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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 07-01-2010 and ending 06-30-2011

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization
CAMDEN-CLARK MEMORIAL HOSPITAL CORPORATION

Doing Business As
CAMDEN CLARK MEDICAL CENTER

Number and street (or P O box if mail is not delivered to street address) 800 GARFIELD AVENUE | Room/suite

City or town, state or country, and ZIP + 4
PARKERSBURG, WV 26101

D Employer identification number
31-1524546

E Telephone number
(304)424-2202

G Gross receipts $ 258,812,865

F Name and address of principal officer
MICHAEL A KING
800 GARFIELD AVE
PARKERSBURG, WV 26102

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW CCMH ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1997

M State of legal domicile WV

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
TO OPERATE AN ACUTE CARE AND EMERGENCY HOSPITAL FACILITY

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	6
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	5
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	1,735
6	Total number of volunteers (estimate if necessary)	6	450
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	3,057,656
b	Net unrelated business taxable income from Form 990-T, line 34	7b	561,355

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	290,515	600,434
	9	Program service revenue (Part VIII, line 2g)	165,218,470	187,334,388
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4,355,868	7,155,188
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,828,114	29,180,590
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	171,692,967	224,270,600
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	29,600	52,250
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	70,209,369	80,850,969
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶0		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	106,243,143	117,590,016
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	176,482,112	198,493,235
	19	Revenue less expenses Subtract line 18 from line 12	-4,789,145	25,777,365
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	260,632,900	384,699,358
	21	Total liabilities (Part X, line 26)	170,531,779	262,515,526
	22	Net assets or fund balances Subtract line 21 from line 20	90,101,121	122,183,832

Part II Signature Block

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

Sign Here

****** | 2012-08-15
Signature of officer | Date

ALLEN R BUTCHER CFO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name SUSAN S DULL	Preparer's signature SUSAN S DULL	Date	Check if self-employed ▶ ☐	PTIN
Firm's name ▶ DIXON HUGHES GOODMAN LLP			Firm's EIN ▶
Firm's address ▶ PO BOX 1556 MORGANTOWN, WV 265071556			Phone no ▶ (304) 292-7343

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III **Statement of Program Service Accomplishments**

Check if Schedule O contains a response to any question in this Part III . . . . ☐

1 Briefly describe the organization's mission

THE MISSION OF CAMDEN-CLARK MEMORIAL HOSPITAL IS TO MEET THE HEALTH CARE NEEDS OF OUR COMMUNITY FOR A LIFETIME

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

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 183,145,085 including grants of $ 52,250) (Revenue $ 211,872,766)

SEE SCHEDULE O

4b (Code) (Expenses $ including grants of $) (Revenue $)

4c (Code) (Expenses $ including grants of $) (Revenue $)

4d Other program services (Describe in Schedule O)

(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses** ▶$ 183,145,085

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	2	Yes	
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		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *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," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
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		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	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.*	11b		No
c	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.*	11c		No
d	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.*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*	11e	Yes	
f	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 (ASC 740)? *If "Yes," complete Schedule D, Part X.*	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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, Parts I and IV*	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the U S ? *If "Yes," complete Schedule F, Parts II and IV*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the U S ? *If "Yes," complete Schedule F, Parts III and IV*	16		No
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 (see instructions)*	17		No
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		No
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		No
20a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a	Yes	
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	Yes	

Part 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	Yes	
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		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b–24d and complete Schedule K. If "No," go to line 25*	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	Yes	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
b	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		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 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		No
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)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c	Yes	
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
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		No
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	Yes	
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Yes	
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2* ☐ **Yes** ☑ **No**			
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		No
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		No
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	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V . . . . ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	1a	214			
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c		
2a	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	1,735			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)					
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			3b	Yes	
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		No
b	If "Yes," enter the name of the foreign country ▶ See instructions for 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		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?			6a		No
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).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			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		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**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				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

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

Check if Schedule O contains a response to any question in this Part VI . . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	6		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	5		
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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		No
6	Does the organization have members or stockholders?		6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	Yes	
b	Each committee with authority to act on behalf of the governing body?		8b	Yes	
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		9		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
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		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	Yes	
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	Yes	

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶WV

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available Check all that apply

☐ Own website ☑ Another's website ☑ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶

BRIAN R STANDLEY
800 GARFIELD AVENUE
PARKERSBURG, WV 26102
(304) 424-2635

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

Check if Schedule O contains a response to any question in this Part VII . . . .

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any 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 neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) LAURENCE MALLORY CHAIRMAN OF THE BOARD	1 00	X						0	0	0
(2) TERRY CAPEL MD BOARD MEMBER	1 00	X						0	0	0
(3) KATHY G EDDY SECRETARY	1 00	X		X				0	0	0
(4) RONALD ROBERTS BOARD MEMBER	1 00	X						0	0	0
(5) MICHAEL MOREHEAD MD BOARD MEMBER	1 00	X						0	0	0
(6) GREG GORE BOARD MEMBER	1 00	X						0	0	0
(7) JENNIFER LEAVITT DO BOARD MEMBER	1 00	X						0	0	0
(8) MICHAEL A KING PRESIDENT	40 00			X				654,956	0	54,876
(9) ALLEN R BUTCHER TREASURER	40 00			X				370,532	0	15,011
(10) TODD A KRUGER VICE PRESIDENT	40 00			X				339,031	0	18,966
(11) DAVID MCCLURE VP OF OPERATIONS	40 00			X				211,361	0	11,532
(12) TOM HELLER VP OF HR	40 00			X				241,471	0	13,470
(13) CYNTHIA KERN VP OF QUALITY	40 00			X				152,047	0	9,570
(14) PAMELA MINCKS PHARMACIST	40 00					X		125,220	0	8,482
(15) GENE SEXTON PHARMACIST	40 00					X		124,497	0	10,699
(16) JOSHUA WOODS CHIEF INFORMATION OFFICER	40 00					X		116,346	0	9,221

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(17) SHAUN CARTER PHARMACY MANAGER	40 00					X		118,131	0	11,283
(18) BRIAN STANDLEY DIRECTOR OF FINANCE	40 00					X		112,157	0	9,152
(19) PAUL MODIE MD BOARD MEMBER	1 00						X	0	0	0
1b Sub-Total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶								2,565,749	0	172,262

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶17

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ECLIPSYS CORPORATION THREE RAVINIA DRIVE ATLANTA, GA 30346	SOFTWARE CONSULTING	3,268,996
CANDESCENT HEALING LLC 32 ELM PLACE SUITE 1 SOUTH RYE, NY 10580	WOUND CARE SERVICES	1,452,837
HMP OF WOOD COUNTY 4535 DRESSLER RD NW CANTON, OH 47718	HOSPITALISTS	1,245,979
QUEST DIAGNOSTICS 12436 COLLECTION CENTER DRIVE CHICAGO, IL 60693	LABORATORY SERVICES	1,111,898
JARVIS DOWNING AND EMCH INC PO BOX 6253 WHEELING, WV 26003	CONTRACTOR	1,092,198

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶23

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	1a Federated campaigns . . . 1a					
	b Membership dues 1b					
	c Fundraising events 1c					
	d Related organizations . . . 1d					
	e Government grants (contributions) 1e					
	f All other contributions, gifts, grants, and similar amounts not included above 1f	600,434				
	g Noncash contributions included in lines 1a-1f $					
	h **Total.** Add lines 1a-1f . . . . ▶		600,434			
Program Service Revenue		Business Code				
	2a PATIENT SERVICE,NET	621500	187,071,707	184,667,874	2,403,833	
	b AMBULANCE FEES	621910	235,110	235,110		
	c COMMUNITY SERVICE	624200	27,571	27,571		
	d					
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a–2f . . . . ▶		187,334,388			
Other Revenue	3 Investment income (including dividends, interest and other similar amounts) . . . . . ▶		2,455,623			2,455,623
	4 Income from investment of tax-exempt bond proceeds . . ▶		28,254			28,254
	5 Royalties . . . . ▶					
		(i) Real / (ii) Personal				
	6a Gross Rents	867,487 /				
	b Less rental expenses	457,070 /				
	c Rental income or (loss)	410,417 /				
	d Net rental income or (loss) . . . . ▶		410,417			410,417
		(i) Securities / (ii) Other				
	7a Gross amount from sales of assets other than inventory	38,755,630 / 876				
	b Less cost or other basis and sales expenses	34,085,195 /				
	c Gain or (loss)	4,670,435 / 876				
	d Net gain or (loss) . . . . ▶		4,671,311			4,671,311
	8a Gross income from fundraising events (not including $ ______ of contributions reported on line 1c) See Part IV, line 18 . . . a					
	b Less direct expenses . . . b					
	c Net income or (loss) from fundraising events . . ▶					
	9a Gross income from gaming activities See Part IV, line 19 . a					
	b Less direct expenses . . . . b					
	c Net income or (loss) from gaming activities . . . ▶					
	10a Gross sales of inventory, less returns and allowances . a					
	b Less cost of goods sold . . b					
	c Net income or (loss) from sales of inventory . . ▶					
	Miscellaneous Revenue	Business Code				
	11a GAIN ON ASSET ACQUISIT	900099	26,414,074	26,414,074		
	b CAFETERIA	624200	1,156,553			1,156,553
	c FAMILY FITNESS CENTER	713940	653,823		653,823	
	d All other revenue		545,723	528,137		17,586
	e **Total.** Add lines 11a–11d . . . . . . ▶		28,770,173			
	12 **Total revenue.** See Instructions . . . ▶		224,270,600	211,872,766	3,057,656	8,739,744

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	52,250	52,250		
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				
5	Compensation of current officers, directors, trustees, and key employees	2,092,823	547,171	1,545,652	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	59,936,250	55,141,350	4,794,900	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	3,059,795	2,815,011	244,784	
9	Other employee benefits	10,925,337	10,051,310	874,027	
10	Payroll taxes	4,836,764	4,449,823	386,941	
a	Fees for services (non-employees) Management	1,512,178	1,391,204	120,974	
b	Legal	239,568	239,568		
c	Accounting	350,946	350,946		
d	Lobbying				
e	Professional fundraising services *See Part IV, line 17* . .				
f	Investment management fees				
g	Other	9,246,597	8,506,869	739,728	
12	Advertising and promotion	585,488	538,649	46,839	
13	Office expenses	41,275,292	37,973,269	3,302,023	
14	Information technology	2,770,662	2,549,009	221,653	
15	Royalties . .				
16	Occupancy	4,475,113	4,117,104	358,009	
17	Travel	2,997	2,757	240	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	43,712	40,215	3,497	
20	Interest	6,351,932	5,843,777	508,155	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	14,371,291	13,221,588	1,149,703	
23	Insurance	6,581,911	6,055,358	526,553	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	PATIENT CHARGES	12,363,240	12,363,240		
b	PROVISION FOR BAD DEBTS	7,671,387	7,671,387		
c	DIAGNOSTIC TESTING	3,191,801	3,191,801		
d					
e					
f	All other expenses	6,555,901	6,031,429	524,472	
25	**Total functional expenses.** Add lines 1 through 24f	198,493,235	183,145,085	15,348,150	0
26	**Joint costs.** Check here ▶ ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X **Balance Sheet**

			(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing	76,829	1	1,586,700
	2	Savings and temporary cash investments	9,843,323	2	4,015,681
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	17,017,894	4	34,799,058
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	17,972	5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Schedule L		6	
	7	Notes and loans receivable, net	1,393,564	7	1,353,423
	8	Inventories for sale or use	3,607,758	8	7,243,062
	9	Prepaid expenses and deferred charges	2,059,143	9	2,196,301
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D* — 10a: 392,377,756			
	b	Less accumulated depreciation — 10b: 165,585,350	125,329,531	10c	226,792,406
	11	Investments—publicly traded securities	96,153,755	11	102,540,449
	12	Investments—other securities See Part IV, line 11	258,743	12	347,336
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	4,874,388	15	3,824,942
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	260,632,900	16	384,699,358
Liabilities	17	Accounts payable and accrued expenses	10,599,648	17	20,713,596
	18	Grants payable		18	
	19	Deferred revenue	62,476	19	62,792
	20	Tax-exempt bond liabilities	110,720,610	20	192,486,219
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*		22	
	23	Secured mortgages and notes payable to unrelated third parties	3,886,981	23	528,248
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D	45,262,064	25	48,724,671
	26	**Total liabilities.** Add lines 17 through 25	170,531,779	26	262,515,526
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	90,101,121	27	122,183,832
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	90,101,121	33	122,183,832
	34	Total liabilities and net assets/fund balances	260,632,900	34	384,699,358

Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI . . . . ☑

1	Total revenue (must equal Part VIII, column (A), line 12) . . .	1	224,270,600
2	Total expenses (must equal Part IX, column (A), line 25)	2	198,493,235
3	Revenue less expenses Subtract line 2 from line 1	3	25,777,365
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	90,101,121
5	Other changes in net assets or fund balances (explain in Schedule O)	5	6,305,345
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	122,183,832

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII . . . . ☐

			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		No
b	Were the organization's financial statements audited by an independent accountant?	2b		No
c	If "Yes," to 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 separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated 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		No
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		

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SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

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

2010

Open to Public Inspection

Name of the organization
CAMDEN-CLARK MEMORIAL HOSPITAL CORPORATION

Employer identification number
31-1524546

Part I 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)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☑ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ 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

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ 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)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 33 1/3% 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 33 1/3% 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).**

11 ☐ 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

a ☐ Type I **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)

f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the 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 the supported organization?	**11g(i)**		
(ii) a family member of a person described in (i) above?	**11g(ii)**		
(iii) a 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	**(ii)** EIN	**(iii)** Type of organization (described on lines 1- 9 above or IRC section **(see instructions)**)	**(iv)** Is the organization in col (i) listed in your governing document? Yes	No	**(v)** Did you notify the organization in col (i) of your support? Yes	No	**(vi)** Is the organization in col (i) organized in the U S ? Yes	No	**(vii)** Amount of support
Total									

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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						
5 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)						
6 **Public Support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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)						

12 Gross receipts from related activities, etc (See instructions) | **12** |

13 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2010 (line 6 column (f) divided by line 11 column (f)) | **14** |

15 Public Support Percentage for 2009 Schedule A, Part II, line 14 | **15** |

16a **33 1/3% support test—2010.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support test—2009.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2010.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2009.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

18 **Private Foundation** If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶☐

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	**(a)** 2006	**(b)** 2007	**(c)** 2008	**(d)** 2009	**(e)** 2010	**(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						
c Add lines 7a and 7b						
8 **Public Support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	**(a)** 2006	**(b)** 2007	**(c)** 2008	**(d)** 2009	**(e)** 2010	**(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 carried 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)						

14 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2010** (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from **2009** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2010.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support tests—2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

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

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
CAMDEN-CLARK MEMORIAL HOSPITAL CORPORATION

Employer identification number
31-1524546

Part I 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)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 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

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit ☐ Yes ☐ No

Part II Conservation Easements.
Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)
- ☐ Preservation of land for public use (e g , recreation or pleasure)
- ☐ Preservation of an historically importantly land area
- ☐ Protection of natural habitat
- ☐ Preservation of a certified historic structure
- ☐ Preservation of open space

2 Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶______

4 Number of states where property subject to conservation easement is located ▶______

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶______

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ______

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 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

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

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 ▶ $ ______

(ii) Assets included in Form 990, Part X ▶ $ ______

2 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 ▶ $ ______

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a Beginning of year balance					
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶

b Permanent endowment ▶

c Term endowment ▶

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		11,870,134		11,870,134
b Buildings		137,989,309	37,004,714	100,984,595
c Leasehold improvements				
d Equipment		239,594,619	125,028,163	114,566,456
e Other		2,923,694	3,552,473	-628,779
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				226,792,406

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	
SELF-FUNDED INSURANCE RESERVE	12,124,203
PENSION LIABILITY	10,984,066
BOND INTEREST SWAP LIABILITY	13,132,024
OTHER	12,484,378
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	48,724,671

2. Fin 48 (ASC 740) 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 (ASC740)

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
		PART X, LINE 2 EFFECTIVE JULY 1, 2009, THE ORGANIZATION ADOPTED THE FINANCIAL ACCOUNTING STANDARDS BOARD'S ("FASB") AUTHORITATIVE GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES THE GUIDANCE CLARIFIES THE ACCOUNTING FOR THE RECOGNITION AND MEASUREMENT OF THE BENEFITS OF INDIVIDUAL TAX POSITIONS IN THE FINANCIAL STATEMENTS TAX POSITIONS MUST MEET A RECOGNITION THRESHOLD OF MORE-LIKELY-THAN-NOT IN ORDER FOR THE BENEFIT OF THOSE TAX POSITIONS TO BE RECOGNIZED IN THE FINANCIAL STATEMENTS THE ORGANIZATION HAS DETERMINED THAT NO MATERIAL UNRECOGNIZED TAX BENEFITS OR OBLIGATIONS EXIST AS OF JUNE 30, 2010, AND THE ADOPTION OF THE GUIDANCE DID NOT HAVE A MATERIAL EFFECT ON THE FINANCIAL POSITION OR RESULTS OF OPERATIONS

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SCHEDULE H (Form 990)

Department of the Treasury
Internal Revenue Service

Hospitals

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 20.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
CAMDEN-CLARK MEMORIAL HOSPITAL CORPORATION

Employer identification number
31-1524546

Part I Financial Assistance and Certain Other Community Benefits at Cost

			Yes	No
1a	Did the organization have a finnancial assistance policy during the tax year? If "No," skip to question 6a	1a	Yes	
b	If "Yes," is it a written policy?	1b	Yes	
2	If the organization has multiple hospitals, indicate which of the following best describes application of the financial assistance policy to its various hospital facilities during the tax year ☐ Applied uniformly to all hospitals ☐ Applied uniformly to most hospitals ☑ Generally tailored to individual hospitals			
3	Answer the following based on the the financial assistance eligibility criteria that applied to the largest number of the organization's patients during the tax year			
a	Does the organization use Federal Poverty Guidelines (FPG) to determine eligibility for providing *free* care to low income individuals? If "Yes," indicate which of the following is the FPG family income limit for eligibility for free care ☐ 100% ☐ 150% ☑ 200% ☐ Other ______ %	3a	Yes	
b	Does the organization use FPG to determine eligibility for providing *discounted* care to low income individuals? If "Yes," indicate which of the following is the family income limit for eligibility for discounted care ☐ 200% ☐ 250% ☐ 300% ☑ 350% ☐ 400% ☐ Other ______ %	3b	Yes	
c	If the organization does not use FPG to determine eligibility, describe in Part VI the income based criteria for determining eligibility for free or discounted care Include in the description whether the organization uses an asset test or other threshold, regardless of income, to determine eligibility for free or discounted care			
4	Did the organization's financial assistance policy that applied to the largest number of its patients during the tax year provide for free or discounted care to the "medically indigent"?	4	Yes	
5a	Did the organization budget amounts for free or discounted care provided under its financial assistance policy during the tax year?	5a	Yes	
b	If "Yes," did the organization's financial assistance expenses exceed the budgeted amount?	5b	Yes	
c	If "Yes" to line 5b, as a result of budget considerations, was the organization unable to provide free or discounted care to a patient who was eligibile for free or discounted care?	5c		No
6a	Does the organization prepare a community benefit report during the tax year?	6a		No
6b	If "Yes," did the organization make it available to the public?	6b		

Complete the following table using the worksheets provided in the Schedule H instructions Do not submit these worksheets with the Schedule H

7 Financial Assistance and Certain Other Community Benefits at Cost

Financial Assistance and Means-Tested Government Programs	(a) Number of activities or programs (optional)	(b) Persons served (optional)	(c) Total community benefit expense	(d) Direct offsetting revenue	(e) Net community benefit expense	(f) Percent of total expense
a Financial Assistance at cost (from Worksheets 1 and 2)			13,643,285		13,643,285	7 150 %
b Unreimbursed Medicaid (from Worksheet 3, column a)			25,089,473	16,369,426	8,720,047	4 880 %
c Unreimbursed costs—other means-tested government programs (from Worksheet 3, column b)						
d **Total** Financial Assistance and Means-Tested Government Programs			38,732,758	16,369,426	22,363,332	12 030 %
Other Benefits						
e Community health improvement services and community benefit operations (from Worksheet 4)			822,189		822,189	0 430 %
f Health professions education (from Worksheet 5)			827,562	652,663	174,899	0 090 %
g Subsidized health services (from Worksheet 6)						
h Research (from Worksheet 7)						
i Cash and in-kind contributions to community groups (from Worksheet 8)			110,680		110,680	0 060 %
j **Total** Other Benefits			1,760,431	652,663	1,107,768	0 580 %
k **Total.** Add lines 7d and 7j			40,493,189	17,022,089	23,471,100	12 610 %

Part II **Community Building Activities** during the tax year, and describe in Part VI how its community building activities during the tax year, and describe in Part VI how its community building activities promoted the health of the communities it serves.

	(a) Number of activities or programs (optional)	(b) Persons served (optional)	(c) Total community building expense	(d) Direct offsetting revenue	(e) Net community building expense	(f) Percent of total expense
1 Physical improvements and housing						
2 Economic development						
3 Community support						
4 Environmental improvements						
5 Leadership development and training for community members						
6 Coalition building						
7 Community health improvement advocacy						
8 Workforce development						
9 Other						
10 **Total**						

Part III **Bad Debt, Medicare, & Collection Practices**

Section A. Bad Debt Expense

			Yes	No
1	Did the organization report bad debt expense in accordance with Heathcare Financial Management Association Statement No 15?	1		No
2	Enter the amount of the organization's bad debt expense (at cost) — 2 — 2,913,911			
3	Enter the estimated amount of the organization's bad debt expense (at cost) attributable to patients eligible under the organization's financial assistance policy — 3 — 582,782			
4	Provide in Part VI the text of the footnote to the organization's financial statements that describes bad debt expense In addition, describe the costing methodology used in determining the amounts reported on lines 2 and 3, and rationale for including a portion of bad debt amounts as community benefit			

Section B. Medicare

5	Enter total revenue received from Medicare (including DSH and IME)	5	78,102,484
6	Enter Medicare allowable costs of care relating to payments on line 5	6	70,607,111
7	Subtract line 6 from line 5 This is the surplus or (shortfall)	7	7,495,373

8 Describe in Part VI the extent to which any shortfall reported in line 7 should be treated as community benefit Also describe in Part VI the costing methodology or source used to determine the amount reported on line 6 Check the box that describes the method used

☐ Cost accounting system ☑ Cost to charge ratio ☐ Other

Section C. Collection Practices

			Yes	No
9a	Does the organization have a written debt collection policy?	9a	Yes	
b	If "Yes," does the organization's collection policy contain provisions on the collection practices to be followed for patients who are known to qualify for charity care or financial assistance? Describe in Part VI	9b	Yes	

Part IV **Management Companies and Joint Ventures**

	(a) Name of entity	(b) Description of primary activity of entity	(c) Organization's profit % or stock ownership %	(d) Officers, directors, trustees, or key employees' profit % or stock ownership%	(e) Physicians' profit % or stock ownership %
1	1 LHC	HOME HEALTH AND HOSPICE	10 000 %		
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					

Part V Facility Information

Section A. Hospital Facilities
(list in order of size, measured by total revenue per facility, from largest to smallest)

How many hospital facilities did the organization operate during the tax year? 1

	Name and address	Licensed hospital	General medical & surgical	Children's hospital	Teaching hospital	Critical access hospital	Research facility	ER-24 hours	ER-other	Other (Describe)
1	CAMDEN-CLARK MEMORIAL HOSPITAL 800 GARFIELD AVENUE PARKERSBURG, WV 26102	X	X		X			X		DISPROPORTIONATE SHARE HOSPITAL

Part V **Facility Information** *(continued)*

Section C. Other Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility
(list in order of size, measured by total revenue per facility, from largest to smallest)

How many non-hospital facilities did the organization operate during the tax year?____________________

	Name and address	Type of Facility (Describe)
1		
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

Part VI Supplemental Information

Complete this part to provide the following information

1 **Required descriptions.** Provide the description required for Part I, lines 3c, 6a, and 7, Part II, Part III, lines 4, 8, and 9b, and Part V, Section B, lines 1j, 3, 4, 5c, 6i, 7, 11h, 13g, 15e, 16e, 17e, 18d, 19d, 20, and 21

2 **Needs assessment.** Describe how the organization assesses the health care needs of the communities it serves, in addition to any needs assessments reported in Part V, Section B

3 **Patient education of eligibility for assistance.** Describe how the organization informs and educates patients and persons who may be billed for patient care about their eligibility for assistance under federal, state, or local government programs or under the organization's financial assistance policy

4 **Community information.** Describe the community the organization serves, taking into account the geographic area and demographic constituents it serves

5 **Promotion of community health.** Provide any other information important to describing how the organization's hospital facilities or other health care facilities further its exempt purpose by promoting the health of the community (e g , open medical staff, community board, use of surplus funds, etc)

6 **Affiliated health care system.** If the organization is part of an affiliated health care system, describe the respective roles of the organization and its affiliates in promoting the health of the communities served

7 **State filing of community benefit report.** If applicable, identify all states with which the organization, or a related organization, files a community benefit report

Identifier	ReturnReference	Explanation
		PART I, LINE 7 WORKSHEET 2, "RATIO OF PATIENT CARE, COST TO CHARGES" WAS USED TO COMPLETE THE COST-TO-CHARGE RATIO IN PART 1, LINE 7 FOR "OTHER BENEFITS", ACTUAL EXPENSES OF THE ORGANIZATION AT COST WERE USED IN ADDITION TO SOME DONATED ITEMS VALUED AT FAIR MARKET VALUE

Identifier	ReturnReference	Explanation
		PART I, L7 COL(F) THE AMOUNT OF TOTAL EXPENSE REPORTED ON FORM 990, PART IX, LINE 25 INCLUDES A BAD DEBT EXPENSE OF $14,084,474 WHICH HAS BEEN REMOVED FOR PURPOSES OF COMPUTING PERCENT OF TOTAL EXPENSE IN COLUMN (F)

Identifier	ReturnReference	Explanation
	PART I, LINE 7E	THIS AMOUNT INCLUDES THE EXPENSES OF THE FOLLOWING ACTIVITIES ALONG WITH MANY MORE MAY FAIR HEALTH FAIR, COMMUNITY HEALTH FORUM, CHILDBIRTH CLASSES, HEARTSAVER AED, RELAY FOR LIFE, ROTARY BLOOD SCREENING, AND SHRINER'S CLINIC

Identifier	ReturnReference	Explanation
	PART I LINE 6A-B	FOR FISCAL YEAR END 6/30/2010, A COMMUNITY BENEFIT REPORT WAS PREPARED THE ORGANIZATION IS IN THE PROCESS OF PREPARING INFORMATION TO COMPLY WITH THE COMMUNITY HEALTH NEEDS ASSESSMENT REQUIREMENTS OF SECTION 501(R) FOR YEARS BEGINNING AFTER 5/23/2012

Identifier	ReturnReference	Explanation
		PART III, LINE 4 BAD DEBT EXPENSE AT COST IS CALCULATED BY MULTIPLYING THE INTERNAL FINANCIAL STATEMENT AMOUNT OF BAD DEBT EXPENSE ($7,671,387) BY THE COST TO CHARGE RATIO (37 98%) WHICH WAS DETERMINED BY USING IRS WORKSHEET 2 FROM THE SCHEDULE H INSTRUCTIONS THE ESTIMATED AMOUNT OF THE ORGANIZATION'S BAD DEBT ATTRIBUTED TO PATIENTS ELIGIBLE UNDER THE CHARITY CARE POLICY IS CALCULATED BASED ON AN ESTIMATE OF 20% OF THE BAD DEBT AT COST THE RATIONALE FOR THIS IS THAT SELF-PAY BALANCES AFTER INSURANCE ARE NOT ACCOUNTS THAT WE FOCUS A LOT OF EFFORT ON WE FOCUS OUR EFFORTS IN QUALIFYING PATIENTS FOR CHARITY CARE ON PRIMARY SELF-PAY ACCOUNTS NOT ALL PATIENTS TAKE THE INITIATIVE TO SEE IF THEY QUALIFY FOR CHARITY CARE

Identifier	ReturnReference	Explanation
		PART III, LINE 8 THE ORGANIZATION USED INFORMATION FROM THEIR COST REPORT TO COMPLETE THIS SECTION AS WELL AS THEIR INTERNAL REPORTS

Identifier	ReturnReference	Explanation
		PART III, LINE 9B IF A PATIENT IS KNOWN TO QUALIFY FOR FINANCIAL ASSISTANCE, THEN NO COLLECTION ACTIVITY WILL OCCUR ON THEIR ACCOUNT THE CHARITY QUALIFICATION IS GOOD FOR 6 MONTHS, SO ANY SUBSEQUENT VISITS DURING THAT 6 MONTH PERIOD WOULD ALSO QUALIFY FOR CHARITY CARE AND NOT BE SUBJECT TO COLLECTION ACTIVITY

Identifier	ReturnReference	Explanation
CAMDEN-CLARK MEMORIAL HOSPITAL		PART V, SECTION B, LINE 11H THE ORGANIZATION HAS POSTED KEY EXCERPTS OF ITS FINANCIAL ASSISTANCE POLICY ON ITS WEBSITE ALONG WITH SOME FREQUENTLY ASKED QUESTIONS AND RELATED ANSWERS

Identifier	ReturnReference	Explanation
CAMDEN-CLARK MEMORIAL HOSPITAL		PART V, SECTION B, LINE 19D THE MAXIMUM AMOUNTS THAT CAN BE CHARGED TO FAP-ELIGIBLE INDIVIDUALS FOR EMERGENCY OR OTHER MEDICALLY NECESSARY CARE IS STATE REGULATED WEST VIRGINIA IS A RATE-REGULATED STATE THE WV HEALTH CARE AUTHORITY HAS PRESCRIBED REVENUE LIMITS FOR CERTAIN GROUPS OF PAYORS, INCLUDED UNINSURED INDIVIDUALS

Identifier	ReturnReference	Explanation
		PART VI, LINE 2 THE ORGANIZATION IS PART OF THE MID-OHIO VALLEY RURAL HEALTH ALLIANCE THE ALLIANCE MEMBERS JOINTLY ASSESS THE NEEDS OF THE REGION AND WORK WITH A CONSULTANT TO ENSURE THAT THOSE NEEDS ARE ADDRESSED

Identifier	ReturnReference	Explanation
		PART VI, LINE 3 THE ORGANIZATION PROVIDES IN WRITING ALL OPTIONS FOR POSSIBLE FINANCIAL ASSISTANCE THE ORGANIZATION ALSO HAS FINANCIAL REPRESENTATIVES THAT ARE AVAILABLE TO DISCUSS OPTIONS WITH INPATIENTS AND OUTPATIENTS ON A DAILY BASIS AS WELL AS HAVING THIS INFORMATION POSTED ON THE ORGANIZATION'S WEBSITE WE ALSO HAVE A STATE MEDICAID WORKER ONSITE TO HELP DETERMINE PATIENT ELIGIBILITY AND HELP PATIENTS THROUGH THE ELIGIBILITY PROCESS

Identifier	ReturnReference	Explanation
		PART VI, LINE 4 CAMDEN CLARK, LOCATED IN PARKERSBURG, WV, SERVICES THE MID-OHIO VALLEY REGION OF WEST VIRGINIA AND OHIO THE PRIMARY SERVICE AREA CONSISTS PRIMARILY OF 4 COUNTIES WITH AN ESTIMATED TOTAL POPULATION OF APPROXIMATELY 164,000 PEOPLE AND A MEDIAN HOUSEHOLD INCOME OF APPROXIMATELY $39,000 IT IS AN AGING POPULATION THERE IS A DECLINING CORPORATE PRESENCE IN THE AREA WHICH HAS NEGATIVELY IMPACTED THE UNEMPLOYMENT RATE THERE IS ONE OTHER HOSPITAL WITHIN THE PRIMARY SERVICE AREA, LOCATED IN MARIETTA, OH IN ADDITION, OUR COMMUNITY INCLUDEDS SEVERAL FEDERALLY DESIGNATED MEDICALLY UNDERSERVED AREAS OR POPULATIONS

Identifier	ReturnReference	Explanation
		PART VI, LINE 6 A MAJORITY OF THE ORGANIZATION'S GOVERNING BODY IS COMPRISED OF PERSONS WHO RESIDE IN THE HOSPITAL'S PRIMARY SERVICE AREA AND WHO ARE NEITHER EMPLOYEES NOR INDEPENDENT CONTRACTORS OF THE HOSPITAL, NOR FAMILY MEMBERS THEREOF THE ORGANIZATION EXTENDS MEDICAL STAFF PRIVILEGES TO ALL QUALIFIED PHYSICIANS IN THE COMMUNITY TO MANY OF ITS DEPARTMENTS ANY SURPLUS OF FUNDS IS USED PRIMARILY TO ENHANCE PATIENT CARE WHILE NO RESEARCH IS DONE AT THE FACILITY, A RESIDENCY PROGRAM WAS STARTED IN 2009

Identifier	ReturnReference	Explanation
		PART VI, LINE 7 CAMDEN-CLARK MEMORIAL HOSPITAL IS PART OF THE WV UNITED HEALTH SYSTEM CAMDEN-CLARK MEMORIAL HOSPITAL PLAYS A SIGNIFICANT ROLE IN IMPROVING THE GENERAL HEALTH CARE OF THE COMMUNITY THE STRATEGIC PLAN OF THE SYSTEM STATES INTENT TO BUILD A REGIONAL HEALTH CARE DELIVERY SYSTEM IN ITS SERVICES AREA WHILE OFFERING A VARIETY OF OPTIONS FOR PROVIDERS WHO WANT TO PARTICIPATE THE SYSTEM MAINTAINS A DEMONSTRATED COMMITMENT TO ASSIST RURAL COMMUNITIES IN PRESERVING AND IMPROVING THE HEALTH CARE AVAILABLE TO THE PATIENTS IT SERVES SYSTEM MANAGEMENT IS FOCUSED ON RECRUITMENT OF STAFF AND EMPLOYEES TO MEET THE GROWING NEEDS OF THE AGING POPULATION IN THE SYSTEM'S SERVICES AREAS OTHER HOSPITALS IN THE SYSTEM INCLUDE UNITED HEALTH CENTER, WHICH IS MORE CENTRALLY LOCATED IN THE STATE, JEFFERSON MEMORIAL HOSPITAL AND CITY HOSPITAL, INC WHICH ARE LOCATED IN THE EASTERN PANHANDLE OF WEST VIRGINIA AND WEST VIRGINIA UNIVERSITY HOSPITALS LOCATED IN MORGANTOWN, WV

Identifier	ReturnReference	Explanation
REPORTS FILED WITH STATES	PART VI, LINE 7	WV

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
CAMDEN-CLARK MEMORIAL HOSPITAL CORPORATION

Employer identification number
31-1524546

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Part II can be duplicated if additional space is needed. . . . . ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) WOOD COUNTY DEVELOPMENT AUTHORITYPO BOX 1683 PARKERSBURG,WV 26102	55-0575873	501(C)4	5,500				ANNUAL PLEDGE
(2) GOOD SAMARITAN CLINIC INC418 GRAND PARK DRIVE SUITE 311 PARKERSBURG,WV 261054000	55-0708491	501(C)3	15,000				DONATION TO CLINIC OPERATIONS
(3) PARKERSBURG AREA COMMUNITY FOUNDATIONPO BOX 1762 PARKERSBURG,WV 26102	55-0748246	501(C)3	10,000				ANNUAL PLEDGE
(4) BOY SCOUTS OF AMERICA1340 JULIANA STREET PARKERSBURG,WV 26101		501(C)3	5,000				FUNDRAISING DINNER DONATION
(5) ELITE SPORTS CENTER 2000 1ST AVENUE PARKERSBURG,WV 26101			10,000				SCOREBOARD SPONSORSHIP/SIGNAGE

2 Enter total number of section 501(c)(3) and government organizations . . . . ▶ 3

3 Enter total number of other organizations . . . . ▶ 2

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of non-cash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of non-cash assistance

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 CONTRIBUTIONS AND GRANTS ARE DISCRETIONARY AND DECISIONS ON WHICH ORGANIZATIONS TO SUPPORT ARE MADE BY THE SENIOR LEADERSHIP TEAM IN CONJUNCTION WITH THE BOARD OF DIRECTOR OF MARKETING A VICE PRESIDENT OF THE ORGANIZATION SITS ON THE WOOD COUNTY DEVELOPMENT AUTHORITY'S BOARD OF DIRECTORS THE DIRECTOR OF FINANCE SITS ON THE GOOD SAMARATIN CLINIC'S BOARD OF DIRECTORS

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Schedule J (Form 990)

Compensation Information

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
CAMDEN-CLARK MEMORIAL HOSPITAL CORPORATION

Employer identification number
31-1524546

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☑ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☑ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	**1b**	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	**2**	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply ☑ Compensation committee ☑ Written employment contract ☑ Independent compensation consultant ☑ Compensation survey or study ☐ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment from the organization or a related organization?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	**4c**		No
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	**5b**		No
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization? If "Yes," to line 6a or 6b, describe in Part III	**6b**		No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

(A) Name		**(B)** Breakdown of W-2 and/or 1099-MISC compensation			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
(1) MICHAEL A KING	(i)	616,456	0	38,500	50,933	3,943	709,832	0
	(ii)	0	0	0	0	0	0	0
(2) ALLEN R BUTCHER	(i)	337,532	0	33,000	11,274	3,737	385,543	0
	(ii)	0	0	0	0	0	0	0
(3) TODD A KRUGER	(i)	306,031	0	33,000	16,094	2,872	357,997	0
	(ii)	0	0	0	0	0	0	0
(4) DAVID MCCLURE	(i)	189,361	0	22,000	8,525	3,007	222,893	0
	(ii)	0	0	0	0	0	0	0
(5) TOM HELLER	(i)	202,971	0	38,500	10,931	2,539	254,941	0
	(ii)	0	0	0	0	0	0	0
(6) CYNTHIA KERN	(i)	141,042	0	11,005	8,330	1,240	161,617	0
	(ii)	0	0	0	0	0	0	0
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
SUPPLEMENTAL INFORMATION	PART III	PART I LINE 1A MEMBERSHIPS AT THE FAMILY FITNESS CENTER ARE OFFERED TO EACH MEMBER OF THE SENIOR LEADERSHIP TEAM THESE ARE COVERED IN THE APPLICABLE EMPLOYMENT CONTRACTS THE HOUSING ALLOWANCE WAS PROVIDED TO CERTAIN NEWLY HIRED CHIEF NURSING OFFICERS WHO DID NOT LIVE LOCALLY THESE WERE DOCUMENTED IN THE EMPLOYMENT OFFER LETTERS

Schedule K (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990).
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
CAMDEN-CLARK MEMORIAL HOSPITAL CORPORATION

Employer identification number
31-1524546

Part I Bond Issues

	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased Yes	(g) Defeased No	(h) On Behalf of Issuer Yes	(h) On Behalf of Issuer No	(i) Pool financing Yes	(i) Pool financing No
A	WV HOSPITAL FINANCE AUTHORITY	62-1256910	956622VY7	06-30-2004	96,695,947	SEE SCHEDULE O		X		X		X
B	WV HOSPITAL FINANCE AUTHORITY	62-1256910	956622A87	10-16-2009	25,063,291	REFUND PRIOR ISSUE (9/13/2007)		X		X		X
C	WV HOSPITAL FINANCE AUTHORITY	62-1256910	956622D35	03-01-2011	73,555,712	PURCHASE ASSETS OF ST JOSEPHS HOSPITAL		X		X		X

Part II Proceeds

		A	B	C	D
1	Amount of bonds retired				
2	Amount of bonds legally defeased				
3	Total proceeds of issue	96,250,000	25,063,291	73,555,712	
4	Gross proceeds in reserve funds	6,484,456	1,651,274		
5	Capitalized interest from proceeds	5,856,926			
6	Proceeds in refunding escrow				
7	Issuance costs from proceeds	957,082	220,575	435,854	
8	Credit enhancement from proceeds	4,364,162	328,403		
9	Working capital expenditures from proceeds				
10	Capital expenditures from proceeds	54,490,515		68,026,812	
11	Other spent proceeds	24,666,322	29,661,003		
12	Other unspent proceeds	264,472	2,875,516	5,093,143	
13	Year of substantial completion	2008	2012		

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
14	Were the bonds issued as part of a current refunding issue?	X		X			X		
15	Were the bonds issued as part of an advance refunding issue?		X		X		X		
16	Has the final allocation of proceeds been made?	X			X		X		
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X			

Part III Private Business Use

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X		X		
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X		X		X		

Part III Private Business Use *(Continued)*

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
3a	Are there any management or service contracts that may result in private business use?		X		X		X		
b	Are there any research agreements that may result in private business use of bond-financed property?		X		X		X		
c	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?	X		X		X			
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶								
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶								
6	Total of lines 4 and 5								
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X		X		X			

Part IV Arbitrage

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X		X		X		
2	Is the bond issue a variable rate issue?	X			X	X			
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?	X			X		X		
b	Name of provider	UBS AG							
c	Term of hedge	29 600000000000							
d	Was the hedge superintegrated?		X						
e	Was a hedge terminated?		X						
4a	Were gross proceeds invested in a GIC?	X			X		X		
b	Name of provider	LEHMAN BROTHERS SPECIAL FINANCING							
c	Term of GIC	29 600000000000							
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	X							
5	Were any gross proceeds invested beyond an available temporary period?	X		X			X		
6	Did the bond issue qualify for an exception to rebate?	X		X			X		

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Identifier	Return Reference	Explanation
SCHEDULE K SUPPLENTAL INFORMATION		WEST VIRGINIA UNIVERSITY HOSPITALS, INC (WVUH), EIN 55-0643304, CITY HOSPITAL, INC (CITY HOSPITAL), EIN 55-0383321, THE CHARLES TOWN GENERAL HOSPITAL (D/B/A JEFFERSON MEMORIAL HOSPITAL), EIN 55-0359755, CITY HOSPITAL FOUNDATION, INC (CITY HOSPITAL FOUNDATION), EIN 31-1118075, UNITED HOSPITAL CENTER, INC (UNITED HOSPITAL CENTER), EIN 55-0525724, AND CAMDEN-CLARK MEMORIAL HOSPITAL CENTER, INC (CAMDEN-CLARK) EIN 31-1524546 ARE MEMBERS OF THE WEST VIRGINIA UNITED HEALTH SYSTEM OBLIGATED GROUP AND HAVE ISSUED TAX-EXEMPT BONDS UNDER WEST VIRGINIA UNITED HEALTH SYSTEM HOWEVER, THESE BOND ISSUANCES WERE IN TURN REALLOCATED BY WEST VIRGINIA UNITED HEALTH SYSTEM TO ITS SYSTEM SUBSIDIARIES

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Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
CAMDEN-CLARK MEMORIAL HOSPITAL CORPORATION

Employer identification number
31-1524546

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1 (a) Name of disqualified person	(b) Description of transaction	(c) Corrected? Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 . . . . ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . ▶ $

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization? To	From	(c) Original principal amount	(d) Balance due	(e) In default? Yes	No	(f) Approved by board or committee? Yes	No	(g) Written agreement? Yes	No
Total . . . . ▶ $										

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance

Part IV Business Transactions Involving Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues? Yes	No
(1) PARKERSBURG NEUROLOGICAL ASSOCIATES	BUSINESS ENTITY OWNED, IN PART, BY BOARD MEMBER, DR MICHAEL MOREHEAD	93,122	PAYMENT REMITTED TO PARKERSBURG NEUROLOGICAL ASSOCIATES FOR THE ORGANIZATION'S USE OF EQUIPMENT, SUPPLIES, AND STAFF AND INTRAOPERATIVE MONITORING ON THE ORGANIZATION'S NEUROSURGERY CASES		No
(2) PARKERSBURG NEUROLOGICAL ASSOCIATES	BUSINESS ENTITY OWNED, IN PART, BY BOARD MEMBER, DR MICHAEL MOREHEAD	50,017	REVENUE RECEIVED FROM PARKERSBURG NEUROLOGICAL ASSOCIATES FOR LEASE OF THE ORGANIZATION'S OFFICE SPACE		No

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
CAMDEN-CLARK MEMORIAL HOSPITAL CORPORATION

Employer identification number
31-1524546

Identifier	Return Reference	Explanation
	FORM 990, PART I, LINE 5	AFTER CAMDEN CLARK MEDICAL CENTER MERGED WITH ST JOSEPH'S HOSPITAL ON MARCH 1, 2011, THE ORGANIZATION HAD 2,108 TOTAL EMPLOYEES, WHICH IS DIFFERENT THAN THE AMOUNT THAT WAS REPORTED ON THE 2010 FORM W-3 OF 1,735

Identifier	Return Reference	Explanation
	FORM 990, PART III, LINE 4A	THE HOSPITAL STRIVES TO SUPPLY A COMPREHENSIVE RANGE OF INPATIENT, OUTPATIENT, OUTREACH CLINICS AND EMERGENCY ROOM SERVICES, INCLUDING PREVENTION, GUIDANCE, DIAGNOSIS, TREATMENT, RESTORATION, REHABILITATION AND OTHER EFFORTS AS MAY BE REQUIRED TO MEET THE HEALTH CARE NEEDS OF THE COMMUNITY AND AS THE HOSPITAL'S RESOURCES WILL PERMIT ALTHOUGH REIMBURSEMENT FOR SERVICES RENDERED IS CRITICAL TO THE OPERATION AND STABILITY OF THE HOSPITAL, IT IS RECOGNIZED THAT NOT ALL INDIVIDUALS POSSESS THE ABILITY TO PURCHASE ESSENTIAL MEDICAL SERVICES OUR MISSION IS TO SERVE THE COMMUNITY BY PROVIDING HEALTH CARE SERVICES AND HEALTH CARE EDUCATION THEREFORE, IN KEEPING WITH THIS COMMITMENT TO SERVICE ALL MEMBERS OF THE COMMUNITY, CAMDEN-CLARK MEMORIAL HOSPITAL WILL PROVIDE THE FOLLOWING WHERE THE INDIVIDUAL'S NEED AND/OR AN INABILITY TO PAY COEXIST - FREE CARE AND/OR SUBSIDIZED CARE - CARE PROVIDED TO PERSONS COVERED BY GOVERNMENTAL PROGRAMS AT OR BELOW COST - HEALTH ACTIVITIES AND PROGRAMS TO SUPPORT THE COMMUNITY RECOGNIZING ITS MISSION TO THE COMMUNITY, SERVICES ARE PROVIDED TO BOTH MEDICARE AND MEDICAID PATIENTS TO THE EXTENT REIMBURSEMENT IS BELOW COST, THE HOSPITAL RECOGNIZES THESE AMOUNTS AS CHARTITY CARE IN MEETING IT'S MISSION TO THE ENTIRE COMMUNITY IN ADDITION, CHARITY CARE IS PROVIDED THROUGH MANY REDUCED-PRICE SERVICES AND FREE PROGRAMS OFFERED THROUGHOUT THE YEAR BASED UPON ACTIVITIES AND SERVICES THAT THE HOSPITAL BELIEVES WILL SERVE A BONAFIDE COMMUNITY HEALTH NEED THE HOSPITAL PROVIDED $25,095,194 OF CHARITY CARE FOR THE YEAR ENDED JUNE 30, 2011 THE HOSPITAL ALSO PROVIDES NUMBEROUS OTHER BENEFITS FOR THE MID-OHIO VALLEY COMMUNITY, INCLUDING ECONOMIC BENEFITS, HEALTH EDUCATION, WELLNESS/OUTREACH PROGRAMS, AND PUBLIC SERVICES AND SUPPORT GROUPS

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		CAMDEN-CLARK HEALTH SERVICES, INC , A NON-PROFIT, TAX-EXEMPT CORPORATION, IS THE SOLE MEMBER OF THE ORGANIZATION

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		ALL OF THE MEMBERS OF THE BOARD OF DIRECTORS ARE ELECTED BY WEST VIRGINIA UNITED HEALTH SYSTEM (WVUHS), THE SOLE MEMBER OF CAMDEN CLARK HEALTH SERVICES, INC

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B		AS THE SOLE MEMBER OF CAMDEN CLARK HEALTH SERVICES, INC , WVUHS THROUGH ITS AFFILIATION AGREEMENT, HOLDS POWER TO APPROVE CERTAIN DECISIONS SUCH AS - ANNUAL BUDGET - CAPITAL EXPENDITURES OVER $1 MILLION - NEW DEBT OVER $1 MILLION - NEW PROGRAMS - EXTRAORDINARY FILINGS

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE CHIEF FINANCIAL OFFICER AND DIRECTOR OF FINANCE REVIEWED THE COMPLETED FORM PRIOR TO FILING A DRAFT COPY OF THE FORM IS REVIEWED WITH THE BOARD OF DIRECTORS AND A FULL AND COMPLETE FORM IS FORWARDED TO THE BOARD PRIOR TO BEING FILED

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	TO IDENTIFY AND MONITOR ANY CONFLICTS, A SIGNED CONFLICT OF INTEREST STATEMENT IS REQUIRED FROM BOARD MEMBERS OF THE ORGANIZATION AND KEY INDIVIDUALS THAT ARE IN A POSITION TO MAKE OR INFLUENCE DECISIONS IF AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST IS OBSERVED OR DISCLOSED, THE ORGANIZATION INVOKES THE PROCEDURES SET OUT IN THE POLICY/BYLAWS FOR ADDRESSING THE CONFLICT OF INTEREST FOR KEY INDIVIDUALS (EMPLOYEES), A SPECIFIC CONFLICT OF INTEREST STANDARD IN THE ORGANIZATION'S CODE OF ETHICS AND BUSINESS CONDUCT ALSO EXISTS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE ORGANIZATION UTILIZES AN EXECUTIVE COMPENSATION CONSULTANT TO SURVEY DATA AND MAKE RECOMMENDATIONS THE COMPENSATION OF THE CEO AND OTHER OFFICERS AND KEY EMPLOYEES IS REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S FINANCIAL STATEMENTS ARE MADE AVAILABLE ON REQUEST AND ARE ALSO AVAILABLE ON THE WEST VIRGINIA HEALTHCARE AUTHORITY WEBSITE. THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE MADE AVAILABLE UPON REQUEST

Identifier	Return Reference	Explanation
	FORM 990, PART VIII, LINE 11A	IN CONJUNCTION WITH THE ACQUISITION OF THE ASSETS OF ST JOSEPH'S HOSPITAL, AN INDEPENDENT APPRAISAL WAS OBTAINED ON BOTH FACILITIES THE VALUE ARRIVED AT IN THE APPRAISAL WAS HIGHER THAN THE CARRYING VALUE OF THE ASSETS ACQUIRED, RESULTING IN A GAIN BEING RECORDED OF $26,414,074

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	ANNUAL PENSION LIABILITY VALUATION ADJUSTMENT 4,310,193 ANNUAL ADJUSTMENT TO VALUATION OF INTEREST RATE SWAP LIABILITY 7,153,297 UNREALIZED GAIN OR LOSS -743,497 INTERCOMPANY TRANSFERS -4,414,648 TOTAL TO FORM 990, PART XI, LINE 5 6,305,345

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

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2010
Open to Public Inspection

Name of the organization
CAMDEN-CLARK MEMORIAL HOSPITAL CORPORATION

Employer identification number
31-1524546

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) FAMILY FITNESS CENTER LLC 2804 BIRCH STREET PARKERSBURG, WV 26101 55-0774193	PROVIDE AN EXERCISE FACILITY FOR THE COMMUNITY	WV	656,131	1,791,146	N/A

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization Yes	No
(1) CAMDEN-CLARK HEALTH SERVICES INC 800 GARFIELD AVENUE PARKERSBURG, WV 26102 55-0769602	AIDS, STRENGTHENS, AND SUPPORTS CAMDEN-CLARK MEMORIAL HOSPITAL	WV	501(C)3	LINE 11A, I	N/A		No
(2) CAMDEN-CLARK FOUNDATION 800 GARFIELD AVENUE PARKERSBURG, WV 26102 55-0667789	RAISE AND MANAGE FUNDS FOR CAMDEN-CLARK MEMORIAL HOSPITAL	WV	501(C)3	LINE 7	N/A		No
(3) AUXILIARY OF CAMDEN-CLARK MEMORIAL HOSPITAL OF PARKERSBURG 800 GARFIELD AVENUE PARKERSBURG, WV 26102 55-0386283	PROMOTES ADVANCEMENT AND WELFARE OF CAMDEN-CLARK MEMORIAL HOSPITAL	WV	501(C)3	LINE 3	N/A		No
(4) CAMDEN-CLARK PHYSICIAN CORPORATION 604 ANN STREET PARKERSBURG, WV 26102 26-4058719	FURNISHES FACILITIES AND SERVICES TO PROVIDE MEDICAL SERVICES	WV	501(C)3	LINE 11A, I	N/A		No

Part III **Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V **Transactions With Related Organizations** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)

			Yes	No
	Note. Complete line 1 if any entity is listed in Parts II, III or IV			
1	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity	**1a**	Yes	
b	Gift, grant, or capital contribution to other organization(s)	**1b**	Yes	
c	Gift, grant, or capital contribution from other organization(s)	**1c**	Yes	
d	Loans or loan guarantees to or for other organization(s)	**1d**		No
e	Loans or loan guarantees by other organization(s)	**1e**		No
f	Sale of assets to other organization(s)	**1f**		No
g	Purchase of assets from other organization(s)	**1g**		No
h	Exchange of assets	**1h**	Yes	
i	Lease of facilities, equipment, or other assets to other organization(s)	**1i**	Yes	
j	Lease of facilities, equipment, or other assets from other organization(s)	**1j**		No
k	Performance of services or membership or fundraising solicitations for other organization(s)	**1k**		No
l	Performance of services or membership or fundraising solicitations by other organization(s)	**1l**		No
m	Sharing of facilities, equipment, mailing lists, or other assets	**1m**	Yes	
n	Sharing of paid employees	**1n**		No
o	Reimbursement paid to other organization for expenses	**1o**		No
p	Reimbursement paid by other organization for expenses	**1p**	Yes	
q	Other transfer of cash or property to other organization(s)	**1q**	Yes	
r	Other transfer of cash or property from other organization(s)	**1r**		No

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

	(a) Name of other organization	**(b)** Transaction type(a-r)	**(c)** Amount involved	**(d)** Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

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) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation

CAMDEN-CLARK HEALTH SERVICES, INC. AND SUBSIDIARIES

Consolidated Financial Statements and Other Finanical Information

For the Eight Month Period ended
February 28, 2011
and
Year Ended June 30, 2010

CAMDEN-CLARK HEALTH SERVICES, INC. AND SUBSIDIARIES

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DIXON HUGHES GOODMAN

REPORT OF INDEPENDENT AUDITORS

Board of Trustees
Camden-Clark Health Services, Inc and Subsidiaries
Parkersburg, West Virginia

We have audited the accompanying consolidated statements of financial position of Camden-Clark Health Services, Inc and Subsidiaries (the "Corporation") as of February 28, 2011 and June 30, 2010, and the related consolidated statements of operations, changes in net assets, and cash flows for the eight-month period ended February 28, 2011 and the year ended June 30, 2010 These consolidated financial statements are the responsibility of the Corporation'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 the audit to obtain reasonable assurance about whether the consolidated financial statements are free of material misstatement An audit includes 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 Corporation'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, as well as evaluating the overall consolidated financial statement 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 financial position of Camden-Clark Health Services, Inc and Subsidiaries as of February 28, 2011 and June 30, 2010, and the results of its operations, changes in net assets, and cash flows for the eight month period ended February 28, 2011 and year ended June 30, 2010 in conformity with accounting principles generally accepted in the United States of America

Dixon Hughes Goodman LLP

Charleston, West Virginia
June 29, 2011

Praxity

CAMDEN-CLARK HEALTH SERVICES, INC. AND SUBSIDIARIES
CONSOLIDATED STATEMENTS OF FINANCIAL POSITION
For the Eight Month Period ended February 28, 2011 and for the Year ended June 30, 2010

	2011	2010
Assets		
Current assets		
Cash and cash equivalents	$ **13,858,477**	$ 10,560,614
Assets whose use is limited		
Under financing agreements	**268,897**	1,980,375
Patient receivables, net of allowance for doubtful accounts of $42,021,000 and $43,807,000, respectively	**21,310,580**	17,666,272
Supplies inventory	**3,593,054**	3,607,758
Investments	**346,739**	200,264
Other	**3,266,374**	3,257,045
Total current assets	**42,644,121**	37,272,328
Assets whose use is limited		
By board for capital improvements	**73,354,922**	76,115,364
By trustee under financing agreements	**12,081,437**	14,101,868
Under self-funded insurance arrangements	**2,118,311**	3,046,879
Under deferred compensation trust agreements	**796,783**	909,269
Total assets whose use is limited	**88,351,453**	94,173,380
Property and equipment		
Land and land improvements	**6,748,705**	6,485,368
Building	**94,652,702**	92,336,718
Equipment	**162,092,159**	162,480,130
	263,493,566	261,302,216
Accumulated depreciation	**(144,296,222)**	(138,304,423)
	119,197,344	122,997,793
Construction/software implementation in progress	**6,654,248**	2,981,612
Property and equipment, net	**125,851,592**	125,979,405
Other assets		
Other assets	**2,889,104**	1,224,140
Deferred financing costs, net	**4,168,513**	4,388,660
Total other assets	**7,057,617**	5,612,800
Total assets	$ **263,904,783**	$ 263,037,913

	2011	2010
Liabilities and Net Assets		
Current liabilities		
Notes payable and capital lease obligations – current	**$ 44,555**	$ 45,111
Bonds payable-current	**3,050,714**	2,683,045
Professional and general liability-current	**650,607**	8,072,955
Accrued interest payable	**167,454**	984,335
Accounts payable and accrued expenses	**9,956,354**	5,640,117
Accrued vacation and sick leave	**2,988,274**	2,929,661
Accrued payroll and withholdings	**3,261,822**	2,371,248
Line of credit	**5,000,000**	-
Amounts due to third-party payors	**3,643,850**	3,312,761
Total current liabilities	**28,763,630**	26,039,233
Long-term obligations		
Notes payable and capital lease obligations	**499,378**	529,109
Bonds payable	**104,982,822**	108,037,565
Professional and general liability	**8,903,046**	5,262,318
Derivative obligation	**9,821,549**	14,807,729
Accrued pension obligation	**10,132,612**	16,209,830
Other liabilities	**796,783**	909,232
Total long-term obligations	**135,136,190**	145,755,783
Total liabilities	**163,899,820**	171,795,016
Net assets		
Unrestricted	**99,614,912**	90,934,031
Temporarily restricted	**278,051**	196,866
Permanently restricted	**112,000**	112,000
Total net assets	**100,004,963**	91,242,897
Total liabilities and net assets	**$ 263,904,783**	$ 263,037,913

See accompanying notes to consolidated financial statements.

CAMDEN-CLARK HEALTH SERVICES, INC. AND SUBSIDIARIES
CONSOLIDATED STATEMENTS OF OPERATIONS
For the Eight Month Period ended February 28, 2011 and for the Year ended June 30, 2010

	2011	2010
Operating revenue:		
Net patient service revenue	$ 105,631,138	$ 170,708,006
(Loss) gain on sale of assets	(1,424)	10,802
Other revenue	2,892,221	2,871,339
Total revenue	108,521,935	173,590,147
Operating expenses:		
Salaries and wages	40,378,311	59,105,685
Employee benefits	13,035,883	17,814,404
Physician fees	3,938,008	5,822,889
Supplies	21,673,767	34,181,684
Utilities	1,886,309	2,911,340
Repairs and renovations	769,782	1,159,443
Maintenance contracts	1,557,214	2,443,020
Rents	848,548	1,320,626
Insurance	5,291,497	9,166,438
Depreciation	8,246,827	12,667,795
Interest	3,679,519	5,813,606
Provision for bad debts	3,192,642	14,436,599
Other	13,680,355	18,592,911
Total operating expenses	118,178,662	185,436,440
Loss from operations	(9,656,727)	(11,846,293)
Nonoperating gains (losses)		
Investment income	6,027,914	3,895,725
Change in fair value of derivative obligation	4,986,180	(5,477,592)
Excess (deficit) of revenues over expenses	1,357,367	(13,428,160)
Other changes in unrestricted net assets		
Change in pension funded status	4,310,193	(3,015,969)
Net unrealized gains on investments	2,717,067	2,893,664
Net assets released from restrictions for capital acquisitions	296,254	490,111
Total other changes in unrestricted net assets	7,323,514	367,806
Increase (decrease) in unrestricted net assets	$ 8,680,881	$ (13,060,354)

CAMDEN-CLARK HEALTH SERVICES, INC. AND SUBSIDIARIES
CONSOLIDATED STATEMENTS OF CHANGES IN NET ASSETS
For the Eight Month Period ended February 28, 2011 and for the Year ended June 30, 2010

	2011	2010
Unrestricted net assets		
Excess (deficit) of revenues over expenses	$ 1,357,367	$ (13,428,160)
Net unrealized gains on investments	2,717,067	2,893,664
Assets released from restrictions for capital acquisitions	296,254	490,111
Change in minimum pension obligation	4,310,193	(3,015,969)
Increase (decrease) in unrestricted net assets	8,680,881	(13,060,354)
Temporarily restricted net assets		
Contributions, net	335,394	425,490
Investment income	42,045	34,871
Net assets released from restrictions for capital acquisitions	(296,254)	(490,111)
Increase (decrease) in temporarily restricted net assets	81,185	(29,750)
Increase (decrease) in net assets	8,762,066	(13,090,104)
Net assets, beginning of year	91,242,897	104,333,001
Net assets, end of period/year	$ 100,004,963	$ 91,242,897

CAMDEN-CLARK HEALTH SERVICES, INC. AND SUBSIDIARIES
CONSOLIDATED STATEMENTS OF CASH FLOWS
For the Eight Month Period ended February 28, 2011 and for the Year ended June 30, 2010

	2011	2010
Operating activities:		
Increase (decrease) in net assets	$ 8,762,066	$ (13,090,104)
Adjustments to reconcile increase (decrease) in net assets to net cash provided by operating activities		
Depreciation	8,246,827	12,667,795
Amortization	220,147	233,228
Restricted contributions and investment income	(377,439)	(460,361)
Loss (gain) on disposal of assets	1,424	(10,802)
Net realized and unrealized (gains) losses on investments	(6,640,483)	(5,544,977)
Change in minimum pension obligation	(4,310,193)	3,015,969
Provision for bad debt	3,192,642	14,436,599
Change in fair value of derivative obligation	(4,986,180)	5,477,592
(Increase) decrease in cash due to changes in operating assets		
Patient receivables, net of allowances	(6,836,950)	(10,576,423)
Supplies inventory and other current assets	5,375	(186,076)
Other assets	(1,664,964)	916,718
Increase (decrease) in cash due to changes in operating liabilities		
Accounts payable and other accrued expenses	3,557,969	(4,305,493)
Accrued payroll and payroll withholdings	890,574	539,874
Professional and general liability	(3,781,620)	7,799,005
Pension obligation	(1,767,025)	(310,869)
Estimated third party settlements	331,089	602,212
Other liabilities	(112,449)	107,681
Net cash (used in) provided by operating activities	(5,269,190)	11,311,568
Cash flows from investing activities		
Assets whose use is limited, net	14,027,413	1,666,788
Property and equipment acquisitions	(8,120,438)	(7,339,470)
Net cash provided by (used in) investing activities	5,906,975	(5,672,682)
Cash flows from financing activities		
Restricted contributions and investment income	377,439	460,361
Payments on notes payable	(30,287)	(40,169)
Proceeds from bonds payable	-	463,291
Payments on bonds	(2,646,021)	(2,153,711)
Payment of bond issuance costs	(41,053)	(34,264)
Proceeds from line of credit	5,000,000	-
Net cash provided by (used in) financing activities	2,660,078	(1,304,492)
Increase in cash and cash equivalents	3,297,863	4,334,394
Cash and cash equivalents-beginning of year	10,560,614	6,226,220
Cash and cash equivalents-end of year	$ 13,858,477	$ 10,560,614
Supplement disclosure of cash flow information		
Cash payments for interest	$ 4,496,400	$ 5,413,552
Capitalized interest	$ 252,141	$ 639,596

See accompanying notes to consolidated financial statements.

1. DESCRIPTION OF ORGANIZATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Organization Camden-Clark Health Services, Inc (the "Corporation") is a West Virginia nonprofit corporation and is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code ("IRC") The Corporation is the parent company of Camden-Clark Memorial Hospital Corporation, which provides inpatient, outpatient and emergency services for residents of Wood County and the surrounding area

Principles of Consolidation: The accompanying consolidated financial statements include the assets, liabilities, net assets, revenues, and expenses of

Camden-Clark Memorial Hospital Corporation, a controlled tax-exempt entity,
Family Fitness Center, LLC, a single-member limited liability company,
Camden-Clark Foundation Inc , a tax-exempt entity, and
Camden-Clark Physician Corporation, a tax-exempt entity

All significant intercompany transactions and accounts 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 of America ("GAAP") requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period Actual results could materially differ from those estimates

Cash and Cash Equivalents: Cash and cash equivalents include investments in highly liquid debt instruments with an original maturity of three months or less, excluding amounts whose use is limited by board designation or other arrangements under trust agreements The Corporation routinely invests its surplus operating funds in money market mutual funds These funds generally invest in highly liquid U S government and agency obligations

Included in cash and cash equivalents are amounts invested in a daily repurchase agreement entered into with a financial institution In accordance with the terms of the repurchase agreement, the Corporation invests excess funds overnight through the purchase of securities under agreement to resell the securities the following day The underlying securities remain under the control of the financial institution during the effective period of the agreement

Cash Balances in Excess of FDIC Insurance: The Corporation maintains cash balances with several banking institutions At February 28, 2011 and June 30, 2010, the amounts on deposit at these institutions exceeded the amounts which would be covered by the Federal Deposit Insurance Corporation ("FDIC") In management's opinion, the amounts in excess of FDIC limits do not pose significant risk to the Corporation and management does not anticipate nonperformance by these institutions

Supplies Inventory: Supplies inventory is valued at the lower-of-cost (first-in, first-out method) or market

Patient Receivables: Patient receivables consist primarily of amounts due from third-party reimbursement programs, managed care health plans, commercial insurance companies, and individual patients for healthcare services rendered The Corporation does not require collateral or other security on its patient receivables Patient receivables are reported net of management's estimate of amounts uncollectible due to contractual adjustment, bad debt, and charity Management considers past performance when determining these amounts

Significant concentrations of net patient receivables at February 28, 2011 and June 30, 2010 include Medicare 32% and 23%, Medicaid 7% and 19%, Blue Cross 16% and 18%, and commercial and other payors of 45% and 40%, respectively

Investments and Investment Income Investments in equity securities with readily determinable fair values and all investments in debt securities are measured at fair value on the consolidated statements of financial position Investment income or loss (including realized gains and losses on investments, interest and dividends) is included in the excess (deficit) of revenues over expenses, unless the income or loss is restricted by donor or law Realized gains and losses are determined based on the specific identification method Unrealized gains and losses on investments are excluded from the excess (deficit) of revenues over expenses

The Corporation continually reviews non-trading investments for impairment conditions that indicate that an other-than-temporary decline in market value has occurred In conducting this review, numerous factors are considered that, individually or in combination, indicate a decline is other-than-temporary and that a reduction of the carrying value is required These factors include specific information pertaining to an individual company or a particular industry and general market conditions that reflect prospects for the economy as a whole For the eight month period ended February 28, 2011 and the year ended June 30, 2010, the Corporation did not have any other-than-temporary impairment losses

Investment Risk: Investment securities are exposed to various risks, such as interest rate, market and credit Due to the level of risk associated with certain investment securities and the level of uncertainty related to the changes in value of investment securities, it is at least reasonably possible that changes in risks in the near term could materially affect the amounts reported in the accompanying consolidated statements of financial position, statements of operations and changes in net assets

Assets Whose Use is Limited: Assets whose use is limited include assets held by trustees under indenture agreements and designated assets set aside by the Board of Trustees (the "Board") to fund the following obligations of the Corporation

- Expansion and renovation project and other capital improvements,
- Payment of principal and interest on outstanding bond obligations and other financing arrangements,
- Payment of obligations arising from the Corporation's self-insurance arrangements, and
- Payment of obligations arising from the Corporation's deferred compensation agreements

Professional and general liability The provision for estimated self-insured medical malpractice and general liability includes estimates of the ultimate costs for both reported claims and claims incurred but not reported

Property and Equipment Property and equipment acquisitions are recorded at cost Assets acquired costing $1,000 or greater are capitalized and depreciated over the estimated useful life of each class of depreciable asset and is computed using the straight-line method Property and equipment provided under the operating lease and agreement with the Corporation, as described in other notes to these consolidated financial statements, is recorded at historical cost and depreciated over the estimated useful life of the property and equipment

Gross assets recorded under capital leases at February 28, 2011 and June 30, 2010 were $0 and $1,589,000, respectively Amortization of such assets, recorded under the straight-line method over the lease period, is included with depreciation expense in the consolidated statements of operations The accumulated amortization on assets under capital leases amounts to approximately $0 and $1,589,000 at February 28, 2011 and June 30, 2010, respectively

Gifts of long-lived assets such as land, buildings or equipment are reported as unrestricted support, but are excluded from excess (deficit) of revenues over expenses, unless explicit donor stipulations specify how the assets are to be used Gifts of cash or other assets that must be used to acquire long-lived assets are reported as restricted support Absent explicit donor stipulations about how long these long-lived assets must be maintained, expirations of donor restrictions are reported when the donated or acquired long-lived assets are placed into service

Impairment of Long-Lived Assets Management of the Corporation reviews long-lived assets (including property, equipment, and other assets) for impairment whenever events or changes in circumstances indicate that the carrying amount of an asset may not be recoverable Management considers the undiscounted cash flow expected to be generated by the use of the asset and its eventual disposition to determine when, and if, impairment has occurred Any write-downs due to impairment are charged to operations at the time the impairment is identified No such write-downs were required in 2011 and 2010

Deferred Financing Costs The costs of issuing the Corporation's 2004 Revenue Refunding and Improvement Bonds were deferred at issuance and are being amortized over the life of the bonds through interest expense using the effective yield method For the eight month period ended February 28, 2011 and the year ended June 30, 2010, amortization of bond issuance costs approximated $181,000 and $278,000, respectively

The costs of issuing the Corporation's 2007 Improvement Revenue Bonds were deferred at issuance and are being amortized over the life of the bonds through interest expense using the effective yield method For the eight month period ended February 28, 2011 and the year ended June 30, 2010, amortization of bond issuance costs approximated $39,000 and $54,000, respectively

Amortization expense for the period March 1, 2011 to December 31, 2011 and the next five years is expected to approximate the following

March 1, 2011 – December 31, 2011	$	270,000
2012	$	317,000
2013	$	309,000
2014	$	297,000
2015	$	278,000
2016	$	266,000

Temporarily and Permanently Restricted Net Assets: Temporarily restricted net assets are those whose use by the Corporation has been limited by donors to a specific time period or purpose Permanently restricted net assets have been restricted by donors to be maintained by the Corporation in perpetuity

Income Taxes: The Corporation is generally exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code, accordingly, the accompanying consolidated financial statements do not reflect a provision or liability for federal and state income taxes The Corporation follows the Financial Accounting Standards Board's ("FASB") authoritative guidance on accounting for uncertainty in income taxes The guidance clarifies the accounting for the recognition and measurement of the benefits of individual tax positions in the financial statements Tax positions must meet a recognition threshold of more-likely-than-not in order for the benefit of those tax positions to be recognized in the consolidated financial statements The Corporation has determined that it does not have any material unrecognized tax benefits or obligations at February 28, 2011 and June 30, 2010

Net Patient Revenues: The Corporation has agreements with third-party payors that provide for payments to the Corporation at amounts different from its established rates Payment arrangements include prospectively determined rates per discharge, reimbursed costs, discounted charges, and per diem payments Net patient service revenue is reported at the estimated net realizable amounts from patients, third-party payors, and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payors Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined

Excess (deficit) of Revenues Over Expenses The consolidated statements of operations include excess (deficit) of revenues over expenses Changes in unrestricted net assets, which are excluded from excess (deficit) of revenues over expenses, consistent with industry practice, include unrealized gains and losses on investments other than trading securities, change in minimum pension obligation, permanent transfers of assets to and from related organizations for other than goods and services, and contributions of long-lived assets (including assets acquired using contributions that, by donor restriction, were to be used for the purpose of acquiring such assets)

Charity Care The Corporation provides care to patients who meet certain criteria under its charity care policy without charge or at amounts less than its established rates Because the Corporation does not pursue collection of amounts determined to qualify as charity care, they are not reported as revenues

The Corporation maintains records to identify and monitor the level of charity care it provides These records include the amount of charges forgone for services and supplies furnished under its charity care policy Charity care rendered by the Corporation, at established charges, approximated $16,722,167 and $12,502,175 for the eight month period ended February 28, 2011 and the year ended June 30, 2010 respectively These amounts pertain to services relating to care provided to the poor and the indigent

Donor-Restricted Gifts and Contributions Unconditional promises to give cash and other assets to the Corporation 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 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 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 statements of operations as net assets released from restrictions Donor-restricted contributions whose restrictions are met within the same year as received are reported as unrestricted contributions in the accompanying consolidated financial statements

Self-insurance health plan: The Corporation has a self-insurance program for employee health insurance Payments for claims by employees are remitted to a third-party administrator to provide for the payment of actual claims and administrative fees Estimated unpaid claims, including amounts for incurred but not reported claims, are included in accounts payable and accrued expenses

Derivatives: Derivative instruments are recorded in the accompanying consolidated financial statements at estimated fair value Changes in estimated fair value of derivative instruments that meet certain criteria and that qualify for hedge accounting are reported as Other Changes in Unrestricted Net Assets in the Consolidated Statement of Operations Changes in estimated fair value of derivative instruments that do not qualify for hedge accounting are recorded in (Deficit) of Revenues Over Expenses The Corporation held two interest rate swap agreements during the eight month period ended February 28, 2011 and the year ended June 30, 2010 The Corporation records its derivative instruments as either assets or liabilities in the accompanying consolidated statements of financial position These interest rate swaps were not recorded utilizing hedge accounting and the estimated fair value adjustment for the eight month period ended February 28, 2011 and the year ended June 30, 2010 is recognized in excess (deficit) of revenues over expenses

Advertising Expense: The Corporation recognizes the costs for advertising as they are incurred Advertising costs included in expenses for the eight month period ended February 28, 2011 and the year ended June 30, 2010 were approximately $348,100 and $538,700, respectively

New Accounting Pronouncements: The FASB recently issued amendments to Health Care Entities Topic 954 which is effective for fiscal years beginning after December 15, 2010 The objective of one of the amendments under subtopic 2010-03 is to reduce the diversity in practice related to charity disclosures Currently, some entities base their charity disclosures on cost while others utilize a charge or revenue basis Topic 954 requires that cost be used as the basis for charity care disclosures Accordingly, upon adoption the Corporation will need to change from the current revenue based disclosures to cost based disclosures, including disclosing the method used to determine such costs The other amendment under subtopic 2010-24 clarifies that a health care entity should not net insurance recoveries against a related claim liability Additionally, the amount of the claims reserve obligations should be estimated without consideration of insurance recoveries Accordingly, upon adoption, the Corporation will need to reflect its insurance obligations on a gross basis and record a recovery asset net of estimated valuation allowance, when applicable

Subsequent Events: The Corporation evaluated the effect subsequent events would have on the financial statements through June 29, 2011, which is the date the consolidated financial statements were issued

Reclassifications: Certain amounts in the prior year consolidated financial statements and note disclosures have been reclassified for comparative purposes to conform to the presentation in the current year consolidated financial statements

2. Net Patient Service Revenue

For the eight month period ended February 28, 2011 and the year ended June 30, 2010, there were no final settlements for Medicaid cost reports or the Medicaid Disproportionate Share Enhancement Program For the eight month period ended February 28, 2011 and the year ended June 30, 2010, there were no final settlements for Medicare cost reports

Revenue from Medicare and Medicaid programs accounted for approximately 40% and 11%, respectively, for the eight month period ended February 28, 2011 and 37% and 8%, respectively, for the year ended June 30, 2010 of the Corporation's net patient service revenue Laws and regulations governing Medicare and Medicaid programs are extremely complex and subject to interpretation As a result, there is at least a reasonable possibility that recorded estimates will change in the near term and any such changes may be material Net patient service revenue for the eight month period ended February 28, 2011, increased approximately $716,000 as a result of revisions to prior year cost report settlement estimates Settlement of prior year cost reports and revisions to other prior year settlement estimates did not have a material impact on net patient service revenue for 2010

Medicare: Inpatient acute care services rendered to Medicare program beneficiaries are paid at prospectively determined rates per discharge These rates vary according to a patient classification system that is based on clinical, diagnostic, and other factors Non-prospectively determined inpatient services for exempt units are paid based on a cost reimbursement methodology subject to TEFRA limitations Outpatient services (including ambulatory surgery, radiology, and other diagnostic services) are paid based on a payment system entitled Ambulatory Payment Classification ("APCs") The payment system applies to the outpatient services performed in all hospitals participating in the Medicare program, and community mental health centers

Payment under APCs resulted in discontinuation of the blended payment method for radiology and other diagnostic services and ambulatory surgical center services provided in a hospital outpatient department The Corporation's Medicare cost reports have been settled by the Medicare intermediary through June 30, 2007

Medicaid: Inpatient and outpatient services rendered to Medicaid program beneficiaries are reimbursed on a prospective payment system

Medicaid Disproportionate Share Enhancement Program: The West Virginia Legislature has approved the West Virginia Medicaid Disproportionate Share Hospital Program ("DSH") Under this program, eligible hospitals receive additional reimbursement based on their Medicaid inpatient utilization and other factors as compared to other hospitals in the state

The State of West Virginia Disproportionate Share Hospital State Plan (the DSH State Plan) provides for a settlement process among participating hospitals The Bureau for Medical Services of the State of West Virginia Department of Health and Human Resources (the Bureau) has contracted with a third-party vendor to assist with the audit settlement process for the DSH State Plan The laws and regulations governing the DSH settlement process are complex, involving statistical data from all participating hospitals, and subject to interpretation Accordingly, the Corporation is not able to estimate the impact on the consolidated financial statements upon completion of the DSH settlement process The ultimate resolution of the settlement process could materially affect the Corporation's future results of operations or cash flows in a particular period

The Corporation's Medicaid cost reports have been settled by the Medicaid fiscal intermediary through June 30, 1996

Other Payors: The Corporation has also entered into payment agreements with certain commercial carriers The West Virginia Public Employees Insurance Association has imposed limitations of payments The basis for payments to the Corporation under these agreements includes discounts from established charges

Economic Dependency: The Corporation receives payments for services rendered from the Medicare and Medicaid programs The amount ultimately received for services rendered to the beneficiaries of these programs is dependent on the regulations governing these programs and is, therefore, subject to frequent and often substantial change Payments received for services rendered from other than the Medicare or Medicaid programs are almost entirely for services to residents of Wood County and surrounding areas The economic conditions of the region, therefore, have a substantial impact on the Corporation

Rate Regulation: Pursuant to the provisions of the West Virginia Code, the West Virginia Health Care Authority ("HCA") has been empowered to regulate the Corporation's rates charged to nongovernmental payors through orders issued on the basis of budget and rate applications submitted by the Corporation The Corporation's management believes that there will be no significant change in its rate structure and, therefore, there will not be a material adverse effect on the financial position of the Corporation

Healthcare Regulation: The healthcare industry is subject to numerous laws and regulations of federal, state and local governments These laws and regulations include, but are not necessarily limited to, matters such as licensure, accreditation, government healthcare program participation requirements, reimbursement of patient services, and Medicare and Medicaid fraud and abuse Recently, government activity has increased with respect to investigations and allegations concerning possible violations of fraud and abuse statutes and regulations by healthcare providers

Violations of these laws and regulations could result in expulsion from government healthcare programs together with the imposition of significant fines and penalties, as well as significant repayments for patient services previously billed Management believes that the Corporation is in compliance with applicable government laws and regulations Compliance with such laws and regulations can be subject to future government review and interpretation as well as regulatory actions unknown or unasserted at this time

3. Assets Whose Use Is Limited

Assets whose use is limited include assets held by trustees under indenture agreements and designated assets set aside by the Board for future capital improvements and self-insurance trust agreements, over which the Board retains control and may, at its discretion, subsequently use for other purposes Amounts required to meet current liabilities of the Corporation have been classified as current assets in the consolidated statements of financial position at February 28, 2011 and June 30, 2010 The composition of assets whose use is limited at February 28, 2011 and June 30, 2010 is as follows

	February 28, 2011		
	Cost	Market	Net Unrealized Gains/Losses
Under financing agreements:			
Cash and cash equivalents	$ 268,897	$ 268,897	$ -
By Board for capital improvements:			
Cash and cash equivalents	$ 357,507	$ 357,507	$ -
Equity securities and mutual funds	30,439,589	36,896,924	6,457,335
Debt securities	30,057,411	30,835,794	778,383
Alternative investment	4,500,000	5,264,697	764,697
	$ 65,354,507	$ 73,354,922	$ 8,000,415
By trustee under financing agreement:			
Cash and cash equivalents	$ 12,068,796	$ 12,068,796	$ -
Debt securities	11,883	12,641	758
	$ 12,080,679	$ 12,081,437	$ 758
Under self-funding insurance arrangements:			
Cash and cash equivalents	$ 201,179	$ 201,179	$ -
Equity securities and mutual funds	1,779,044	1,917,132	138,088
	$ 1,980,223	$ 2,118,311	$ 138,088
Under deferred compensation trust agreements:			
Cash and cash equivalents	$ 7,066	$ 7,066	$ -
Equity securities and mutual funds	683,442	789,717	106,275
	$ 690,508	$ 796,783	$ 106,275

	June 30, 2010		
	Cost	Market	Net Unrealized Gains/Losses
Under financing agreements			
Cash and cash equivalents	$ 1,980,375	$ 1,980,375	$ -
By Board for capital improvements			
Cash and cash equivalents	$ 11,282,280	$ 11,282,280	$ -
Debt securities	24,613,227	25,772,854	1,159,627
Equity securities and mutual funds	35,021,297	39,060,230	4,038,933
	$ 70,916,804	$ 76,115,364	$ 5,198,560
By trustee under financing agreement			
Cash and fixed income funds	$ 9,247,176	$ 9,247,176	$ -
Debt securities	4,845,514	4,854,692	9,178
	$ 14,092,690	$ 14,101,868	$ 9,178
Under self-funding insurance arrangements			
Cash and cash equivalents	$ 612,467	$ 612,467	$ -
Equity securities and mutual funds	2,241,721	2,434,412	192,691
	$ 2,854,188	$ 3,046,879	$ 192,691
Under deferred compensation trust agreements			
Cash and cash equivalents	$ 7,875	$ 7,875	$ -
Debt securities	38,127	213,105	174,978
Equity securities and mutual funds	872,425	688,289	(184,136)
	$ 918,427	$ 909,269	$ (9,158)

The following table reflects the gross unrealized losses and fair value of the Corporation's investments with unrealized losses that are not deemed to be other-than-temporarily impaired, aggregated by investment category and length of time that individual securities have been in a continuous loss position at February 28, 2011

	Less than 12 months		**12 months or greater**		**Total**	
	Fair Value	**Unrealized Losses**	**Fair Value**	**Unrealized Losses**	**Fair Value**	**Unrealized Losses**
Fixed income funds	**$ 9,866,604**	**$ 218,474**	**$ 885,170**	**$ 34,370**	**$10,751,774**	**$ 252,844**
Equity securities and mutual funds	**9,867,012**	**290,930**	**2,099,464**	**40,145**	**11,966,476**	**331,075**
Total	**$19,733,616**	**$ 509,404**	**$ 2,984,634**	**$ 74,515**	**$22,718,250**	**$ 583,919**

Investments of the Corporation consist of fixed income funds, equity securities and mutual funds There is no concentration of investments in any one security or industry sector that would account for the above noted unrealized losses Management believes that temporary market fluctuations account for these positions and that based upon the objectives of the Corporation, the investments will fully recover before the need to liquidate The Corporation has the ability and intent to hold these investments until they are no longer in a loss position

The following schedule summarizes the investment return and its classification in the consolidated statements of operations and changes in net assets

	For the eight month period ended February 28, 2011			
	Unrestricted	Temporarily Restricted	Permanently Restricted	Total
Dividends and interest	**$ 2,447,295**	**$ 8,399**	**$ -**	**$ 2,455,694**
Net realized gains	**3,889,770**	**3,785**	**-**	**3,893,555**
Net unrealized gains on investments	**2,717,067**	**29,861**	**-**	**2,746,928**
Total return on investments	**$ 9,054,132**	**$ 42,045**	**$ -**	**$ 9,096,177**
Reported as follows:				
Other revenue	**$ 309,151**	**$ -**	**$ -**	**$ 309,151**
Investment income-temporarily restricted	**-**	**42,045**	**-**	**42,045**
Investment income-unrestricted	**6,027,914**	**-**	**-**	**6,027,914**
Net unrealized gains on investments	**2,717,067**	**-**	**-**	**2,717,067**
Total return on investments	**$ 9,054,132**	**$ 42,045**	**$ -**	**$ 9,096,177**

	Year ended June 30, 2010			
	Unrestricted	Temporarily Restricted	Permanently Restricted	Total
Dividends and interest	$ 2,263,326	$ 13,105	$ -	$ 2,276,431
Net realized gains	2,651,313	1,544	-	2,652,857
Net unrealized gains on investments	2,893,664	20,222	-	2,913,886
Total return on investments	$ 7,808,303	$ 34,871	$ -	$ 7,843,174
Reported as follows				
Other revenue	$ 1,305,067	$ -	$ -	$ 1,305,067
Investment income-temporarily restricted	-	34,871	-	34,871
Investment income-unrestricted	3,609,572	-	-	3,609,572
Net unrealized gains on investments	2,893,664	-	-	2,893,664
Total return on investments	$ 7,808,303	$ 34,871	$ -	$ 7,843,174

Total return on investments is net of investment fees of approximately $136,000 for the period July 1, 2010 thru February 28,2011 and $265,000 for the year ended June 30, 2010, respectively

Returns on permanently restricted funds are temporarily restricted based on donor specifications

4. INVESTMENTS

Investments stated at fair value include

	February 28, 2011	June 30, 2010
Cash and cash equivalents	$ 115,745	$ 110,732
Mutual funds	333,955	187,380
Other	12,784	12,884
	$ 462,484	$ 310,996
Amounts representing cash equivalents	$ 115,745	$ 110,732
Amounts representing short-term investments	346,739	200,264
Investments	$ 462,484	$ 310,996

5. SUPPLIES INVENTORY

Significant components of supplies inventory are as follows

	February 28, 2011	June 30, 2010
Operating room	$ 1,852,043	$ 1,794,508
Pharmaceuticals	988,005	988,005
Medical and surgical	201,259	208,972
Other	551,747	616,273
Supplies inventory	$ 3,593,054	$ 3,607,758

6. PENSION PLANS

Defined Benefit Plan: The Corporation sponsors a defined benefit pension plan that covers substantially all Corporation employees The Plan provides retirement benefits based on years of credited service and compensation levels The Corporation's funding policy is to make the recommended cash contributions, as determined by its actuaries, to ensure full funding of the Plan The Corporation expects to contribute approximately $1,920,000 to its pension plan during the period from March 1, 2011 to December 31, 2011

The Corporation uses a June 30 measurement date for its defined benefit plan In accordance with FASB ASC 715, *Compensation – Retirement Benefits*, ("FASB ASC 715"), the Corporation was required to recognize a minimum liability relating to the underfunded status of the Plan, for the eight month period ended February 28, 2011 and the year ended June 30, 2010 An underfunding results whenever the accumulated benefit obligation exceeds the fair value of the Plan assets The minimum pension liability adjustment is reflected as a component of other changes in unrestricted net assets on the consolidated statements of operations

The following table sets forth the changes in benefit obligations, changes in Plan assets, and components of net periodic pension cost for the defined benefit plan as of February 28, 2011 and June 30, 2010 and for the eight month period ended February 28, 2011 and the year ended June 30, 2010

	2011	2010
Change in benefit obligations		
Projected benefit obligation, beginning of period/year	**$ 37,432,227**	$ 32,905,001
Service cost	**917,460**	1,182,096
Interest cost	**1,340,543**	1,994,038
Actuarial (gain)/loss	**(1,087,518)**	4,724,594
Benefits paid	**(1,848,220)**	(3,373,502)
Projected benefit obligation, end of period/year	**$ 36,754,492**	$ 37,432,227
Change in plan assets		
Fair value of plan assets, beginning of period/year	**$ 21,222,397**	$ 19,400,271
Actual return on plan assets	**3,467,703**	2,175,628
Employer contributions	**3,780,000**	3,020,000
Benefits paid	**(1,848,220)**	(3,373,502)
Fair value of plan assets, end of period/year	**$ 26,621,880**	$ 21,222,397
Unfunded Status at End of Period/Year	**$ (10,132,612)**	$ (16,209,830)
Components of net periodic pension costs		
Service cost	**$ 917,460**	$ 1,182,096
Interest cost	**1,340,543**	1,994,038
Return on assets	**(1,010,139)**	(1,360,092)
Net actuarial loss recognition	**765,111**	893,089
Net periodic pension cost	**$ 2,012,975**	$ 2,709,131

Included in unrestricted net assets at February 28, 2011 and June 30, 2010, is an unrecognized actuarial loss of $11,024,626 and $15,334,819 that has not yet been recognized in net periodic benefit cost The actuarial loss expected to be recognized in the period from March 1, 2011 to December 31, 2011 is $729,000

The accumulated benefit obligation for the Plan was $31,773,382 and $32,520,486 at February 28, 2011 and June 30, 2010, respectively

The Corporation maintains an investment policy with regard to its pension plan assets The investment policy has been formulated by the Board based upon consideration of a wide range of policies and describes the prudent investment processes deemed appropriate for the Corporation to engage It sets forth an investment structure for managing all plan assets, states the Board's expectations and objectives, establishes criteria to monitor and evaluate performance, and sets forth requirements complying with Employees Retirement Income Securities Act of 1974 ("ERISA") laws, rules and regulations Strategies have been developed to maintain the purchasing power of the current assets by producing positive real rates of return on plan assets, maintaining a fully funded status with regard to the accumulated benefit obligation, maintaining flexibility in determining the future level of contributions, and maximizing return within prudent levels of risk as determined by the Board The investments guidelines and the Plan's strategic asset allocation are based upon an investment horizon of greater than five years, so that short-term fluctuations should be viewed based on this long-term perspective

Plan assets are allocated among the following categories

			Plan Assets		
Asset Category	**February 28, 2011**	**%**	**Target Range**	June 30, 2010	%
Cash and cash equivalents	**$ -**	**0%**	5%	$ 822,204	4%
Mutual funds and other investments	**25,929,711**	**97%**	95%	20,343,871	96%
Other	**692,169**	**3%**	0%	56,322	0%
Total	**$ 26,621,880**	**100%**	100%	$ 21,222,397	100%

Estimated future benefits payments for the period March 1, 2011 through December 31, 2011 and then for the years ending December 31 are as follows

March 1, 2011 to December 31, 2011	$ 962,435
2012	$ 1,001,702
2013	$ 1,165,073
2014	$ 1,266,089
2015	$ 1,457,451
2016-2020	$ 9,100,050

Weighted average assumptions used to determine benefit obligations are as follows

	February 28, 2011	June 30, 2010 2010
Discount rate	**5.45%**	6 25%
Compensation increase rate	**4.00%**	4 00%

Weighted average assumptions used to determine net cost are as follows

	February 28, 2011	June 30, 2010 2010
Discount rate	**5.45%**	6 25%
Expected long-term rate of return on assets	**7.00%**	7 00%
Compensation increase rate	**4.00%**	4 00%

The basis for determining the overall expected long-term rate of return on assets has been based on the assumption that future real returns will approximate the historic long-term rates of return experienced for each asset class in the investment policy statement Based on this analysis, it was determined that the long-term rate of return as of February 28, 2011 should be consistently applied

The following table summarizes the plan's financial assets and liabilities accounted for at fair value on a recurring basis by level within the fair value hierarchy

	February 28, 2011			
	Level 1	Level 2	Level 3	Total
Cash and cash equivalents				
Money market funds	$ (17,107)	$ -	$ -	$ (17,107)
Mutual funds				
Domestic	9,798,731	-	-	9,798,731
International	3,256,557	-	-	3,256,557
Fixed income	12,855,216	-	-	12,855,216
Total mutual funds	25,910,504	-	-	25,910,504
Hedge fund	-	695,517	-	695,517
Total investments at fair value	$ 25,893,397	$ 695,517	$ -	$ 26,588,914

	June 30, 2010			
	Level 1	Level 2	Level 3	Total
Mutual funds				
Equities	$ 10,337,484	$ -	$ -	$ 10,337,484
Fixed income	4,141,553	-	-	4,141,553
Common stock	1,033,391	-	-	1,033,391
Municipal and corporate bonds	4,464,242	-	-	4,464,242
U S government securities	367,201	-	-	367,201
Money market funds	-	822,204	-	822,204
Total investments at fair value	$ 20,343,871	$ 822,204	$ -	$ 21,166,075

The Corporation had $32,966 and $56,322 of accrued interest as of February 28, 2011 and June 30, 2010, which was not classified as a Level as prescribed within FASB ASC 820

Deferred Compensation Arrangements: The Corporation has a 457(b) deferred compensation plan for certain administrative personnel Under the terms of the Plan, contributions are made at the discretion of the Corporation The contributions are vested at the beginning of the third calendar year following the calendar year of the allocation Employees are entitled to receive a distribution equal to the vested portion of the accounts as of the vesting date Rabbi trust arrangements have been used to hold plan assets of which the total market value of February 28, 2011 and June 30, 2010 was $796,783 and $909,269, respectively Plan assets are included with assets whose use is limited in the consolidated statements of financial position with the liability reflected separately and is reported in other long-term liabilities

7. BONDS PAYABLE

In 2004, the Corporation received $19,000,000 in proceeds of West Virginia Hospital Finance Authority Hospital Revenue Refunding and Improvement Bonds 2004, Series A, $19,350,000 in proceeds of West Virginia Finance Authority Hospital Auction Rate Certificates Revenue Refunding and Improvement Bonds, 2004 Series B, and $57,900,000 in proceeds of West Virginia Hospital Finance Authority Hospital Auction Rate Certificates Revenue Refunding and Improvement Bonds, 2004 Series C The proceeds from the Series 2004 Bonds were used or will be used to (1) refund all the Wood County Building Commission Revenue Bonds, Series 1996, Series 1998, and Series 2003, (2) finance the costs of acquisition of certain equipment for the institution, including capitalized interest thereon, and (3) fund a Debt Service Reserve Fund and pay the costs of issuing the Series 2004 Bonds

In 2007, the Corporation received $24,600,000 in proceeds of West Virginia Hospital Finance Authority Hospital Auction Rate Certificates Improvement Revenue Bonds 2007, Series A The proceeds from the Series 2007 Bonds were used or will be used to (1) refund a bank loan, (2) finance the costs of acquisition of certain equipment for the institution, including capitalized interest thereon, and (3) fund a Debt Service Reserve Fund and pay the costs of issuing the Series 2007 Bonds On October 1, 2009, the Supplemental Master Trust Indenture 2009-1 amended and restated the Series 2007 A Note Bonds This amendment and restatement converted the terms and provisions of the 2007 Series A Auction Rate Certificates to fixed rate bonds

The Corporation's bond obligations outstanding are as follows

	February 28, 2011	June 30, 2010 2010
West Virginia Hospital Finance Authority Hospital Revenue Refunding and Improvement Bonds, 2004 Series A dated June 30, 2004, maturing February 15, 2019, with interest rates ranging from 3 75% to 5 25%, including unamortized premiums of $190,474 and $213,134, respectively	**$ 12,835,474**	$ 13,108,134
West Virginia Hospital Finance Authority Hospital Auction Rate Certificates Revenue Refunding and Improvement Bonds, 2004 Series B dated June 30, 2004, maturing February 15, 2034, with weekly variable interest rates The interest rate at February 28, 2011 and June 30, 2010 was 0 770% and 0 753%, respectively	**15,349,385**	15,399,407
West Virginia Hospital Finance Authority Hospital Auction Rate Certificates Revenue Refunding and Improvement Bonds, 2004 Series C dated June 30, 2004, maturing February 5, 2034, with weekly variable interest rates The interest rate at February 28, 2011 and June 30, 2010 was 0 735% and 0 753%, respectively	**55,399,638**	57,149,778
West Virginia Hospital Finance Authority Hospital Auction Rate Certificates Improvement Revenue Bonds, 2007 Series A dated September 13, 2007 as amended and restated on October 1, 2009, maturing February 15, 2034 The interest rate at February 28, 2011 and June 30, 2010 was 2 50%, including unamortized premiums of $449,036 and $463,291, respectively	**24,449,039**	25,063,291
	108,033,536	110,720,610
Less current portion	**3,050,714**	2,683,045
	$ 104,982,822	$ 108,037,565

The bond agreements contain certain covenants that provide for, among other things, the maintenance of a certain level of revenues available for debt service, limitations on the occurrence of additional short-term and long-term debt, as well as other non-financial covenants Under the terms of the bond agreement, the Corporation is required to maintain certain deposits with the trustee Such deposits are included with assets whose use is limited The bonds are secured by gross receipts and essentially all assets of the Corporation

At February 28, 2011 the Corporation did not meet compliance with the short term indebtedness limitaion which requires that current liabilities do not exceed the lesser of 15% of net patient service revenues of the obligated group or 30% of unrestricted cash and investments A primary contributing factor to this covenant violation was the $5,000,000 outstanding balance on the line of credit used in conjunction with the transaction as described in Note 16 Management has obtained a waiver for this covenant violation through March 1, 2012

Scheduled principal payments on bonds for the period March 1, 2011 to December 31, 2011 then for the 12 months ended December 31 are as follows

Years Ending	Principal Payments	Premium Amortization	Total
March 1, 2011 – December 31, 2011	$ 2,491,667	$ 50,713	$ 2,542,380
2012	2,794,167	59,858	2,854,025
2013	3,042,500	58,707	3,101,207
2014	3,233,333	56,389	3,289,722
2015	3,214,167	50,541	3,264,708
Thereafter	92,618,192	363,302	92,981,494
	$ 107,394,026	$ 639,510	$ 108,033,536

Interest costs incurred on borrowed funds during the period of construction of capital assets are capitalized as a component of the cost of acquiring those assets Similarly, investment income earned on borrowed funds to be used for the construction or acquisition of capital assets and invested temporarily is also capitalized A summary of interest costs and investment income are presented in the table below

	Capitalized	Included in Operations	Total
Eight month period ended February 28, 2011:			
Interest costs	**$ 257,424**	**$ 3,268,520**	**$ 3,525,944**
Interest income	**5,283**	**-**	**-**
Net interest costs capitalized	**$ 252,141**		
For the year ended June 30, 2010:			
Interest costs	$ 670,131	$ 4,733,089	$ 5,403,220
Interest income	30,535	-	-
Net interest costs capitalized	$ 639,596		

8. NOTES PAYABLE

Notes payable consist of the following

	February 28, 2011	June 30, 2010 2010
Note payable bearing interest at a rate of 6 50%, payable in monthly installments of $6,534, including interest, with a final payment due May 2020, secured by shared first deed of trust on the building housing the Fitness Center	$ 543,933	$ 574,220
Less current maturities	44,555	45,111
	$ 499,378	$ 529,109

Scheduled principal payments on notes outstanding for the period March 1, 2011 through December 31, 2011 and then for the years ending December 31 are as follows

Years Ending December 31	Principal Payments
March 1, 2011 – December 31, 2011	$ 39,513
2012	46,718
2013	49,940
2014	53,285
2015	56,853
Thereafter	297,624
	$ 543,933

9. INTEREST RATE SWAP AGREEMENT

The Corporation has entered into a floating-to-fixed interest rate swap agreement with an initial notional amount of $57,900,000, which amortizes in conjunction with the outstanding balance of the Corporation's 2004 Series C Revenue Refunding and Improvement Bonds According to the terms of the Agreement, which terminates February 15, 2034, the Corporation pays interest at a fixed rate of 4 129% and receives interest from the counterparty at a variable rate of interest determined based on 67% of USD LIBOR plus 30 basis points 0 51% and 0 66% at February 28, 2011 and June 30, 2010, respectively) The Corporation's objective for entering into the Agreement is to manage its interest rate exposure on the variable rate 2004 Series C Revenue Refunding and Improvement Bonds

In fiscal year 2007, the Corporation entered into another floating-to-fixed interest rate agreement with an initial notional amount of $24,600,000, which amortizes in conjuction with the outstanding balance of the Corporation's 2007 Series A Hospital Revenue Improvement Bonds The counterparty to this swap is UBS AG Pursuant to the terms of this swap agreement, the Corporation is identified as the "fixed-rate payor", paying interest at a fixed rate of 3 835% per year UBS is identified as the "floating-rate payor" and pays interest computed as 67% of USD LIBOR The net interest position between the Corporation and UBS is settled monthly The

$24,600,000 2007 Series A bonds are Auction Rate Certificates ("ARCs") which were amended and restated on October 1, 2009 to convert the certificates to fixed rate bonds

The following table summarizes the location and amounts of the values for the Corporation's interest rate swap agreements

	Liability Derivatives			
	February 28, 2011		June 30, 2010	
Derivatives not designated as hedging instruments	**Statement of Financial Position Location**	**Fair Value**	Statement of Financial Position Location	Fair Value
Interest rate swap agreements	**Derivative Obligation**	**$ 9,821,549**	Derivative Obligation	$14,807,729

The following table summarizes the location and amounts of derivative gains (losses) on the Corporation's interest rate swap agreements

		For the Eight Month Period ended February 28, 2011 and Year ended June 30, 2010	
Derivatives not designated as hedging instruments	**Location of Gain (Loss) Recognized**	**2011**	2010
Interest rate swap agreements	Change in fair value of derivative obligation	**$ 4,986,180**	$ (5,477,592)

Management obtained a valuation of the interest rate swap agreements in accordance with FASB ASC 820, *Fair Value Measurements and Disclosures* "FASB ASC 820"), from an independent analyst This guidance attempts to value derivatives, such as the Corporation's interest rate swaps, by adjusting the mid-market valuation for a theoretical non-performance or credit risk of the Corporation As of February 28, 2011 and June 30, 2010, the Corporation was posting no collateral Therefore, the entire swap value is subject to the fair value measurement adjustment The mid-market valuation for the liability associated with the swap agreements as of February 28, 2011 and June 30, 2010 was determined to be $11,172,433 and $17,400,408, respectively, and the fair value measurement valuation resulted in a reduction of this amount by $1,350,884 and $2,592,679, respectively

10. SELF-FUNDED INSURANCE RESERVES

Professional and General Liability: The Corporation is self-insured for professional malpractice and general liability claims through a revocable trust agreement held under the custodial management of a financial institution The trust was established to provide for the payment of professional malpractice and comprehensive general liability claims, expenses associated with the investigation and defense of claims, and insurance premiums for coverage in excess of self-insured limits

The self-insurance reserve has been established to provide for known claims and incidents as well as claims from unknown incidents that may be asserted arising from services provided Management has engaged independent actuaries to estimate the ultimate cost of the settlement of such claims Management's methodology for estimating the self-insurance liability is based on various statistical computations used in an analysis to model various components of potential losses through the use of simulation techniques to project losses based on prior claims history and industry standards

The estimated liability for such claims has been discounted using a 3 5% and 4 0% discount rate during the period ended February 28, 2011 and for the year ended June 30, 2010, respectively As of February 28, 2011 and June 30, 2010, the Corporation has recorded a self-insurance reserve of approximately $9,554,000 and $13,335,000, respectively, as the liability for self-insured claims The significant decrease in the reserve primarily relates to the payout on a prior year claim approximating $7,000,000 The insurance carrier has denied coverage for this claim Management believes that such claim should be covered by insurance and continues to seek reimbursement However, an insurance receivable has not been recorded at the present time as the amount of such recovery, if any, cannot be estimated In management's opinion, the recorded reserves provide an reasonable estimate for loss contingencies based on currently available information However, given the nature of the claims, it is not possible at the present time to estimate the ultimate legal and financial liability with respect to certain lawsuits It is possible that future settlement of existing known and unknown claims may exceed the recorded estimated reserve Depending on the amount and timing of such setlement, an unfavorable resolution could matertially affect the future results of operations or cash flows in a particular period Adjustments to estimates resulting from the future settlement of claims are reflected in operations in the period in which such adjustments become known

Retention limits covered by the self-insurance reserve are $5,000,000 for claims incurred after July 1, 2003, $3,000,000 for claims incurred between July 1, 2002 and June 30, 2003 and $2,000,000 for professional liability and $4,000,000 for general liability claims incurred prior to July 1, 2002 The Corporation maintains commercial insurance coverage in excess of primary coverage with limits of $10,000,000 per occurrence and $10,000,000 in aggregate The estimated fair value of invested assets in the trust as of February 28, 2011 and June 30, 2010 was $2,118,311 and $3,046,879, respectively Claims in excess of the self-insurance fund assets and purchased commercial coverage are the responsibility of the Corporation

11. RELOCATION AND PRACTICE START-UP ASSISTANCE TO PHYSICIANS

The Corporation has entered into agreements with multiple physicians whereby the Corporation provides monies for relocation of the physician practices and meets certain practice start-up obligations These agreements have various commencement dates and provide that the obligations owing to the Corporation are to be repaid or forgiven by the Corporation over a stated period of time At February 28, 2011 and June 30, 2010, the outstanding amount provided to physicians is $899,072 and $1,133,298, respectively, which is included in other assets in the accompanying consolidated statements of financial position

The following is a summary of activity during the eight month period ended February 28 and the year ended June 30

	2011	2010
Balance-beginning of period/year	**$ 1,133,298**	$ 1,634,717
Advances to physicians	**-**	-
Repayments or forgiveness	**(234,226)**	(501,419)
Balance-end of period/year	**$ 899,072**	$ 1,133,298

Anticipated Repayment or Forgiveness Based on agreements in existence, scheduled repayment or forgiveness of debt relating to the balance at February 28, 2011 is as follows, excluding interest income assessed on unliquidated balances

Period/Years Ending December 31	**Scheduled Repayment or Forgiveness**
3/1/2011 – 12/31/2011	$ 350,688
2012	273,657
2013	199,935
2014	68,803
2015	5,989
	$ 899,072

12. FUNCTIONAL EXPENSES

The Corporation provides general healthcare services to the residents within its geographic location Expenses related to providing these services for the eight month period ended February 28, 2011 and year ended June 30, 2010 are estimated as follows

	2011	2010
Healthcare services	**$ 84,341,828**	$ 132,342,405
General and administrative	**33,836,834**	53,094,035
	$ 118,178,662	$ 185,436,440

13. COMMITMENTS AND CONTINGENCIES

Operating Leases: Future mınımum annual lease commıtments at February 28, 2011, under noncancellable operatıng leases, prıncıpally for office space and equıpment, are payable as follows

Period/Years Ending December 31	Minimum Lease Payment
3/1/2011 – 12/31/2011	$ 702,429
2012	683,502
2013	251,424
2014	101,884
2015	60,951
	$ 1,800,190

Lease expense for the Corporatıon for the eıght month perıod ended February 28, 2011 and the year ended June 30, 2010, respectıvely was approxımately $734,000 and $1,107,000, respectıvely

License Agreement: The Corporatıon, along wıth St Joseph's Hospıtal, entered ınto a lıcense agreement wıth a vendor to provıde the Corporatıon wıth a new healthcare ınformatıon system Future estımated mınımum annual amounts payable under thıs arrangement are as follows

Period/Years Ending December 31	Minimum Lease Payment
3/1/2011 – 12/31/2011	$ 6,648,475
2012	3,771,908
2013	2,512,835
2014	1,252,198
2015	1,340,686
Thereafter	6,968,426
	$ 22,494,528

Litigation:

The Corporatıon ıs subject to certaın claıms that arıse ın the ordınary course of busıness Many of these claıms are ın the early stages of the evaluatıon process Accordıngly, ıt ıs not possıble at the present tıme to estımate the ultımate legal and fınancıal lıabılıty, ıf any, wıth respect to certaın lawsuıts In the opınıon of management, after consultatıon wıth counsel, adequate ınsurance and self-ınsurance reserves exısts, so the eventual outcome of such claıms ıs not expected to have a materıal adverse effect on the Corporatıon's fınancıal position or its ability to provide adequate and proper health care to its patients However, depending on the amount and timing of such resolution, an unfavorable resolution of some or all of these matters could materially affect the future consolidated results of operations or cash flows in a particular period

Conditional Asset Retirement Obligation:

The Company follows guidance with respect to FASB ASC 410, *Asset Retirement and Environmental Obligations* ("FASB ASC 410") Under this guidance, an entity must accrue for costs related to legal obligations to perform asset retirement activities, such as asbestos removal, on its existing properties Management of the Corporation believes that there is an indeterminate settlement date for the asset retirement obligations because the range of time over which the Corporation may settle the obligations is unknown and cannot be estimated As a result, management cannot reasonably estimate a liability related to these potential asset retirement activities However, management does not believe that remediation of such obligations will have a material effect on the consolidated financial statements

14. FAIR VALUE OF FINANCIAL ASSETS AND LIABILITIES

FASB ASC 820, *Fair Value Measurements* ("FASB ASC 820") defines fair value, establishes a framework for measuring fair value in generally accepted accounting principles and expands disclosures about fair value measurements As required by the Fair Value Measurements Topic of the FASB Accounting Standards Codification, fair value is defined 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 The Fair Value Measurements Topic of the FASB Accounting Standards Codification establishes 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

As noted above, there is a three-level valuation hierarchy for disclosure of fair value measurements The valuation hierarchy is based upon the transparency of inputs to the valuation of an asset or liability as of the measurement date The three levels are defined as follows

- Level 1 – inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Corporatioin has the ability to access
- Level 2 – inputs to the valuation methodology include
    - quoted prices for similar assets or liabilities in active markets,
    - quoted prices for identical or similar assets or liabilities in inactive markets,
    - inputs other than quoted prices that are observable for the asset or liability,
    - inputs that are derived principally from or corroborated by observable market data by correlation or other means

  If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability
- Level 3 – inputs to the valuation methodology are unobservable and significant to the fair value measurement

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurements Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs

The following table presents the financial instruments carried at fair value, by caption, on the statement of financial position by the hierarchy defined above

Prices for debt and equity securities, mutual funds and treasury notes which are readily available in the active markets in which those securities are traded, and transacted values for money market mutual funds are categorized as Level 1 Prices for collective trust funds held with a financial institution, private pooled investment funds, and interest rate swaps are categorized as Level 2 as prices are determined on a recurring basis based on inputs that are readily available in public markets or can be derived from information available in publicly quoted markets Prices for real estate and alternative private pooled investments are determined by using unobservable inputs about which little or no market data exists

The following tables set forth by level the fair value hierarchy of the Corporation's financial assets and liabilities accounted for at fair value on a recurring basis as of February 28, 2011 and June 30, 2010 Assets and liabilities are classified in their entirety based on the lowest level of input that is significant to the fair value measurement The Corporation's assessment of the significance of a particular input to the fair value measurement requires judgment, and may affect the valuation of fair value assets and liabilities and their placement within the fair value hierarchy levels

The table below presents the balances of assets and liabilities measured at fair value on a recurring basis

	February 28, 2011			
	Level 1	**Level 2**	**Level 3**	**Total**
Investments				
Money market	$ 12,903,445	$ -	$ -	$ 12,903,445
Common stocks				
Consumer discretionary	32,059	-	-	32,059
Consumer staples	428,653	-	-	428,653
Energy sector	692,880	-	-	692,880
Financials	630,609	-	-	630,609
Healthcare sector	600,996	-	-	600,996
Industrials	979,088	-	-	979,088
Information techonology	853,357	-	-	853,357
Materials	223,425	-	-	223,425
Telecomunication services	192,104	-	-	192,104
Utilities	209,420	-	-	209,420
Other	237,944	-	-	237,944
Total common stocks	5,080,535	-	-	5,080,535
Mutual funds				
Domestic equity	10,666,101	-	-	10,666,101
International equity	6,586,895	-	-	6,586,895
Fixed income	17,270,242	-	-	17,270,242
Total mutual funds	34,523,238	-	-	34,523,238
Debt securities				
Corporate Bonds	-	7,536,476	-	7,536,476
Mortgage backed securities	-	4,094,798	-	4,094,798
CMO's	-	2,363,386	-	2,363,386
Government debt obligations	-	2,433,488	-	2,433,488
Munincipal bonds	-	14,420,287	-	14,420,287
Total debt securities	-	30,848,435	-	30,848,435
Hedge fund	-	5,264,697	-	5,264,697
Total trading securities	$ 52,507,218	$ 36,113,132	$ -	$ 88,620,350
Liabilities				
Derivative obligation	-	9,821,549	-	9,821,549
Total liabilities at fair value	$ -	$ 9,821,549	$ -	$ 9,821,549

	Assets and Liabilities at Fair Value as of June 30, 2010			
	Level 1	Level 2	Level 3	Total
Investments				
Cash equivalents	$23,130,173	$ -	$ -	$23,130,173
Equity securities and mutual funds	42,182,931	-	-	42,182,931
Debt securities	-	30,840,651	-	30,840,651
Total investments at fair value	$ 65,313,104	$ 30,840,651	$ -	$ 96,153,755
Liabilities				
Derivative obligation	-	14,807,729	-	14,807,729
Total liabilities at fair value	$ -	$14,807,729	$ -	$14,807,729

Following is a description of the Corporation's valuation methodologies for assets and liabilities measured at fair value Fair value for Level 1 is based upon quoted market prices Fair value for Level 2 is based on quoted prices for similar instruments in active markets, quoted prices for identical or similar instruments in markets that are not active, and model-based valuation techniques for which all significant assumptions are observable in the market or can be corroborated by observable market data for substantially the full term of the assets Inputs are obtained from various sources including market participants, dealers, and brokers

The following methods and assumptions were used by the Corporation in estimating the fair value of its financial instruments at February 28, 2011 and June 30, 2010

Cash and Cash Equivalents and Short-Term Investments

The carrying amounts reported in the statements of financial position for cash and cash equivalents and short-term investments approximate their fair value.

Assets Limited as to Use

The fair value for assets limited as to use, except for alternative investments, is based on quoted market prices, if available, or estimated using quoted market prices for similar securities (see Note 3)

Long-Term Debt (see Note 7)

Because the Corporation's variable-rate debt, as disclosed in Note 7, is routinely reset in the credit market, these outstanding bonds trade at par value Accordingly, management believes the carrying value of its variable-rate debt approximates its fair value

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future values Furthermore, although the Corporation believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date

15. Fair Value Of Financial Instruments

The carrying amounts of the Corporation's financial instruments, excluding long-term obligations, approximate their fair values The Corporation's long-term obligations are recorded at amortized cost They have inseparable third-party credit enhancements The fair value below, which has been estimated using pricing models that utilize available market information, excludes the effect of the inseparable third party credit enhancement

	February 28, 2011		June 30, 2010	
	Fair Value	**Carrying Value**	Fair Value	Carrying Value
Debt obligations	**$ 107,970,884**	**$ 108,033,536**	$ 111,261,218	$ 110,045,000

16. Business Combination

On December 6, 2010, the Corporation and West Virginia United Health System ("WVUHS") entered into an agreement to purchase substantially all of the assets of St Joseph's Hospital, and its affiliates and subsidiaries ("SJH"), from Signature Hospital Corporation ("Signature") The purchase was effective March 1, 2011 The purchase price for the assets and net working capital was $89,127,000 and was financed through a combination of taxable and tax-exempt bond issues, as well as a bank line of credit totaling $100,479,356 The results of operations for the eight months ended February 28, 2011 include approximately $1,879,000 of expense related to merger costs In addition, the deposits made towards the purchase price totaling $1,750,000 are included on the statement of financial position in other assets

In conjunction with the SJH transaction, the Corporation and WVUHS entered into an agreement whereby WVUHS became the sole member of the Corporation effective March 1, 2011

OTHER FINANCIAL INFORMATION

DIXON HUGHES GOODMAN

REPORT OF INDEPENDENT AUDITORS ON OTHER FINANCIAL INFORMATION

Board of Trustees
Camden-Clark Health Services, Inc and Subsidiaries
Parkersburg, West Virginia

We have audited the consolidated financial statements of Camden-Clark Health Services, Inc and Subsidiaries ("the Corporation") as of and for the eight month period ended February 28, 2011 and the year ended June 30, 2010, and our report thereon dated June 29, 2011, which expressed an unqualified opinion on those consolidated financial statements, appears on page 1 Our audit was conducted for the purpose of forming an opinion on the consolidated financial statements as a whole The consolidating statements of financial position and operations on pages 35 to 36 are presented for purposes of additional analysis and are not a required part of the consolidated financial statements Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the consolidated financial statements The information has been subjected to the auditing procedures applied in the audit of the consolidated financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the consolidated financial statements or to the consolidated financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America In our opinion, the information is fairly stated in all material respects in relation to the consolidated financial statements as a whole

Dixon Hughes Goodman LLP

Charleston, West Virginia
June 29, 2011

CAMDEN-CLARK HEALTH SERVICES, INC AND SUBSIDIARIES
SCHEDULE I – CONSOLIDATING STATEMENTS OF FINANCIAL POSITION

	February 28, 2011							
ASSETS	**Camden-Clark Memorial Hospital**	**Family Fitness Center, LLC**	**Eliminations**	**Camden-Clark Memorial Hospital Corporation Consolidated**	**Camden-Clark Foundation, Inc**	**Camden-Clark Physician Corporation**	**Eliminations**	**Camden-Clark Health Services, Inc Consolidated**
Current assets								
Cash and cash equivalents	$ 12,948,634	$ 241,847	$ -	$ 13,190,481	$ 503,557	$ 164,439	$ -	$ 13,858,477
Assets whose use is limited								
Under financing agreements	268,897	-	-	268,897	-	-	-	268,897
Under employee health insurance program	-	-	-	-	-	-	-	-
Patient receivables-net	20,445,661	-	-	20,445,661	-	864,919	-	21,310,580
Estimated third party payor settlements	-	-	-	-	-	-	-	-
Supplies inventory	3,593,054	-	-	3,593,054	-	-	-	3,593,054
Investments	-	-	-	-	346,739		-	346,739
Other	2,666,802	23,291	-	2,690,093	208,526	367,755	-	3,266,374
Total current assets	39,923,048	265,138	-	40,188,186	1,058,822	1,397,113	-	42,644,121
Assets whose use is limited								
By board for capital improvements	73,354,922	-	-	73,354,922	-	-	-	73,354,922
By trustee under financing agreements	12,081,437	-	-	12,081,437	-	-	-	12,081,437
Under self-funding insurance arrangements	2,118,311	-	-	2,118,311	-	-	-	2,118,311
Under deferred compensation trust agreements	796,783	-	-	796,783	-	-	-	796,783
Total assets whose use is limited	88,351,453	-	-	88,351,453	-	-	-	88,351,453
Property and equipment								
Land and improvements	6,348,427	245,936	-	6,594,363	154,342	-	-	6,748,705
Building	92,618,968	2,000,734	-	94,619,702	33,000	-	-	94,652,702
Equipment	160,514,161	811,940	-	161,326,101	33,740	732,318	-	162,092,159
	259,481,556	3,058,610	-	262,540,166	221,082	732,318	-	263,493,566
Accumulated depreciation	(142,430,536)	(1,490,812)	-	(143,921,348)	(69,838)	(305,036)	-	(144,296,222)
	117,051,020	1,567,798	-	118,618,818	151,244	427,282	-	119,197,344
Construction/software implementation in progress	6,634,907	19,341	-	6,654,248	-	-	-	6,654,248
Net property and equipment	123,685,927	1,587,139	-	125,273,066	151,244	427,282	-	125,851,592
Other assets								
Other assets	2,966,614	-	(77,510)	2,889,104	-	-	-	2,889,104
Deferred financing costs-net	4,168,513	-	-	4,168,513	-	-	-	4,168,513
Total other assets	7,135,127	-	(77,510)	7,057,617	-	-	-	7,057,617
Total assets	$ 259,095,555	$ 1,852,277	$ (77,510)	$ 260,870,322	$ 1,210,066	$ 1,824,395	$ -	$ 263,904,783

LIABILITIES AND NET ASSETS	Camden-Clark Memorial Hospital	Family Fitness Center, LLC	Eliminations	Camden-Clark Memorial Hospital Corporation Consolidated	Camden-Clark Foundation, Inc	Camden-Clark Physician Corporation	Eliminations	Camden-Clark Health Services, Inc Consolidated
	February 28, 2011							
Current Liabilities								
Notes payable and capital leases-current	$ 2,641	$ 41,914	$ -	$ 44,555	$ -	$ -	$ -	$ 44,555
Bonds payable-current	3,050,714	-	-	3,050,714	-	-	-	3,050,714
Professional and general liability-current	650,607	-	-	650,607	-	-	-	650,607
Accrued interest payable	162,361	5,093	-	167,454	-	-	-	167,454
Accounts payable and accrued expenses	9,783,298	107,786	-	9,891,084	-	65,270	-	9,956,354
Accrued vacation and sick leave	2,511,974	-	-	2,511,974	-	476,300	-	2,988,274
Accrued payroll and withholdings	2,578,463	24,873	-	2,603,336	-	658,486	-	3,261,822
Line of credit	5,000,000	-		5,000,000	-	-	-	5,000,000
Amounts due to third-party payers	3,643,850	-	-	3,643,850	-	-	-	3,643,850
Total current liabilities	27,383,908	179,666	-	27,563,574	-	1,200,056	-	28,763,630
Long-term debt-less current maturities								
Notes payable and capital leases	-	499,378	-	499,378	-	-	-	499,378
Bonds payable	104,982,822	-	-	104,982,822	-	-	-	104,982,822
Professional and general liability	8,903,046	-	-	8,903,046	-	-	-	8,903,046
Derivative obligation	9,821,549	-	-	9,821,549	-	-	-	9,821,549
Accrued pension obligation	10,132,612	-	-	10,132,612	-	-	-	10,132,612
Other liabilities	796,783	-	-	796,783	-	-	-	796,783
Total long-term debt	134,636,812	499,378	-	135,136,190	-	-	-	135,136,190
Net assets								
Unrestricted	97,074,835	1,173,233	(77,510)	98,170,558	820,015	624,339	-	99,614,912
Temporarily restricted		-	-	-	278,051	-	-	278,051
Permanently restricted	-	-	-	-	112,000	-	-	112,000
Total net assets	97,074,835	1,173,233	(77,510)	98,170,558	1,210,066	624,339	-	100,004,963
Total liabilities and net assets	$ 259,095,555	$ 1,852,277	$ (77,510)	$ 260,870,322	$ 1,210,066	$ 1,824,395	$ -	$ 263,904,783

CAMDEN-CLARK HEALTH SERVICES, INC AND SUBSIDIARIES
SCHEDULE II – CONSOLIDATING STATEMENT OF OPERATIONS
For the Eight Month Period ended February 28, 2011

	Camden-Clark Memorial Hospital	Family Fitness Center, LLC	Eliminations	Camden-Clark Memorial Hospital Corporation Consolidated	Camden-Clark Foundation, Inc	Camden-Clark Physician Corporation	Eliminations	Camden-Clark Health Services, Inc Consolidated
Net patient service revenue	$ 101,789,915	$ -	$ (2,910)	$ 101,787,005	$ -	$ 3,844,133	$ -	$ 105,631,138
Loss on sale of assets	(1,424)	-	-	(1,424)	-	-	-	(1,424)
Other revenue	1,842,705	447,055	(58,331)	2,231,429	123,303	676,497	(139,008)	2,892,221
Total revenue	103,631,196	447,055	(61,241)	104,017,010	123,303	4,520,630	(139,008)	108,521,935
Operating expenses								
Salaries and wages	35,756,463	139,477	-	35,895,940	-	4,482,371	-	40,378,311
Employee benefits	12,247,721	24,270	(2,910)	12,269,081	-	766,802	-	13,035,883
Physician fees	3,803,212	-	-	3,803,212	-	134,796	-	3,938,008
Supplies	21,567,377	15,473	-	21,582,850	-	90,917	-	21,673,767
Utilities	1,825,921	56,962	-	1,882,883	-	3,426	-	1,886,309
Repairs and renovations	739,567	30,101	-	769,668	-	114	-	769,782
Maintenance contracts	1,511,988	-	-	1,511,988	-	45,226	-	1,557,214
Rents	733,582	-	-	733,582	-	114,966	-	848,548
Insurance	4,999,753	6,491	-	5,006,244	-	285,253	-	5,291,497
Depreciation	8,103,204	72,554	-	8,175,758	880	70,189	-	8,246,827
Interest	3,661,818	17,701	-	3,679,519	-	-	-	3,679,519
Provision for bad debts	3,181,187	-	-	3,181,187	-	11,455	-	3,192,642
Other	13,197,869	120,132	(58,331)	13,259,670	292,603	267,090	(139,008)	13,680,355
Total operating expenses	111,329,662	483,161	(61,241)	111,751,582	293,483	6,272,605	(139,008)	118,178,662
Loss from operations	(7,698,466)	(36,106)	-	(7,734,572)	(170,180)	(1,751,975)	-	(9,656,727)
Non operating gains								
Investment income	6,027,914	-	-	6,027,914	-	-	-	6,027,914
Change in ineffective interest rate swap	4,986,180	-	-	4,986,180	-	-	-	4,986,180
Excess (deficit) of revenue over expenses	3,315,628	(36,106)	-	3,279,522	(170,180)	(1,751,975)	-	1,357,367
Other changes in unrestricted net assets								
Change in pension funded status	4,310,193	-	-	4,310,193	-	-	-	4,310,193
Net unrealized gains/losses on investments	2,716,652	-	-	2,716,652	415	-	-	2,717,067
Net assets released from restrictions for purchase of capital acquisitions	147,746	-	-	147,746	148,508	-	-	296,254
Transfers (from) to related organizations	(2,459,676)	75,000	-	(2,384,676)	70,422	2,314,254	-	-
Increase (decrease) in unrestricted net assets	$ 8,030,543	$ 38,894	$ -	$ 8,069,437	$ 49,165	$ 562,279	$ -	$ 8,680,881

See Accompanying Independent Auditors Report on Other Financial Information.