

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490





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SCANNED JUN 2 2 201

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

Open to Public Inspection

<u>A</u>	For tr	ne 2009 ca	lendar year,				2009, and end		06/3		, 20_10	
В	Check if	applicable		ne of organizat	on DOCTORS COM	MUNITY H	OSPITAL FO	UNDATIO	N II D	Employ	er identification	number
	Address	s change	use IRS label or Doin	ng Business As	3					52	171233	38
	Name c		print or Num	nber and street (o	rPO box if mail is not deliver	red to street add	ress) Room/	'suite	E	Telepho	one number	
	Initial re		type See 8118	Good Luc	k Road				(301)	552-802	28
	Termina		Specific City	or town, state	or country, and ZIP + 4							
		ed return		ham, MD 20	706-2418				G	Gross re	cents \$ 26	08,266
		on pending	F Name and	address of pri	ncipal officer. Dennis	Scanlon		1				
ш	Аррисано	or parting			l, Lanham, MD 2070						for affiliates? Yes	
$\overline{}$	Tay-ey	cempt status		3)◀ (insert		527		1			ncluded?	
j			hweb.org	3 /4 (IIISEIT	110) 4347 (a)(1) 01						list (see instruction	ons)
K			Corporation [☐ Trust ☐ As	sociation ☐ Other ▶		L Year of form			nption nur		<u></u>
	art I			Irusi L. As	sociation 🗀 Other 🕨		L rear or form	ation 199	M	State of	legal domicile. M	טו
Ľ		Summ							11		l las Canital	
4.	i	Briefly de Needs	scribe the o	rganization	's mission or most s	ignificant a	ctivities: Sup	port Doct	ors H	ospitai	i, inc. Capitai	
Activities & Governance												
Ë									• • • • • • •			
Ve	2	Check this	hox ► ∏ if t	he organization	n discontinued its operation	ns or dispose	d of more than 2	5% of its net	assets			
Ğ	3			-	· ·	•			audotto	3		15
αğ v)	3				e governing body (F				•	4		15
Ē	4		•	-	nembers of the gove	•	•	10)		5		0
⋛	5				•				•	 		
ĕ					nate if necessary)					6		0
					evenue from Part VIII					7a		0
	Ь	Net unrel	ated busines	ss taxable ir	ncome from Form 99	0-T, line 34	<u>1</u>	,		7b		0
								Pric	r Year		Current Ye	
Φ	8	Contribut	ions and gra	ants (Part V	III, line 1h)				8	5,512	2	<u>07,351</u>
Revenue	9	Program service revenue (Part VIII, line 2g)										0
ě	10	Investme	nt income (P	art VIII, col	umn (A), lines 3, 4, a	and 7d) .				0		915
Œ	11				(A), lines 5, 6d, 8c, 9		d 11e)			0		0
					11 (must equal Part				8	5,512	2	08,266
	13	Grants ar	nd simular am	nounts naid	(Part IX, column (A)	lines 1-3)				0		0
				•						0		0
ės	15	Benefits paid to or for members (Part IX, column (A), line 4)							13	0,666	1	08,924
Expenses	160				t IX, column (A) - line		i, iiies 5–10)			0		0
Š	104						293,467	3 3-1 20		in sec		*
ш					(, column (D); 1ine 25)			27		0,353		55,160
	17	Other exp	enses (Part	ix, column	(A), lines 11a-11d,	111-241)				1,019		64,084
	18 19	Povenue	enses. Add	ines 13-1	must equal Part IX	il column-ka	i), line 25)	-		5.507		55,818
P 6	19	nevenue	ess expense:	s. Subtractifi	inte 16 from time 12		· · · · · · ·	Beginning			End of Ye	
ets c	i I				OGDEN,	IIT T		Deginning				44,795
SSS	20		ets (Part X, I			<u>.U.I.</u>				0,386		
Net Ass	21		ilities (Part X					<u> </u>		3,033		14,033
Z	22		•		btract line 21 from li	ne 20 . .		1		7,353	<u> </u>	30,762
	art II		ature Bloci									
					t I have examined this retu lete Declaration of prepar							
Sig	gn											
	ere	Signa	ture of officer						Date		•	
		▶ Dei	nnis Scanlo	n, Treasure	er							
		Type	or print name a	and title								
		 	<u> </u>				Date	Check if	Pr	enarer's i	dentifying number	
		Preparer's	· •					self-	(se	eparer s i e instruc		
Pai	d	3.3.10.070	7					employed >	니			
Pre	parer's	Euro's se	mo for variant				!l					
	Only	if self-em	me (or yours oloyed),					EIN		<u> </u>		
		address,	and ZIP + 4					Pho	ne no	<u> </u>		
Ma	y the	IRS discu	ss this retur	n with the j	oreparer shown abov	ve? (see ins	structions) .	<u> </u>		<u> </u>	. Yes	☐ No
For	Privad	cy Act and	f Paperwork	Reduction A	Act Notice, see the se	parate instr	uctions.	Cat N	o. 1128	2Y	Form 9 9	(2009)

9-17

Par	Statement of Program Service Accomplishments	
1	Briefly describe the organization's mission: Support Doctors Hospital, Inc. Capital Needs	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	☐ Yes ☑ No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	☐ Yes ☑ No
4	If "Yes," describe these changes on Schedule O. Describe the exempt purpose achievements for each of the organization's three largest program services Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount allocations to others, the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 170,617 including grants of \$0) (Revenue \$ To raise funds for the future capital needs of Doctors Hospital Inc	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	Other program services. (Describe in Schedule O.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0) Total program service expenses > 170,617	
	rear brediant datum and many and	

-ci	Checklist of Hequired 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	✓	i
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	✓	
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		✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		√
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 similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"	6		1
7	complete Schedule D, Part I	7		→
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		1
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," complete Schedule D, Part IV	9		√
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V.	10		1
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	1	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	1	ļ
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			<u></u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<u> </u>	1
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	1
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		1
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? If "Yes," complete Schedule F, Part II	15		1
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		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	ļ 	1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		1
20_	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		I ✓

Pai	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		✓
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		✓
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 lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		✓
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		✓_
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		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			اا
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
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	1	
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	_	1
36	Section 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		1
37	Did the organization conduct more than 5% 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		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	1	

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	j		}
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	√	
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		ļ.,
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)		•	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	· ! -	1
b	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, 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		√
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		/
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c_		
6a		6a		✓_
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			ļ
	and services provided to the payor?	7a		ļ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7c		
а	required to file Form 8282?			ļ · · ·
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	`		
	benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7g		ļ
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	- 71.		
	required?	7h	 	-
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	 	
_		<u> </u>		1
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9a		
a	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		1
ь 10	Section 501(c)(7) organizations. Enter:			1
а	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	}	1	
11	Section 501(c)(12) organizations. Enter:	ŀ		
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)	ļ		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	-	₽-
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b	<u> </u>		1

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

	Hier A. Governing Body and Management		_	
	1 . 1		Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	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		✓
3	Did the organization delegate control over management duties customarily performed by or under the direct	1		
	supervision of officers, directors or trustees, or key employees to a management company or other person? .	_3_		✓
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	_4_		✓
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		√
6	Does the organization have members or stockholders?	6		✓
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	<u>7a</u>		√
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following.			
а	The governing body?	8a	√	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
9	Is there any officer, director, 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	<u>9a</u>		√
	tion B. Policies (This Section B requests information about policies not required by the Internal Code)	ernal		
Hev	enue Code.)			
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		_✓
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			,
	form?	11	-	-
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	V	<u> </u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			,
	rise to conflicts?	12b		-
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	40-	,	
	describe in Schedule O how this is done	12c	V	-
13	Does the organization have a written whistleblower policy?	13	<u> </u>	
14	Does the organization have a written document retention and destruction policy?	14	✓	
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?			
	The organization's CEO, Executive Director, or top management official	15a	✓ -	
b	Other officers or key employees of the organization	15b		-
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)			l
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	40	<u> </u>	1
	with a taxable entity during the year?	16a	 	-
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	466	 -	
800	the organization's exempt status with respect to such arrangements?	16b	<u> </u>	
17	List the states with which a copy of this Form 990 is required to be filed Section 6104 required to accept the form 1000 (or 1004 if each table) 200 and 200 T (604)			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c	s(8)(3	only)	
	available for public inspection. Indicate how you make these available. Check all that apply.			
40	Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	ot int	erest	
00	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and recoorganization: Dennis P Scanlon, (301)552-8087		the	
	8118 Good Luck Road, Lanham, MD 20706-2418			

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. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- 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, and 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.

Check this box if the organization did not co	ompensate	any o	curre	ent	offic	cer, d	irec	tor, or trustee.		
(A)	(B)				>)			(D)	(E)	(F)
Name and Title	Average	Position (check all that apply)			ply)	Reportable	Reportable	Estimated		
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Robert L Bonaventure	4									
Board Member	1	1						0	0	0
M H Jim Estepp	1							o	o	0
Board Member	<u>'</u>	✓							-	
William R Hite EdD	1							o	o	0
Board Member	<u> </u>	1				L			· ·	
Raymond G LaPlaca Esq	1							0	o	0
Board Member	'	✓			L			· ·		·
Ata O Moshyedi M D	1							o	0	0
Board Member	<u>'</u>	1						•		
Jacqueline Sales	1	1						o	ol	0
Board Member	<u> </u>	✓								
Elmer H Tippett	1					ļ		o	o	0
Board Member	<u>'</u>	✓			L					
William A Youngblood	1							0	o	0
Board Member	'	✓		<u>L</u> .						
Philip B Down	1							o	اه	0
Board Member	ļ. '	✓						•	Ů	
Maurice I Klein	1							o	o	0
Board Member	'	✓					<u>L</u> .		Ů	
Timothy Adams	1	ŀ					Ì	0	o	0
Board Member		✓					<u> </u>		Ů	
P Michael Errico	1							0	o	0
Board Member	'	✓							Ů	
Robert W Ryan	1						1	o	l ol	0
Board Member	<u>'</u>	1					L		Ů	
Charles A Dukes Jr	1						ļ	0	o	0
Chairman	<u>'</u>			✓			L			
Dennis P Scanlon	1							0	o	0
Treasurer	ļ <u>'</u>			1	<u> </u>		<u></u>		ļ	
Leletha Marshall	40							67,289	o	0
Executive Director		<u> </u>	<u> </u>	<u> </u>	1			J.,203		

Pa	rt VII Section A. Officers, Directors, Tru	istees, Key	/ Emp	loy	ees	, an	d Hig	hes	t Compensate	d Employees (co	ontinued)
	(A)	(B)			(4	C)			(D)	(E)	(F)
	Name and title	Average hours per week	Individual trustee or director	Institutional trustee	Officer	র Key employee	Highest compensated	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
				ð			ated	ļ			
				\vdash	\vdash	┝		\vdash			
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				-							
415						<u> </u>		Ļ	67.000		ļ
2	Total	not limited	to the	ose	liste	ed a	above) w	67,289	ore than \$100.0	
	reportable compensation from the organization							,			
											Yes No
3	Did the organization list any former office employee on line 1a? If "Yes," complete S							oye	e, or highest o	ompensated	3 1
4	For any individual listed on line 1a, is the s							an	· · · · d other compe	nsation from	
	the organization and related organizations	greater tha	ın \$15	50,0	0007	If '	'Yes,"	coi	mplete Schedu	le J for such	4
5	individual										7. *
	services rendered to the organization? If "	Yes," comp	lete	Sch	edu	le J	for s	uch	person		5 🗸
<u>Se</u>	ction B. Independent Contractors Complete this table for your five highest co		d ind		nda	nt e			ro that raceiva	d mara than ¢1	00 000 of
	compensation from the organization.	mpensate	u ma	epe	iiue	:iii (JOHUZ	1010	is that receive	u more man şi	
	(A) Name and business add	Irace							(B) Description of s	enuces	(C) Compensation
	, and and desired dec			-						CITIOGO	Componidation
								_			
2	Total number of independent contractors (i	ncluding b	ıt not	lim	ited	l to	those	liet	ed above) who	received	
-	more than \$100,000 in compensation from								CC above, will		

Part	VIII	Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns	0 0 0 0 0 0 207,351	207,351			
rice Revenue	2a b		Business Code				
Program Service Revenue		All other program service revenue . Total. Add lines 2a-2f		0			
	3 4 5	Investment income (including dividend other similar amounts) Income from investment of tax-exempt bon Royalties	s, interest, and	915 0 0	915 0	0 0	0 0
	6a b c d	Gross Rents Less: rental expenses Rental income or (loss) Net rental income or (loss) Oross amount fromsales of (i) Real (i) Real (ii) Real (iii) Real					
	b	assets other than inventory Less: cost or other basis and sales expenses .	0				
ē	d	Gain or (loss)					
Other Revenue	b	events (not including \$					
		Gross income from gaming activities. See Part IV, line 19					
		Less: direct expenses b. Net income or (loss) from gaming activ	L				
	b	Gross sales of inventory, less returns and allowances a Less: cost of goods sold . b Net income or (loss) from sales of invent					
	44		240,1033 0000		 		<u> </u>
	11а Ь				-	-	
	c						
		All other revenue					ļ
	е 12	Total. Add lines 11a-11d Total revenue. See instructions		208,266		0	0

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other experiences must complete solumns (A) but are not required to complete columns (B) (C) and

	All other organizations must complete col	umn (A) but are no	t required to comp	piete columns (B),	(C), and (D).
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	67,289	67,289		
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	0		
7	Other salaries and wages	41,635	41,635		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)		- /-		
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting				
	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees			<u> </u>	
g	Other	59,412	59,412		
12	Advertising and promotion				
13	Office expenses	2,281	2,281		
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings.				
20	Internet				
	0				
22	Depreciation, depletion, and amortization.				
23	Insurance				
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	Fund Raising Expenses	293,467	0	0	293,467
a b				·	222,1.61
d					
e	All other symmetry				
25	All other expenses Total functional expenses. Add lines 1 through 24f	464,084	170,617	0	293,467
26	Joint costs. Check here ▶ ☐ 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				

	rt X	Balance Sheet	(A)		(B)
			Beginning of year		End of year
	1	Cash—non-interest-bearing	0	1	0
-	2	Savings and temporary cash investments	140,425	2	166,633
	3	Pledges and grants receivable, net	201,935	3	209,807
	4	Accounts receivable, net	0	4	0
	5	Receivables from current and former officers, directors, trustees, key		ì	
		employees, and highest compensated employees. Complete Part II of			
l		Schedule L	0	5	0
ļ	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete	•		
- 1		Part II of Schedule L	0	6	0
ş	7	Notes and loans receivable, net	0	7	0
Assets	8	Inventories for sale or use	0	8	0
۲	9	Prepaid expenses and deferred charges	4,586	9	4,866
İ	10a	Land, buildings, and equipment cost or 10a 0			
		other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation 10b 0	0	10c	0
	11	Investments—publicly traded securities	. 0	11	
	12	Investments—other securities See Part IV, line 11	163,440	12	163,489
- {	13	Investments—program-related. See Part IV, line 11		13	
ł	14	Intangible assets	0	14	
- 1	15	Other assets. See Part IV, line 11		15	<u> </u>
\perp	16	Total assets. Add lines 1 through 15 (must equal line 34)	510,386	16	544,795
1	17	Accounts payable and accrued expenses	19,188	17	610
}	18	Grants payable	0	18	
-	19	Deferred revenue	0	19	
	20	Tax-exempt bond liabilities	0	-	
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	
=	22	Payables to current and former officers, directors, trustees, key			
Liabilities		employees, highest compensated employees, and disqualified			
-		persons. Complete Part II of Schedule L	0	22	· · · · · · · · · · · · · · · · · · ·
	23	Secured mortgages and notes payable to unrelated third parties	0		
-	24	Unsecured notes and loans payable to unrelated third parties	0		
	25	Other liabilities. Complete Part X of Schedule D	463,845		513,423
	26	Total liabilities. Add lines 17 through 25	483,033	26	514,033
seo		Organizations that follow SFAS 117, check here ► 🗹 and			
ğ		complete lines 27 through 29, and lines 33 and 34.			
<u>a</u>	27	Unrestricted net assets	27,353		0 700
m	28	Temporarily restricted net assets	0	28	30,762
립	29	Permanently restricted net assets	0	29	0
Net Assets or Fund Balan		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
ţ	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ĕ	32	Retained earnings, endowment, accumulated income, or other funds		32	
le	33	Total net assets or fund balances	27,353	33	30,762
	34	Total liabilities and net assets/fund balances	510,386	34	544,795

Pai	t XI Financial Statements and Reporting				
			Yes	No	
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	√	<u> </u>	
b	Were the organization's financial statements audited by an independent accountant?				
С	If "Yes" to line 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c			
d	If "Yes" to line 2a or 2b, check a box below to Indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: Separate basis Both consolidated and separate basis				
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		1	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b			

Form **990** (2009)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047 Open to Public

Inspection Internal Revenue Service Name of the organization Employer identification number **DOCTORS COMMUNITY HOSPITAL FOUNDATION INC** 1712338 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) R A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33\% % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/4 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. b Type II c Type III-Functionally integrated d Type III-Other e 🗹 By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (III) below, the governing body of the supported organization? 11g(i) 11g(ii) (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (iv) is the organization (v) Did you notify (vi) Is the (vii) Amount of organization (described on lines 1-9 in col (i) listed in your organization in col support the organization in above or IRC section governing document? col (i) of your (i) organized in the (see instructions)) support? Yes No Yes No Yes No **Doctors Hospital Inc** Hospital 52-1638026 99,285

99,285

	Support Schedule for Org (Complete only if you chec					and 170(b)(I)(A)(vi)
Sec	tion A. Public Support						
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3					ļ	
5 6	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4.						
	tion B. Total Support		•		<u>.</u>		
	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts 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 from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10 .		1		L	 	
12	Gross receipts from related activities, etc	(see instruction	ons)			12	
13	First five years. If the Form 990 is for organization, check this box and stop he	re					
	tion C. Computation of Public Su					1	
14	Public support percentage for 2009 (line	, ,,	•	I, column (f))		14	<u>%</u>
15	Public support percentage from 2008 Scl					15	%_
	33% % support test—2009. If the organiand stop here. The organization qualifies	as a publicly	supported orga	nization			▶ 🗆
b	33% % support test—2008. If the organization quality box and stop here. The organization quality						e, check this
17a	10%-facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circumstances test – 20 more, and if the organization meets the org	acts-and-circu	mstances" test,	check this box	and stop here	. Explain in Part	t IV how the
b 18	10%-facts-and-circumstances test—2008 more, and if the organization meets the "forganization meets the "facts-and-circumstate Private foundation. If the organization did	acts-and-circun inces" test The	nstances" test, o organization qua	check this box	and stop here cly supported or	Explain in Part rganization	IV how the ▶ □

	dule A (Form 990 or 990-EZ) 2009						Page 3
	Support Schedule for Organ (Complete only if you checke				n)(2) 		
	tion A. Public Support	n				,	T
Ca	alendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that 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 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
Ca	ilendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b	 					
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)					<u> </u>	
14	First five years. If the Form 990 is for to organization, check this box and stop I	here .	<u> </u>	nd, third, fourtl	•	•	on 501(c)(3) ▶ □
	tion C. Computation of Public Sup					T	
15 16	Public support percentage for 2009 (lin Public support percentage from 2008 S	Schedule A, Pa	art III, line 15	ne 13, column	(†)) 	15	% %_
	tion D. Computation of Investmen					1	
17	Investment income percentage for 2009	•	* *	•		17	<u>%</u> %
18 19a	Investment income percentage from 20 331/3 % support tests – 2009. If the organization						
	17 is not more than 331/3 %, check this be	ox and stop h	ere. The organ	ization qualifies	s as a publicly	supported org	anization ► 🗆
b	331/3 % support tests - 2008. If the organ line 18 is not more than 331/3 %, check this						

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

Schedule A (F	Form 990 or 990-EZ) 2009	Page 4
Part IV	Supplemental Information. Complete this part to provide the explanations required Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information.	by Part II, line 10; See instructions.
	<u> </u>	
	······	
	······	
		·
		·
		

SCHEDULE D

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990. ► See separate instructions.

Name of the organization Employer identification number **DOCTORS COMMUNITY HOSPITAL FOUNDATION INC** 52 : 1712338 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 1 Total number at end of year 2 Aggregate contributions to (during year) 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 funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No 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 important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. 2a a Total number of conservation easements b Total acreage restricted by conservation easements 2b 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 the tax year ► Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 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 the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a 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. b 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 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: a Revenues included in Form 990, Part VIII, line 1 **b** Assets included in Form 990, Part X

	- 4
Dana	•

Par	t III Organizations Maintain	ing Collections	of Art, H	istorica	l Treasure	s, or Ot	her Similar A	ssets (continued)
3	Using the organization's acquisition collection items (check all that appl		other reco	ords, che	ck any of th	ne followi	ing that are a si	gnificant use of its
а	Public exhibition		d		oan or exch			
b	Scholarly research		е		Other			
С	Preservation for future general	tions						
4	Provide a description of the organiz Part XIV	ation's collection	s and exp	olain how	v they furthe	er the org	ganızatıon's exe	empt purpose in
5	During the year, did the organization assets to be sold to raise funds rathe	r than to be maint	ained as p	art of the	e organizatio	n's collec	ction?	Yes No
Par	Escrow and Custodial A IV, line 9, or reported an					answere	ed "Yes" to Fo	rm 990, Part
								t 🗌 Yes 🗌 No
b	If "Yes," explain the arrangement in	Part XIV and cor	nplete the	following	ng table:			
						-	<u> </u>	mount
С	Beginning balance					1c		
d						. 1d		
е	Distributions during the year .					. <u>1e</u>		
f	Ending balance					. <u>If</u>		П., П.,
	Did the organization include an amilf "Yes," explain the arrangement in	Part XIV.						∐ Yes ∐ No
Par	t V Endowment Funds. Co		7					
		(a) Current year	(b) Pric	or year				(e) Four years back
1a	Beginning of year balance		<u> </u>					COLUMN TO SERVICE STATE OF THE SERVICE STATE STATE OF THE SERVICE STATE
b	Contributions							
С	Net investment earnings, gains, and losses					4177	7 32 y y	
đ	Grants or scholarships						22.79.NB	
е	Other expenditures for facilities and programs				CAR	304	Antonia de la companya de la company	生类积约
f g	Administrative expenses End of year balance		<u> </u>					
2	Provide the estimated percentage of	of the year end ba	lance hel	d as:				
а	Board designated or quasi-endown							
b	Permanent endowment ▶							
С	Term endowment ▶ 9	6						
За	Are there endowment funds not in th	e possession of the	he organiz	ation tha	at are held a	ınd admir	nistered for the	
	organization by							Yes No
	(i) unrelated organizations							3a(i)
	(ii) related organizations							3a(ii)
	If "Yes" to 3a(II), are the related org							3b
4	Describe in Part XIV the intended up t VI Investments—Land, Bu					Dowl V 1:	no 10	
Par								
	Description of investment	(a) Cost or o			st or other s (other)	dep	ocumulated preciation	(d) Book value
1a	Land	.	. 0		. 0	经到证书		0
b	Buildings		0		0		0	0
С	Leasehold improvements		0		0		0	0
	Equipment	.	0		. 0		0	0
<u>e</u>	Other		0		(5) (10)	<u> </u>	0	0
Tota	I. Add lines 1a through 1e. (Column (d)	must equal Form 9	90, Part X	, column	(B), line 10(d))	•	0

Part VII Investments—Other Securities	. See Form 990. Part X.	line 12.	r age C
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year ma	
Financial derivatives	163,489	End-of-Year Market Value	
Closely-held equity interests	0		
Other			
			· · · · · · · · · · · · · · · · · · ·
			
			
			_
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	163,489		
Part VIII Investments—Program Relate	d. See Form 990, Part X	line 13.	
(a) Description of investment type	(b) Book value	(c) Method of valu Cost or end-of-year m	
<u> </u>			
			·
			-
Total. (Column (b) must equal Form 990, Part X, col (B) line 13.)	4 V 15 - 45	<u></u>	
Part IX Other Assets. See Form 990, Pa	rt X, IIDE 15. (a) Description		(b) Book value
	(a) Description		(b) Book value
The state of the s	·		
	 		
Total. (Column (b) must equal Form 990, Part X, col.	(B) line 15)	>	
Part X Other Liabilities. See Form 990,			·
1. (a) Description of liability	(b) Amount		
Federal income taxes		0	
Due To Doctors Hospital, Inc	513,42	3	
<u> </u>		_	
		_	
		\dashv	
		7	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	513,42	3	

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Pа	a	

Pai	TXI Reconciliation of Change in Net Assets from Form 990	to Audited Finance	ial Statements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		. 1	208,266
2	Total expenses (Form 990, Part IX, column (A), line 25)		. 2	464,084
3	Excess or (deficit) for the year. Subtract line 2 from line 1		. 3	-255,818
4	Net unrealized gains (losses) on investments		. 4	0
5	Donated services and use of facilities		5	0
6	Investment expenses		. 6	0
7	Prior period adjustments		. 7	0
8	Other (Describe in Part XIV.)		. 8	259,227
9	Total adjustments (net). Add lines 4 through 8		. 9	259,227
10	Excess or (deficit) for the year per audited financial statements. Comb		. 10	3,409
Pai	t XII Reconciliation of Revenue per Audited Financial Sta	tements With Rev		
1	Total revenue, gains, and other support per audited financial statemen	ts	1	208,266
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 - 1		
а	Net unrealized gains on investments	2a	0	
b	Donated services and use of facilities	2b	0	
С	Recoveries of prior year grants	2c	0	
d	Other (Describe in Part XIV.)	2d	0	_
е	Add lines 2a through 2d		. 2e	0
3	Subtract line 2e from line 1		3	208,266
4	Amounts 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	0	
b	Other (Describe in Part XIV.)	4b	0	
C	Add lines 4a and 4b		· · 4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line XIII Reconciliation of Expenses per Audited Financial St.			208,266
		atements with Ex	penses per Rei	464,084
1	Total expenses and losses per audited financial statements			404,004
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 0- 1		
а	Donated services and use of facilities	2a 2b	0	
b	Prior year adjustments	-	0	
C	Other losses	2c 2d	0	
d	Other (Describe in Part XIV.)	20	2e	0
	Add lines 2a through 2d		3	464,084
3	Subtract line 2e from line 1			404,004
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4a	o	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4b	0	
b	Other (Describe in Part XIV.)	140	4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I	line 18)	5	464,084
	t XIV Supplemental Information	,	1 0	404,004
Com and this	plete this part to provide the descriptions required for Part II, lines 3, 5, 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b part to provide any additional information sedule D, Part X - N A			
Sch	nedule D, Part XI, Line 8 - net asset transfer -99,285 Contributions 35	8,512		
		• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	

, SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990

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

► Attach to Form 990.

OMB No 1545-0047

Employer identification number

Open to Public Inspection

DOCTORS COMMUNITY HOSPITAL FOUNDATION INC	52 1712338
Form 990, Part VI, Section B, Line 11 - Board meeting was cancelled due to lack of a quoi	rum . Will be discussed at
next Board meeting	
Farm 000 Back W. Castley D. Line 40. Pack D. J. J. Lorg. 199 C. J. C.	to the second and the second
Form 990, Part VI, Section B, Line 12c - Each Board member and Officer of the Organization	ion is required to complete a
written conflict of Interest statement annually.	
Form 990, Part VI, Section B, Line 15 - The Human Resources Department did a survey of	similar positions in the area
to assure we are naving a market rate for this position	
to assure we are paying a market rate for this position	
Farma 000 Bank VI Canting C. Ling 40 All Daymont and William C.	
Form 990, Part VI, Section C, Line 19 - All Documents are available upon request.	

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•••••••••••••••••••••••••••••••••••••••	
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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. See separate instructions. \blacktriangle ► Attach to Form 990.

OMB No 1545-0047	
------------------	--

Open to Public Inspection % 000 000

Employer identification number

(f)
Direct controlling entity (f) Direct controlling 1712338 Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it ۲ Public charity status (if section 501(c)(3)) (e) End-of-year assets 52 Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) (d) Exempt Code section 501 (C) (3) (d) Total income Legal domicile (state or foreign country) Legal domicile (state or foreign country) MD Primary activity Primary activity had one or more related tax-exempt organizations during the tax year.) Hospital Doctors Hospital Inc (52-1638026) 8118 Good Luck Road, Lanham, MD 20706 DOCTORS COMMUNITY HOSPITAL FOUNDATION INC (a) Name, address, and EIN of related organization (a)Name, address, and EIN of disregarded entity Part II Part I

Schedule R (Form 990) 2009

General or managing partner? Yes No Percentage ownership 8 Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 Code V—UB! amount in box 20 of Schedule K-1 (Form 1065) Share of end-of-year assets (h) Osproportonate abocations? å Yes Share of total income (g) Share of end-of-year assets Type of entity (C corp, S corp, or trust) because it had one or more related organizations treated as a partnership during the tax year.) (n) Share of total income (d) (d) (Direct controlling | Predominant income (related, unrelated, excluded from tax under sections 512-514) (state or foreign country) Legal domicile (d)
| Direct controlling | entity Primary activity (c)
Legal
domicile
(state or
foreign Name, address, and EIN of related organization Primary activity Name, address, and EIN of related organization Part IV Part III

Schedule R (Form 990) 2009

Schedule R (Form 990) 2009
Part V Transac

Transport of the control of game and the control at swelca. The control at swelca. The control at the control a	e 54, 55, or 50.)	
Note. Complete line 1 if any entity is listed in Parts II. III. or IV of this schedule.		Yes No
_	arts II–IV?	**************************************
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		1a /
b Gift, grant, or capital contribution to other organization(s)	•	1b /
c Gift, grant, or capital contribution from other organization(s)	· · · ·	10
d Loans or loan guarantees to or for other organization(s)	•	1d >
e Loans or loan guarantees by other organization(s)	•	1e ×
	•	
f Sale of assets to other organization(s)		+
g Purchase of assets from other organization(s)	•	1g 🗸
h Exchange of assets	•	-h
i Lease of facilities, equipment, or other assets to other organization(s)	· · ·	1i 🗸
j Lease of facilities, equipment, or other assets from other organization(s)	•	1j 🗸
k Performance of services or membership or fundraising solicitations for other organization(s)	•	1k
I Performance of services or membership or fundraising solicitations by other organization(s)	•	=
m Sharing of facilities, equipment, mailing lists, or other assets	•	- m
Sharing of paid employees		- 1u
o Reimbursement paid to other organization for expenses		10
	·	4p
		が、は、紫が
a Other transfer of cash or property to other organization(s)		19
r Other transfer of cash or property from other organization(s)		11 /
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	ionships and transa	action thresholds.
(1)	1	(2)
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved
(E)		
(2)		
(6)		
(4)		
(5)		
(9)		
	Schedule	Schedule R (Form 990) 2009

Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.) Part VI

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.

(a)	(a)		Đ	_	(e)	3	H	-	£
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	Are all partners section 501(c)(3) organizations?	tners 13) ons?	Share of end-of-year assets	Desproportionate allocations?	donstel Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)		General or managing partner?
			Yes	S S		Yes	No	Yes	s No
								_	
									,
									•
							Schedule R (Form 990) 2009	orm 9	90) 2009

COHEN RUTHERFORD + KNIGHTrc

Certified Public Accountants

Audited Consolidated Financial Statements and Other Financial Information

Doctors Community Hospital and Subsidiaries

June 30, 2010 and 2009

Audited Consolidated Financial Statements Doctors Community Hospital and Subsidiaries June 30, 2010 and 2009

- Contents -

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Consolidating Balance Sheet and Statement of Operations Information



Report of Independent Auditors

Board of Directors Doctors Community Hospital and Subsidiaries Lanham, Maryland

We have audited the accompanying consolidated balance sheets of Doctors Community Hospital and Subsidiaries, (the Hospital) as of June 30, 2010 and 2009, and the related consolidated statements of operations and other changes in unrestricted net assets, changes in net assets, and cash flows for the years then ended. These consolidated financial statements are the responsibility of the Hospital's management. Our responsibility is to express an opinion on these consolidated financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform our audits to obtain reasonable assurance about whether the consolidated financial statements are free of material misstatement. We were not engaged to perform an audit of the Hospital's internal control over financial reporting. Our audits included consideration of internal control over financial reporting as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Hospital's internal control over financial reporting. Accordingly, we express no such opinion. An audit also includes examining, on a test basis, evidence supporting the amounts and disclosures in the consolidated financial statements, assessing the accounting principles used and significant estimates made by management, and evaluating the overall consolidated financial statements presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the consolidated financial position of Doctors Community Hospital and Subsidiaries as of June 30, 2010 and 2009, and the results of their operations, the changes in their net assets and cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Tel: 301 828 1000 Fax: 301 530 3625

October 19, 2010

Cohen, Rutherford + Knight, P.C.

Consolidated Balance Sheets

Doctors Community Hospital and Subsidiaries

	June 30			
		2010		2009
ASSETS				
CURRENT ASSETS				
· ·	•	4.4.504.600	_	10.204.242
Cash and cash equivalents	\$	14,521,680	\$	18,306,343
Assets whose use is limited - current portion of trustee-held				
funds Note B		4,682,633		4,135,618
Patient accounts receivable, less uncollectible accounts				
of \$7,329,639 and \$8,628,391 for 2010 and 2009, respectively		20,757,705		16,764,777
Other amounts receivable		2,175,209		1,263,606
Inventories		2,772,283		2,596,904
Prepaid expenses		1,265,039		1,350,863
TOTAL CURRENT ASSETS		46,174,549		44,418,111
NOTES RECEIVABLE		1,662,786		155,667
INVESTMENTS				
Marketable securities Note B		26,739,456		25,766,121
Joint ventures and equity investments Note C		2,182,857		2,204,251
1 ,		28,922,313		27,970,372
ASSETS WHOSE USE IS LIMITED Note B				
		22 700 472		20.252.410
Investments held by Trustee or Authority, less current portion		32,790,163		39,352,410
LAND, BUILDINGS, AND EQUIPMENT Note E		138,555,389		116,721,641
DEFERRED FINANCING COSTS		3,542,287		2,161,368
GOODWILL Note L		2,475,791		2,475,791
OTHER ASSETS		14,083,757		13,043,898
TOTAL ASSETS	\$	268,207,035	\$	246,299,258

Consolidated Balance Sheets – Continued **Doctors Community Hospital and Subsidiaries**

	June 30			
	2010		•	
LIABILITIES AND NET ASSETS				
CURRENT LIABILITIES				
Accounts payable and accrued expenses	\$	18,239,569	\$	21,032,952
Salaries, wages, and related items		10,211,101		9,051,043
Advances from third party payers		5,998,161		4,934,168
Interest rate swap Note F		24,135,956		0
Interest payable to bondholders		4,294,765		1,829,100
Current portion of long-term obligations $Note F$		3,300,844		3,187,731
TOTAL CURRENT LIABILITIES		66,180,396		40,034,994
NONCURRENT LIABILITIES				
Other noncurrent liabilities		3,602,329		2,922,352
Interest rate swap Note F		0		18,497,509
Pension obligation Note I		7,166,902		7,319,139
Long-term obligations, less current portion Note F		157,276,508		139,135,280
TOTAL LIABILITIES	- 2	234,226,135		207,909,274
NONCONTROLLING INTEREST		2,021,777		2,321,454
NET ASSETS				
Unrestricted		31,835,431		36,041,112
Temporarily restricted Note M		123,692		27,418
TOTAL NET ASSETS		31,959,123		36,068,530
COMMITMENTS AND CONTINGENCIES Notes K				
	\$	268,207,035	\$	246,299,258

Consolidated Statements of Operations and Other Changes in Unrestricted Net Assets

Doctors Community Hospital and Subsidiaries

	Year Ended June 30		
	2010	2009	
REVENUE			
Net patient service revenue	\$ 191,744,078	\$ 180,294,557	
Other operating revenue Note B	6,156,272	6,667,807	
Pledges and contributions	207,351	85,512	
Net assets released from restrictions used for operations	335,301	2,821,951	
TOTAL REVENUE	198,443,002	189,869,827	
EXPENSES			
Salaries and wages	75,956,168	70,697,700	
Employee benefits	15,012,104	13,463,924	
Purchased services	29,144,131	28,469,514	
Supplies	32,926,696	30,889,362	
Other expenses	9,792,131	10,753,161	
Provision for bad debts	16,070,689	18,296,936	
Depreciation Note E	9,260,387	5,877,761	
Amortization	138,278	136,960	
Fundraising	293,467	332,768	
Interest Note F	6,390,913	4,088,292	
TOTAL OPERATING EXPENSES	194,984,964	183,006,378	
INCOME FROM OPERATIONS	3,458,038	6,863,449	
NONOPERATING GAINS (LOSSES)			
Impairment loss Note B	0	(9,732,165)	
Unrealized gain on trading securities Note B	542,496	3,007,233	
Change in the fair value of the interest rate swap $Note F$	(5,638,447)	(10,854,931)	
EXCESS OF EXPENSES OVER REVENUE BEFORE			
NONCONTROLLING INTEREST	(1,637,913)	(10,716,414)	
Noncontrolling interest	(1,872,492)	(1,645,728)	
EXCESS OF EXPENSES OVER REVENUE	(3,510,405)	(12,362,142)	
Net assets released from restrictions for capital acquisitions	255,883	2,031,419	
Pension - related changes other than net periodic pension cost $Note I$	(951,159)	(2,774,768)	
DECREASE IN UNRESTRICTED NET ASSETS	\$ (4,205,681)	\$ (13,105,491)	

Consolidated Statements of Changes in Net Assets **Doctors Community Hospital and Subsidiaries**

	Year Ended June 30			
		2010	_	2009
UNRESTRICTED NET ASSETS				
Excess of expenses over revenue	\$	(3,510,405)	\$	(12,362,142)
Net assets released from restrictions for capital expenditures		255,883		2,031,419
Pension - related changes other than net periodic pension cost $Note\ I$		(951,159)		(2,774,768)
DECREASE IN UNRESTRICTED NET ASSETS		(4,205,681)		(13,105,491)
TEMPORARILY RESTRICTED NET ASSETS				
Restricted contributions		687,458		2,455,425
Net assets released from restrictions for operations		(335,301)		(2,821,951)
Net assets released from restrictions for capital expenditures		(255,883)		(2,031,419)
INCREASE (DECREASE) IN TEMPORARILY				
RESTRICTED NET ASSETS		96,274	_	(2,397,945)
DECREASE IN NET ASSETS		(4,109,407)		(15,503,436)
NET ASSETS, BEGINNING OF YEAR		36,068,530		51,571,966
NET ASSETS, END OF YEAR	\$	31,959,123	\$	36,068,530

Consolidated Statements of Cash Flows – Continued **Doctors Community Hospital and Subsidiaries**

	Year Ended June 30		
	 2010	2009	
OPERATING ACTIVITIES AND OTHER GAINS			
Decrease in net assets	\$ (4,109,407)	\$ (15,503,436)	
Adjustment to reconcile decrease in net assets to net cash			
and cash equivalents provided by operating activities:			
Restricted contributions received	(687,458)	(2,455,425)	
Depreciation and amortization	9,260,387	5,877,761	
Provision for bad debts	16,070,689	18,296,936	
Unrealized gain on investments	(542,496)	(3,007,233)	
Loss on disposal of equipment	59,905	27,917	
Decrease in joint ventures and equity investments	21,394	253,664	
Realized loss (gain) on sale of investments	(8,188)	10,547,431	
Amortization of bond discount	(138,278)	(136,763)	
Noncontrolling interest	1,872,492	2,314,291	
Change in fair value of interest rate swap	5,638,447	10,854,932	
Increase (decrease) in:			
Accounts payable and accrued expenses, exclusive of			
accrual for equipment cost	(2,793,383)	6,833,523	
Accrued salaries, wages and related items	1,160,058	785,846	
Advances from third party payers	962,613	(496,751)	
Pension obligation	(152,237)	3,241,629	
Interest payable	2,465,665	(42,600)	
Other liabilities	679,977	(2,413,316)	
Decrease (increase) in:			
Net patient accounts receivable	(20,063,617)	(12,706,198)	
Other revervables	(2,418,722)	(764,516)	
Inventories	(175,379)	706,500	
Prepaid expenses and other assets	 (954,035)	1,871,911	
NET CASH AND CASH EQUIVALENTS PROVIDED			
BY OPERATING ACTIVITIES AND OTHER GAINS	6,148,427	24,086,103	
INVESTING ACTIVITIES			
Net sales of trading investments, including assets whose	F F00 F04	20.520.000	
use is limited	5,592,581	32,530,288	
Purchase of property, plant and equipment	 (31,154,040)	(48,454,312)	
NET CASH AND CASH EQUIVALENTS			
USED IN INVESTING ACTIVITIES	(25,561,459)	(15,924,024)	
(Continued)			

Consolidated Statements of Cash Flows – Continued **Doctors Community Hospital and Subsidiaries**

	Year Ended June 30							
		2010		2010		2010		2009
FINANCING ACTIVITIES								
Principal payments on debt	\$	(3,245,495)	\$	(3,052,763)				
Proceeds from issue of debt		80,798,114		4,000,000				
Bond rettrement		(59,160,000)		0				
Advances from third-party payers		101,380		104,427				
Deferred financing costs		(1,380,919)		0				
Distributions to the noncontrolling interest holders		(2,172,170)		(1,431,040)				
Restricted contributions received		687,458		2,455,425				
NET CASH AND CASH EQUIVALENTS		_						
PROVIDED BY FINANCING ACTIVITIES	_	15,628,368		2,076,049				
NET INCREASE (DECREASE) IN CASH AND CASH AND CASH EQUIVALENTS		(3,784,663)		10,238,128				
CASH AND CASH EQUIVALENTS		10.207.242		0.040.215				
AT BEGINNING OF YEAR		18,306,343		8,068,215				
CASH AND CASH EQUIVALENTS								
AT END OF YEAR	_\$	14,521,680	_\$	18,306,343				

Note A - Organization and Summary of Significant Accounting Principles

Organization

Doctors Community Hospital (the Hospital) is a not-for-profit, non-stock corporation that operates an acute care general hospital facility licensed for 190 beds. The Hospital serves the health care needs of the residents of Prince George's County, the District of Columbia, and the greater Washington, D.C. metropolitan area. The Hospital has two wholly owned/controlled subsidiaries: Doctors Community Health Ventures, Inc. (Health Ventures) and Doctors Community Hospital Foundation, Inc. (the Foundation).

Health Ventures is a for-profit corporation that invests in corporations and other businesses consistent with the Hospital's mission and strategic plan.

The Foundation is a not-for-profit, non-stock corporation established to raise and invest funds to support or benefit the operations of the Hospital. The Foundation's bylaws provide that all funds raised, except those required for the operation of the Foundation, be distributed to or be held for the benefit of the Hospital. The Foundation's bylaws also provide the Hospital with the authority to direct its activities, management, and policies.

The Hospital owns a 60% interest in Doctors Regional Cancer Center, LLC (DRCC) and Doctors Community Hospital Sleep Center, LLC (the Sleep Center), and a 100% interest in Spine Team Maryland (STM). DRCC is a limited liability company formed in Maryland for the purpose of providing outpatient cancer treatment services to the residents of central Maryland. The Sleep Center is a limited liability company formed in Maryland for the purpose of providing diagnostic sleep services for residents of Prince Georges County and surrounding areas. STM is a limited liability company formed in Maryland for the purpose of providing medical and surgical services for the residents of Prince Georges County and surrounding areas.

Principles of Consolidation

The consolidated financial statements include the accounts of the Hospital, Health Ventures, the Foundation, DRCC, the Sleep Center, and STM (collectively, the Company). All intercompany accounts and transactions have been eliminated in consolidation.

Use of Estimates

The preparation of consolidated financial statements in conformity with accounting principles generally accepted in the United States requires management to make estimates and assumptions that affect the amounts reported in the consolidated financial statements and accompanying notes. Actual results could differ from those estimates.

Note A – Organization and Summary of Significant Accounting Principles – Continued

Cash and Cash Equivalents

Cash and cash equivalents include overnight repurchase agreements and other investments with a maturity date of three months or less when purchased. The Company has cash holdings in commercial banks routinely exceeding the Federal Deposit Insurance Corporation maximum insurance limit of \$250,000. Cash and cash equivalents are reported at cost which approximates market value.

Investments

Marketable securities, including assets whose use is limited, are carried at fair value. All such investments are classified as trading. Assets whose use is limited that are required to meet current liabilities of the Hospital have been classified as current assets.

Unrestricted investment income, including realized gains and losses on the sale of trading securities is reported as other operating revenue. The cost of securities sold is based on the specific-identification method. Unrealized gains and losses on trading securities are included in nonoperating gains (losses) in the accompanying consolidated statements of operations and other changes in unrestricted net assets

Patient Revenue and Accounts Receivable

Net patient service revenue and net patient accounts receivable are reported at estimated net realizable amounts from patients, third party payers, and others for services rendered. Discounts ranging from 2.25% to 6% of Hospital charges are given to Medicare, Medicaid, and certain approved commercial health insurance and health maintenance organizations. In addition, these payers routinely review patient billings and deny payments for certain charges that they deem medically unnecessary or performed without appropriate pre-authorization. Discounts and denials are recorded as reductions of net patient service revenue. Accounts receivable from these third-party payers have been adjusted to reflect the difference between charges and the estimated reimbursable amounts.

Note A – Organization and Summary of Significant Accounting Principles – Continued

Patient Revenue and Accounts Receivable - Continued

Gross patient revenue was comprised of the following for the years ended June 30:

	2010	2009
Medicare	40%	38%
Medicaid	12%	5%
Blue Cross Blue Shield	20%	20%
Other third-party payers	22%	32%
Self-pay patients	6%	5%
	100%	100%

The Company bills third party payers directly for services provided. Insurance coverage and credit information are obtained from patients upon admission when available. No collateral is obtained for patient accounts receivable. Patient accounts receivable deemed to be uncollectible, by management, have been written off. An allowance for doubtful accounts is recorded based on historical trends for patient accounts receivable that are anticipated to become uncollectible in future periods.

Gross patient accounts receivable were comprised of the following for the years ended June 30:

	2010	2009
Medicare	29%	14%
Medicaid	14%	3%
Blue Cross Blue Shield	18%	15%
Other third-party payers	20%	26%
Self-pay patients	19%	42%
	100%	100%

Laws and regulations governing the Medicare and Medicaid programs are complex and subject to interpretation. The Company believes that it is in compliance with all applicable laws and regulations and is not aware of any pending or threatened investigations involving allegations of potential wrongdoing that would have a material effect on the consolidated financial statements. Compliance with such laws and regulations can be subject to future government review and interpretation as well as significant regulatory action including fines, penalties, and exclusion from the Medicare and Medicaid programs.

Note A – Organization and Summary of Significant Accounting Principles – Continued

Inventories

Inventories consist of supplies and drugs and are carried at the lower of cost or market using the average-cost method.

Land, Buildings, and Equipment

Land, buildings, and equipment are recorded at cost. Depreciation is recorded over the estimated useful lives of the assets using the straight-line method. Maintenance and repairs are charged to expense as incurred. The straight-line method is used to amortize the cost of equipment under capital leases over the estimated useful life of the equipment or the term of the lease, whichever is appropriate.

Restricted Net Assets

Temporarily restricted net assets are those whose use by the Hospital has been limited by donors to a specific time period or purpose. As of June 30, 2010 and 2009, the Hospital had no permanently restricted net assets. Temporarily restricted net assets are available to fund various health care services and other community benefits provided by the Hospital.

Excess of Expenses over Revenue

The consolidated statements of operations include the excess of expenses over revenue (the "performance indicator"). Changes in unrestricted net assets, which are excluded from the excess of expenses over revenue, consistent with industry practice, include contributions received and used for additions of long-lived assets, and changes in the pension obligation other than net periodic pension cost.

Charity Care

A patient is classified as a charity patient by reference to certain established policies of the Hospital. These policies define charity services as those services for which no payment is anticipated. In assessing a patient's ability to pay, the Hospital utilizes the generally recognized poverty income levels in the local community, but also includes certain cases where incurred charges are significant when compared to income. Charity care provided in 2010 and 2009, measured at established rates, was \$923,563 and \$799,475 respectively. These charges are excluded from net patient service revenue. Cost of providing this care is included in operating expenses.

Note A – Organization and Summary of Significant Accounting Principles – Continued

Contributions and Pledges

Unconditional promises to give cash and other assets to the Foundation are reported at fair value at the date the promise is received. Conditional promises to give and indications of intentions to give are reported at fair value at the date the gift is received or when the conditions for receiving the donation have been satisfied. The gifts are reported as either temporarily or permanently restricted support if they are received with donor stipulations that limit the use of the donated assets. Contributions restricted by donors for additions to the Hospital's operating property are transferred from temporarily restricted net assets to unrestricted net assets when the expenditure is made. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reclassified as unrestricted net assets and reported in the consolidated statements of changes in net assets as net assets released from restriction.

The Hospital and Foundation write off any grants and pledges receivable that are considered uncollectible; accordingly, there is no allowance for doubtful accounts recorded for these receivables. Grants and pledges receivable have not been discounted because management considers the effect to be immaterial. The balance of pledges receivable was \$162,459 and \$166,882 at June 30, 2010 and 2009, respectively, and is included in other amounts receivable in the accompanying consolidated balance sheets.

Advertising Costs

The Hospital expenses advertising costs as they are incurred. Advertising expense was approximately \$954,569 and \$614,824 for the fiscal years June 30, 2010 and 2009, respectively, and is reported as other expense in the accompanying consolidated statements of operations and other changes in unrestricted net assets.

Functional Expenses

The Company's operating expenses by functional classification are as follows:

Year Ended June 30			
2010	2009		
\$ 139,933,762	\$ 139,506,644		
54,587,118	42,998,715		
464,084	501,019		
\$ 194,984,964	\$ 183,006,378		
	2010 \$ 139,933,762 54,587,118 464,084		

Note A – Organization and Summary of Significant Accounting Principles – Continued

Deferred Financing Costs

Financing costs incurred in issuing the Maryland Health and Higher Educational Facilities Authority (the Authority or MHHEFA) Revenue Bonds have been capitalized by the Hospital. These costs are being amortized over the life of the related bond issue using the bonds-outstanding method, which approximates the interest method. Deferred financing costs and accumulated amortization, which are included in other assets in the accompanying consolidated balance sheets, are as follows:

June 30			
	2010		2009
\$	3,984,004	\$	2,464,807
	(441,717)		(303,439)
\$	3,542,287	\$	2,161,368
	\$	2010 \$ 3,984,004 (441,717)	2010 \$ 3,984,004 \$ (441,717)

The estimated aggregate amortization expense anticipated for the next five years is as follows:

2011	\$ 184,372
2012	181,193
2013	177,897
2014	174,462
2015	 170,896
	\$ 888,820

Fair Value of Financial Instruments

The following methods and assumptions were used by the Company to estimate the fair value of financial instruments:

- Cash and cash equivalents, patient accounts receivable, other receivables, notes
 receivable, accounts payable and accrued expenses, employee compensation and
 related payroll taxes, and advances from third-party payers: The carrying amount
 reported in the balance sheets for each of these assets and liabilities approximates their fair
 value.
- Marketable securities and assets limited as to use: Fair values are based on quoted market prices of individual securities or investments if available, or are estimated using quoted market prices for similar securities.

Note A – Organization and Summary of Significant Accounting Principles – Continued

Fair Value of Financial Instruments - Continued

- Long-term debt: Fair values of the Hospital's fixed-rate debt are based on current traded values. The fair value of variable rate debt approximates carrying value. The fair values are disclosed in *Note F*.
- Interest rate swap: The fair value of the Hospital's interest rate swap is based on the proprietary model of a third party valuation specialist (see *Note F*).

Income Taxes

The Hospital and the Foundation are exempt from federal income tax under section 501(c)(3) of the Internal Revenue Code as public charities. Both entities are entitled to rely on this determination as long as there are no substantial changes in its character, purposes, or methods of operation. Management has concluded that there have been no such changes, and therefore the Hospital and Foundation's status as public charities exempt from federal income taxation remain in effect.

The state in which the Hospital and the Foundation operate also provided a general exemption from state income taxation for organizations that are exempt from federal income taxation. However, both entities are subject to federal and state income taxation at corporate tax rates on unrelated business income. Exemption from other state and local taxes, such as real and personal property taxes is separately determined.

The Hospital and the Foundation had no unrecognized tax benefits or such amounts were immaterial during the periods presented. For tax periods with respect to which no unrelated business income was recognized, no tax return was required. Tax periods for which no return is filed remain open for examination indefinitely. Although informational returns were filed, no tax returns were filed during 2010 and 2009.

Health Ventures is subject to corporate income tax and incurred an income tax liability of \$350,000 and \$115,923 for the years ended June 30, 2010 and 2009, respectively.

DRCC is a Maryland limited liability company that has not elected to be taxed as a corporation under current Treasury regulations. DRCC is owned by more than one member. As such, DRCC is

Note A - Organization and Summary of Significant Accounting Principles - Continued

Income Taxes - Continued

subject to the partnership tax rules under Subchapter K of the Internal Revenue Code of 1986, as amended. Under these rules DRCC itself is not subject to federal or state income tax, but must file annual information returns indicating its gross and taxable income to determine the tax results to its members.

The Sleep Center is a Maryland limited liability company that has not elected to be taxed as a corporation under Treasury Regulations. The Sleep Center is owned by more than one member. As such, the Sleep Center is subject to the partnership tax rules under Subchapter K of the Internal Revenue Code of 1986, as amended. Under these rules the Sleep Center is not a taxable entity, but must file annual information returns indicating its gross and taxable income to determine the tax results to its members.

The Spine Team Maryland is a Maryland limited liability company that has not elected to be taxed as a corporation under Treasury Regulation. The Spine Team Maryland is wholly owned by the Hospital. As such, the Spine Team Maryland is a "disregarded entity" under current IRS regulations.

Goodwill

Goodwill represents the excess of cost over the fair value of assets acquired. Management evaluates goodwill for impairment on an annual basis. Management reviewed the balance for impairment and believes there is none as of June 30, 2010.

Reclassifications

Certain amounts have been reclassified in the 2010 consolidated financial statements to be comparable with the 2009 consolidated financial statements

Recent Changes in Accounting Standards

In August 2010, the Financial Accounting Standards Board (FASB) amended the Accounting Standards Codification (ASC) for Health Care Entities to require that cost be used as the measurement basis for charity care disclosures and that cost be identified as the direct and indirect costs of providing the charity care. This amendment is effective for fiscal years beginning after December 15, 2010. Also, in August 2010, the FASB amended the ASC for Health Care Entities to clarify that a health care entity should not net insurance recoveries against a related claim liability. Additionally, the amount of the claim liability should be determined without considerations of insurance recoveries. This amendment is effective for fiscal years and interim periods within those years, beginning after December 15, 2010. Management is currently evaluating the impact on the Company's future financial statements of adoption of these changes in accounting.

Note A - Organization and Summary of Significant Accounting Principles - Continued

Subsequent Events

Subsequent events have been evaluated by management through October 19, 2010, which is the date the financial statements were available to be issued.

Note B – Investments

The following is a summary of investment securities:

	June	e 30
	2010	2009
Marketable securities:		
Corporate debt securities	\$ 3,061,161	\$ 2,779,449
Mutual funds	23,678,295	22,986,672
	\$ 26,739,456	\$ 25,766,121
Assets whose use is limited:		
Mutual funds	\$ 1,200,476	\$ 10,961,939
Government obligations	36,272,320	32,526,089
	\$ 37,472,796	\$ 43,488,028
Assets whose use is limited are held in the following funds:		
	2010	2009
Funds held by Trustee or Authority:		_
Debt service reserve fund	\$ 37,472,796	\$ 43,488,028
Less assets required for current obligations	(4,682,633)	(4,135,618)
	\$ 32,790,163	\$ 39,352,410

Note B – Investments – Continued

Investment return is summarized as follows:

	Other		Non			
	C	perating	(Operating		
		Revenue	Ga	ins (Losses)		Total
2010						
Interest and dividend income	\$	775,525	\$	0	\$	775,525
Net realized loss		8,188		0		8,188
Net unrealized gains		0		542,496		542,496
Investment fees		(81,282)		0	_	(81,282)
	\$	702,431	\$	542,496	\$	1,244,927
2009						
Interest and dividend income	\$	1,738,534	\$	0	\$	1,738,534
Net realized gain		(815,266)		0		(815,266)
Impairment loss		0		(9,732,165)		(9,732,165)
Net unrealized losses		0		3,007,233		3,007,233
Investment fees		(131,475)	_	0	_	(131,475)
	\$	791,793	\$	(6,724,932)	\$	(5,933,139)

Current accounting standards define fair value as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date, and establish a three-level hierarchy for fair value measurements based upon the transparency of inputs to the valuation of an asset or liability as of the measurement date. The three levels of inputs that may be used to measure fair value are as follows:

Level 1: Quoted prices in active markets for identical assets of liabilities.

Level 2: Observable input other than Level 1 prices such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities.

Level 3. Unobservable inputs that are supported by little or no market activity and that are significant to the fair value of the assets(s) or liabilities. Level 3 assets and liabilities include financial instruments whose value is determined using pricing models, discounted cash flow methodologies, or similar techniques, as well as instruments for which the determination of fair value requires significant management judgment or estimation.

Note B – Investments – Continued

The following discussion describes the valuation methodologies used for the Company's financial assets and liabilities measured at fair value. The techniques utilized in estimating the fair values are affected by the assumptions used, including discount rates, and estimates of the amount and timing of future cash flows. Care should be exercised in deriving conclusions about the Company's business, its value, or financial position based on the fair value information of financial assets and liabilities presented below.

Fair value estimates are made at a specific point in time, based on available market information and judgments about the financial asset, including estimates of the timing, amount of expected future cash flows, and the credit standing of the issuer. In some cases, the fair value estimates cannot be substantiated by comparison to independent markets. In addition, the disclosed fair value may not be realized in the immediate settlement of the financial asset or liability. Furthermore, the disclosed fair values do not reflect any premium or discount that could result from offering for sale at one time an entire holding of a particular financial asset or liability. Potential taxes and other expenses that would be incurred in an actual sale or settlement are not reflected in the amounts disclosed.

Fair values of the Company's investments in mutual funds classified at Level 1 are based on quoted market prices. The fair values of mutual funds classified at Level 2 are based on the Company's prorata share of the each fund's net asset value.

Fair values for the Company's fixed income securities (corporate debt and federal government obligations) are based on prices provided by its investment managers and its custodian bank. Both the investment managers and the custodian bank use a variety of pricing sources to determine market valuations. Each designate specific pricing services or indexes for each sector of the market based upon the provider's experience. The Company's federal government obligations and government backed securities portfolio is highly liquid, which allows for a high percentage of the portfolio to be priced through pricing services.

The fair value of the Company's interest rate swap (level 3) is based on the proprietary model of a third party valuation specialist. The fair value takes into consideration the prevailing interest rate environment and the specific terms and conditions of the swap, and considers the credit risk of the Company and the counterparty. The method used to determine the fair value calculates the estimated future payments required by the swap and discounts these payments using an appropriate discount rate. The value represents the estimated exit price that the Company would pay to terminate the agreement

Note B – Investments – Continued

The following table presents the Company's fair value hierarchy for assets measured at fair value on a recurring basis as of June 30, 2010.

							Tota	l Fair
		Level 1	Le	vel 2	Lev	el 3	Va	lue
Cash	\$	0	\$	0	\$	0	\$	0
Mutual funds		1,785,848	29,	559,079		0	31,3	44,927
Fixed income		0	37,	013,091		0	37,0	13,091
	Total \$	1,785,848	\$ 66,	572,170	\$	0	\$ 68,3	58,018
					-			
Interest rate swap		0		0	24,1	35,957	24,1	35,957
	Total_\$	0	\$	0	\$ 24,1	35,957	\$ 24,1	35,957

The following table presents the Company's fair value hierarchy for assets measured at fair value on a recurring basis as of June 30, 2009:

							To	tal Fair	
		Level 1		1 Level 2		rel 3	Value		
Cash	\$	637	\$	0	\$	0	\$	637	
Mutual funds		2,577,112	34,1	32,756		0	36	,709,868	
Fixed income		0	36,1	90,452		0	36	,190,452	
	Total \$	2,577,749	\$ 70,3	323,208	\$	0	\$ 72	,900,957	
Interest rate swap		0		0	18,4	97,509	18	,497,509	
	Total \$	0	\$	0	\$ 18,4	97,509	\$ 18	,497,509	

The following table summarizes the activity for fair value measurements using significant unobservable inputs (Level 3):

	Level 3				
	2010	2009			
Fair value, beginning	\$ 18,497,509	\$ 7,642,577			
Net unrealized losses	5,638,448	10,854,932			
Fair value, ending	\$ 24,135,957	\$ 18,497,509			

Note C – Joint Ventures and Equity Investments

Health Ventures invests in corporations and other forms of business consistent with the mission and strategic plan of the Company. Health Ventures' unconsolidated investments are carried at cost or at equity depending on the percentage of ownership and control. Health Venture's investment in Magnolia Gardens L.L.C. is not consolidated with the financial statements of the Company because the Health Ventures does not control the investee. The investment income of these joint ventures and equity investments is reported in other operating revenue in the accompanying consolidated statement of operations and other changes in unrestricted net assets. These investments are summarized as follows:

				Jun	e 30	
Name	Percent Ownership	Accounting Method	_	2010		2009
Magnolia Gardens LLC	51.0%	Equity	\$	1,834,835	\$	1,853,061
Neighborcare Home Medical						
Equipment of Maryland LLC	5.0%	Cost		250,000		250,000
Metropolitan Ambulatory						
Urological Institute, LLC	31.7%	Equity		114,260		101,190
Diagnostic Imaging, LLC	50.0%	Equity		(16,238)		0
			\$	2,182,857	\$	2,204,251

Note D - Related Party Transactions

The Hospital has income guarantee agreements with certain physicians. These advances are held as promissory notes and are often forgiven based on the established terms of these notes, such as maintaining an active practice in the Hospital's community.

The Hospital advanced funds to Health Ventures in its establishment of Metropolitan Medical Group, LLC and Diagnostic Imaging, LLC. Health Ventures periodically repays the Hospital. The outstanding balance of the advance was \$3,328,089 at June 30, 2010. The Medical Director of Radiology for the Hospital is a partner of Diagnostic Imaging, LLC.

A member of the board of directors maintains a business that has transactions with the Hospital that amounted to approximately \$650,363 in fiscal year 2010 and \$578,060 in fiscal year 2009.

During 2010, the Foundation transferred \$4,537 of restricted net assets to the Hospital, which was then released from restriction by the Hospital for use in operations.

Note E – Land, Buildings, and Equipment

Land, buildings, and equipment are summarized as follows:

		June 30		
Name	Useful Life	eful Life 2010 2009		
Land improvements	10-40 Years	\$ 3,685,435	\$ 5,708,937	
Buildings	4-40 Years	135,014,745	58,583,041	
Furniture and equipment	2-20 Years	68,987,230	58,310,508	
Equipment under capital lease				
obligations	2-20 Years	6,042,072	2,270,493	
		213,729,482	124,872,979	
Less accumulated depreciation		83,448,166	74,504,046	
		130,281,316	50,368,933	
Construction in progress		1,992,786	60,214,206	
Land		6,281,287	6,138,502	
		\$ 138,555,389	\$ 116,721,641	

The Company capitalized interest of \$3,991,443 in 2010 and \$2,602,639 in 2009 related to construction activities, and total capitalized interest reported as a component of land, buildings and equipment, net of accumulated depreciation, was \$6,506,594 as of June 30, 2010 and \$2,629,794 as of June 30, 2009. Capitalized interest related to construction activities includes the relevant portions of applicable interest payments to creditors on bonds and other debt obligations, net payments/receipts to counterparties on interest rate swap arrangements, letter of credit fees, and income received on trustee-held funds.

Accumulated depreciation includes accumulated amortization of capital leased equipment in the amount of \$1,118,566 and \$884,922 as of June 30, 2010 and 2009, respectively. Depreciation expense of capital leased equipment was \$268,405 and \$240,018 for fiscal year 2010 and 2009, respectively.

Note F - Long-Term Debt

Long-term indebtedness consisted of the following:

2010 2009 Maryland Health and Higher Education Facilities Authority Revenue Bonds, Series 2007A: 4.00% term bonds due July 1, 2013 \$ 9,750,000 \$ 11,955,000 5.00% term bonds due July 1, 2020 21,890,000 21,890,000 5.00% term bonds due July 1, 2027 30,795,000 30,795,000 5.00% term bonds due July 1, 2029 10,915,000 10,915,000 Maryland Health and Higher Education Facilities Authority Revenue Bonds, Series 2008, variable rate 0 59,160,000 Maryland Health and Higher Education Facilities Authority Revenue Bonds, Series 2010: 5.30% term bonds due July 1, 2025 5,330,000 0 5.625% term bonds due July 1, 2038 68,245,000 0 5.75% term bonds due July 1, 2038 68,245,000 0 Loan originally totaling \$810,000, bearing interest of 6.82%, principal and interest is payable in monthly installments of 68 68		June	e 30
Authority Revenue Bonds, Series 2007A: 4.00% term bonds due July 1, 2013 \$ 9,750,000 \$ 11,955,000 5.00% term bonds due July 1, 2020 21,890,000 21,890,000 5.00% term bonds due July 1, 2027 30,795,000 30,795,000 5.00% term bonds due July 1, 2029 10,915,000 10,915,000 Maryland Health and Higher Education Facilities Authority Revenue Bonds, Series 2008, variable rate 0 59,160,000 Maryland Health and Higher Education Facilities Authority Revenue Bonds, Series 2010: 5.30% term bonds due July 1, 2025 5,330,000 0 5.625% term bonds due July 1, 2030 9,095,000 0 5.75% term bonds due July 1, 2038 68,245,000 0 Loan originally totaling \$810,000, bearing interest of 6.82%, principal and interest is payable in monthly installments of		 2010	2009
4.00% term bonds due July 1, 2013 \$ 9,750,000 \$ 11,955,000 \$ 5.00% term bonds due July 1, 2020 21,890,000 21,890,000 5.00% term bonds due July 1, 2027 30,795,000 30,795,000 5.00% term bonds due July 1, 2029 10,915,000 10,915,000 Maryland Health and Higher Education Facilities Authority Revenue Bonds, Series 2008, variable rate 0 59,160,000 Maryland Health and Higher Education Facilities Authority Revenue Bonds, Series 2010: 5.30% term bonds due July 1, 2025 5,330,000 0 5.625% term bonds due July 1, 2030 9,095,000 0 5.75% term bonds due July 1, 2038 68,245,000 0 Loan originally totaling \$810,000, bearing interest of 6.82%, principal and interest is payable in monthly installments of	Maryland Health and Higher Education Facilities		
5.00% term bonds due July 1, 2020 5.00% term bonds due July 1, 2027 30,795,000 30,795,000 5.00% term bonds due July 1, 2029 10,915,000 Maryland Health and Higher Education Facilities Authority Revenue Bonds, Series 2008, variable rate 0 59,160,000 Maryland Health and Higher Education Facilities Authority Revenue Bonds, Series 2010: 5.30% term bonds due July 1, 2025 5,330,000 0 5.625% term bonds due July 1, 2030 5.75% term bonds due July 1, 2038 Loan originally totaling \$810,000, bearing interest of 6.82%, principal and interest is payable in monthly installments of	Authority Revenue Bonds, Series 2007A:		
5.00% term bonds due July 1, 2027 5.00% term bonds due July 1, 2029 10,915,000 Maryland Health and Higher Education Facilities Authority Revenue Bonds, Series 2008, variable rate 0 59,160,000 Maryland Health and Higher Education Facilities Authority Revenue Bonds, Series 2010: 5.30% term bonds due July 1, 2025 5,330,000 0 5.625% term bonds due July 1, 2030 5.75% term bonds due July 1, 2038 Loan originally totaling \$810,000, bearing interest of 6.82%, principal and interest is payable in monthly installments of	4.00% term bonds due July 1, 2013	\$ 9,750,000	\$ 11,955,000
5.00% term bonds due July 1, 2029 Maryland Health and Higher Education Facilities Authority Revenue Bonds, Series 2008, variable rate O 59,160,000 Maryland Health and Higher Education Facilities Authority Revenue Bonds, Series 2010: 5.30% term bonds due July 1, 2025 5.625% term bonds due July 1, 2030 5.75% term bonds due July 1, 2038 Loan originally totaling \$810,000, bearing interest of 6.82%, principal and interest is payable in monthly installments of	5.00% term bonds due July 1, 2020	21,890,000	21,890,000
Maryland Health and Higher Education Facilities Authority Revenue Bonds, Series 2008, variable rate 0 59,160,000 Maryland Health and Higher Education Facilities Authority Revenue Bonds, Series 2010: 5.30% term bonds due July 1, 2025 5,330,000 0 5.625% term bonds due July 1, 2030 9,095,000 0 5.75% term bonds due July 1, 2038 68,245,000 0 Loan originally totaling \$810,000, bearing interest of 6.82%, principal and interest is payable in monthly installments of	5.00% term bonds due July 1, 2027	30,795,000	30,795,000
Authority Revenue Bonds, Series 2008, variable rate 0 59,160,000 Maryland Health and Higher Education Facilities Authority Revenue Bonds, Series 2010: 5.30% term bonds due July 1, 2025 5,330,000 0 5.625% term bonds due July 1, 2030 9,095,000 0 5.75% term bonds due July 1, 2038 68,245,000 0 Loan originally totaling \$810,000, bearing interest of 6.82%, principal and interest is payable in monthly installments of	5.00% term bonds due July 1, 2029	10,915,000	10,915,000
Maryland Health and Higher Education Facilities Authority Revenue Bonds, Series 2010: 5.30% term bonds due July 1, 2025 5,330,000 0 5.625% term bonds due July 1, 2030 5.75% term bonds due July 1, 2038 68,245,000 0 Loan originally totaling \$810,000, bearing interest of 6.82%, principal and interest is payable in monthly installments of	Maryland Health and Higher Education Facilities		
Authority Revenue Bonds, Series 2010: 5.30% term bonds due July 1, 2025 5.330,000 0 5.625% term bonds due July 1, 2030 5.75% term bonds due July 1, 2038 Coan originally totaling \$810,000, bearing interest of 6.82%, principal and interest is payable in monthly installments of	Authority Revenue Bonds, Series 2008, variable rate	0	59,160,000
5.30% term bonds due July 1, 2025 5.625% term bonds due July 1, 2030 9,095,000 0 5.75% term bonds due July 1, 2038 68,245,000 0 Loan originally totaling \$810,000, bearing interest of 6.82%, principal and interest is payable in monthly installments of	Maryland Health and Higher Education Facilities		
5.625% term bonds due July 1, 2030 9,095,000 0 5.75% term bonds due July 1, 2038 68,245,000 0 Loan originally totaling \$810,000, bearing interest of 6.82%, principal and interest is payable in monthly installments of	Authority Revenue Bonds, Series 2010:		
5.75% term bonds due July 1, 2038 68,245,000 0 Loan originally totaling \$810,000, bearing interest of 6.82%, principal and interest is payable in monthly installments of	5.30% term bonds due July 1, 2025	5,330,000	0
Loan originally totaling \$810,000, bearing interest of 6.82%, principal and interest is payable in monthly installments of	5.625% term bonds due July 1, 2030	9,095,000	0
principal and interest is payable in monthly installments of	5.75% term bonds due July 1, 2038	68,245,000	0
	Loan originally totaling \$810,000, bearing interest of 6.82%,		
	principal and interest is payable in monthly installments of		
\$9,331.20. The loan matures on July 15, 2008 0 8,652	\$9,331.20. The loan matures on July 15, 2008	0	8,652
Capital leases 505,215 1,176,592	Capital leases	505,215	1,176,592
Notes payable 3,702,031 4,000,000	Notes payable	 3,702,031	4,000,000
160,227,246 139,900,244		160,227,246	139,900,244
Current portion of long-term debt (3,300,844) (3,187,731)	Current portion of long-term debt	(3,300,844)	(3,187,731)
Original issue premium, net of accumulated amortization 2,221,992 2,422,767	Original issue premium, net of accumulated amortization	2,221,992	2,422,767
Original issue discount, net of accumulated amortization (1,871,886) 0	Original issue discount, net of accumulated amortization	 (1,871,886)	0
\$ 157,276,508 \$139,135,280		\$ 157,276,508	\$139,135,280

The fair value of the Company's long-term debt, based on quoted market prices, was \$144,210,999 and \$124,790,343 at June 30, 2010 and 2009, respectively.

Note F – Long-Term Debt – Continued

The aggregate maturities of long-term debt, including sinking fund principal requirements during the next five fiscal years are as follows:

2011	\$ 3,879,270
2012	3,679,346
2013	3,823,423
2014	4,288,327
2015	4,414,107
2016 and after	143,695,572
	\$163,780,045

Total interest paid for the years ended June 30, 2010 and 2009 was \$4,084,370 and \$3,954,598, respectively.

Revenue Bonds

On May 15, 2010, the Hospital issued \$82,670,000 principal amount of Revenue Bonds, Series 2010 (Series 2010 Bonds). The proceeds of this issue were used to retire the Revenue Bonds, Series 2008 and to finance the costs of renovation and equipment purchases.

On January 4, 2007, the Hospital issued \$77,685,000 principal amount of Revenue Bonds, Series 2007A (Series 2007 Bonds). The proceeds of this issue were used to retire certain existing bonds, pooled loans, and to finance the costs of renovation and equipment purchases. The retirement of existing bonds resulted in a loss of approximately \$2 million during 2007.

On May 21, 2008, the Hospital issued \$59,160,000 principal amount of Revenue Bonds, Series 2008 (Series 2008 Bonds). The proceeds of this issue were used to finance the costs of the construction of the tower addition to the Hospital and renovation of other Hospital facilities. Interest was determined by a remarking agent on a weekly basis not to exceed 12% based on prevailing market conditions. Weekly interest rates during 2009 ranged from 0.32% to 7.35%. The Series 2008 Bonds were fully repaid from the proceeds of the Series 2010 Bonds.

The Hospital is required to maintain certain debt ratios as defined by the Agreement. In the opinion of the management, the Hospital has complied with the required covenants for 2010 and 2009.

Other Debt

During 1999, the Hospital purchased land for \$1,020,000 in exchange for a note payable due in monthly installments of \$9,331, including interest at the rate of 6.8% through July 2008, with a balloon payment of \$200,000 in August 2008. The land was used to build an employee parking lot that opened in the fall of 1999.

Note F - Long-Term Debt - Continued

Other Debt - continued

During 2008, DRCC obtained a \$4,000,000 revolving line of credit from a commercial lender to finance the acquisition of certain medical equipment. The line of credit was converted to a term note during 2009. The outstanding principal balance was \$4,446,419 and \$4,000,000 on June 30, 2010 and 2009, respectively. Beginning in October 2009, monthly payments of principal and interest at 6.8% per annum become due. DRCC financed \$873,759 and \$3,413,542 of equipment acquisitions during 2010 and 2009, respectively. As of June 30, 2009, the remaining \$349,788 of equipment financing under the terms of the note was in transit to DRCC. The outstanding principal balance is collateralized against the corresponding medical equipment purchased. Aggregate future principal payments as of June 30, 2009 are as follows:

2010	\$ 517,702
2011	553,879
2012	592,585
2013	633,995
2014	678,298
Thereafter	725,572
	\$ 3,702,031

Other debt includes the Hospital's obligations under capital lease (see *Note H*).

Derivative Instrument

Generally accepted accounting principles require that all derivative instruments be recognized in the financial statements at their fair value. The Hospital entered into an interest rate swap agreement that is considered a financial instrument. The interest rate swap contract is not designated as an effective cash flow hedge under current accounting principles. Consequently, changes in the fair value of the interest rate swap agreement are recognized in the consolidated statement of operations as a component of excess of revenue over expenses (expenses over revenue).

Note F – Long-Term Debt – Continued

Derivative Instruments - Continued

The Hospital's interest rate swap has a notional amount of \$75,000,000 subject to scheduled amortization, an effective date of January 1, 2009, and a termination date of July 1, 2040. It provides for the Hospital to pay a fixed rate of approximately 4.6% and receive a variable rate based on 79% of one month London Interbank Offered Rate. Subject to the terms of the agreement, either party has the option to terminate the agreement prior to the termination date provided that no event of default or termination has occurred. Specifically, the interest rate swap provider has the optional right to terminate this transaction (provided that no event of default or termination event has occurred) on May 1, 2011 and annually thereafter until scheduled termination. Should the interest rate swap provider elect to optionally terminate this transaction, a termination amount in respect of such termination would be due from one counterparty to this transaction to the other counterparty. In the event that under these circumstances a termination payment becomes due from the Hospital to the interest rate swap provider, such amount could potentially have a material impact on future financial position, results of operations and liquidity of the Hospital.

The Hospital is exposed to credit loss in the event of nonperformance by the interest rate swap provider to the remaining interest rate swap agreement. However, the Hospital does not anticipate nonperformance by the counterparty. The fair value of the remaining interest rate swap agreement is a liability of \$24,135,957 and \$18,497,509 on June 30, 2010 and 2009, respectively. Settlements of the interest rate swap are semi-annual. The June 30, 2010 net settlement payment of \$1,657,596 is accrued in accounts payable and accrued expenses in the accompanying consolidated balance sheets. Net settlement payments are reported as a component of interest cost with the exception of instruments used to support the plan of finance for the new clinical tower. These related settlements are capitalized as part of the project during the construction period

In August 2010, the Hospital entered into an amendment to the interest rate swap agreement whereby the Hospital paid the counterparty \$2,522,000 to reduce the notional amount of the interest rate swap by ten percent (to \$67,500,000). The \$2,522,000 payment will be reported as a realized loss in the 2011 consolidated statements of operations and other changes in unrestricted net assets.

Letter of Credit

In conjunction with the issuance of the 2008 Series Bonds, management entered into a letter of credit reimbursement agreement with a commercial lender that expired in May 2010. Letter of credit fees were paid quarterly, and were reported as a component of interest cost with the exception of instruments used to support the plan of finance for the new clinical tower. These related fees were capitalized as part of the project during the construction period.

Note G - Medical Malpractice and Workers' Compensation Insurance

From October 18, 2001 to October 31, 2004, the Hospital maintained occurrence-based professional liability insurance with a per-claim limit of \$8,000,000 and aggregate annual limit of \$10,000,000 with a commercial carrier. The Hospital was liable for a deductible up to \$250,000 for each occurrence up to a maximum of \$750,000. Prior to October 18, 2001, the Hospital's policy had no deductible. Effective November 1, 2004, due to the commercial carrier discontinuing services in Maryland and rising insurance costs, the Hospital purchased coverage on a claims-made basis from Freestate Healthcare Insurance Company, Ltd., a group captive formed by several Maryland hospitals. The hospital owns a 1/8 interest in the captive that is accounted for using the cost method. The cost of \$15,000 is recorded in other assets for 2010 and 2009. Premiums are expensed as incurred and are established based on the Hospital's historical experience supplemented as necessary with industry experience. The total premium is allocated to each of the shareholder's based on their experience. Retrospective premium assessments and credits are calculated based on the aggregate experience of all named insureds under the policy. Each named insured's assessment of credit is based on the percentage of their actual exposure to the actual exposure of all named insureds. In management's opinion, the assets of Freestate are sufficient to meet its obligations as of June 30, 2010 If the financial condition of Freestate were to materially deteriorate in the future, and Freestate was unable to pay its claim obligations, the responsibility to pay those claims would return to the member hospitals.

The captive is responsible for claims up to \$1,000,000 for each and every loss event. Excess coverage has been purchased for all claims in excess of \$1,000,000 to a limit of \$6,000,000 effective March 1, 2006. The liability for all known claims and an estimate for claims incurred but not reported was \$1,145,208 and \$1,361,490 at June 30, 2010 and 2009, respectively. These amounts are included in accounts payable and accrued expenses in the accompanying consolidated balance sheet.

The Hospital is self-insured against workers' compensation claims up to a per-accident limit of \$400,000 and an annual limit of \$1,121,720. A liability has been recorded for all known claims and an estimate for claims incurred but not reported in the amount of \$679,114 and \$477,147 at June 30, 2010 and 2009, respectively. These amounts are included in accounts payable and accrued expenses in the accompanying consolidated balance sheet.

Note H – Leases

The Hospital has operating leases covering various medical and other equipment and facilities. Generally, the leases carry renewal provisions and require the Hospital to pay maintenance costs.

The Hospital and DRCC have entered into capital leases for certain equipment. The cost of assets under the capital leases is included in land, buildings, and equipment (see *Note E*), and the related capital lease obligations are included in long-term debt (see *Note F*) in the accompanying consolidated balance sheets. Depreciation expense on these assets is included with depreciation and amortization in the consolidated statements of operations and other changes in unrestricted net assets.

Note H - Leases - Continued

Future minimum lease payments as of June 30, 2010 are as follows:

	Cap	ital Leases	Oper	ating Leases
2011	\$	483,142	\$	604,133
2012		22,073		502,937
2013		0		173,279
2014		0		58,137
2015		0		0
2016 and thereafter		0		0
Total minimum lease payments		505,215		1,338,486
Current portion of long-term debt		(483,142)		
Capital lease obligations, less current portion	\$	22,073		

Total rental expense for the years ended June 30, 2010 and 2009 was \$2,120,190 and \$2,054,388, respectively.

Note I – Retirement Plans

The Hospital has a defined benefit pension plan (the Plan) covering substantially all employees. The benefits are based on years of service and the employee's compensation during years of employment. The Hospital's funding policy is to make sufficient contributions to the Plan to comply with the minimum funding provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The Hospital expects to contribute \$1,000,000 to the Plan during 2010. The measurement date of the Plan is June 30.

Note I - Retirement Plans - Continued

The following table provides a reconciliation of the benefit obligation, Plan assets, and funded status of the Plan in the Company's consolidated financial statements based on actuarial valuations:

	 2010		2009
Accumulated Benefit Obligation	\$ 16,816,115	\$	14,164,302
Change in Benefit Obligation			
Benefit obligation at beginning of year	\$ 14,761,171	\$	12,832,903
Service cost	1,197,246		1,365,540
Interest cost	876,049		916,861
Actuarial (gain) loss	592,967		193,287
Benefits paid	(305,282)		(547,420)
Benefit Obligation at End of Year	17,122,151		14,761,171
Change in Plan Assets			
Fair value of plan assets at beginning of year	\$ 7,442,032	\$	8,755,393
Actual return on plan assets	(257,242)		(2,077,989)
Employer contributions	3,075,741		1,312,048
Benefits paid	(305,282)		(547,420)
Fair Value of Plan Assets at End of Year	9,955,249		7,442,032
Funded Status (Pension Obligation)	\$ (7,166,902)	_\$_	(7,319,139)
Components of Net Periodic Benefit Cost			
Service cost	\$ 1,197,246	\$	1,365,540
Interest cost	876,049		916,861
Expected return on plan assets	(598,055)		(851,076)
Amortization of prior service cost	12,049		15,061
Recognigiton of loss from change in measurement date	485,036		332,106
Net Periodic Pension Cost	\$ 1,972,325	\$	1,778,492

Note I - Retirement Plans - Continued

The total amount recognized in unrestricted net assets for 2010 and 2009 is as follows:

	 2010	 2009
Net loss	\$ 7,658,328	\$ 6,695,100
Prior service cost	 100,366	 112,415
	\$ 7,758,694	\$ 6,807,515

The total amount of prior service cost and net gain (loss) expected to be recognized in net periodic benefit cost during 2011 is \$570,894.

The Plan's assets are invested primarily in cash and cash equivalents and mutual funds as follows as of June 30:

	2010	2009
Cash and cash equivalents	53%	0%
Mutual funds	47%	100%
	100%	100%

Plan assets are invested to ensure that the Plan has the ability to pay all benefit and expense obligations when due, to maximize return within prudent levels of risk for pension assets and to maintain a funding cushion for unexpected developments. The target weighted-average asset allocation of pension investments is 70% equities and 30% debt securities and cash as of June 30, 2010. The target weighted-average asset allocation of pension investments for future periods will be 50% equities and 50% debt securities.

The Plan's estimated future benefit payments are as follows:

2011	\$ 317,328
2012	570,346
2013	1,208,955
2014	759,426
2015	859,621
2016-2020	8,720,266
Total	\$ 13,222,685

Note I - Retirement Plans - Continued

The weighted-average assumptions used to determine net periodic benefit cost and the projected benefit obligation for the years ended June 30 were as follows:

_	2010	2009
Discount rate	5.25%	6.00%
Expected return on Plan assets	7.50%	8.00%
Rate of compenstion increase	2.00%	5 00%

The Company's management considers the balance of plan assets of \$9,955,249 as of June 30, 2010 to be based on level 1 fair value measures. Plan assets as of June 30, 2010 consists of cash and cash equivalents and mutual funds.

The Hospital has a deferred compensation plan that permits certain executives to defer receiving a portion of their compensation. The deferred amounts are included in other assets in the accompanying balance sheets. The associated liability of an equal amount is included in other liabilities. The liability recorded regarding the deferred compensation was \$2,922,352 and \$2,922,352 as of June 30, 2010 and 2009, respectively. During 2010 and 2009, distributions of \$77,677 and \$1,149,508 were made to participants in the plan, respectively.

The Hospital is the beneficiary of life insurance policies in place for certain executives. Approximately \$9,200,000 is included in other assets at June 30, 2010 and 2009, which is the amount that could be realized by the Hospital under the insurance contracts.

Note J - Maryland Health Services Cost Review Commission

Certain of the Hospital's charges are subject to review and approval by the Maryland Health Services Cost Review Commission (the Commission). Hospital management has filed the required forms with the Commission and believes the Hospital is in compliance with Commission requirements.

The current rate of reimbursement for principally all inpatient services and certain other services to patients under the Medicare and Medicaid programs is based on an agreement between the Centers for Medicare and Medicaid Services and the Commission. This agreement is based upon a waiver from Medicare reimbursement principles under Section 1814(b) of the Social Security Act and will continue as long as all third-party payers elect to be reimbursed under this program and the rate of increase for costs per hospital inpatient admission is below the national average. Management believes that this program will remain in effect at least through June 2011.

Note J - Maryland Health Services Cost Review Commission - Continued

The Commission and the Hospital entered into an agreement that is based on a rate methodology for those Hospital service centers that provide only inpatient services. Under this methodology, a target average charge per case is established for the Hospital, based on past actual charges and case mix indices. The actual average charge per case is compared with the target average charge-per-case and to the extent that the actual average exceeds the target, the overcharge plus applicable penalties will reduce the approved target for future years. At June 30, 2010, the Hospital was in compliance with its average charge per case target.

The Commission's rate-setting methodology for Hospital service centers that provide both inpatient and outpatient services or only outpatient services consists of establishing an acceptable unit rate for defined inpatient and outpatient service centers within the Hospital. The actual average unit charge for each service center is compared to the approved rate monthly Overcharges and undercharges due to either patient volume or price variances, plus penalties where applicable, are applied to decrease (in the case of overcharges) or increase (in the case of undercharges) future approved rates on an annual basis.

The Commission changed the charge-per-case reimbursement methodology for all Maryland hospitals effective July 1, 2005. The Commission chose a severity-adjusted method of grouping hospital discharges to measure differences in patient acuity and to align payments appropriately to that acuity. This policy decision reflects the Commission's desire to continuously improve the rate-setting system and to remain a leader in the development of policies that ensure cost containment, access to care, equity in payment, and financial stability of the hospital industry.

The timing of the Commission's rate adjustments for the Hospital could result in an increase or reduction in rates due to the variances and penalties described above in a year subsequent to the year in which such items occur. The Hospital's policy is to accrue revenue based on actual charges for services to patients in the year in which the services to patients are performed and billed

Note K – Commitments and Contingencies

Litigation

There are several lawsuits pending in which the Hospital has been named as defendant. In the opinion of Hospital management, after consultation with legal counsel, the potential liability, in the event of adverse settlement, will not have a material impact on the Hospital's consolidated financial position.

Note K – Commitments and Contingencies – Continued

Risk Factors

The Hospital's ability to maintain and/or increase future revenues could be adversely affected by:

- the growth of managed care organizations promoting alternative methods for health care delivery and payment of services such as discounted fee for service networks and capitated fee arrangements (the rate setting process in the State of Maryland prohibits hospitals from entering into discounted fee arrangements; however, managed care contracts may provide for exclusive service arrangements);
- proposed and/or future changes in the laws, rules, regulations, and policies relating to the definition, activities, and/or taxation of not-for-profit tax-exempt entities;
- the enactment into law of all or any part of the current budget resolutions under consideration by Congress related to Medicare and Medicaid reimbursement methodology and/or further reductions in payments to hospitals and other health care providers;
- the future of Maryland's Certificate of Need program, where future deregulation could result in the entrance of new competitors, or future additional regulation may eliminate the Corporation's ability to expand new services; and
- the ultimate impact of the federal Patient Protection and Affordable Care Act and the Health Care Education Affordability Reconciliation Act of 2010.

The Joint Commission, a non-governmental privately owned entity, provides accreditation status to hospitals and other health care organizations in the United States. Such accreditation is based upon a number of requirements such as undergoing periodic surveys conducted by Joint Commission personnel. Certain managed care payers require hospitals to have appropriate Joint Commission accreditation in order to participate in those programs. In addition, the Center for Medicare and Medicaid Services (CMS), the agency with oversight of the Medicare and Medicaid programs, provides "deemed status" for facilities having Joint Commission accreditation. By being Joint Commission accredited, facilities are "deemed" to be in compliance with the Medicare and Medicaid conditions of participation. Termination as a Medicare provider or exclusion from any or all of these programs/payers would have a materially negative impact on the future financial position, operating results and cash flows of the Hospital. In April 2010 the Hospital was surveyed by Joint Commission and received a full three-year Joint Commission accreditation through July 2013.

Note K – Commitments and Contingencies – Continued

During September 2008, certain large U.S. financial institutions failed, primarily as a result of holdings in troubled subprime loans or assets collateralized with such distressed loans. These institutional failures, and the negative economic conditions that contributed to these failures, generated substantial volatility in global financial markets and substantial uncertainty regarding access to capital and the continued viability of many other financial institutions. Despite the federal legislative initiatives to ameliorate these conditions, global credit markets remain volatile and the health of the global economy continues to be uncertain. These conditions create uncertainty regarding the future valuation of the Hospital's invested funds and the resulting impact on the future financial position, results of operations and cash flows of the Hospital could be material. In response to these circumstances, the Hospital completely disinvested its equity security holdings during October 2008, resulting in an impairment loss in excess of \$10 million.

The Company invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in values of investment securities will occur in the near term, and such changes could materially affect the amounts reported as investments on the consolidated balance sheets.

Note L – Goodwill

During June 2007, the Hospital purchased a 60% interest in DRCC. Goodwill in the amount of \$1,062,531 resulted from the transaction and has been included in the accompanying consolidated balance sheets as of June 30, 2010 and 2009.

Upon inception of DRCC in 2007, and as part of its initial capital contribution, Maryland Regional Cancer Care, LLC, the founding member of DRCC, transferred a portion of its goodwill to DRCC. The amount of goodwill transferred to DRCC was \$646,975 and has been included in the accompanying consolidated balance sheets at June 30, 2010 and 2009.

Health Ventures has a 51% ownership interest in Magnolia Gardens, LLC Goodwill in the amount of \$766,285 resulted from the purchase of ownership and has been included in the accompanying consolidated balance sheets as of June 30, 2010 and 2009.

Note M - Temporarily Restricted Net Assets

Temporarily restricted net assets are available for the years ended June 30 for the following programs and projects.

	2010	2009
Nancy Heilman Scholarship Fund	\$ 1,479	\$ 1,479
Brian Erfan Memorial Fund	5,850	5,850
Jane Schafer Scholarship Fund	10,785	9,956
Cardıac Rehab Scholarship	12,648	10,133
UASI 2008 grant	92,930	 0
	\$ 123,692	\$ 27,418



Report of Independent Auditors on Other Financial Information

Board of Directors Doctors Community Hospital and Subsidiaries Lanham, Maryland

Cohen, Rutherford + Knight, P.C.

The 2010 and 2009 audited consolidated financial statements of Doctors Community Hospital and Subsidiaries and our report thereon are presented in the preceding section of this report. Those audits were conducted for the purpose of forming an opinion on the basic consolidated financial statements taken as a whole. The supplementary information presented hereinafter as of and for the year ended June 30, 2010 is presented for purposes of additional analysis of the basic consolidated financial statements, and is not a required part of the basic consolidated financial statements. Accordingly, we do not express an opinion on the supplementary consolidating information. However, such information has been subjected to the auditing procedures applied in the audit of the basic consolidated financial statements and, in our opinion, is fairly stated in all material respects in relation to the consolidated financial statements taken as a whole.

October 19, 2010

Consolidating Balance Sheet Information

Doctors Community Hospital and Subsidiaries

June 30, 2010

Consolidated	\$ 14,521,680 4,682,633 20,757,705 2,175,209 2,772,283 1,265,039 46,174,549	1,662,786 26,739,456 0 2,182,857 0 28,922,313	32,790,163 138,555,389 · 3,542,287 2,475,791 14,083,757 \$ 268,207,035
Eliminations	\$ 0 0 (42,685) (192,599) 0 0 0 0	0 (2,132,900) (899,765) 0 (5,180,666) (8,213,331)	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Spine Team Maryland, LLC	\$ 8,555 0 42,322 0 0 0 0 0 51,144		0 104,036 0 0 0 0 0 0 0 0 155,180
Doctors Community Hospital Sleep Center, LLC	\$ 422,985 0 76,447 140,170 82,044 0 721,646	0 0 0 638,922 638,922	500,827 0 0 0 0 0 0 0 8
Doctors Regional Cancer Center, LLC	\$ 577,007 0 630,318 118,747 0 111,867	0 0 0 0 0 0	0 6,540,798 0 646,975 0 \$ 8,625,712
Doctors Community Health Ventures, Inc	\$ 90,308 0 374,416 0 6,173 0 6,173	1,662,786 0 0 2,182,857 0 2,182,857	0 615,294 0 766,285 10,000 \$ 5,708,119
Doctors Community Hospital Foundation, Inc.	\$ 166,633 0 0 209,807 0 4,866 381,306	163,489 0 0 0 0 0 0 0	0 0 0
Doctors Community Hospital	\$ 13,256,192 4,682,633 19,676,887 1,899,084 2,684,066 1,148,039 43,346,901	26,575,967 2,132,900 899,765 0 4,541,744 34,150,376	32,790,163 130,794,434 3,542,287 1,062,531 14,173,757 \$ 259,860,449
ASSETS	CURRENT ASSETS Cash and cash equivalents Assets limited to use for debt service Patient accounts receivable, net of allowance Other amounts receivable Inventories Prepaid expenses TOTAL CURRENT ASSETS	NOTES RECEIVABLE INVESTMENTS Marketable securities Investment in Doctors Regional Cancer Center Investment in Sleep Services of America, Inc Joint ventures and equity investments Due to DCH	ASSETS WHOSE USE IS LIMITED Funds held by Trustee or Authority, less current portion 32,790,163 LAND, BUILDINGS, AND EQUIPMENT 130,794,434 DEFERRED FINANCING COSTS 3,542,287 GOODWILL OTHER ASSETS 10,062,531 TOTAL ASSETS 259,860,4449

See the accompanying report of independent auditors on other financial information.

Consolidating Balance Sheet Information **Doctors Community Hospital and Subsidiaries**June 30, 2010

,	Doctors Community	Doctors Community Hospital		Doctors Regional Cancer	Doctors Community Hospital Sleep	Spine Team		-
LIABILITIES AND NET ASSETS	Hospital	Foundation, Inc.	Ventures, Inc	Center, LLC	Center, LLC	Maryland, LLC	Cuminations	Consolidated
CURRENT LIABILITIES								
Accounts payable and accrued expenses	\$ 17,812,823	\$ 610	\$ 172,025	\$ 502,723	\$ 320,856	\$ 69,274	\$ (638,742)	\$ 18,239,569
Due to DCH	0	513,423	192,599	109,070	40,931	265,886	(1,121,909)	0
Salaries, wages, and related items	10,069,042	0	142,059	0	0	0	0	10,211,101
Advances from thard party payers	5,998,161	0	0	0	0	0	0	5,998,161
Interest rate swap	24,135,956	0	0	0	0		0	24,135,956
Interest payable to bondholders	4,294,765	0	0	0	0	0	0	4,294,765
Current portion of long-term obligation	2,372,985	0	0	927,859	0	0	0	3,300,844
TOTAL CURRENT LIABILITIES	64,683,732	514,033	506,683	1,539,652	361,787	335,160	(1,760,651)	66,180,396
NONCURRENT LIABILITIES								
Other noncurrent lablities	3,602,329	0	0	327,209	0	0	(327,209)	3,602,329
Pension obligation, net of current portion	7,166,902	0	0	0	0	0	0	7,166,902
Long-term obligations, net of current portion	154,072,491	0	3,328,090	3,204,017	0	0	(3,328,090)	157,276,508
TOTAL LIABILITIES	229,525,454	514,033	3,834,773	5,070,878	361,787	335,160	(5,415,950)	234,226,135
NO NCO NTROLLING INTEREST	0	0	0	0	0	0	2,021,777	2,021,777
NET ASSETS AND MEMBERS' EQUITY								
Unrestacted	30,242,065	0	0	0	0	0	1,593,366	31,835,431
Members' equity	0	0	1,873,346	3,554,834	1,499,608	(179,980)	(6,747,808)	0
Temporarily restricted	92,930	30,762	0	0	0	0	0	123,692
TOTAL NET ASSETS	30,334,995	30,762	1,873,346	3,554,834	1,499,608	(179,980)	(5,154,442)	31,959,123
	\$ 259,860,449	\$ 544,795	\$ 5,708,119	\$ 8,625,712	\$ 1,861,395	\$ 155,180	\$ (8,548,615)	\$ 268,207,035

See the accompanying report of independent auditors on other financial information.

Consolidating Statement of Operations Information **Doctors Community Hospital and Subsidiaries**

For the Year Ended June 30, 2010

		Doctors	Doctors	Doctors	Doctors			
	Doctors Community Hospital	Community Hospital Foundation, Inc	Community Health Ventures, Inc	Cancer Center, LLC	Community Hospital Sleep Center, LLC	Spine Team Maryland, LLC	Eliminations	Consolidated
UNRESTRICTED NET ASSETS								
OPERATING REVENUE								
Net patient service revenue	\$ 176,393,377	0 8	\$ 1,783,439	\$ 5,862,331	\$ 7,662,609	\$ 42,322	0	\$ 191,744,078
Other operating revenue	7,313,282	915	357,865	0	0	0	(1,515,790)	6,156,272
Medges and contrabutions	0	207,351	0	0	0	0	0	207,351
Investment income from subsidiary	2,808,738	0	0	0	0	0	(2.808,738)	0
Net assets released from restnations used for operations	335,301	0	0	0	0	0	0	335,301
TOTAL OPERATING REVENUE	186,850,698	208,266	2,141,304	5,862,331	7,662,609	42,322	(4,324,528)	198,443,002
EXPENSES								
Salanes and wages	74,964,383	108,924	0	0	827,577	55,284	0	75,956,168
Employee benefits	14,846,627	0	0	0	165,477	0	0	15,012,104
Purchased services	24,162,943	34,067	212,742	4,192,623	484,610	57,146	0	29, 144, 131
Supplies	32,403,330	2,281	0	127,764	376,888	16,433	0	32,926,696
Other expenses	7,079,862	23,345	3,026,009	688,509	398,124	92,072	(1,515,790)	9,792,131
Provision for bad debts	15,951,504	2,000	0	117,185	0	0	0	16,070,689
Depredation	8,014,955	0	95,429	997,104	151,532	1,367	0	9,260,387
Amortization	138,278	0	0	0	0	0	0	138,278
Fundrausing	0	293,467	0	0	0	0	0	293,467
Interest	6,074,596	0	0	316,317	0	0	0	6,390,913
TOTAL EXPENSES	183,636,478	464,084	3,334,180	6,439,502	2,404,208	222,302	(1,515,790)	194,984,964
NONOPERATING INCOME Unrealized pain on trading securities	542,496	0	0	0	0	0	0	542,496
Change in fair value of interest rate swap	(5,638,447)	0	0	0	0	0	0	(5,638,447)
EXCESS OF REVENUE OVER EXPENSE								
BEFORE NONCONTROLLING INTEREST	(1,881,731)	(255,818)	(1,192,876)	(577,171)	5,258,401	(179,980)	(2,808,738)	(1,637,913)
Nonwantrolling interest	0	0	0	0	0	0	(1,872,492)	(1,872,492)
EXCESS OF REVENUE OVER EXPENSE (EXPENSES OVER REVENUE)	(1,881,731)	(255,818)	(1,192,876)	(577,171)	5,258,401	(179,980)	(4,681,230)	(3,510,405)
Net asset transfer	99,285	(99.285)	0	0	0	0	0	0
Dividends paid	0	0	0	0	(5,430,424)	0	5,430,424	0
Contabutions	328,946	358,512	0	0	0	0	0	687,458
Net assets released from restractions for use in operations	(335,301)	0	0	0	0	0	0	(335,301)
Pension - related changes other than net penodic pension wst	(951,159)	0	0	0	0	0	0	(951,159)
Increase (decrease) in net assets	(2,739,960)	3,409	(1,192,876)	(577,171)	(172,023)	(179,980)	749,194	(4,109,407)
Net assets, beginning of year	33,074,955	27,353	3,066,222	4,132,005	1,671,631	0	(5,903,636)	36,068,530
Net assets, end of year	\$ 30,334,995	\$ 30,762	\$ 1,873,346	\$ 3,554,834	\$ 1,499,608	(179,980)	\$ (5,154,442)	\$ 31,959,123
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See the accompanying report of independent auditors on other financial information.