (See the instructions for Schedule C for details.)  Enter the amount directly expended by the filing organization for section 527 exempt enter the amount of the filing organization's internal funds contributed to other orga 527 exempt funtion activities  Total of direct and indirect exempt function expenditures. Add lines 1 and 2 and ent 1120-POL, line 17b  Did the filing organization file Form 1120-POL for this year?  State the names, addresses and Employer Identification Number (EIN) of all section were made. Enter the amount paid and indicate if the amount was paid from the filing political contributions received and promptly and directly delivered to a separate posegregated fund or a political action committee (PAC). If additional space is needed.	Provide a description of the organization's direct and indirect political campaign activities in Part IV  Political expenditures  Volunteer hours  I-B To be completed by all organizations exempt under section 501(c)(3). (See the for Schedule C for details.)  Enter the amount of any excise tax incurred by the organization under section 4955  Enter the amount of any excise tax incurred by organization managers under section 4955  If the organization incurred in a section 4955 tax, did it file Form 4720 for this year?  Was a correction made?  If "Yes," describe in Part IV  I-C To be completed by all organizations exempt under section 501(c), except sect (See the instructions for Schedule C for details.)  Enter the amount directly expended by the filing organization for section 527 exempt function activities  Enter the amount of the filing organization's internal funds contributed to other organizations for section 527 exempt function activities  Total of direct and indirect exempt function expenditures Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b  Did the filing organization file Form 1120-POL for this year?  State the names, addresses and Employer Identification Number (EIN) of all section 527 political organization were made. Enter the amount paid and indicate if the amount was paid from the filing organization's own interna political contributions received and promptly and directly delivered to a separate political organization, such a segregated fund or a political action committee (PAC). If additional space is needed, provide information in Pa florm filing organization's internal funds. If none, internal funds. If none,	Provide a description of the organization's direct and indirect political campaign activities in Part IV  Political expenditures  Volunteer hours  I-B To be completed by all organizations exempt under section 501(c)(3). (See the instructions for Schedule C for details.)  Enter the amount of any excise tax incurred by the organization under section 4955  Enter the amount of any excise tax incurred by organization managers under section 4955  [If the organization incurred in a section 4955 tax, did it file Form 4720 for this year?  [Yes  Was a correction made?  [Yes  If "Yes," describe in Part IV  I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(  (See the instructions for Schedule C for details.)  Enter the amount directly expended by the filing organization for section 527 exempt function activities  [Enter the amount of the filing organization's internal funds contributed to other organizations for section 527 exempt funtion activities  [Set exempt funtion activities]  [Set of direct and indirect exempt function expenditures Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b  [Oth the filing organization file Form 1120-POL for this year?  [Yes  State the names, addresses and Employer Identification Number (EIN) of all section 527 political organizations to which pays were made. Enter the amount paid and indirectly differently and promptive made promptly and promptive and promptive in the pays were made. Enter the amount paid and indirectly differently and promptive internal funds or were political contributions received and promptive and promptive internal funds or were political organization's own internal funds or were political contributions received and promptive and promptive and promptive internal funds or managers in the pays and promptive an

	(election under sec	organizations exempt under section 501( tion 501(h)). (See the instructions for Schedul belongs to an affiliated group		768
	<u> </u>	checked box A and "limited control" provisions apply		
	Limits on Lo	bbying Expenditures— s" means amounts paid or incurred.)	(a) Filing Organization's Totals	<b>(b)</b> A ffiliated Group Totals
1a	Total lobbying expenditures to influe	nce public opinion (grass roots lobbying)		
b	Total lobbying expenditures to influe	nce a legislative body (direct lobbying)		
c	Total lobbying expenditures (add line	es 1a and 1b)		
d	Other exempt purpose expenditures			
е	Total exempt purpose expenditures	(add lines 1c and 1d)		
f	Lobbying nontaxable amount Enter to columns—  If the amount on line 1e, column (a) or (b) is:  Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,500,000  Over \$1,500,000 but not over \$17,000,000	The lobbying nontaxable amount is:  20% of the amount on line 1e  \$100,000 plus 15% of the excess over \$500,000  \$175,000 plus 10% of the excess over \$1,000,000  \$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (ente	r 25% of line 1f)		
h	Subtract line 1g from line 1a Enter -	0 - If line g is more than line a		
i	Subtract line 1f from line 1c Enter -	0- ıf lıne f ıs more than lıne c		
j 	If there is an amount other than zero section 4911 tax for this year?	on either line 1h or line 1i, did the organization file Form	m 4720 reporting	┌ Yes ┌ No

# 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 1a through 1f of the instructions.)

	Lobbying Expenditures During 4-Year Averaging Period					
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2005	<b>(b)</b> 2006	<b>(c)</b> 2007	( <b>d)</b> 2008	<b>(e)</b> Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
С	Total lobbying expenditures					
d	Grassroots non-taxable amount					
e	Grassroots ceiling amount (150% of line d, column (e))					
f	Grassroots lobbying expenditures					

Part II-B	To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form
	<b>5768 (election under section 501(h)).</b> (See the instructions for Schedule C for details.)

		(a)		(b)
		Yes	No	A mount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?		Νo	
b	Paid staff or management (include compensation in expenses reported on lines c through i)?		Νο	
c	Media advertisements?		Νo	
d	Mailings to members, legislators, or the public?		Νo	
e	Publications, or published or broadcast statements?		Νo	
f	Grants to other organizations for lobbying purposes?	Yes		320
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Νo	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?		Νo	
i	Other activities If "Yes," describe in Part IV		Νo	
j	Total lines 1c through			320
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo	
b	If "Yes" enter the amount of any tax incurred under section 4912			
c	If "Yes" enter the amount of any tax incurred by organization managers under section 4912		ľ	
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		Νo	

## Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). (See the instructions for Schedule C for details.)

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

# Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." (See the instructions for Schedule C for details.)

2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current Year	2a \$	
b	Carryover from last year	2b\$	
c	Total	2c \$	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3 \$	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political		
	expenditure next year?	4 \$	
5	Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	5 \$	·

#### Part IV Supplemental Information

Dues, assessments and similar amounts from members

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Ident if ier	Return Reference	Explanation
· -	lobbying purposes	A mount reported in Part II-B, Question 1F represents portion of dues paid to trade associations that is attributable to lobbying activities

1 \$

Part IV Supplemental Information			
Ident if ier	Return Reference	Explanation	

Schedule C (Form 990 or 990EZ) 2008

OMB No 1545-0047

Open to Public Inspection

### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Supplemental Financial Statements

**Employer identification number** Name of the organization Hendrick Provider Network 75-2660403 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate Contributions to (during year) 3 Aggregate Grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised □ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year 2a Total number of conservation easements h 2b Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) 2d d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🕨 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year 🕨 7 A mount of expenses incurred in monitoring, inspecting, and enforcing easements during the year 🕨 \$

#### the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes

Does each conservation easement reported on line 2(d) above satisfy the requirements of section

- If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
  - (i) Revenues included in Form 990, Part VIII, line 1

For Paperwork Reduction Act Notice, see the Intructions for Form 990

(ii) Assets included in Form 990, Part X

170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?

- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items
- Revenues included in Form 990, Part VIII, line 1

**►** \$

Assets included in Form 990, Part X

1a b c	Description of investment  Land			) Cost or other sis (investment)	(b)Cost or other basis (other)  759,480 7,182	(c) Depreciation	(d) Bo	611,830 7,182
Pa  la b c	Land				basis (other)		(d) Bo	
Pa  1a b	Land					(c) Depreciation	(d) Bo	ook value
Pa	Land					(c) Depreciation	( <b>d)</b> Bo	ook value
4 Pa						(c) Depreciation	( <b>d</b> ) Bo	ook value
4	Description of investment					(c) Depreciation	<b>(d)</b> Bo	ook value
4					1 (1-10			
4	rt VI Investments—Land, Buildings, and E	quipment.	See F	orm 990, Pa	rt X, line 10.			
ь	Describe in Part XIV the intended uses of the organiz							
						3b		
	(ii) related organizations					3a(ii)		
	(i) unrelated organizations					3a(i)		
Jd	organization by	ie organization	ciidt i	are neiu allu ac	mministered for	LII C	Yes	No
c 3a	Term endowment ►  Are there endowment funds not in the possession of the content	na organization	that '	are held and a	Iministered for	the		
ь	Permanent endowment							
a	Board designated or quasi-endowment							
2	Provide the estimated percentage of the year end bala	nce held as						
g								
f	Administrative expenses							
e	Other expenditures for facilities and programs							
d	Grants or scholarships							
C	Investment earnings or losses							
b	Contributions							
1a	Beginning of year balance							
1-		ent Year <b>(b</b>	)Prior	rear <b>  (c)</b> Two	Years Back (d)	Three Years Back (e)	)Four Y	ears Back
Pa	art V Endowment Funds. Complete if the org							
ь	If "Yes," explain the arrangement in Part XIV							
2a	Did the organization include an amount on Form 990,	Part X, line 21	,			Γ.	Yes	┌ No
f	Ending balance				1f			
e	Distributions during the year				1e			
d	Additions during the year				1d			
C	Beginning balance				1c			
						A mou	nt	
b	If "Yes," explain why in Part XIV and complete the fol	lowing table			,			
74	included on Form 990, Part X?	o. meermeuldi	. 101 C	Charbactons Of	. Jenei ussets I		Yes	┌ No
	Part IV, line 9, or reported an amount or  Is the organization an agent, trustee, custodian or oth				r other accots	not		
Pa	rt IV Trust, Escrow and Custodial Arrange	ements. Con	plet	e if the organ		ered "Yes" to Fo	rm 9	90,
5	During the year, did the organization solicit or receive assets to be sold to raise funds rather than to be mair						Yes	Г No
_	Part XIV	4		<b></b>		.1		
	Provide a description of the organization's collections	and explain ho	w the	y further the or	ganızatıon's ex	empt purpose ın		
4	Preservation for future generations							
с 4	Scholarly research	e	Γ	Other				
	Public exhibition	d	Г	Loan or exch	ange programs			
c	items (check all that apply)							

Part VII Investments—Other Securities. See	e Form 990, Part X, line 12	2.	
(a) Description of security or cateory (including name of security)	(b)Book value		d of valuation · year market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other Interest in HMCF Net Assets	68,947		С
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. Se			d of valuation
(a) Description of investment type	(b) Book value		d of valuation -year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, (a) Descri			(b) Book value
(4) 50301	TPCION		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line			
Part X Other Liabilities. See Form 990, Part			
(a) Description of Liability	(b) A mount		
Federal Income Taxes	+		
	+		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	h		

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	
Par	t XIII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Re	turn
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
ь	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines <b>2a</b> through <b>2d</b>	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	5	
	Reconciliation of Expenses per Audited Financial Statements With Expenses	T	<u> leturn</u>
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities	-	
Ь	Prior year adjustments	-	
c	Losses reported on Form 990, Part IX, line 25	-	
d	Other (Describe in Part XIV)	┨╻	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a	-	
Ь	Other (Describe in Part XIV)	┨. │	
с _	Add lines 4a and 4b	4c	
5 Dag	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	
	t XIV Supplemental Information		
Con	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pa	art XIV,	nnes id and ∠b,

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Ident if ier	Return Reference	Explanation
fin 48 financial statements footnote		in june 2006, fasb issued fasb interpretation (fin) no 48, accounting for uncertainty in income taxes ("fin no 48") fin no 48 is an interpretation of sfas no 109, which prescribes a comprehensive model for recognizing, measuring, presenting and dislosing the financial statements uncertain tax positions that hendrick has taken or expect to take in hendrick tax returns the fasb had delayed the effective date until fiscal years beginning after december 15, 2008, with early adoption permitted hendrick will adopt fin no 48 for fiscal year ending august 31, 2010, unless it is further delayed by fasb the impact of fin no 48 on hendrick's financial statements, if any, has not been determined at this time

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As Filed Data -

DLN: 93493190011040

OMB No 1545-0047

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** 

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

2008

Open to Public Inspection

Name of	the organizat	ion
Hendrick P	rovider Network	

**Schedule J** 

Department of the Treasury

Internal Revenue Service

(Form 990)

**Employer identification number** 

75-2660403

Pa	rt I Questions Regarding Compensatio	n		·		
					Yes	Νo
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					
	First class or charter travel		Housing allowance or residence for personal use			
	Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments		Health or social club dues or initiation fees			
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a w provision of all the expenses described above? If "N	•		1b		
2	Did the organization require substantiation prior to i officers, directors, trustees, and the CEO/Executive		,	2		
	,		, <u>-</u>	<u>-</u>		
3	Indicate which, if any, of the following the organizatiorganizatior CEO/Executive Director Check all the					
	Compensation committee		Written employment contract			
	Independent compensation consultant	Г	Compensation survey or study			
	Form 990 of other organizations	Г	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990,	Part V I	I, Section A, line 1a			
а	Receive a severance payment or change of control p	paymen	t?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ntal nor	nqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-b	ased co	ompensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide tl	he applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must co	mplete	lines 5-8.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	line 1a	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," o		•	7		No
8	Were any amounts reported in Form 990, Part VII, p subject to the initial contract exception described in in Part III			8		N o

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Whitney Mascorro	(ı) (ıı)	380,449 0	20,734 0	2,780 0	1,313 0	15,894 0	421,170 0	
Tim Lancaster	(ı) (ıı)	0 368,763	0 135,321	0 226,736	6,900	0 12,248	0 749,968	
Stephen Kımmel	(ı) (ıı)	0 236,386	0 88,448	0 238,467	6,900	0 21,790	0 591,991	
Joe Pearson	(ı) (ıı)	0 156,975	0 52,363	0 46,015	0 5,719	0 15,857	0 276,929	
Joseph Tadvick	(ı) (ıı)	344,019 0	71,888 0	31,646 0	6,900 O	15,719 0	470,172 0	
Edward Holt	(ı) (ıı)	299,916 0	0 0	547 0	0 0	11,237 0	311,700 0	
Randy Daniell	(1) (11)	247,388 0	0 0	21,577 0	6,874 0	19,586 0	295,425 0	
Gregory Kroeger	(ı) (ıı)	349,118 0	82,277 0	31,646 0	6,900 O	15,719 0	485,660 0	
	(i) (ii)							
	(ii) (i)							
	(ii) (i) (ii)							

#### Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation
Q uestion 4	participation in or payment from supplemental nonqualified retirement plan	The individuals listed below participate in a 457(f) nonqualified retirement plan Tim Lancaster \$179,209 Stephen Kimmel \$189,329

### OMB No 1545-0047

Open to Public Inspection

#### **SCHEDULE 0**

(Form 990)

Department of the Treasury Internal Revenue Service

**Supplemental Information to Form 990** ▶ Attach to Form 990. To be completed by organizations to provide additional information for

Name of the organization Hendrick Provider Network

**Employer identification number** 

75-2660403

ldentifier	Return Reference	Explanation
Form 990, Part VI, Question 6	Describe the classes of members or stockholders	Hendrick Medical Center is the sole member of hendrick provider network

responses to specific questions for the Form 990 or to provide any additional information.

Identifier Return Reference		Explanation	
Form 990, part VI, Question 7a	ļ ·	The member, Hendrick Medical Center, shall elect the successors of the initial directors	

ldentifier	Return Reference	Explanation
	Decisions of governing body subject to approval by other persons	Article VII of the restated articles of incorporation provides, in part, that an amendment to article II relating to the purpose of the corporation and article VI relating to the number and method of the election or appointment of the board of trustees shall occur only with the consent of the baptist general convention of texas or its executive board

ldentifier	Return Reference	Explanation
form 990, part VI, Question 10		the organization engages an outside accounting firm to prepare form 990. Once prepared, the form is reviewed by the organization's internal accountants prior to filing.

ldentifier	Return Reference	Explanation
Form 990, part VI, Question 12c	monitoring compliance with policy	the organization conducts, at a minimum, annual reviews of the possible conflicts of interest and other financial relationships identified under this conflict of interest policy

ldentifier	Return Reference	Explanation
Form 990, Part VI, question 15a	process for determining compensation of ceo, directors, or top officials	A comprehensive review of compensation is conducted by an independent party at least every three years. This report presents the results of the analysis of salary, incentive, total cash compensation (salary plus incentive), benefits, and total compensation (total cash and benefits). Integrated Healthcare Strategies (IHS) works with the Personnel Committee to formally define an executive total compensation philosophy. Hendrick Health Systems current philosophy is to use ranges built around the median of the market with a 50% spread from minimum to maximum. Incentive opportunity levels are competitive with practices of peer groups and benefits will be delivered at market competitive levels. Severance and perquisites reflect a conservative philosophy. The Committee determined that the peer group would be primarily regional not-for-profit hospitals of similar size and complexity. National peer group will be used for reference purposes where appropriate. The Hendrick Health System Personnel Committee is delegated the responsibility for the executive compensation program by the Board of Trustees. The Committee Sets the overall executive compensation philosophy to be implemented by Hendrick Health System, sets compensation components for the President & CEO, reviews, discusses and makes decisions based on the President & CEOs recommendations for his direct reports, reports a summary of the process back to the Board of Trustees along with the actual compensation approved for the President and CEO, and approves all incentive goals and awards.

ldentifier	Return Reference	Explanation
form 990, part VI, question 19	_	the organization makes its governing documents, conflict of interest policy, and financial statements available to the public upon request

ldentifier	Return Reference	Explanation
FORM 990, PART	RELATED COMPENSATION HOURS	AVG HOURS WORKED FOR RELATED ORG TIM LANCASTER 40 STEPHEN KIMMEL
VII	WORKED	40 JOE PEARSON 40

#### DLN: 93493190011040

OMB No 1545-0047

Open to Public

### **Related Organizations and Unrelated Partnerships**

Department of the Treasury

(Form 990)

**SCHEDULE R** 

Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. See separate instructions.

Inspection Internal Revenue Service Name of the organization **Employer identification number** Hendrick Provider Network 75-2660403 **Identification of Disregarded Entities** (A) Name, address, and EIN of disregarded entity (B) Direct controlling Primary activity Legal domicile (state Total income End-of-year assets or foreign country) entity

	or roreigh country)		entity
_	•	•	

Part II Identification of Related Tax-Exempt Organizations

(A) Name, address, and EIN of related organization	<b>(B)</b> Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	<b>(F)</b> Direct controlling entity
Hendrick Medical Center  PO Box 3117 Abilene, TX79604 75-0827446	hospital	TX	501(c)(3)	3	NA
Hendrick Anesthesia Network  PO Box 3117 Abilene, TX79604 75-2728889	anesthesia	TX	501(c)(3)	9	na
Hendrick Center for Extended Care  PO BOx 3117 Abilene, TX79604 75-2434172	hospital	TX	501(c)(3)	3	na
Hendrick Medical center foundation  PO Box 3117 Abilene, TX79604 23-7413284	fund raising	TX	501(c)(3)	11	na
For Danerwork Peduction Act Notice, see the Instructions for Form 990		Cat No E013EV	/		Schodulo D (Form 990) 2009

20114111 Identification of Re	siateu Org	aiiiZativiis	Iaxable	as a Partifership									
<b>(A)</b> Name, address, and EIN of related organization	<b>(B)</b> Primary act	tivity	(C) Legal domicile (state or foreign country)	( <b>D)</b> Direct controlling entity	(E) Predominant income(related, investment, unrelated)	<b>(F)</b> Share of total income	(G) Share of end-of- year assets	(F Disprop allocat	<b>1)</b> prtionate tions?	Code V—UE on Box 20 o		(J) Genera manag partn	al or qınq
								Yes	No		ļ	Yes	No
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Part IV Identification of Re	lated Ora	anizationo	Tayabla	as a Cornoration	or Truct								
	erated Org	1			_	T	T						
<b>(A)</b> Name, address, and EIN of related org	anızatıon	( <b>B)</b> Primary activ	rity	(C) Legal domicile (state or foreign country)	( <b>D</b> ) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total inc	ome	Sł end	( <b>G)</b> nare of -of-year essets	Perce	<b>1)</b> ntage ership	
Hendrick Health Network PO Box 3117 Abilene, TX79604 72-1619011		health insuranc	e	тх	na	C-Corporation		0		0	0 %		
Hendrick Managed Care Network LLC PO Box 3117 abilene, TX79604 52-2001034		ınactıve		тх	N/A	C-Corporation		0		0	0 %		

Part V	<b>Transactions with Related Organizations</b>
--------	--

Pai	iransactions with Related Organizations								
	Note. Complete line 1 if any entity is listed in Parts II, III or IV				Yes	No			
<b>1</b> Du	uring the tax year, did the orgranization engage in any of the following transactions with	n one or more related organizations listed in Parts I	I-IV?						
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity									
b	<b>b</b> Gift, grant, or capital contribution to other organization(s)								
c	c Gift, grant, or capital contribution from other organization(s)								
d	d Loans or loan guarantees to or for other organization(s)								
e	Loans or loan guarantees by other organization(s)			1e	Yes				
f	Sale of assets to other organization(s)			1f	Yes				
g	Purchase of assets from other organization(s)			<b>1</b> g	Yes				
h	Exchange of assets			1h		No			
i	Lease of facilities, equipment, or other assets to other organization(s)			1i		No			
j	Lease of facilities, equipment, or other assets from other organization(s)			1j	Yes				
k	Performance of services or membership or fundraising solicitations for other organizat	tion(s)		1k		No			
ı	Performance of services or membership or fundraising solicitations by other organizati	ion(s)		11		No			
m	Sharing of facilities, equipment, mailing lists, or other assets			1m	Yes				
n	Sharing of paid employees			1n	Yes				
0	Reimbursement paid to other organization for expenses			10		No			
р	Reimbursement paid by other organization for expenses			1р		No			
q	O ther transfer of cash or property to other organization(s)			1q	Yes				
r	O ther transfer of cash or property from other organization(s)			1r	Yes				
2	If the answer to any of the above is "Yes," see the instructions for information on who	must complete this line, including covered relation	ships and transaction thresholds						
	(A)	(B)	(c)						
	Name of other organization(s)	Transaction type(a-r)	Amount Involved						
(1)									
(2)									
(3)									
(4)									
(5)									

#### Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

	T	ı	(5)		· -			1	1		
<b>(A)</b> Name, address, and EIN of entity	( <b>B)</b> Primary activity	<b>(C)</b> Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		<b>(E)</b> Share of end-of-year assets	<b>(F)</b> Disproprtionate allocations?		( <b>G</b> ) Code V—UBI amount on Box 20 of K-1		or ng ?	
			Yes	No		Yes	No		Yes	No	
	1	1				ı		1			