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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

2010

OMB No 1545-0047

Open to Public Inspection

A Fo	r the 2	2010 ca	ılendar year, or tax year begir	ning 07-01-2010 and ending 06-30-20	11			
3 Ch	eck ıf ap	plicable	C Name of organization Saint Francis Memorial Hospital			D Emp	loyer	identification number
- Add	dress cha	ange	·			94-	1156	295
— Na	me char	nge	Doing Business As			E Tele	phone	number
– _{Ind}	tial retur	'n	Number and street (or P.O. box	ıf maıl ıs not delivered to street address)	Room/suite	(4.1.)	5) 35	3-6600
– Tei	mınated	i	900 Hyde Street		integrity states	(41)	3) 33.	
– _{Am}	ended r	eturn	City or town, state or country, ai	nd ZIP + 4		G Gross	s receip	ots \$ 250,064,087
— _{Апі}	nlıcatıon	pending	San Francisco, CA 94109					
71	plication	pending	F Name and address of p	aringinal officer	1 >			
			Alan Fox	officipal officer	H(a) Is this	a group returi	n for affil	ıates?
			900 Hyde Street	0	H(b) Are a	ll affiliates ir	ncluded	I?
			San Francisco, CA 9410	9	If"N	o," attacl	h a lıs	t (see instructions)
r Ta	x-exem	pt status	▼ 501(c)(3)	◀ (insert no)	H(c) Gro	up exemp	tıon n	umber 🟲
				()	-			
J W	ebsite	:: = ∨∨∨∨	/W CHWHEALTH ORG					
		janization	Corporation Trust Associa	ation Other 🕨	L Year of fo	ormation 1	938	M State of legal domicile CA
Pa	rt I	Sum	mary					
	1	•	_	sion or most significant activities				
		To provid ve serve		st effective medical and healthcare rela	ted services to	meet the	need	is of the communities
Governance	<u></u>	ve serve	•					
₫								
Ę.	-							
<u> </u>	2 (Check th	nis box দ if the organization	discontinued its operations or disposed	of more than 2	25% of its	s net a	assets
	3 1	Number	of voting members of the gove	erning body (Part VI, line 1a)			3	19
Activities &	4 1	Number	of independent voting membe	rs of the governing body (Part VI, line 1	b)		4	12
Ē	5 T	Total nui	mber of individuals employed	ın calendar year 2010 (Part V, line 2a)			5	1,161
5	6 T	Total nui	mber of volunteers (estimate	ıfnecessary)			6	332
4.	7a ⊺	Total uni	related business revenue from	n Part VIII, column (C), line 12			7a	501,840
	ь	Net unre	lated business taxable incom	e from Form 990-T, line 34			7b	0
					Pric	or Year		Current Year
	8	Contri	butions and grants (Part VIII		963	,108	525,044	
₫	9		• ,	, line 2g)		188,941		
Ravenue	10			mn (A), lines 3, 4, and 7d)		4,270	,604	6,057,495
æ	11	Other	revenue (Part VIII, column (A	A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,304	,547	1,315,164
	12	Totalr	revenue—add lines 8 through	11 (must equal Part VIII, column (A), li				
						195,479	,759	224,306,765
	13			art IX, column (A), lines 1–3)		95	,467	659,485
	14			t IX, column (A), line 4)			0	0
Ø	15		es, other compensation, emplo	oyee benefits (Part IX, column (A), lines		115,681	638	121,790,325
ž.	16a	10)	cional fundraicing fooc (Part I	X, column (A), line 11e)		113,001,	0	0
Expenses							٠	0
Д	b		ndraising expenses (Part IX, column	· · · <u> </u>				100 761 501
	17), lines 11a-11d, 11f-24f)		82,222		100,764,534
	18			nust equal Part IX, column (A), line 25)		197,999		223,214,344
. 09	19	Keven	ue iess expenses. Subtract lii	ne 18 from line 12		-2,519		1,092,421
පිමි මෙස					-	g of Curre Year	ent	End of Year
0 e	20	Totala	assets (Part X. line 16)			323,138	,980	343,759,229
Net Assets or Fund Balances	21					82,547		83,278,794
3 S	22			ct line 21 from line 20		240,591	-	260,480,435
	1311		ature Block		·	2.0,002	,00.	200,100,100
Jnde cnow	r penalt	ties of po	erjury, I declare that I have exar	nined this return, including accompanying te. Declaration of preparer (other than offi				
		I -						
		 	. t			012-05-01		
Sigr		▼ Signa	ature of officer		D	ate		
Her	е		FOX CFO					
		 	or print name and title			a	16	1
		Print/Type preparer's		Preparer's signature	Date	Check if se employed		PTIN
Paid	F	<u> </u>	me F KPMG LLP			1 7 2		Firm's EIN
Prep		Firm's add	iress F 55 SECOND STREET SUITE 1	400				
Jse (Only	5 aut						Phone no • (415) 963- 5100
	I		SAN FRANCISCO, CA 94105)				1

May the IRS discuss this return with the preparer shown above? (see instructions)

┌Yes ┌No

	er program services (Describe ir penses \$	including grants of	\$) (Revenue \$)
O the	er program services (Describe ir				
		Schedule ()			
(Code	e) (Expenses \$		including grants of \$) (Revenue \$)
(Code	e) (Expenses \$		including grants of \$) (Revenue \$)
as sup	pport, time and money to organizations	and individuals through	out the community		
outpa pharm psych servic	atient operating room cases of 3,359 In macy, cardiopulmonary, surgery and tele n day care, outpatient burn care, spine a ces Support services chaplaincy prograi	patient services acute n emetry unit Outpatient s ind joint center, diagnost m, family support service	nedical/surgical care and re services emergency care, s tic imaging, radiation oncolo es, palliative care, parking s	nab, intensive and burn care, adult psy ports medicine and occupational health gy, retail pharmacy, gastrointestinal s	rch, skilled nursing facility, i clinics, pulmonary rehab, ervices and physical therapy
	Francis Memorial Hospital's mission is to effective manner. The hospital has 356 l	contribute to the health	of the community through	the provision of quality services delive	ered in a compassionate and
(Code	e) (Expenses \$	204,981,444	ıncludıng grants of \$	659,485) (Revenue \$	215,907,222)
Section	ribe the exempt purpose achieve on 501(c)(3) and 501(c)(4) orga ations to others, the total expens	nizations and section	on 4947(a)(1) trusts a	re required to report the amoun	
	s," describe these changes on S			,	
	ne organization cease conducting			nducts, any program	Yes ▼ No
-	s," describe these new services			·	·
					Yes ✓ No
	BIOLINI MANIGER JAMES FALL	KINZKING WITH G	THERE IN THE COTT	TOWN TO THE NO VE THE Q	
Briefl	ly describe the organization's mis	ssion			
3111					୮
F	Brief ROVII RAND	Check if Schedule O contains a Briefly describe the organization's mis ROVIDE COMPASSIONATE, HIGH-Q RAND DISENFRANCHISED, AND PA Did the organization undertake any sig	Check if Schedule O contains a response to any question of the organization's mission ROVIDE COMPASSIONATE, HIGH-QUALITY, AFFORDAR AND DISENFRANCHISED, AND PARTNERING WITH Output of the organization undertake any significant program se	Check if Schedule O contains a response to any question in this Part III Briefly describe the organization's mission ROVIDE COMPASSIONATE, HIGH-QUALITY, AFFORDABLE HEALTH SERVICE RAND DISENFRANCHISED, AND PARTNERING WITH OTHERS IN THE COMM Did the organization undertake any significant program services during the year	Check if Schedule O contains a response to any question in this Part III

			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	Yes	
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? <i>If "Yes," complete Schedule D, Part II</i>	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 quasiendowments? If "Yes," complete Schedule D, Part V	10	Yes	
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			
а	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	Yes	
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	Yes	
е	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	Yes	
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? <i>If</i> " <i>Yes,"</i> 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? <i>If</i> "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	

Par	t IV Checklist of Required Schedules (continued)			
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		Νo
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)			
а	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		Νo
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		Νο
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		No
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		N o
а	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 Vo			
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?	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	check if senedate o contains a response to any question in this rate v	<u> </u>	• '	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 227			
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?	1 c	Yes	
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	21-	V	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
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		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N o
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		Νο
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).			
	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		N o
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
·	file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νο
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νο
	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		
ь 10	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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			
С	Enter the amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N o
h	If "Yes," has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14b		

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.

Se	ection 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			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
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		Νο
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		Νο
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			
а	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		Νo
	ection B. Policies (This Section B requests information about policies not required by the Internal evenue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νo
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		Νο
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?			
а	The organization's CEO, Executive Director, or top management official	15a		Νo
	Other officers or key employees of the organization	15b		Νο
	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		No
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		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ▶ CA			
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 Vupon 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 LARA HARROW FINANCE DEPT 3400 DATA DRIVE 3RD FLOOR

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- 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	•	elated o	rganı	zatio	on co	ompen	sate	d any current office	r, director, or trust	ee			
(A) Name and Title	(B) A verage hours	Posi	(C) Position (che			(C) Position (check all that apply)					(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Highest compensated employee Key employee Officer Instrutional Trustee or director		Former	organization (W- 2/1099-MISC) (W- 2/10 MISC		compensation from the organization and related organizations						
See Additional Data Table													

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

week (describe hours for related organizations in Schedule O) week (describe hours for related organizations in Schedule O) week (describe hours for related organizations in Schedule O)	(A) Name and Title	(B) Average hours per		tion ((che		II		(D) Reportable compensation from the	(E) Reportable compensation from related	Estim amount o	ated of other
c Total from continuation sheets to Part VII, Section A		week (describe hours for related organizations in Schedule	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W-	organızatıons (W- 2/1099-	from organizat relat	the ion and ed
c Total from continuation sheets to Part VII, Section A	See Additional Data Table											
c Total from continuation sheets to Part VII, Section A												
c Total from continuation sheets to Part VII, Section A												
c Total from continuation sheets to Part VII, Section A												
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c Total from continuation sheets to Part VII, Section A												
c Total from continuation sheets to Part VII, Section A												
c Total from continuation sheets to Part VII, Section A												
c Total from continuation sheets to Part VII, Section A												
d Total (add lines 1b and 1c)								-				
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►381								_	4 172 515	1 209 410		652 407
\$100,000 in reportable compensation from the organization 381												652,487
Yes No							above)) who	received more tha	n		
											Yes	No

			res	NO
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete <i>Schedule J for such individual</i>	3		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
CITY BUILDING INC PIER 26 ANNEX NORTH SAN FRANCISCO, CA 94105	Construction Service	7,696,575
REHABCARE GRP INC 7733 FORSYTH BLVD SUITE 2300 ST LOUIS, MO 631502096	Therapy	2,055,580
GALEN INPATIENT PHYSICIANS 2100 POWELL ST STE 900 EMERYVILLE, CA 946081803	Medical Services	1,860,696
CITY PARK 1234 PINE ST SAN FRANCISCO, CA 94109	Parking Services	737,060
DIVERSIFIED CLINICAL SERVICES 4500 SALISBURY RD SUITE 300 JACKSONVILLE, FL 32216	Management Services	616,507
2 Total number of independent contractors (including but not limited to those listed above) who received more than	

Part \	/ 111	Statement of Reven	ue				, 49	
					(A) Total revenue	(B) Related or exempt function revenue	business	(D) Revenue excluded from tax under sections
								512, 513, or 514
まま	1a	Federated campaigns	1 a					
Contributions, gifts, grants and other similar amounts	ь	Membership dues	. 1b					
E	c	Fundraising events	1c					
<u> </u>	d	Related organizations	. 1d					
å. Si⊞	e	Government grants (contributions)	1e	237,464				
e E	f	All other contributions, gifts, grants	s, and 1f	287,580		! 		!
ē₽		similar amounts not included above Noncash contributions included in li						
걸	_		<u>.</u>		F2F 044			
	h	Total. Add lines 1a-1f	<u> </u>	T	525,044			
Program Serwce Revenue	2a			Business Code				
еже	Za	PATIENT REV/CHARITY CARE		900099	166,307,120	166,307,120		
ъ П	ь		i.	900099		46,587,565		
7 ¥ C	C	MEDICAL OFF BLDGS		532000	2,376,649		0.500	
S.	d e	PHARMACY LABORATORY		446110 621500	7,026 524,481		3,583 498,257	
<u>=</u>		All other program service re	venue	021300	324,401	606,221	430,237	
ွိ		T-4-1 Add 2- 26	_		606,221			
	д 3				216,409,062			
	_	Investment income (includir and other similar amounts)			2,544,164			2,544,164
	4	Income from investment of tax-ex			0			
	5	Royalties			0			
			(ı) Real	(II) Personal				
		Gross Rents						
	ь	Less rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss)		•				
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of	29,227,350	43,303				
		assets other than inventory						
	ь	Less cost or other basis and	25,716,243	41,079				
		sales expenses						
		Gain or (loss)	3,511,107	2,224	3,513,331			3,513,331
		Net gain or (loss) Gross income from fundraisi		T				3,313,331
Ĕ		(not including	ng events					
Other Revenue		\$ of contributions reported on	line 1 a)					
ъ		See Part IV, line 18						
jē.			а					
ᅙ		Less direct expenses .	_		0			
		Net income or (loss) from fu		T	0			
		Less direct expenses .	activities See Part IV, line 19 . a	<u> </u>				
		Net income or (loss) from ga			0			
		■ Gross sales of inventory, les						
		returns and allowances .	2					
	h	Less cost of goods sold .	a					
		Net income or (loss) from sa			0			
	_	Miscellaneous Revenue						
	11a	a CAFETERIA		900099	214,530			214,530
		PARKING LOT FEES		812930	812,871			812,871
		GIFT SHOPS		453220	47,179			47,179
		d All other revenue	.		240,584			240,584
	e	Total. Add lines 11a-11d			4 345 464			
			•		1,315,164			
	12	Total revenue. See Instructi	ons		224,306,765		501,840	7,372,659
						215,907,222		[

	990 (2010)				Page 10
Part	IX Statement of Functional Expenses				
Λ.	Section 501(c)(3) and 501(c)(4) organizations mus Il other organizations must complete column (A) but are not required to c			'D)	
Do no	ot include amounts reported on lines 6b, p, 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	659,485	·	general expenses	ехрепзез
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0	227,122		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	3,154,767	2,978,192	176,575	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	93,279,846	87,474,454	5,805,392	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	6,791,780	6,352,490	439,290	
9	Other employee benefits	12,360,545	11,561,071	799,474	
10	Payroll taxes	6,203,387	5,802,154	401,233	
а	Fees for services (non-employees) Management	0	, ,	,	
ь	Legal	113,715		113,715	
c	Accounting	72,759		72,759	
d	Lobbying	20,511		20,511	
e	Professional fundraising services See Part IV, line 17	0		,	
f	Investment management fees	114,435		114,435	
g	Other	22,969,983	16,066,899	6,903,084	
12	Advertising and promotion	567,536	18,457	549,079	
13	Office expenses	4,511,478	,	333,973	
14	Information technology	7,747,611		26,119	
15	Royalties	0		·	
16	Occupancy	3,551,394	3,241,832	309,562	
17	Travel	93,630	55,211	38,419	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	,		
19	Conferences, conventions, and meetings	117,816	32,777	85,039	
20	Interest	833,947	833,901	46	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	9,326,083	9,020,988	305,095	
23	Insurance	915,407	915,407		
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)				
а	BAD DEBT	14,659,101	14,659,101		
b	MEDICAL SUPPLIES	21,368,015	21,365,576	2,439	
c	MEDI-CAL PROVIDER FEE	10,173,204	10,173,204		
d	DUES & SUBSCRIPTIONS	239,519	39,478	200,041	
e	LICENSES & TAXES	447,610	343,669	103,941	
f	All other expenses	2,920,780	1,488,101	1,432,679	0
25	Total functional expenses. Add lines 1 through 24f	223,214,344	204,981,444	18,232,900	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) (B) Beginning of year End of year 7.877 7,877 1 1.877.805 2 5.964.725 2 Savings and temporary cash investments 82,502 34,418 3 28,072,350 26,486,198 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 Schedule L . . . 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) **A**ssets 6 1,189,666 689,262 8 2,679,044 2.813.976 5,703,424 9,006,391 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete 259,171,913 10a Part VI of Schedule D 158.580.092 ь Less accumulated depreciation 10b 99,803,905 **10c** 100.591.821 105,724,420 93.531.964 11 11 12 12 Investments—other securities See Part IV, line 11 68,046,443 74,582,141 13 13 Investments—program-related See Part IV, line 11 . . 14 14 22,144,000 15 17,858,000 15 16 323.138.980 16 343,759,229 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 19,867,344 17 19,402,313 17 Accounts payable and accrued expenses . 18 18 4.731 5.456.647 19 19 10,000,000 20 20 10,000,000 Liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 72.664 23 23 17.529 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 52.602.877 25 48.402.305 Other liabilities Complete Part X of Schedule D 82,547,616 26 26 83,278,794 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 Unrestricted net assets 169.771.613 **27** 183,124,987 Temporarily restricted net assets 40,309,473 28 28 46,841,516 Fund 30,510,278 29 30,513,932 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here 🕨 🥅 and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 240,591,364 33 260,480,435 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 343,759.229 323,138,980

Pal	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		224,3	306,765
2	Total expenses (must equal Part IX, column (A), line 25)	2		223,2	214,344
3	Revenue less expenses Subtract line 2 from line 1	3		1,0	92,421
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		240,5	591,364
5	Other changes in net assets or fund balances (explain in Schedule O)	5		18,7	96,650
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		260,4	180,435
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII		•	ァ	
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
ь	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of taudit, 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 its Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	ssued			
	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?	е	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the r audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes	

Employer identification number

SCHEDULE A Public

(Form 990 or 990EZ)

Name of the organization

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

anne 1	idileis	94-1156295			
Par	τI	Reason for Public Charity Status (All organizations must complete this part.) See instruc	tions		
		zation is not a private foundation because it is (For lines 1 through 11, check only one box)			
1	Γ	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).			
2	Γ	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)			
3	굣	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).			
4	Γ	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A) hospital's name, city, and state	(iii). Ente	r the	
5	Γ	An organization operated for the benefit of a college or university owned or operated by a governmental uni	t describe	d ın	
		section 170(b)(1)(A)(iv). (Complete Part II)			
6	Γ	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).			
7	Γ	An organization that normally receives a substantial part of its support from a governmental unit or from th described in section 170(b)(1)(A)(vi) (Complete Part II)	e general	public	
8	Γ	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)			
9	Г	An organization that normally receives (1) more than 331/3% of its support from contributions, membersh	ıp fees, ar	nd gros	5 S
		receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more tha		-	
		its support from gross investment income and unrelated business taxable income (less section 511 tax) fr	om busine	esses	
		acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)			
LO	Γ	An organization organized and operated exclusively to test for public safety. See section 509(a)(4).			
l 1	Γ	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carr one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 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 T	•	a)(3).	Chec
e	Γ	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more d other than foundation managers and other than one or more publicly supported organizations described in 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 sucheck this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the	pporting o	rganız	ation, [
g		following persons?			
		(i) a person who directly or indirectly controls, either alone or together with persons described in (ii)		Yes	No
		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	(iv) Is the organizati col (i) list your gove docume	on in ced in rning	(v) Did you not organizati col (i) of suppor	on in your	(vi) Is the organization in col (i) organized in the US?		(vii) A mount of support
		instructions))	Yes	No	Yes	No	Yes	No	
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.)

	dider rate III. If the	organización i	ans to quanty t	maci the tests	iisted below, pie	case complet	c raic III.
S	ection A. Public Support		_				
Cale	endar 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						
	ınclude 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						
	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						
Ü	line 4						
S	ection B. Total Support	1				I	
	endar year (or fiscal year beginning						
Cur	in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	A mounts from line 4						
8	Gross income from interest,						
0	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	es, etc (See inst	ructions)			12	
13	First Five Years If the Form 990 is f	or the organization	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	nızatıon,
	check this box and stop here	_	r		•	. , . , -	▶ ┌॔
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2010	(lıne 6 column (f) divided by line	11 column (f))		14	
15	Public Support Percentage for 2009	Schedule A Par	rt II line 14			15	
							
16a	33 1/3% support test—2010. If the				line 14 is 33 1/3%	or more, chec	
	and stop here. The organization qua	•				2.2.4.204	▶ [
b	33 1/3% support test—2009. If the				oa, and line 15 is :	1/3% or mor	. -
17-	box and stop here. The organization				12 16 1C	handler - 4.4	▶
r/a	10%-facts-and-circumstances test-						ın.
	is 10% or more, and if the organization made			•			
	in Part IV how the organization mee	is the facts and	circumstances"	test ine organiz	acion quanifies as	a publicly supp	orted F
L	organization 10%-facts-and-circumstances test-	_2000 Ifthe era	anization did not	chack a hay an lu	no 13 165 166 5	or 17a and line	F1
ט	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat			•		<u>-</u>	clv
	supported organization	aon meets the 16	aces and circuitis	tances test life	. organization qual	iiiies as a publi	ETY ▶ ¯
18	Private Foundation If the organizati	on did not check	a box on line 13	. 16a. 16b. 17a o	r 17b. check this	box and see	- 1
	instructions	a.a not eneck		, , 0 0 , 7 0 0	. 2. 2, 511558 61115		▶ □

Schedule A (Form 990 or 990-EZ) 2010 Page 3 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 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified **b** A mounts 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 Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning **(e)** 2010 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (f) Total ın) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b c Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(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		
S	ection 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

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

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

Schedule A (Fo	orm 990 or 990-EZ) 2010	Pag
Part IV	Supplemental Information. Supplemental Information. Complete this required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. additional information. (See instructions).	•

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

Software ID: Software Version:

EIN: 94-1156295

Name: Saint Francis Memorial Hospital

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors (A) (B) (C) (D) (E) (F)											
(B) Average hours		tıon (che)			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other compensation		
week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations		
3 0	Х						0	0	0		
3 0	Х						122,916	0	0		
3 0	X						10,000	0	0		
3 0	Х						0	0	0		
3 0	Х						1,266	0	0		
3 0	Х						0	518,723	64,965		
2.0	V						0	0	0		
3 0	Х						0	0			
3 0	Х						0	0	0		
3 0	х						О	0	0		
3 0	Х						0	0	0		
3 0	Х						0	0	0		
3 0	Х						0	0	0		
3 0	Х						16,225	0	0		
3 0	Х						192,579	0	0		
									0		
3 0	Х						0	0			
3 0	Х						0	0	0		
3 0	Х						0	0	0		
8 0	Х		х				О	0	0		
3 0	Х		Х				0	0	0		
40 0			х				326,191	0	48,370		
40 0			Х				0	789,687	74,790		
40 0				х			288,881	0	39,401		
40 0				х			200,847	0	36,016		
40 0				х			286,953	0	31,448		
40 0				х			184,744	0	35,422		
	(B) Average hours per week 3 0 3 0 3 0 3 0 3 0 3 0 3 0 3 0 3 0 3	(B) A verage hours per week Position 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 3 0 X 4 0 0 X 4 0 0 X	(B) A verage hours per week 3 0	(B) A verage hours per week	(B) A verage hours per week	C	Note Position (check all that apply) Position (check all that apply)	CD	Note Position (check all that apply) Position (check all that apply)		

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours		tion (that a	che		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director			from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations			
Raymond Miller Director-Pharmacy	40 0				х			195,541	0	27,179
Barbara Morrissette VP HR	40 0				х			191,544	0	26,566
Dallas Ryan Dırector Materials Management	40 0				х			207,586	0	33,725
Andrew Smith VP Medical Affairs	40 0				х			281,912	0	23,410
Lloyd Yandell Dırector-Facılıtıes	40 0				х			158,399	0	17,167
A bbie Yant Senior Director-A dvocacy	40 0				x			189,098	0	39,082
Susanne Gardino Registered Nurse	40 0					x		241,458	0	17,944
Harendra C Joshi Coordinator Nuclear Medicine	40 0					×		245,778	0	20,915
Bradford K Moy Medical Director	30 0					Х		261,781	0	22,989
John Ikona Ubı Registered Nurse	40 0					х		270,260	0	45,041
Doris Y Yau Staff Nurse II	20 0					х		299,556	0	48,057

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DLN: 93493122009742

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

Open to Public Inspection

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

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

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

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

	me of the organization nt Francis Memorial Hospital			Employer ide	ntification number
Jan	it Francis Memorial Hospital			94-1156295	5
ar	t I-A Complete if the or	ganization is exempt unde	er section 501(c) or is a section 52	7 organization.
L	Provide a description of the org	ganızatıon's dırect and ındırect po	litical campaign act	tivities in Part IV	
2	Political expenditures			▶	\$
3	V olunteer hours				
ar	t I=B Complete if the ord	ganization is exempt unde	er section 501(c)(3).	
1		tax incurred by the organization			\$
2		tax incurred by organization mar			\$
3		ection 4955 tax, did it file Form 4			⊤ Yes
4a	Was a correction made?	·	,		☐ Yes ☐ No
ь	If "Yes," describe in Part IV				·
ar		ganization is exempt und	er section 501(c) except section 50	1(c)(3).
1	Enter the amount directly expe	nded by the filing organization for	r section 527 exem	pt function activities 🕨	\$
2		rganızatıon's funds contributed to	o other organization	s for section 527	\$
	exempt funtion activities				
3	·	cures Add lines 1 and 2 Enter he	ere and on Form 112	20-POL, line 17b	\$
3 4 5	Total exempt function expendit Did the filing organization file F Enter the names, addresses an	f orm 1120-POL for this year? Id employer identification number	· (EIN) of all section	n 527 political organizatior	
4	Total exempt function expendit Did the filing organization file F Enter the names, addresses ar organization made payments F amount of political contribution	orm 1120-POL for this year?	(EIN) of all section the amount paid froid d directly delivered	n 527 political organizatior om the filing organization's to a separate political org	is to which the filing funds Also enter the anization, such as a
4	Total exempt function expendit Did the filing organization file F Enter the names, addresses ar organization made payments F amount of political contribution	form 1120-POL for this year? Id employer identification number For each organization listed, enter Is received that were promptly an	(EIN) of all section the amount paid froid d directly delivered	n 527 political organizatior om the filing organization's to a separate political org	to which the filing funds. Also enter the anization, such as a ation in Part IV (e) A mount of political contributions received
4	Total exempt function expendit Did the filing organization file F Enter the names, addresses ar organization made payments F amount of political contribution separate segregated fund or a	form 1120-POL for this year? Indicated and employer identification number for each organization listed, enter is received that were promptly an political action committee (PAC)	r (EIN) of all section r the amount paid fro d directly delivered If additional space	n 527 political organization om the filing organization's to a separate political organis needed, provide information (d) A mount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
1	Total exempt function expendit Did the filing organization file F Enter the names, addresses ar organization made payments F amount of political contribution separate segregated fund or a	form 1120-POL for this year? Indicated and employer identification number for each organization listed, enter is received that were promptly an political action committee (PAC)	r (EIN) of all section r the amount paid fro d directly delivered If additional space	n 527 political organization om the filing organization's to a separate political organis needed, provide information (d) A mount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
4	Total exempt function expendit Did the filing organization file F Enter the names, addresses ar organization made payments F amount of political contribution separate segregated fund or a	form 1120-POL for this year? Indicated and employer identification number for each organization listed, enter is received that were promptly an political action committee (PAC)	r (EIN) of all section r the amount paid fro d directly delivered If additional space	n 527 political organization om the filing organization's to a separate political organis needed, provide information (d) A mount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
4	Total exempt function expendit Did the filing organization file F Enter the names, addresses ar organization made payments F amount of political contribution separate segregated fund or a	form 1120-POL for this year? Indicated and employer identification number for each organization listed, enter is received that were promptly an political action committee (PAC)	r (EIN) of all section r the amount paid fro d directly delivered If additional space	n 527 political organization om the filing organization's to a separate political organis needed, provide information (d) A mount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
4	Total exempt function expendit Did the filing organization file F Enter the names, addresses ar organization made payments F amount of political contribution separate segregated fund or a	form 1120-POL for this year? Indicated and employer identification number for each organization listed, enter is received that were promptly an political action committee (PAC)	r (EIN) of all section r the amount paid fro d directly delivered If additional space	n 527 political organization om the filing organization's to a separate political organis needed, provide information (d) A mount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
4	Total exempt function expendit Did the filing organization file F Enter the names, addresses ar organization made payments F amount of political contribution separate segregated fund or a	form 1120-POL for this year? Indicated and employer identification number for each organization listed, enter is received that were promptly an political action committee (PAC)	r (EIN) of all section r the amount paid fro d directly delivered If additional space	n 527 political organization om the filing organization's to a separate political organis needed, provide information (d) A mount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
4	Total exempt function expendit Did the filing organization file F Enter the names, addresses ar organization made payments F amount of political contribution separate segregated fund or a	form 1120-POL for this year? Indicated and employer identification number for each organization listed, enter is received that were promptly an political action committee (PAC)	r (EIN) of all section r the amount paid fro d directly delivered If additional space	n 527 political organization om the filing organization's to a separate political organis needed, provide information (d) A mount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
4	Total exempt function expendit Did the filing organization file F Enter the names, addresses ar organization made payments F amount of political contribution separate segregated fund or a	form 1120-POL for this year? Indicated and employer identification number for each organization listed, enter is received that were promptly an political action committee (PAC)	r (EIN) of all section r the amount paid fro d directly delivered If additional space	n 527 political organization om the filing organization's to a separate political organis needed, provide information (d) A mount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
4	Total exempt function expendit Did the filing organization file F Enter the names, addresses ar organization made payments F amount of political contribution separate segregated fund or a	form 1120-POL for this year? Indicated and employer identification number for each organization listed, enter is received that were promptly an political action committee (PAC)	r (EIN) of all section r the amount paid fro d directly delivered If additional space	n 527 political organization om the filing organization's to a separate political organis needed, provide information (d) A mount paid from filing organization's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,

Sc	hedule C (Form 990 or 990-EZ) 2010						Page 2
P	art II-A Complete if the organization under section 501(h)).	is ex	cempt under	section 501(c)(3) and fi	led Form 5768	
A B	Check If the filing organization belongs to a Check If the filing organization checked bo			" provisions apply	/		
	Limits on Lobbying E (The term "expenditures" means a)		(a) Filing Organization's Totals	(b) Affiliated Group Totals
<u>1</u> a	Total lobbying expenditures to influence public o						
b	Total lobbying expenditures to influence a legisl						
c	Total lobbying expenditures (add lines 1a and 1	b)					
d	Other exempt purpose expenditures						
е	Total exempt purpose expenditures (add lines 1	c and :	Ld)				
f	Lobbying nontaxable amount Enter the amount columns	from th	e following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The	lobbying nontaxa	ble amount is:			
	Not over \$500,000	20%	of the amount on lin	e 1e			
	Over \$500,000 but not over \$1,000,000	\$100	,000 plus 15% of the	excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175	,000 plus 10% of the	excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225	,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000	\$1,00	00,000				
	Grassroots nontaxable amount (enter 25% of lir	ne 1 f)					
_	Subtract line 1g from line 1a If zero or less, ent	-					
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -					
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h d	or line 11, did the	organization file F	orm 4720 rep	orting	┌ Yes ┌ No
	4-Year Av (Some organizations that made a columns below. See t	secti	on 501(h) ele		havè to co		ne five
	Lobbying Exp	endit	ures During 4	l-Year Averag	jing Period		
	Calendar year (or fiscal year						

	Lobbying Expenditures During 4-Year Averaging Period								
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total			
2a	Lobbying non-taxable amount								
b	Lobbying ceiling amount (150% of line 2a, column(e))								
С	Total lobbying expenditures								
d	Grassroots non-taxable amount								
e	Grassroots ceiling amount (150% of line 2d, column (e))								
f	Grassroots lobbying expenditures								

Part II-B	Complete if the organization is exempt under	r section 501(c)(3) and has NOT filed Form 5768
	(election under section 501(h)).	

		(a)		(b)	
		Yes	No	A mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		No		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νο		
c	Media advertisements?		Νο		
d	Mailings to members, legislators, or the public?		Νo		
е	Publications, or published or broadcast statements?		Νo		
f	Grants to other organizations for lobbying purposes?		Νo		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Νo		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo		
i	Other activities? If "Yes," describe in Part IV	Yes		20,511	
j	Total lines 1c through 1i			20,511	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No		
b	If "Yes," enter the amount of any tax incurred under section 4912				
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		•		
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		•		

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

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

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-B 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

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

Part IV Supplemental Information

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

Ident if ier	Return Reference	Explanation
PART II - B		Lobbying expenditures paid by the Parent organization for annual membership dues where expenses are allocated to the hospital American Hospital Association \$2,382 Catholic Health Association \$1,559 Hospital Association of So Cal \$16,570

1

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DLN: 93493122009742

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public

ernal Revenue Service		► Attach to Fo	n to Form 990. ► See separate instructions.				Inspection		
	me of the organi			Emp	loyer identifi	cation numb	er		
Sair	nt Francis Memorial I	iospitai		94-1	156295				
Pa	irt I Organi	izations Maintaining Donor Ac	dvised Funds or Other Similar Fu			t s. Comple	te if the		
	organız	ration answered "Yes" to Form 99	· · · · · · · · · · · · · · · · · · ·						
			(a) Donor advised funds	(b) Funds and	other accou	ınts		
	Total number at	·							
	33 3	ributions to (during year) its from (during year)							
• I	Aggregate yalu	, <u>,</u> , ,							
		-							
•	_		sors in writing that the assets held in don organization's exclusive legal control?	or auvi	seu	☐ Yes	┌ No		
;	Did the organiz	ation inform all grantees, donors, and	donor advisors in writing that grant funds	may be	.				
	•		efit of the donor or donor advisor, or for ar	ny othe	r purpose	┌ Yes	□No		
20		ermissible private benefit	ıf the organızatıon answered "Yes" to	o Form	n QQN Dart	<u> </u>	, 140		
e	•	conservation easements held by the or		0 1 0111	1 990, Fait	IV, IIIIC 7.			
		•	on or pleasure)	hıstorı	cally importa	ntly land are	·a		
	_	of natural habitat	Preservation of a c						
	Preservati	on of open space							
2	Complete lines	2a-2d if the organization held a quali	fied conservation contribution in the form	ofaco	nservation				
	easement on th	ne last day of the tax year	ŗ						
					Held at th	e End of the	Year		
а		f conservation easements	•	2a					
Ь	_	restricted by conservation easements	•	2b					
с		servation easements on a certified his	` '	2c					
d		servation easements included in (c) ac	· · · · · · · · · · · · · · · · · · ·	2d					
3		·	rred, released, extinguished, or terminate	d by th	e organizatio	n during			
	the taxable yea	ar ►							
ŀ	Number of stat	es where property subject to conserva	ation easement is located 🗠						
i		nization have a written policy regarding the conservation easements it holds?	g the periodic monitoring, inspection, hand	dling of	violations, ai	nd 「Yes	┌ No		
•	Staff and volun	teer hours devoted to monitoring, insp	ecting and enforcing conservation easem	ients di	uring the year	*			
,	A mount of expe	enses incurred in monitoring, inspecti	ng, and enforcing conservation easements	during	; the year 🟲 🕏	·			
3		servation easement reported on line 2) and 170(h)(4)(B)(II)?	(d) above satisfy the requirements of sec	tion		☐ Yes	┌ No		
)	balance sheet,	and include, if applicable, the text of t	onservation easements in its revenue and the footnote to the organization's financial						
ar	t IIII Organi		ns of Art, Historical Treasures, 'Yes" to Form 990, Part IV, line 8.	or Otl	ner Simila	r Assets.			
.a			116, not to report in its revenue stateme	nt and	balance shee	t works of			
	art, historical t	reasures, or other similar assets held	for public exhibition, education or researc ancial statements that describes these it	h ın fu			e,		
b	historical treas		116, to report in its revenue statement a public exhibition, education, or research ii :			•			
	(i) Revenues ir	ncluded in Form 990, Part VIII, line 1			► \$				
	(ii) Assets incl	luded in Form 990, Part X			- \$				
!		tion received or held works of art, histonts required to be reported under SFA	orical treasures, or other similar assets fo S 116 relating to these items	or finan	cial gain, prov	/ıde the	_		
а	Revenues inclu	ıded ın Form 990, Part VIII, line 1			► \$				

b Assets included in Form 990, Part X

Pari	411 Organizations Maintaining Co	llections of Art	, Hist	corical Tre	easu	res, or Ot	<u>:her</u>	· Similar Ass	sets (co	ntınued)		
3	Using the organization's accession and othe items (check all that apply)	r records, check any	y of the	e following th	at ar	e a sıgnıfıcar	nt us	e of its collect	on			
а	Public exhibition		d	☐ Loan or	rexcl	nange progra	ms					
b	Scholarly research e Other											
c	Preservation for future generations											
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 assets to be sold to raise funds rather than			•					_ Yes	┌ No		
Par	t IV Escrow and Custodial Arrang					nanswered	"Ye	es" to Form 9	90,			
	Part IV, line 9, or reported an ar			•								
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?				ons c	or other asse	ts n	ot [Yes	┌ No		
Ь	If "Yes," explain the arrangement in Part XI	V and complete the	followi	ng table					_			
_							_	Am	ount			
C _	Beginning balance					<u> </u>	Lc 					
d	Additions during the year						Ld					
e	Distributions during the year						Le					
f	Ending balance					_ 1	Lf					
2a	Did the organization include an amount on F	orm 990, Part X, line	e 21?					Γ	Yes	┌ No		
	If "Yes," explain the arrangement in Part XI\											
Pa	rt V Endowment Funds. Complete	If the organization (a)Current Year		<u>wered "Yes'</u>)Prior Year					(e)Four Y	oars Pasis		
la	Beginning of year balance	36,206,485	(D	33,349,590	· ·	WO TEATS DACK	(u)	Tillee feats back	(e)rour re	ears back		
b	Contributions	3,654		6,794								
c	Investment earnings or losses	5,190,056		3,252,188			+					
d	Grants or scholarships	, ,		, ,			1					
e	Other expenditures for facilities	5,061,472		402,087			1					
_	and programs	, ,		,								
f	Administrative expenses											
g	End of year balance	36,338,723		36,206,485								
2	Provide the estimated percentage of the yea	r end balance held a	a s									
а	Board designated or quasi-endowment 🕨	16 640 %										
ь	Permanent endowment > 83 360 %											
С	Term endowment ►											
3a	Are there endowment funds not in the posse	ssion of the organiza	ation t	hat are held a	and a	dministered	for t	he				
	organization by								Yes	No		
	(i) unrelated organizations						•	3a(i	_			
_	(ii) related organizations				•			3a(i	- 	No		
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the						•	3b				
	t VI Investments—Land, Building				Λ D:	art V ling 1	<u></u> Λ					
	Description of investment	s, and Equipme	116. 36	(a) Cost or otl	her	(b)Cost or other)	er	(c) Accumulated depreciation	(d) Boo	ok value		
1a	Land				\dashv	2,094,5	567			2,094,567		
	Buildings		'		\dashv	132,800,3		87,694,197	 	5,106,148		
	Leasehold improvements		•		-+	132,800,3		171,740	4	25,106		
	·		•		\dashv	·		<u>`</u>	1			
	Equipment		•		-+	93,722,7		70,714,155	1	3,008,612		
E	Other		.		- 1	30,357,3	ו∪ככ		I 3	0,357,390		

100,591,821

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12		
(a) Description of security or category (including name of security)	(b)Book value		od of valuation f-year market value
(1)Financial derivatives		Cost of end-of	i-year market value
(2)Closely-held equity interests		1	
Other		1	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	•		
Part VIII Investments—Program Related. Se		13.	
			od of valuation
(a) Description of investment type	(b) Book value		f-year market value
(1) UNCONSOLIDATED FOUNDATION	74,582,141		F
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	74,582,141		
Part IX Other Assets. See Form 990, Part X, III	•	<u> </u>	
(a) Descrip			(b) Book value
(1) PREPAID PENSION EXPENSE			17,858,000
		-	
Total. (Column (b) should equal Form 990, Part X, col.(B) line is	<u> </u>		17,858,000
Part X Other Liabilities. See Form 990, Part >			1.,000,000
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes	0		
DUE TO RELATED PARTIES	46,094,699		
PENSION LIABILITY	1,676,989		
OTHER NON CURRENT LIABILITIES	534,548		
DEFERRED COMPENSATION	96,069		
	<u> </u>		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	48,402,305		

Par	XII Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	its
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 p	er 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	
а	Net unrealized gains on investments	
b	Donated services and use of facilities	
c	Recoveries of prior year grants	
d	Other (Describe in Part XIV) 2d	
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	
b	Other (Describe in Part XIV)	
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
	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	
а	Donated services and use of facilities	
b	Prior year adjustments	
c	Other losses	
d	Other (Describe in Part XIV)	
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIV)	
С	Add lines 4a and 4b	4c
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5
Par	t 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 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

Ident if ier	Return Reference	Explanation
Sch D, Part V, Line 4		The endowment funds are intended to be used to support the
		hospital's healthcare needs and other hospital program needs

OMB No 1545-0047

Open to Public

(Form 990)

Name of the organization

Saint Francis Memorial Hospital

Department of the Treasury Internal Revenue Service

SCHEDULE H

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

Hospitals

Inspection Employer identification number

					94-	1156295		
Pā	rt I Financial Assista	ance and C	ertain Oth	er Community Be	nefits at Cost			
							Yes	s No
1a	Did the organization have a fi	nnancıal assı	stance policy	during the tax year? I	f"No," skip to questio	n 6a . 1	a Yes	5
b	If "Yes," is it a written policy	?				1	b Yes	5
2	If the organization has multip assistance policy to its vario	• •		_	describes application o	of the financial		
	Applied uniformly to all ho	•	ls	Applied uniformly	to most hospitals			
3	Answer the following based o organization's patients during	n the the finar	ncıal assıstaı	nce eligibility criteria t	hat applied to the large	st number of the		
а								
	_	_		_	or	3	a Yes	5
	T 100% T 150%			O ther	<u> </u>			
Ь	Does the organization use FP "Yes," indicate which of the fo							
		_	_	_		-	b Yes	-
	200% 250%	J 30	00% I	350% 40	0% v Other_	<u>500. %</u>		
c	If the organization does not u determining eligibility for free test or other threshold, regar	or discounte	d care Inclu	de in the description w	hether the organization			
4	Did the organization's financi			· ·	•	uring the tax year	Yes	5
5a	provide for free or discounted Did the organization budget amount			_		k year? 5	a Yes	,
ь	If "Yes," did the organization	's financial as	sistance exp	enses exceed the bud	geted amount?		b Yes	$\overline{}$
c	If "Yes" to line 5b, as a resul care to a patient who was elig	_			•	or discounted	c	No
6a	Does the organization prepare a community benefit report during the tax year?							
6b	If "Yes," did the organization			ublic?		6	b Yes	5
	Complete the following table worksheets with the Schedule	-	ksheets prov	ided in the Schedule H	instructions Do not s	ubmit these		
7	Financial Assistance and C	Certain Other	Community E	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 bene expense		ercent of expense
а	Financial Assistance at cost (from Worksheets 1 and 2)		3,497	3,620,156	0	3,620,1	56	1 740 %
b	Unreimbursed Medicaid (from		9,859	44,707,650	29,208,687	15,498,9		7 430 %
c	Worksheet 3, column a) Unreimbursed costs—other		9,039	44,707,630	29,200,087	15,498,9	,,,	7 730 70
	means-tested government programs (from Worksheet 3, column b)		1,872	4,891,636	0	4,891,6	36	2 350 %
d	Total Financial Assistance and Means-Tested Government Programs		15,228	53,219,442	29,208,687	24,010,7	55 1	11 520 %
e	Other Benefits Community health improvement services and community benefit operations (from (Worksheet 4)		2,070	1,982,618	43,193	1,939,4	25	0 930 %
f	Health professions education			· ·	·			
g	(from Worksheet 5) Subsidized health services		806	413,821	237,818	176,0		0 080 %
h	(from Worksheet 6) Research (from Worksheet 7)		33,789 0	480,148	0	480,1	18	0 230 %
	Cash and in-kind contributions to community groups (from Worksheet 8)		9,191	782,060	24,850	757,2		0 360 %
j 1	Fotal Other Benefits		45,856	3,658,647	305,861	3,352,7	_	1 600 %
-	Total. Add lines 7d and 7j		61,084	56,878,089	29,514,548	27,363,5		13 120 %

Pa	rt II Community Building activities during the of the communities i	tax year, an								ıldıng	ealth
		(a) Number of activities or programs (optional)	(b) Persons served (optional)	(c) Total community building expense		rect offse revenue	etting	(e) Net communit building expense		(f) Perc total ex	
1	Physical improvements and housing										
2	Economic development										
3	Community support										
4	Environmental improvements										
5	Leadership development and training										
6	for community members Coalition building								+		
7	Community health improvement								+		
8	advocacy								4		
9	Workforce development Other	1	0	14,500	1		0	14,	500	0	010 %
10	Total	1	0	14,500	,		0	14,	500	0	010
Pai	Bad Debt, Medicar	e, & Collec	tion Practic	, , , , , , , , , , , , , , , , , , ,			•	,			
Soct	ion A. Bad Debt Expense									Г .,	
1	Did the organization report bac Statement No 15?	d debt expense	e ın accordance	with Heathcare Fina	ancıal M	anagen	nent As	ssociation	1	Yes	No
2	Enter the amount of the organi	zatıon's bad d	ebt expense (a	t cost)		2		3,414,421			
3	Enter the estimated amount of	-				3		0			
	attributable to patients eligible	under the org	janization's fina	ancial assistance po	licy .					ı	
4	Provide in Part VI the text of t In addition, describe the costi rationale for including a portio	ng methodolog	jy used in detei	mining the amounts				•			
Sect	ion B. Medicare										
5	Enter total revenue received fi	om Medicare	(ıncludıng DSH	and IME)		5		47,218,022			
6	Enter Medicare allowable cost	s of care relati	ing to payments	s on line 5		6		63,455,271			
7	Subtract line 6 from line 5 Th	•	•			7		-16,237,249			
8	Describe in Part VI the extent Also describe in Part VI the concept the box that describes	osting method the method us	ology or source ed	used to determine t	he amo						
	Cost accounting system	l ✓ c∘	st to charge ra	tio I	Other						
Sect	ion C. Collection Practices										
9a	Does the organization have a						• •		9a	Yes	
b	If "Yes," does the organization patients who are known to qua								9b	Yes	
Pa	rt IV Management Com									•	•
	(a) Name of entity	(b	o) Description of pr activity of entity		c) Organı orofit % o ownersh	r stock	er) Officers, directors, trustees, or key nployees' profit % stock ownership%	pro	e) Physio ofit % or ownershi	stock
1							1	F . *			
2											
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9											
 10							+		-		
									1		
11									-		
12											

Part	V Facility Information									
(list in largest How m	on A. Hospital Facilities order of size, measured by total revenue per facility, from to smallest) any hospital facilities did the organization operate during tyear? 1	Licensed hospital	General medical &	Children's hospital	Teaching hospital	Critical access hospital	Research facility	ER-24 hours	ER-other	
uie tax	year /	=	& surgical	<u>a</u>		ospital				
Name	and address									Other (Describe)
1	Saint Francis Memorial Hospital 900 Hyde ST San Francisco, CA 94109	x	х		х			Х		
		1								
		+								
		-								
		\vdash								
		+-	_							

low many non-nospital facilities did the organization	on operate during the tax year?			
ame and address	Type of Facility (Describe)			
-				
0	Schedule H (Form 9			

Part V Facility Information (continued)

Schedule H (Form 990) 2010 Page 8

Part VI Supplemental Information

Complete this part to provide the following information

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
- 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
- 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.)
- 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
Schedule H, part I, Line 7, column (f)		The amount of bad debt expense included on Form 990, Part IX, line 25, column (A) is \$14,659,101 and has been subtracted for purposes of calculating the percentages in column (f)

Identifier	ReturnReference	Explanation
chedule H, part I, Line 7		For purposes of calculating the amounts provided in the table, SFMH uses a cost accounting system that combines relative value units (RVU) and cost to charge ratios (CCR) to allocate costs to the patient level. The cost accounting system algorithm allocates total operating expenses to the procedure charge code level based upon an RVU for procedures that have been studied and assigned an RVU, or based upon a CCR for unstudied procedures that do not have an RVU assigned. When a CCR is used, the system calculates that CCR on a departmental specific basis at where the services were provided. The calculation is similar to the Worksheet 2 of Schedule H, Ratio of Patient Care Cost to Charges, except it is calculated on a departmental specific basis, not in the aggregate. The allocated procedure charge code level costs are then rolled up to the patient level based upon the billed procedure charge codes associated with those services provided to each specific patient. This is done for all patient segments including inpatient, outpatient, emergency department, private insurance, Medicaid, Medicare, uninsured and self pay. The cost accounting system is utilized to determine the unreimbursed cost of Medicaid and other meanstested government programs. The cost of charity care is calculated by applying the CCR derived from the cost accounting system on a per facility basis, to the charges incurred on patients that qualify for charity care at the respective facility. The actual cost is reported for other community benefit activities such as community health.
		improvement services, community benefit operations, health professions education, subsidized health services, research and cash and in-kind donations

Identifier	ReturnReference	Explanation
Schedule H, Part II - Community Building Activities		Under work force development, we have Cristo Rey/Immaculate Conception Academy as part of our Mentoring Programs Immaculate Conception Academy (ICA), is an all girls Catholic high school, which offers a college preparatory education in the Dominican tradition. As part of the Cristo Rey Network, ICA operates with a unique program of strong college prep curriculum partnered with a corporate work study component Membership in the Cristo Rey Network allows ICA to open its doors to capable students desiring a faith based high school education but without adequate means to afford it. Saint Francis provides mentoring opportunities for up to 4 ICA students throughout the academic year.

Identifier	ReturnReference	Explanation
Identifier Schedule H, Part III, Line 4	ReturnReference	Explanation The amount of the organization's bad debt at cost is determined by applying the CCR (see above) to patient charges that are deemed to be uncollectible. This amount represents the cost of services provided to patients who are unable or refuse to pay their bills and do not qualify for free or discounted care, government sponsored programs or other financial assistance, and are otherwise uninsured. Any portion of a patient bill remaining after applying financial, uninsured or other discounts or payments received on the account that are ultimately determined to be uncollectible are written off to bad debt. As noted in Part I, Line 3, SFMH provides free or discounted care to uninsured or under-insured individuals at or below 500% of the Federal Poverty Level. SFMH also provides patients options for prompt pay discounts, discounts for the medically indigent, and interest-free extended payment plans for patients who have demonstrated good faith and are cooperating in resolving their hospital bills. All accounts for eligible uninsured patients receive an automatic uninsured discount of 25% for patients seen. The expected patient payment amount on the patient's bill reflects this discount SFMH makes every effort in determining if a patient qualifies for charity care upon admission. SFMH follows CHW's financial assistance policy. CHW's financial assistance policy. CHW's financial assistance policy is communicated to patients upon admission and is available in the languages primarily spoken in the community. It is also posted in various common areas of the hospital and is provided upon billing if eligibility is not previously determined. Eligibility is reevaluated as needed and amounts are classified as charity as soon as eligibility is known. CHW also utilizes a Payment Assistance Rank Ordering (PARO) scoring system to assist in determining if a patient may qualify for charity care even though they have not applied for it PARO is a methodology that applies consistent screening and application standards to al
		and by providing appropriate allowances Reserves for charity and uncollectible amounts have been established and are netted against patient accounts receivable in the consolidated
		balance sheet

Identifier	ReturnReference	Explanation
Schedule H, Part III, Line 8	ReturnReference	SFMH prepares Medicare cost reports in a manner that comports with Provider Reimbursement Manual (PRM) 15-1, 2150ff and PRM 15-2, 1000ff As such, the following language per the PRM 15-1 describes the computation of costs per the Medicare Cost Report Total allowable costs of a provider are apportioned between program beneficiaries and other patients so that the share borne by the program is based upon actual services received by program beneficiaries. The ratio of covered beneficiary charges to total patient charges for the services of each ancillary department is applied to the cost of the department. Added to this amount is the cost of routine services for program beneficiaries, determined on the basis of a separate average cost per diem for all patients for general routine patient care areas. Another factor to be considered is a separate average cost per diem for intensive care unit, coronary care unit, and other special care inpatient hospital units. CHW believes that the entire Medicare shortfall of \$429.3 million, as reported below in Part VI, Line 6, constitutes community benefit. The IRS Community Benefit Standard includes the provision of care to the elderly and Medicare patients. Medicare shortfalls must be absorbed by CHW hospitals in order to continue treating the elderly in our communities. The hospitals provide care regardless of this shortfall and thereby relieve the federal government of the burden of paying the full cost for Medicare beneficiaries. This shortfall includes \$16.2 million reported on Part III, Section B, Line 7, primarily for fee for service Medicare patients, as well as the unreimbursed portion
		of Medicare Managed Care and Medicare Capitated programs for SFMH

Identifier	ReturnReference	Explanation
chedule H, Part III, Line 9b		SFMH ensures that patient accounts are processed fairly and
<i>'</i>		consistently SFMH follows CHW's collection policy CHW's
		collection policy contains provisions that prohibit the collection
		of amounts due from patients who the organization knows
		qualify for charity care Accounts with incorrect or incomplete
		demographic information are assigned to a collection agency if
		SFMH or the billing company retained by CHW is unable to
		obtain an updated address through skip tracing or other means
		For patients who have an application pending for either
		government-sponsored financial assistance or for assistance
		under CHW's Patient Payment Assistance Policy, or where the
		patient is attempting in good faith to settle an outstanding bill
		with the facility via payment plans, SFMH will not knowingly
		send that patient's bill to an outside collection agency Legal
		action will not be pursued to collect debts from patients who
		have qualified for charity or are cooperating in good faith to
		resolve their debt SFMH does not impose wage garnishments
		or liens on primary residences. On self-pay accounts that do
		not meet the criteria noted above, the initial determination of
		assignment to a collection agency will vary depending on the
		nature of the account with the final decision being at the
		discretion of each hospital patient financial assistance
		department Upon assignment of such a patient account to a
		collection agency, SFMH requires the agency to comply with
		the Fair Debt Collection Practices Act
		the Fall Debt Collection Fractices Act

s

Identifier	ReturnReference	Explanation
Identifier Schedule H, Part VI, Line 2 - Needs Assessment	ReturnReference	Explanation In San Francisco since the late 1990's the Building a Healthier San Francisco Coalition (B HSF) made up of healthcare and health related organizations of which SFMH is a member, have worked together to produce the California state-mandated Community Needs Assessment for San Francisco. As a member of BHSF, Saint Francis Memorial Hospital has taken these assess ment findings and through a process directed by the SFMH Board's Community Advisory Commit tee has set priorities for the SFMH Community Benefit Plan. In 2007, BHSF launched a new website HealthmattersinSF org which is home to all of the data that is the basis for the San Francisco. Community Needs Assessment. Following the launch of the website, a series of stakeholder meetings took place to support the process of setting citywide priorities for community benefit planning at a city level and then at the hospital level. These stakeholders coalesced to become the San Francisco. Community Benefit Partnership of which SFMH is a member Beginning in 2009, the Community Benefits Partnership defined a process for data a ssessment and priority setting that would create the 2010 San Francisco Community Needs As sessment. The end result of this new assessment process is Community vital Signs. Community Vital Signs. The Community Benefit Partnership transformed the 4 priority areas from the 2007 assessment to 10 priority health goals for the 2010 San Francisco Community Needs Ass essment. At a Community Stakeholder meeting on November 13, 2009, the Partnership hosted o ver 75 participants representing a cross-section of expertise in health and human services. These community stakeholders confirmed the relevance of the 10 health goals and planted the seeds for 10 affinity groups comprised of subject matter experts for each of the 10 health goals.
		· · · · · · · · · · · · · · · · · · ·
		provide current baseline for each indicator and their associated benchmarks, paving a clear and dynamic p ath forward in promoting the 10 priority health goals of San Francisco. It provides a cent ral web-based location for 1) Assessing health and health care needs, 2) Guiding health policy through collaboration, and 3) Evaluating impacts of health interventions A Community Needs Index Saint Francis Memorial Hospital also makes full use of the Community Needs I ndex (CNI), which analyzes the community needs of a specific geographic region by measuring barriers to health care including income, education, cultural, insurance, and housing. A numerical value is assigned to those areas of highest to lowest needs. These CNI scores c orrelate with data showing these communities also have rates of hospitalization for ambula tory care sensitive conditions. Residents in the communities with scores of "5" are more t han twice likely to need inpatient care for preventable conditions than communities with a score of "1".
		identified zip codes in our catchment area, five of them rate as "highest needy" These zip codes include 94102 (Tenderloin), 94103 (SOMA), 94104 (Downtown), 94108 (Chinatown), and 94133 (North Beach), which allow further focus or refinement of our Community Benefit intervention for maximum and strategic impact. The CHW CNI findings are in alignment with the other health indicator data found on the Health Matters in SF wiebsite. B Assets Assessment Following the development of the Community Vital Signs, participants in these meetings aided in identifying current assets in the form of programs and projects related to the goal and indicators. Subsequently, during this process, over 350 p otential data indicators were identified to measure progress of the health goals. The Part nership then narrowed down the indicators to the 34 most relevant indicators that have cur rent available data and benchmarks with additional research by BHSF and input during the Stakeholder Workshop on June 4, 2010. The Health Matters in SF website hosts a Collaboration Center for each health goal with the aim to continue and enhance the engagement of experts and community advocates, and health improvement.

Identifier	ReturnReference	Explanation
Identifier Schedule H, Part VI, Line 2 - Needs Assessment	ReturnReference	Explanation process by participating in the Affinity Groups BHSF is working with HCI to develop the web tools to enhance both individuals and organizations' ability to collaborate C Developing the Hospital's Implementation Plan (Community Benefit Report & Plan) At the November 2010 CAC meeting, the CAC conducted an exercise to identify existing institutional and com munity partner resources and categorizing them under each of the 10 health goals represent ed in Community Vital Signs The exercise consisted of 3 rounds In round 1, the CAC listed an inventory of all the programs within the scope of Saint Francis Memorial Hospital's C ommunity Benefit program that are already being worked on to support each Community Vital Sign In round 2, each member of the CAC voted for what they believed to be the top 3 goal is to focus on by nominal group process voting Finally in round 3, the results of the voti in were announced and the Community Vital Sign indicator being used as a proxy to measure each goal was discussed in detail. As a result of the process, the CAC selected 6 of the 1 0 Community Vital Signs for the hospital's Community Benefit Plan focus. Community Vital Signs which Saint Francis Memorial Hospital chose not to address this year were - Prevent and Detect. Cancer 2 votes - Raise Healthy Kids. 1 vote - Improve Health and Health Care A ccess for Persons with Disabilities. 0 Votes These needs were not selected because they are beyond the scope of the services offered by Saint Francis Memorial Hospital and they are already being addressed by other organizations in the community Many of the services or programs directly address the needs of vulnerable populations in our community with Disproportionate Unmet Health Needs (DUHN) Communities with DUHN are defined as having a high prevalence or severity for a particular health concern to be addressed by a program pade they are program. Pade to validate this selection inclu des data from the Health Matters in SF website. At Saint Francis Memorial Hospital, some of
		patients i nto Healthy San Francisco Healthy San Francisco provides a medical home and primary physician to uninsured residents of San Francisco Although this is not an insurance program, Healthy San Francisco reinvents the health care
		safety net enabling the uninsured to access primary and preventative care Through our partnership with Glide Health Services, Saint Francis Memorial Hospital provides outpa

I dentifier Return Reference		Explanation		
Schedule H, Part VI, Line 3 - Patient Education of Eligibility for		Communication of the Financial Assistance Program to Patients and the Public SFMH follows CHW's Financial Assistance Program Information about patient financial assistance is available from SFMH, including a contact number for patients to call for information and assistance. The information is provided to patients at Emergency Registration, Hospital Admissions Registration and Outpatient Registration Points on the main campus and at offsite satellite clinics. Notices are posted in each of these areas as well. Written information is provided in the primary languages spoken by the populations served by the facility. At the point of registration, all patients receive brochures explaining the facility's charity care program and the availability of government sponsored programs. Uninsured patients receive copies of the charity care and Medicaid applications in addition to the brochure upon admission to the facility. It is SFMH's policy that at the time of patient billing, facilities provide to all uninsured patients the same billing information concerning services and charges provided to all other patients who receive care at SFMH facilities. If financial assistance eligibility is not determined prior to billing, initial billing statements to uninsured patients include a request to the patient to provide any insurance information that was valid for the dates of service billed, a statement informing patients without insurance coverage they may be eligible for a government sponsored program or facility funded charity care, instructions on how to apply for a government program or charity care and the provision of such applications. Any member of the SFMH staff or medical staff may make referral of patients for financial assistance. The patient or a family member, a close friend or associate of the patient may also make a request for financial assistance.		

Schedule H, Part VI, Line 4 -	
1	Saint Francis Memorial Hospital is the only hospital located in
Community Information	downtown San Francisco Patients' accessing the hospital's services range from the city's richest to poorest residents. Our
	primary service area includes Downtown, Nob Hill, North Beach,
	the Waterfront and areas with disproportionate unmet health
	needs the Tenderloin, Chinatown and South of Market Area (SOMA) communities The City and County of San Francisco is
	a densely populated urban environment with a residential
	population of 805,235 and a daytime population over 1 2 million. The city embraces a diverse ethnic culture 48 5%
	Caucasian, 33 3% Asian, 6 1% African American, 15 1%
	Hispanic, 4 7% - two or more races, 0 4% Native
	Hawaiian/Pacific Islander, 0 5% American Indian/Alaska Native, 6 5% other The population is highly educated with
	85% high school graduates and 50% with a college degree
	There are an estimated 73,000 persons without health
	insurance in San Francisco The cost of living in San Francisco is one of the highest in the nation. The Tenderloin The
	Tenderloin is one of San Francisco's most densely populated
	and needlest neighborhoods Approximately 28,991 residents
	live in the 94102 zip code The residents of the Tenderloin speak many languages, are of many races and income levels
	The neighborhood is home to many immigrant families, 27 3%
	of which are linguistically isolated 43% of residents speak a language other than English at home The Tenderloin is one of
	the city's most impoverished neighborhoods. It is also home to
	many of the city's non-profits that provide the resources and
	networks that individuals need to build new lives. The average median income of residents is only \$22,351, with 24 5% of
	residents living below the federal poverty level. The Tenderloin
	is a very diverse community, 16 5% of residents are African
	American, 13 5% are Latino, 25% are Asian, and 0 4% are Native Hawaiian or Other Pacific Islander The North of Market
	Community Benefit District was established in 2005 with the
	goal of providing consistent cleaning, beautification and safety services to the Tenderloin These services are paid for by a tax
	on property owners In 2009, the Tenderloin was deemed a
	National Historic District Chinatown Established in the 1850's
	this neighborhood is one of the oldest Chinatowns in Northern California Chinatown's architecture, restaurants and shopping
	make it one of the city's most popular tourist destinations
	Chinatown is one of the city's most densely populated neighborhoods with 13,716 residents living in this small area
	Since the neighborhood's birth in the 1800's it has been home
	to many immigrants Today, 16% of its residents live below the
	poverty line The median income of residents living in Chinatown is \$31,542 A majority (58%) of residents living in
	this neighborhood are Asian or Pacific Islander Only 1 3% of
	residents living in Chinatown are African American and 4 2%
	are Hispanic or Latino 61% of residents speak a language other than English at home South of Market Area South of
	Market Area (SOMA) is the fastest growing neighborhood in San
	Francisco with a population of 23,016 residents Dozens of high rise condos and retail outlets are currently under development
	This neighborhood exhibits high poverty rates, particularly for
	adults and seniors There is a high near poverty rate among
	Children and in SOMA, unemployment and labor force non- participation continue to be issues for residents 22 5% of
	SOMA residents live below the federal poverty line SOMA is a
	very diverse neighborhood 11 8% of residents are African
	American, 24 9% are Asian or Pacific Islander and 25 1% are Hispanic or Latino 49% of SOMA residents speak a language
	other than English at home The Transbay Terminal
	Replacement Project, along with many new residential high rises, is transforming the city's skyline and these neighborhood
	demographics However, the neighborhood is still home to a
	number of single room occupancy hotels and poor persons The
	community has been federally designated as a Medically Underserved Area/Population, given that 5 Federally Qualified
	Health Centers (FQHC) are located in the 94102, 94103 and
	94133 zip codes They are Glide Health Services, Curry Senior
	Center, St Anthony's Free Clinic, South of Market Health Center and North East Medical Services Also in the community
	are non-FQHC clinics and Chinese Hospital

Identifier	ReturnReference	Explanation
Schedule H, Part VI, Line 5 - Other Information		The Hospital is governed by a Board of Trustees, the majority of whom reside within its primary service area and who are not employees, contractors or family members thereof All surplus funds generated by SFMH are reinvested back into the organization to improve patient care and provide healthcare services to its community SFMH has an open medical staff wit privileges available to all qualified physicians in the area, In addition, SFMH furthers its exempt purpose by promoting the health of the community by exercising the following - Operating an emergency room that is open to all persons regardless of ability to pay, - Partnering with Glide Health Clinic, an FQHC serving the underserved in the Tenderloin Neighborhood - Engaging in the training and education of health care professionals,

ruentinei	110101111100	Explanation
Schedule H, Part VI, Line 6 -		SFMH is affiliated with CHW Affiliates of CHW also promote the
Affiliated Health Care System		health of additional communities in Bakersfield, San Bernardino
		San Francisco, San Andreas, and Grass Valley/Nevada City,
		California These affiliates follow practices similar to those
		noted above in determining the unmet healthcare needs of their
		communities Total unsponsored community benefit expense fo
		CHW and its subordinate corporations for the year ended June
		30, 2011, is as follows Persons Net Comm % of Served
		Benefit Exp excl Bad Debt Benefits for the Poor Traditional
		Charity Care 97,422 152,563,579 1 6% Unpaid Costs of
		Medicaid/Medi-Cal 1,035,601 444,972,896 4 7% Other
		Means-tested Programs 253,140 63,978,237 0 7%
		Community Services Community Health Services 552,089
		49,285,673 0 5% Health Professions Education 21,637
		10,998,382 0 1% Subsidized Health Services 219,756
		37,388,406 0 4% Donations 233,077 37,415,522 0 4%
		Community Building Activities 15,081 1,642,251 0 0%
		Community Benefit Operations 19,210 6,983,659 0 1% Total
		Community Services for the poor 1,060,850 143,713,893
		1 5% Total Benefits for the Poor 2,447,013 805,228,605
		8 5% Benefits for the Broader Community Community
		Services Community Health Services 2,004,902 23,003,029
		0 2% Health Professions Education 52,255 65,128,468 0 7%
		Subsidized Health Services 124,290 11,026,699 0 1%
		Research 5,057 24,166,007 0 3% Donations 202,417
		7,914,381 0 1% Community Building Activities 63,555
		8,148,278 0 1% Community Benefit Operations 937
		2,883,276 0 0% Total Benefits for the Broader Community
		2,453,413 142,270,138 1 5% Total Community Benefits
		3,562,475 571,626,794 10 0% Unpaid Costs of Medicare
		1,109,062 429,356,656 4 5% Total Community Benefits
		including Cost of Medicare 6,009,488 1,376,855,399 14 5%
		interdaining cost of fredicate opposytion 1,57 opposytists in 570

Explanation

ReturnReference

Identifier

Identifier	ReturnReference	Explanation
chedule H, Part I, line 7b, column (f)		In January 2010, the State of California enacted legislation that provided for supplemental Medi-Cal payments to certain hospitals funded by a quality assurance fee paid by participating hospitals and matching federal funds ("the 2010 Hospital Fee Program") The legislation covered the period of April 1, 2009 through December 31, 2010 The Centers for Medicare & Medicaid Services approved the 2010 Hospital Fee Program in its entirety in December 2010, and therefore all activity of the program was recognized during the year ended June 30, 2011 Quality assurance fees recognized during the year of \$10.2 million are included in total community benefit expense related to unreimbursed Medicaid (Part I, line 7b, column b), and fee-for-service supplemental payments of \$15.0 million recognized during the year are reflected under the Medicaid program as direct offsetting revenue (Part I, line 7b, column d). This net reduction in the cost of the Medicaid program is driving a large decrease in the overall cost of community benefit expense as a percent of total expenses when compared to prior years. The California Health Foundation and Trust ("CHFT"), established for several purposes, including aggregating and distributing financial resources to support charitable activities at various hospitals and health systems in California Upon approval of the legislation noted above in December 2010, SFMH recorded a pledge to a grant fund established by CHFT in the amount \$0.5 million. The grant is reported under other benefits (Part I, line 71, column c), as cash and in-kind contributions to community groups

Identifier	ReturnReference	Explanation
STATE FILING OF COMMUNITY BENEFIT REPORT	990 SCHEDULE H, PART VI	CA,

Schedule H (Form 990) 2010

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Schedule I (Form 990)

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

DLN: 93493122009742

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization Saint Francis Memorial Hospital Employer identification number

94-1156295

•	nation on Grants						
 Does the organization ma the selection criteria used Describe in Part IV the or 	d to award the grants o	orassistance?					✓ Yes ┌ I
Form 990, Part I		Governments and ecipient that received ded		Check this box if n	o one recipient rece	ived more than_\$5,0	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount 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) Alisa Ann Ruch Burn Foundation665 3rd St Ste 345 San Francisco, CA 94107	23-7162017	501(c)(3)	7,075	0	N/A	N/A	Quality of Life
(2) San Francisco Foundation Community Initiative354 Pine St Ste 700 San Francisco, CA 94104	94-3255070	501(c)(3)	8,500	0	N/A	N/A	Social Health
(3) Glide Health Services 330 Ellis St San Francisco, CA 94102	94-1156481	501(c)(3)	9,370	0	N/A	N/A	Service for the Poor
(4) Hospital Council of Northern & Central California 1215 K St 800 Sacramento, CA 95814	94-1533644	501(c)(6)	86,887	0	N/A	N/A	Social Health
(5) ICA San Francisco Work Study3625 24th St San Francisco, CA 94110	26-4450576	501(c)(3)	14,500	0	N/A	N/A	Educational Support
(6) California Health Foundation and Trust1215 K Street Ste 800 Sacramento, CA 94103	94-1489356	501(c)(3)	500,387	0	N/A	N/A	Improve access to & betterment of healthcare
Enter total number of secEnter total number of other							5

Part III	Grants and Other Assistance to Individuals in the United States. C	Complete if the organization	answered "Yes" to Fo	orm 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)A mount of cash grant	(d)A mount 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.

Ident if ier	Return Reference	Explanation
PART I, LINE 2		As a 501(c)(3) organization, we provide assistance to various charitable organizations to promote CHW's Mission A designated Committee establishes and evaluates priorities and allocation of funds with emphasis on promotion of healthy communities and community collaboration. We do not monitor and report program outcomes. Spending is tracked on an ongoing basis to ensure that annual spending is within the budgeted amount.

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**Compensation Information**

DLN: 93493122009742

OMB No 1545-0047

Open to Public Inspection

Schedule J

(Form 990)

Department of the Treasury Internal Revenue Service

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.

Name of the organization Saint Francis Memorial Hospital **Employer identification number** 94-1156295

F C	Questions Regarding Compensation			
			Yes	Νo
1a	Check the appropriate 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		
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		
	omeers, and colors, tradices, and the electronic briefles, regarding the items encored in the la			
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			
а	Receive a severance payment or change-of-control payment from the organization or a related organization?	4a		Νο
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4с		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	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			
а	The organization?	5a		Νο
b	Any related organization?	5b		No
6	If "Yes," to line 5a or 5b, describe in Part III 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			
а	The organization?	6a		Νο
b	Any related organization?	6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		Νο
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		Νο
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations	ٿ		110
	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	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
See Additional Data Table							
(2)							
(3)							
(4)							
(5)							
(6)							
(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

Ident if ier	Ret urn Ref erence	Explanat ion
PART I, LINE 3		Although the organization employs personnel, the Organization relied on a related organization, Catholic Healthcare West, that used one or more of the methods described in Schedule J, Part I, Line 3, to establish the Organization's Service Area Leader's compensation See Schedule O disclosure for Form 990, Part VI, Section B, Line 15a for additional information
Schedule J, J-1		SFMH does not compensate directors, Dr Mel Blaustein, Dr Amy Bossen, Dr Gary Chan, Dr David J Malone and Dr Victor Prieto for their services as board members. All compensation and benefits reported represent compensation as Medical Directors of SFMH.
PART I, LINE 4a		The employees paid by the parent organization participate in a severance plan that provides market-standard compensation, ranging from payments of 6 months to 2 years of base compensation, depending on the executive's position, in the event of a position elimination or other involuntary termination, in accordance with the guidelines of the plan. The organization's non-contractual employees participate in a severance plan that provides fair compensation, ranging from payments of 2 weeks to 18 weeks of base compensation, depending on the employee's position, in the event of a position elimination or other involuntary termination, in accordance with the guidelines of the plan. Severance for employees covered by collective bargaining agreements varies by agreement
PART I, LINE 4b		Certain listed persons hired prior to June 30, 2006 are eligible to participate in the 2007 CHW Executive Deferred Compensation Plan, a nonqualified 457(f) plan that is subject to substantial risk of forfeiture, as required by the IRS. The 2007 Executive Deferred Compensation Plan is intended to provide a benefit approximating the difference, if any, between the benefit provided under the CHW Excess Benefit Plan and the benefit provided under the qualified benefit plan that substantially replaced the Excess Plan. No benefit will vest under the 457(f) plan before the later of the attainment of age 62 while employed or the completion of 15 years of service. Certain listed persons participate in the CHW Excess Benefit Plan, a nonqualified supplemental benefit plan limited to participants in the CHW retirement plan whose benefits are affected by the limitations imposed by Sections 401(a)(17) and 415 of the Internal Revenue Code. Benefit service under this plan was frozen as of January 1, 2008. No payments were made to any listed persons during 2010 pursuant to this plan Certain listed persons participate in the CHW Key Employee Share Option Plan (KEYSOP), which was frozen in May 2002. The KEYSOP program was established in 2001 with the purpose of providing income deferral opportunities to employees eligible for the company's key employee retention program. No payments were made to any listed persons during 2010 pursuant to this plan.
PART II, SUPPLEMENTAL DISCLOSURES		The organization's executive compensation philosophy is designed to assist the organization in attracting and retaining the caliber of executives required to enable the organization to fulfill its mission of providing high quality healthcare for all persons regardless of their ability to pay for services, improving the quality of life in the communities the organization serves, promoting employee satisfaction, and ensuring financial stability. A substantial portion of executive compensation is performance based and is linked to organizational goals approved in advance by the Compensation and Benefits Committee. These goals include attainment of annual and long-term financial performance, certain healthcare quality standards and the organization's commitment to serving the poor and disenfranchised in the communities it serves.

Software ID: Software Version:

EIN: 94-1156295

Name: Saint Francis Memorial Hospital

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees								
(A) Name			of W-2 and/or 1099-MIS		(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base Compensation	(ii) Bonus & ıncentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Anna Cheung	(1) (11)		0 192,045	0 5 15,454	0 31,950	0 33,015	0 5 583,688	0 0
Dr Victor Prieto	(I) (II)		0	0 0	0	0	192,579	0
Alan Fox	(I) (II)		75,094	16,584	24,996 0	23,374	374,561	0
Tom Hennessy	(ı) (ıı))) 311,577	0 252,401	0 225,709	0 36,437	0 38,353	0 864,477	0
Anthony Jackson	(I) (II)			1				
Helen Karow	(ı) (ıı)		35,139	696	17,330	18,686	236,863	0
Dennis Kneeppel	(ı) (ıı)) 207,137) 0	70,092	9,724	23,107	8,341	318,401	0
Juli Maxworthy	(ı) (ıı)		34,509	8,369	15,177 0	20,245	220,166	0
Raymond Miller	(ı) (ıı)		33,898	2,115	10,916	16,263	222,720	0
Barbara Morrissette	(ı) (ıı)		36,628	911	11,046	15,520 0	218,110	0
Dallas Ryan	(ı) (ıı)		35,975 0	5 558	17,969 0	15,756 0	241,311	0
Andrew Smith	(ı) (ıı)		30,000	40,863		9,662	305,322	0
Lloyd Yandell	(ı) (ıı)		20,456	2,993	13,572 0	3,595 0	175,566	0
Abbie Yant	(ı) (ıı)		33,908	3,803	16,672 0	22,410	228,180	0
Susanne Gardino	(ı) (ıı)		300	0 0	17,144 0	800	259,402	0
Harendra C Joshi	(ı) (ıı)) 239,951) 0	300		13,694			0
Bradford K Moy	(ı) (ıı)) 226,981) 0	33,887		1	8,176 0	284,770	0
John Ikona Ubi	(ı) (ıı)		1,625	I I	1	26,356 0	315,301	0
Doris Y Yau	(ı) (ıı)) 298,192) 0	_,			27,748 0	347,613	0

DLN: 93493122009742

OMB No 1545-0047

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.

Open to Public **Inspection**

Nam Sai	ne of the organization Int Francis Memorial Hospital art I Bond Issues										mployer 94-115		cation num	ber	
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue	Price	(f)) Description	Description of Purpose		(g) Defeased		On alf of suer		Pool ncing
-	CALIFORNIA HEALTH									Yes	No	Yes	No	Yes	No
A	FACILITIES FINANCING AUTHORITHY	52-1643828	13033FYE4	11-10-2005	200,00	00,000		MONEY TO ITAL Expen	FINANCE		x		х		×
_															
Pa	art III Proceeds														
_	A mount of bonds retired					A		E	3		С			D	
1 2	A mount of bonds legally defe	ased					0						+		
3	Total proceeds of issue					10,092							+		
4	Gross proceeds in reserve fu	nds					0						+		
5 Capitalized interest from proceeds					113	,606									
6	Proceeds in refunding escrow	ı					0								
7	Issuance costs from proceed	ls					0								
8	Credit enhancement from pro	ceeds					0								
9	Working capital expenditures						0								
10		oceeds				9,979	,093								
11							0								
12							0								
13	Year of substantial completio	on				07					ı				
	Were the bonds issued as pai	rt of a current refund	ing is sue?		Yes	No	-	Yes	No	Yes		No	Yes	+	No
14						X								+	
<u>15</u>			naing issue?			X								+	
16					X									\perp	
17	Does the organization mainta allocation of proceeds?	ıın adequate books a	nd records to supp	oort the final	X										
Pa	rt IIII Private Business (Use													
						A I No		V ₂		V			¥-:	D	No.
1	Was the organization a partne property financed by tax-exe		r a member of an L	LC, which owned	Yes	X		Yes	No	Yes		No	Yes		No
						T							_		

financed property?

Are there any lease arrangements that may result in private business use of bond-

Χ

	В		С		D
Yes	Yes No	Yes	No	Yes	No
/o	·				
/o					
/ 0					

Pai	rt IV Arbitrage								
		А		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	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?	х							
2	Is the bond issue a variable rate issue?	Х							
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		х						
ь	Name of provider								
С	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?		Х						
b	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?								
6	Did the bond issue qualify for an exception to rebate?		х						

Part V Supplemental Information

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

Ident if ier	Ret urn Ref erence	Explanation
Schedule K, Part IV		BOND A CUSIP 13033FYE4 Part I, Column (e) The difference between the issue price in Part I, column (e) and Part II, Line 3 is due to investment earnings Saint Francis Memorial Hospital, as a separate entity, received \$10 million of the \$200 million of the CHFFA 2005HI pool bonds Part III, Line 3a Although there are management or service contracts that may generate private use, we have policies and procedures in place that require such contract be in compliance with Revenue Procedure 97-13 Part III, Line 3b Although there are research agreements which may result in private use, we have policies and procedures in place that require such contract be in compliance with Revenue Procedure 2007-47

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DLN: 93493122009742

OMP N : 1545 0047

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.

2010

Open to Public Inspection

	of the organization							E	mployer i	dentifica	ation numbe	er
									4-11562			
Part I												
	Complete if the organizat	tion an	swered "	Yes" on For	m 990, T	Part IV , line 25a	or 25b,	or Form	990-EZ,	Part V , I		
1	(a) Name of disq	ualıfıe	d person			(b) Desc	cription	of trans	action		<u> </u>	orrected?
											Yes	No
2 En	ter the amount of tax ımpos	ed on t	he orga	nızatıon man	agers o	r disqualified pers	ons dur	ing the	year unde	r		
									_	· \$		
3 En	ter the amount of tax, if any	, on lin	e 2, abo	ve, reimburs	ed by th	ne organization .			•	• \$		
Part I	I Loans to and/or	Erom	Tntore	stad Dare								
Pail 1	Complete if the organi					D. Part IV. line 26	or For	m 990-	EZ. Part V	'. line 38	Sa.	
									(f)	,		
(a) Nan	ne of interested person and	(b) Loan to		(c)0 rig	auno l		(e) In		Approved		(g)Writt	
(u) II u	purpose		ization?	principal		(d)Balance due	defau	lt?	by board or committee?		agreeme	nt?
		То	From				Yes	No	Yes	No	Yes	No
		1	1 10111				1.00	 	1.00	1	1.00	1.0
Total .					▶ \$							
Part II	Grants or Assistar Complete if the organ						/, line 2	27.				
	(a) Name of interested pers	son	(een interested per ganization	rson	(c) A r	nount of g	rant or t	ype of assis	tance
					14 1110 01	gamzation						
							+					

Part IV Business Transactions Involving Interested Persons.

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

Complete if the organization	ii aliswered Tes Oli	roini 550, raic IV, iii	16 20a, 20b, 01 20c.		
(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	organiz	aring of ation's nues?
	organization			Yes	No
(1) HADDAD LANZEROTTI MALIN et al	Gores and Malın - BOD	80,135	Payment for medical Services		Νο
(2) HADDAD LANZEROTTI MALIN et al	Gores and Malın - BOD	92,160	LEASING		Νο

Supplemental Information Part V

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

Identifier Return Reference Explanation

Schedule L (Form 990 or 990-EZ) 2010

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DLN: 93493122009742

OMB No 1545-0047

2010

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Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service

SCHEDULE 0

(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.

Name of the organization Saint Francis Memorial Hospital

Employer identification number

94-1156295

ldentifier	Return Reference	Explanation
Form 990, PART VI - GOVERNANCE, MANAGEMENT, DISCLOSURE		FORM 990, PART VI, SECTION A, LINE 2 Drs Malin and Gores are partners in a Medical Group practice FORM 990, PART VI, SECTION A, LINE 6 The sole corporate members in Catholic Heal theare West, a 501(c)(3) exempt organization FORM 990, PART VI, SECTION A, LINE 7 a CHW, as the sole corporate member, ratflest the selection of members and the CHW board approves new Board members of the organization FORM 990, PART VI, SECTION A, LINE 7 b Reserved rights of the corporate member include adoption of mission and philosophy statements, amendment or restatement of articles of incorporation and bylaws, dissolution of the corporation, acquisition of another corporation, creation of a new subsidiary, merger or consolidation with another corporation, participation as a general or limited partner in any venture, incurring long-term indebtedness in excess of normal operating requirements, ratflication of board member appointments and dismissals, selection and removal of independent auditors, and transactions outside the ordinary course of business FORM 990, PART VI, SECTION B, LINE 11A. The form 990 was reviewed by finance and accounting (regional CHW management and corporate tax department), which worked closely with an independent accounting firmengage of to review the return. The Board of Trustees has delegated the review of the Form990 to the Finance Committee before filling the return with the IRS for discussion at the committee meeting. The dir aft was complete except it excluded compensation formation. Subsequent to its review, the Finance Committee reported back to the Board regarding its review and provided a draft to the Board of Trustees, again excluding compensation. FORM 990, PART VI, SECTION B, LINE 12c. The Organization has adopted CHWs Conflicts of interest Policy. The Organization's Board is charged with monitoring proposed or ongoing transactions for conflicts of interest and addressing any potential or actual conflicts. Pursuant to the conflicts of interest Policy, including completing to the transaction and t

ldentifier	Return Reference	Explanation
Form 990, PART VI - GOVERNANCE, MANAGEMENT, DISCLOSURE		lification and experience of the candidates Compensation is also reviewed annually as part of the merit increase process FORM 990, PART VI, SECTION B, LINE 19 Federal tax laws do not mandate that the organization's governing documents, conflict of interest policy and financial statements be made available for public inspection. The organization makes its financial statements available on its wiebsite and upon request.

ldentifier	Return Reference	Explanation
Form 990, PART XI, LINE 5		Change in unrealized gains in the amount OF \$12,260,954 Interest in net assets of unconsolidated foundation in the amount of \$6,535,696

ldentifier	Return Reference	Explanation
Form 990, Part XII, Line 3b		The organization's federal awards were included in CHW's consolidated OMB Circular A-133 audited Schedule of Federal Expenditures

ldentifier	Return Reference	Explanation
HOURS DEVIOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME Anna Cheung TITLE Board Member HOURS 40

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DLN: 93493122009742

SCHEDULE R (Form 990)

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.

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Saint Francis Memorial Hospital				Employer ider 94-1156295	ntification number		
Part I Identification of Disregarded Entities (Complete	te if the organizati	on answered "Yes	s" on Form 990, Pa	•			
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (sta or foreign country	(d) te Total income)	(e) End-of-year assets	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organization or more related tax-exempt organizations during the	ations (Complete e tax year.)	ıf the organizatio	n answered "Yes"	on Form 990, Par	t IV, line 34 becau	se it had	one
(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	Section 5 cont	g) 12(b)(13 rolled nzation
(4) Cable le Haribbara Mort						Yes	No
(1) Catholic Healthcare West							
185 Berry Street San Francisco, CA 94107 94-1196203	lospital	CA	501(c)(3)	3	NA		
For Privacy Act and Paperwork Reduction Act Notice, see the Instruction	oc for Form 000	Cat No 5	(0.1.3.E.V		Schedule R (Form 000	\ 2010

(a) ame, 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 Disprop allocat	ortionate	(i) Code V— amount in bo Schedule (Form 10	x 20 of K-1	(j Gener mana partr	al or ging	(k) Percentage ownership
								Yes	No			Yes	No	
				ble as a Corpora zations treated as a						nswered "Y	es" on	Form	990,	Part IV,
Name, address, an	(a) Id EIN of related organiz	zation	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct cor enti	ntrolling	(e) Type of e (C corp, S or trust	corp,			Shai end-o	y) re of f-year sets		(h) Percentage ownership

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Pa	Transactions With Related Organizations (Complete If the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A	, or 36.)		
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
ь	Gift, grant, or capital contribution to other organization(s)	1b		No
c	Gift, grant, or capital contribution from other organization(s)	1 c		No
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)	1 g		No
h	Exchange of assets	1h		No
i	Lease of facilities, equipment, or other assets to other organization(s)	1i		No
j	Lease of facilities, equipment, or other assets from other organization(s)	1j		No
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k		No
1	Performance of services or membership or fundraising solicitations by other organization(s)	11		No
m	Sharing of facilities, equipment, mailing lists, or other assets	1m		No
n	Sharing of paid employees	1n	Yes	
o	Reimbursement paid to other organization for expenses	10	Yes	
p	Reimbursement paid by other organization for expenses	1р	Yes	
q	O ther transfer of cash or property to other organization(s)	1q		No
r	O ther 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) (b) (c)	(d)		

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) NONE			
(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 parti sect 501(d organiz	ners ion :)(3) :ations?	(e) Share of end-of-year assets		ortionate	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(I Gene mana part	agın tner?
			Yes	No		Yes	No		Yes	N
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Part VII Supplemental Information

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

I Identifier I Keturn Keterence I	Identifier Return Reference Explanation	
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Schedule R (Form 990) 2010

Consolidated Financial Statements as of and for the Years Ended June 30, 2011 and 2010 and Independent Auditors' Report

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Deloitte

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INDEPENDENT AUDITORS' REPORT

To the Board of Directors of Catholic Healthcare West San Francisco, California

We have audited the accompanying consolidated balance sheets of Catholic Healthcare West and Subordinate Corporations ("Catholic Healthcare West") as of June 30, 2011 and 2010, and the related consolidated statements of operations and changes in net assets and cash flows for the years then ended. These financial statements are the responsibility of Catholic Healthcare West's management. Our responsibility is to express an opinion on these 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 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 Catholic Healthcare West'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 financial statements, assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, such consolidated financial statements present fairly, in all material respects, the financial position of Catholic Healthcare West and Subordinate Corporations as of June 30, 2011 and 2010, and the results of their operations and their cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

The unsponsored community benefit expense information in Note 4, which is the responsibility of Catholic Healthcare West's management, is not a required part of the basic financial statements, and we did not audit or apply limited procedures to such information and we do not express any assurances on such information.

September 16, 2011

Reloitte & Touche Les

CONSOLIDATED BALANCE SHEETS June 30, 2011 and 2010 (in thousands)

Assets	2011		2010
Current assets:			
Cash and cash equivalents	\$ 704,044	\$	796,034
Short-term investments	825,849		596,307
Collateral held under securities lending program	290,526		272,986
Assets limited as to use	828,632		692,704
Patient accounts receivable, net of allowance for doubtful accounts of \$297,294 and \$266,997			
in 2011 and 2010, respectively	1,257,296		1,203,344
Other current assets	 743,086		501,782
Total current assets	 4,649,433		4,063,157
Assets limited as to use:			
Board-designated assets (including \$308,202			
and \$305,472 of assets loaned under securities			
lending program in 2011 and 2010, respectively) for:			
Capital projects	3,139,101		2,676,537
Workers' compensation	367,554		335,511
Hospital professional and general liability	162,091		166,050
Under bond indenture agreements for:			
Capital projects	51,679		147,671
Debt service	190,975		136,641
Bond reserves	26,387		26,423
Donor-restricted	439,932		394,168
Other	68,213		62,476
Less amount required to meet current obligations	 (828,632)	_	(692,704)
Net assets limited as to use	 3,617,300	_	3,252,773
Property and equipment, net	4,102,551		3,894,111
Ownership interests in health-related activities	558,178		422,546
Other long-term assets, net	 196,163		200,060
Total assets	\$ 13,123,625	\$	11,832,647
			(Continued)

CONSOLIDATED BALANCE SHEETS June 30, 2011 and 2010 (in thousands)

Liabilities and Net Assets		2011		2010
Current liabilities:				
Current portion of long-term debt	\$	107,381	\$	69,910
Demand bonds subject to short-term liquidity				
arrangements		574,000		483,000
Accounts payable		418,155		392,720
Payable under securities lending program		291,148		273,945
Accrued salaries and benefits		507,915		485,510
Accrued workers' compensation		31,647		29,971
Accrued hospital professional and general liability		61,304		42,659
Pension and other postretirement liabilities		278,369		279,805
Other accrued liabilities		871,042		791,691
Total current liabilities		3,140,961		2,849,211
Other habilities: Workers' compensation Hospital professional and general liability Pension and other postreturement liabilities Other Total other liabilities Long-term debt, net of current portion Total liabilities		234,938 228,559 598,697 115,823 1,178,017 3,556,817 7.875,795		219,927 141,532 906,232 118,469 1,386,160 3,691,469 7,926,840
Net assets:				
Unrestricted - attributable to CHW		4,715,076		3,426,489
Unrestricted - noncontrolling interest		98,304		89,205
Temporarily restricted		326,503		291,040
Permanently restricted	_	107,947		99,073
Total net assets		5,247,830	_	3,905,807
Total liabilities and net assets	\$	13,123,625	\$	11,832,647
				(Concluded)

See notes to consolidated financial statements.

CONSOLIDATED STATEMENTS OF OPERATIONS AND CHANGES IN NET ASSETS YEARS ENDED June 30, 2011 and 2010 (in thousands)

	2011	2010
Unrestricted revenues and other support:		
Net patient revenue	\$ 9,600,663	\$ 8,599,950
Premium revenue	558,103	
Revenue from health-related activities, net	135,341	93,514
Other operating revenue	255,941	204,114
Contributions	15,320	18,137
Total unrestricted revenues and other support	10,565,368	9,430,414
Expenses:		
Salaries and benefits	5,127,564	4,809,065
Supplies	1,425,271	1,372,573
Provision for bad debts	848,883	745,303
Purchased services and other	2,366,077	1,751,731
Depreciation	432,438	421,774
Interest expense, net	167,571	244,006
Loss on early extinguishment of debt		2.734
Total expenses	10,367.804	9,347,186
Operating income	197,564	83,228
Other income:		
Investment income, net	719,611	402,474
Excess of revenues over expenses	\$ 917,175	\$ 485,702
		(Continued)

CONSOLIDATED STATEMENTS OF OPERATIONS AND CHANGES IN NET ASSETS YEARS ENDED June 30, 2011 and 2010 (in thousands)

	:	2011		2010
Unrestricted net assets:				
Excess of revenues over expenses	\$	917,175	\$	485,702
Change in net unrealized gains on available-for-sale				
investments		5,528		2,425
Net assets released from restrictions used for purchase				
of property and equipment		14,479		12,855
Change in funded status of pension and other				
postretirement benefit plans		324,174		(256.538)
Gain from discontinued operations		1,593		4,007
Change in noncontrolling interest in health-related				(0.1.8)
activities		9,099		(917)
Change in accumulated unrealized derivative gains, net		9,055		4,952
Donated property and equipment		14,207		19,623
Other		2,379	_	(2,137)
Increase in unrestricted net assets	1	,297,689	-	269,972
Temporarily restricted net assets:				
Contributions		39,025		35,329
Net realized and unrealized gains on investments		7,166		4,432
Net assets released from restrictions		(37,829)		(38,047)
Change in interest in net assets of unconsolidated				
foundations		29,093		2,802
Other		(1,993)	_	654
Increase in temporarily restricted net assets		35,462		5,170
Permanently restricted net assets:				
Contributions		2,289		5,576
Net realized and unrealized gains on investments		62		68
Change in interest in net assets of unconsolidated				
foundations		5,961		4,140
Other		560		(973)
Increase in permanently restricted net assets		8,872		8,811
Increase in net assets	1	,342,023		283,953
Net assets, beginning of year		,905,807		3,621,854
		,247,830		3,905,807

See notes to consolidated financial statements.

CATHOLIC HEALTHCARE WEST AND SUBORDINATE CORPORATIONS

CONSOLIDATED STATEMENTS OF CASH FLOWS YEARS ENDED June 30, 2011 and 2010 (in thousands)

		2011	2010
Cash flows from operating activities:			
Change in net assets	\$	1,342,023 \$	283,953
Adjustments to reconcile change in net assets to			
cash provided by operating activities:			
Loss on early extinguishment of debt		-	2,734
Depreciation		432,438	421,774
Amortization		1,693	4,337
Equity in earnings of health-related activities		(118,427)	(78,007)
Gain, net, on disposal of assets		(43,082)	(539)
Restricted contributions and investment income, net		(44,553)	(45,405)
Change in funded status of pension and other			
postretirement benefit plans		(324,174)	256,538
Undistributed portion of change in net assets of			
unconsolidated foundations		(35,054)	(6,942)
Change in net realized and unrealized			
gains on investments		(632,368)	(312,973)
Change in fair value of swaps		(50,038)	52,183
Changes in certain assets and habilities:			
Accounts receivable, net		(53,621)	44,513
Accounts payable		23.963	5,779
Workers' compensation and hospital professional			
and general liabilities		122,359	22,180
Accrued salaries and benefits		22,299	31,224
Pension and other postretirement liabilities		15,203	(4,385)
Other accrued liabilities		(2,261)	1,709
Other, net		(96,052)	80,898
Cash provided by operating activities	*******	560,348	759,571

(Continued)

CATHOLIC HEALTHCARE WEST AND SUBORDINATE CORPORATIONS

CONSOLIDATED STATEMENTS OF CASH FLOWS YEARS ENDED June 30, 2011 and 2010 (in thousands)

	2011	2010
Cash flows from investing activities:		
Purchase of investments	(6,969,137)	(4,475,584)
Proceeds from sale of investments	6,922,672	4,196,842
Cash proceeds on disposal of assets	447	1,289
Investments in health-related activities	(8,629)	(39,593)
Cash distributions from health-related activities	30,000	-
Additions to operating property and equipment	(595,871)	(499,623)
Decrease (increase) in securities lending collateral	(17,203)	30,836
Other, net	(2,692)	(1,367)
Cash used in investing activities	(640,413)	(787,200)
Cash flows from financing activities.		
Borrowings	133,509	592,738
Repayments	(204,322)	(645,994)
Increase (decrease) in payable under securities lending program	17,203	(30,836)
Restricted contributions and investment income	44,553	45,405
Deferred financing costs	(2,868)	(6,614)
Cash used in financing activities	(11,925)	(45,301)
Net decrease in cash and cash equivalents	(91,990)	(72,930)
Cash and cash equivalents at beginning of year	796,034	868,964
Cash and cash equivalents at end of year	\$ 704,044	\$ 796,034
Components of cash and cash equivalents and		
investments at end of year:		
Cash and cash equivalents	704,044	796,034
Short-term investments	825,849	596,307
Board-designated assets for capital projects	3,139,101	2,676,537
Total	<u>\$ 4,668,994</u>	\$ 4,068,878
Supplemental disclosures of cash flow information:		
Cash paid for interest, net of capitalized interest	<u>\$ 210,555</u>	\$ 168,636
Supplemental schedule of noncash investing and		
financing activities:		
Property and equipment acquired through capital lease		
or note payable	\$ 20,284	\$ 2,418
Donated property and equipment	\$ 14,207	\$ 19,623
Accrued purchases of property and equipment	\$ 61,107	\$ 66,364
		(Concluded)

See notes to consolidated financial statements.

CATHOLIC HEALTHCARE WEST AND SUBORDINATE CORPORATIONS

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS YEARS ENDED June 30, 2011 and 2010

1. ORGANIZATION

Catholic Healthcare West is a California nonprofit public benefit corporation exempt from federal and state income taxes. References herein to CHW refer to Catholic Healthcare West and its subordinate corporations (as disclosed in Note 17) Catholic Healthcare West is co-sponsored by six congregations that have specific governance rights and responsibilities, including the appointment of Catholic Healthcare West's corporate members. The co-sponsors are as follows:

- Sisters of Mercy of the Americas, West Midwest Community, Omaha, Nebraska
- Sisters of St. Dominic, Congregation of the Most Holy Rosary, Adrian, Michigan
- Sisters of the Third Order of St. Dominic, Congregation of the Most Holy Name, San Rafael, California
- Congregation of the Sisters of Charity of the Incarnate Word, Houston, Texas
- · Congregation of the Dominican Sisters of St. Catherine of Siena of Kenosha, Kenosha, Wisconsin
- · Sisters of St. Francis of Penance and Christian Charity, St. Francis Province, Redwood City, California

Catholic Healthcare West owns and operates hospitals in California, Arizona and Nevada, and is the sole corporate member (parent corporation) of other primarily nonprofit healthcare corporations in California, Arizona and Nevada, which are exempt from federal and state income taxes. CHW provides a variety of healthcare, education and other benefits to the communities in which it operates. Healthcare services include inpatient, outpatient, subacute and home healthcare services, as well as physician services through CHW Medical Foundation and other affiliated medical groups.

As part of a system-wide corporate financing plan, Catholic Healthcare West established an Obligated Group to access the capital markets and make loans to its members. Obligated Group members are jointly and severally liable for the long-term debt outstanding under the Master Trust Indenture. None of the other CHW subordinate corporations have assumed any financial obligation related to payment of debt service on obligations issued under the Master Trust Indenture. A list of Obligated Group members and other subordinate corporations is included in Note 17. The Obligated Group's unrestricted net assets represent approximately 97% and 96% of the consolidated unrestricted net assets of CHW and subordinate corporations at June 30, 2011 and 2010, respectively.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis for Presentation – The accompanying consolidated financial statements include the accounts of CHW after elimination of intercompany transactions and balances. These financial statements do not include the accounts of the six co-sponsors and their nonhealthcare activities. Certain prior year amounts have been reclassified to conform to current year presentation.

Use of Estimates – The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and 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 differ from those estimates.

Cash and Cash Equivalents – For purposes of the consolidated financial statements, cash and cash equivalents consist primarily of cash and highly liquid marketable securities with an original maturity of three months or less when purchased by CHW.

Securities Lending Program - CHW participates in securities lending transactions with its custodian whereby CHW lends a portion of its investments to various brokers in exchange for collateral for the securities loaned, usually on a short-term basis. CHW maintains effective control of the loaned securities through its custodian during the term of the arrangement in that they may be recalled at any time. Collateral is provided by brokers at an amount equal to at least 100% of the original value of the securities on loan, and is subsequently adjusted for market fluctuations. CHW must return to the borrower the original value of collateral received regardless of the impact of market fluctuations. Under the terms of the agreement, the borrower must return the same, or substantially the same, investments that were borrowed.

The securities on loan under this program are recorded in Board-designated assets in the accompanying consolidated balance sheets. CHW receives both cash and non-cash collateral. Cash collateral is recorded as an asset of the organization. The market value of collateral held for loaned securities is reported as collateral held under securities lending program, and an obligation is recorded for repayment of collateral upon settlement of the lending transaction.

Patient Accounts Receivable — CHW has agreements with third-party payors that provide for payments at amounts different from each hospital's established rates. CHW regularly reviews accounts and contracts and provides appropriate contractual allowances that are netted against patient accounts receivable in the consolidated balance sheet. Management periodically reviews the adequacy of the allowance for uncollectible accounts based on historical experience, trends in health care coverage, and other collection indicators. Reserves for charity and uncollectible amounts have been established and are netted against patient accounts receivable in the consolidated balance sheet.

As part of C11W's mission to serve the community, CHW provides care to patients even though they may lack adequate insurance or may participate in programs with negotiated or regulated amounts. CHW makes every effort to determine if a patient qualifies for charity care upon admission, though determination may also be made at a later time. After satisfaction of amounts due from insurance, the application of any financial, uninsured or other discounts or payments received on the account, and reasonable efforts to collect from the patient have been exhausted, CHW follows established guidelines for placing certain past-due patient balances with collection agencies, subject to the terms of certain restrictions on collection efforts as determined by CHW.

Inventory - Inventories are stated at the lower of cost or market value, determined using the first-in, first-out method.

Investments and Investment Income – The CHW Board of Directors Investment Committee establishes guidelines for investment decisions. Within those guidelines, CHW invests in equity and debt securities which are measured at fair value and are classified as trading securities.

CHW also invests in alternative investments through limited partnerships. Alternative investments are comprised of private equity, real estate, and hedge fund-of-funds vehicles. CHW receives a proportionate share of the investment gains and losses of the partnerships. The limited partnerships generally contract with managers who have full discretionary authority over the investment decisions, within CHW guidelines These alternative investment vehicles invest in equity securities, fixed income securities, currencies, real estate, and derivatives.

CHW accounts for its ownership interests in these alternative investments under the equity method, whose value is based on the net asset value ("NAV"), which approximates fair value, and is determined using investment valuations provided by the external investment managers and fund managers or the general partners. CHW reviews and evaluates the valuations received from third parties. Fair value is the estimated net realizable value of holdings priced at quoted market value (where market quotations are available), historical cost or other estimates including appraisals.

Alternative investments generally are not marketable and many alternative investments have underlying investments which may not have quoted market values. The estimated value of such investments is subject

to uncertainty and could differ had a ready market existed. Such differences could be material. CHW's risk is limited to its capital investment in each investment and capital call commitments as discussed in Note 7.

CHW accounts for its investments on a trade date basis. Amounts due to/from brokers for investment activity for transactions that have been initiated prior to the consolidated balance sheet date that are formally settled subsequent to the consolidated balance sheet date are recorded in other current assets for sales and in other current liabilities for purchases.

Investment income or loss is included in excess of revenues over expenses unless the income or loss is restricted by donor or law. Income earned on tax-exempt borrowings for specific construction projects is offset against interest expense capitalized for such projects.

Board-Designated Assets for Capital Projects – The Board of Directors has a policy of funding depreciation, to the extent that funds are available, to be used for replacement, expansion and improvement of operating property and equipment.

Deferred Financing Costs and Original Issue Discounts/Premiums on Bond Indebtedness – CHW amortizes deferred financing costs and original issue discounts/premiums on bond indebtedness over the estimated average period the related bonds will be outstanding. Deferred financing costs are included in other long-term assets. Original issue discounts/premiums are recorded with the related debt

Property and Equipment – Property and equipment are stated at cost, if purchased, and at fair market value, if donated. Depreciation of property and equipment is provided using the straight-line method for financial statement purposes. Amortization of capital leases is included in depreciation expense, Estimated useful lives by classification are as follows:

Land improvements2 to 40 yearsBuildings3 to 65 yearsEquipment2 to 40 yearsSoftware development5 to 10 years

Asset Retirement Obligations – CHW recognizes the fair value of a liability for legal obligations associated with asset retirements in the period in which it is incurred, if a reasonable estimate of the fair value of the obligation can be made. When the liability is initially recorded, CHW capitalizes the cost of the asset retirement obligation by increasing the carrying amount of the related long-lived asset. The liability is accreted to its present value each period, and the capitalized cost associated with the retirement obligation is depreciated over the useful life of the related asset. Upon settlement of the obligation, any difference between the cost to settle the asset retirement obligation and the liability recorded is recognized as a gain or loss in the consolidated statements of operations and changes in net assets.

Asset Impairment – CHW routinely evaluates the carrying value of its long-lived assets for impairment or whenever events or changes in circumstances indicate that the carrying amount of the asset, or related group of assets, may not be recoverable from estimated future undiscounted cash flows generated by the underlying tangible assets. When the carrying value of an asset exceeds the estimated recoverability, an asset impairment charge is recognized. No asset impairment charges were recorded in 2011 or 2010.

Fair Value of Financial Instruments — The carrying amounts reported in the consolidated balance sheets for cash and cash equivalents, accounts receivable, accounts payable, and accrued liabilities approximate fair value due to their short maturities. The fair value of investments is disclosed in Note 7 and the fair value of debt is disclosed in Note 13.

Derivative Instruments — It is CHW's policy to provide sound stewardship of fiscal resources by effectively managing both the level of outstanding debt and the proportion of variable to fixed rate debt. Accordingly, CHW periodically enters into derivative arrangements to manage interest rate risk related to variable rate debt. CHW records derivative instruments on the consolidated balance sheet as either an asset or liability measured at its fair value (Notes 7 and 14).

For derivative instruments designated as cash flow hedges, the effective portion of the change in fair value is included in change in accumulated unrealized derivative gains and losses in unrestricted net assets in the consolidated statements of operations and changes in net assets. Amounts recorded in unrestricted net assets are reclassified into earnings in the same period or periods during which the hedged transaction affects excess of revenues over expenses. The portion of the change in fair value of derivative instruments deemed ineffective is recorded within interest expense, net, in the consolidated statements of operations and changes in net assets. As of January 1, 2010, no interest rate swaps were designated as each flow hedges.

For derivative instruments that discontinue hedge accounting treatment, the cumulative amount that has been charged or credited to net assets is reclassified to interest expense, net, in the consolidated statements of operations and changes in net assets in the same period or periods during which the previously hedged transaction affects excess of revenues over expenses.

For derivative instruments that have not been designated as hedges, changes in fair value are included in interest expense, net, in the consolidated statements of operations and changes in net assets.

Ownership Interests in Health-Related Activities – Generally, when the ownership interest in health-related activities is more than 50% and CHW has a controlling interest, the ownership interests are consolidated and a noncontrolling interest is recorded in unrestricted net assets. Changes in noncontrolling interests related to revenues, expenses, gains and losses of consolidated investments in health-related activities are recorded in purchased services and other expense. When the ownership interest is at least 20%, but not more than 50%, or CHW has the ability to exercise significant influence over operating and financial policies of the investee, it is accounted for under the equity method and the income or loss is reflected in revenue from health-related activities, net. Ownership interests for which CHW's ownership is less than 20% or for which CHW does not have the ability to exercise significant influence are carried at the lower of cost or estimated net realizable value. Other than the investments in Scripps Health, Mercy Care Plan and Phoenix Children's Hospital, Inc. (Note 10), these ownership interests are not material to the consolidated financial statements.

Self-Insurance Plans – CHW has established self-insurance programs for workers' compensation benefits for employees and for hospital professional and general liability risks CHW is also self-insured for certain employee medical benefits

• Workers' Compensation and Hospital Professional and General Liabilities – Annual self-insurance expense under these programs is based on past claims experience and projected losses. Actuarial estimates of uninsured losses for each program, using a 70% confidence level and discounted at 4.25% at June 30, 2011 and 2010, have been accrued as liabilities and include an actuarial estimate for claims incurred but not reported. Insurance coverage in excess of the per-occurrence self-insured retention has been secured with insurers or reinsurers for specified amounts for workers' compensation and professional and general liabilities. CHW maintains separate trusts for these programs from which claims and related expenses and costs of administering the plans are paid CHW's policy is to fund the trusts such that over time, assets held equal liabilities for claims incurred for workers' compensation and claims made for professional liability risks.

Liabilities consist of the following as of June 30, 2011 and 2010 (in thousands):

	2011	2010
Liabilities, undiscounted	\$ 622,566	\$ 489,697
Less discount	(66,118	(55,608)
Liabilities, current and noncurrent	\$ 556,448	\$ 434,089

An additional expense of \$3.7 million was recorded during 2010 related to changes in the discount rate Self-insurance expense was increased by \$63.5 million in 2011 and decreased by \$25.3 million in 2010, related to revisions to prior years' actuarially estimated liabilities. The expenses and related adjustments

are recorded in salaries and benefits for workers' compensation benefits and in purchased services and other for hospital professional and general liability risks in the accompanying consolidated statements of operations and changes in net assets.

 Medical Benefits – The liability for payment of incurred and unpaid claims is included in other accrued liabilities on the accompanying consolidated balance sheets.

Net Patient Revenue — Gross patient revenue is recorded on the basis of usual and customary charges. Gross patient revenue was \$37.7 billion and \$35.0 billion in 2011 and 2010, respectively. The percentage of inpatient and outpatient services is as follows.

	2011	2010
Inpatient services	65%	66%
Outpatient services	35%	34%

The following table reflects the estimated percentage of gross patient revenues by major payor groups:

	2011	2010
Medicare fee for service	31%	31%
Medicare capitated	1%	1%
Medicare managed care fee for service	9%	9%
Medicaid fee for service	15%	15%
Medicaid managed care fee for service	6%	5%
Contracted rate payors	28%	29%
Commercial capitated	2%	2%
Self pay	4%	4%
Other	4%	4%
Total	100%	100%

CHW has agreements with third-party payors that provide for payments to CHW at amounts different from its established rates. Payment arrangements include prospectively determined rates per discharge, per diem payments, discounted charges and reimbursed costs. Net patient revenue is reported at the estimated net realizable amounts from patients, third-party payors and others for services rendered, including estimated settlements under negotiated payment agreements with third-party payors. Settlements with third-party payors are accrued on an estimated basis in the period in which the related services are rendered and adjusted in future periods as final settlements are determined.

Inpatient acute care services, outpatient services and skilled nursing services rendered to Medicare program beneficiaries are paid at prospectively determined rates. These rates vary according to a patient classification system that is based on clinical, diagnostic and other factors. Certain inpatient nonacute services and defined capital and medical education costs related to Medicare beneficiaries are paid based on a cost settlement methodology.

Medicaid and contracted-rate payors are paid on a per diem, per discharge, modified cost or capitated basis, or a combination of these.

In 2011 and 2010, net patient revenue included \$39.1 million and \$42.2 million, respectively, relating to prior years' settlements from Medicare, Medicaid and other programs.

Certain CHW hospitals qualified for and received Medi-Cal funding as disproportionate-share hospitals from the State of California in 2011 and 2010. The amount received was \$74.1 million and \$96.9 million, respectively, and is included in net patient revenue

In January 2010, the State of California enacted legislation that provided for supplemental Medi-Cal payments to certain hospitals funded by a quality assurance fee paid by participating hospitals and matching federal funds ("the 2010 Hospital Fee Program"). The legislation covered the period of April 1, 2009 through December 31, 2010. The Centers for Medicare & Medicaid Services ("CMS") approved the 2010 Hospital Fee Program in its entirety in December 2010, and therefore all activity of the program was recognized during the year ended June 30, 2011, resulting in net additional income of \$198.8 million. The supplemental payments received during the year ended June 30, 2011, encompassed fee-for-service payments to CHW directly from the California Department of Health Care Services as well as payments routed through managed care plans, amounting in total to approximately \$583.7 million. These payments were recorded in net patient revenue in the consolidated statements of operations and changes in net assets. Quality assurance fees assessed to and paid by CHW during the year ended June 30, 2011, were \$359.1 million and were recorded in purchased services and other in the consolidated statements of operations and changes in net assets.

The California Hospital Association created a private program, the California Health Foundation and Trust ("CHFT"), established for several purposes, including aggregating and distributing financial resources to support charitable activities at various hospitals and health systems in California (together with the supplemental payments and the quality assurance fee discussed above, the "2010 Provider Fee Program"). Upon approval of the legislation noted above in December 2010, CHW recorded a pledge to a grant fund established by CHFT in the amount \$25.8 million, which was paid during the year ended June 30, 2011, and recorded in purchased services and other in the consolidated statements of operations and changes in net assets.

In April 2011, the State of California enacted legislation that continues the provider fee program covering the period of January 1, 2011, through June 30, 2011, subject to review and approval by CMS (the "2011 Provider Fee Program", together with the CHFT pledge discussed below). The legislation was implemented beginning in May 2011, and, as such, CHW received \$185.3 million in supplemental payments and paid fees of \$121.2 million, prior to June 30, 2011. As final approval from CMS was not obtained prior to June 30, 2011, recognition of these amounts in the consolidated statement of operations and changes in net assets has been deferred and the amounts are recorded in other current liabilities and other current assets, respectively.

An additional pledge agreement was executed in May 2011 between CHW and CHFT whereby CHW anticipates paying \$8.7 million into a grant fund established by CHFT, of which \$5.2 million was paid prior to June 30, 2011. The recognition of these expenditures has also been deferred pending final approval of the legislation noted above.

Remaining supplemental payments anticipated to be received under the program of \$42.9 million and remaining amounts to be paid pursuant to the CHFT agreement of \$3.5 million have not been recorded as of June 30, 2011, pending final approval of the 2011 Provider Fee Program by CMS. The total net income of the 2011 Provider Fee Program of approximately \$98.3 million is anticipated to be recognized in the fall of 2011

Payments related to Medicaid provider fee programs are matched through the Federal Medicai Assistance Program. Twenty-two states, including California, have a provider fee program. On August 31, 2011, the California legislature passed an additional 30-month program that, upon final approval by CMS, will cover the period from July 1, 2011 through December 31, 2013

Premium Revenue — CHW has at-risk agreements with various payors to provide medical services to enrollees. Under these agreements, CHW receives monthly payments based on the number of enrollees, regardless of services actually performed by CHW. CHW accrues costs when services are rendered under these contracts, including estimates of incurred but not reported ("IBNR") claims and amounts receivable/payable under risk-sharing arrangements. The IBNR accrual includes an estimate of the costs of services for which CHW is responsible, including out-of-network services.

Traditional Charity Care – Charity care is free or discounted health services provided to persons who cannot afford to pay and who meet CHW's criteria for financial assistance. The amount of services

quantified at customary charges was \$713.8 million and \$705.6 million, for 2011 and 2010, respectively, as discussed in Note 4.

Other Operating Revenue – Other operating revenue includes net gains and losses on the sale of assets, cafeteria revenues, rental revenues, contributions released from restrictions and other nonpatient-care revenues.

Contributions and Restricted Net Assets – 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 met, temporarily restricted net assets related to capital purchases are reclassified as unrestricted and reflected as net assets released from restrictions used for the purchase of property and equipment on the statements of changes in net assets, whereas temporarily restricted net assets related to other gifts are reclassified as unrestricted and recorded as other operating revenue in unrestricted revenues and other support. Gifts received with no restrictions are recorded as contributions in unrestricted revenues and other support. Gifts of long-lived operating assets, such as property and equipment, are reported as unrestricted net assets unless specified by the donor.

Unconditional promises to give cash and other assets to CHW are recorded at fair value at the date the promise is received. Conditional promises to give are recorded when the conditions have been substantially met. Indications of intentions to give are not recorded; such gifts are recorded at fair value only upon actual receipt of the gift. Investment income on temporarily or permanently restricted net assets is classified pursuant to the intent or requirement of the donor.

Endowment assets include donor-restricted funds that the organization must hold in perpetuity or for a donor-specified period. CHW preserves the fair value of these gifts as of the date of donation unless otherwise stipulated by the donor. The portion of donor-restricted endowment funds that are not classified in permanently restricted net assets are classified as temporarily restricted net assets until those amounts are appropriated for expenditure. CHW considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds: (1) the duration and preservation of the fund, (2) the purposes of the organization and the donor-restricted endowment fund, (3) general economic conditions, (4) the possible effect of inflation and deflation, (5) the expected total return from income and the appreciation of investments, (6) other resources of the organization, and (7) the investment policies of CHW

CHW has investment and spending policies for endowment assets designed to provide a predictable stream of funding to programs supported by its endowments while seeking to maintain the purchasing power of the endowment assets.

Endowment assets are invested in a manner that is intended to produce results that achieve the respective benchmark while assuming a moderate level of investment risk. Actual returns in any given year may vary from this amount. To satisfy its long-term rate-of-return objectives, CHW relies on a total return strategy in which investment returns are achieved through both capital appreciation (realized and unrealized) and current yield (interest and dividends). CHW targets a diversified asset allocation to achieve its long-term return objectives within prudent risk constraints.

From time to time, the fair value of assets associated with individual donor-restricted endowment funds may fall below the level that CHW is required to retain as a fund of perpetual duration. Deficits of this nature are reported in unrestricted net assets, unless otherwise specified by the donor.

Community Benefits — As part of its mission. CHW provides services to the poor and benefits for the broader community. The costs incurred to provide such services are included in excess of revenues over expenses in the consolidated statements of operations and changes in net assets. CHW prepares a summary of unsponsored community benefit expense in accordance with Internal Revenue Service Form 990, Schedule H, and the Catholic Health Association of the United States ("CHA") publication, A Guide for Planning and Reporting Community Benefit (Note 4).

Interest Expense – Interest expense on debt issued for construction projects is capitalized until the projects are placed in service. The components of interest expense, net, include the following (in thousands):

		2011		2010
Interest and fees on debt and swap cash settlements Market adjustment on swaps and amortization of	\$	228,763	\$	222,700
amounts in unrestricted nct assets		(40,983)		57,135
Total interest expense Capitalized interest expense		187,780 (20,209)		279,835 (35,829)
Interest expense, net	<u>\$</u>	167,571	\$_	244,006

Income Taxes – CHW has established its status as an organization exempt from income taxes under the Internal Revenue Code Section 501(c)(3) and the laws of the states in which it operates. Certain subsidiaries are subject to income taxes; such amounts are not significant to the consolidated financial statements.

Performance Indicator – Management considers excess of revenues over expenses to be CHW's performance indicator. Excess of revenues over expenses includes all changes in unrestricted net assets except for the effect of changes in accounting principles, gain from discontinued operations, changes in net unrealized gains and losses on available-for-sale investments, net assets released from restrictions used for purchase of property and equipment, change in funded status of pension and other postretirement benefit plans, change in noncontrolling interest in health-related activities, change in accumulated unrealized derivative gains and losses, and donated property and equipment.

Transactions between Related Organizations – Certain Obligated Group members have a policy whereby assets are periodically transferred as charitable distributions to nonprofit corporations that are subordinate corporations of CHW but are not members of the Obligated Group. The subordinate corporations conduct charitable healthcare, educational and religious activities and support subordinate nonprofit healthcare organizations. These transfers are accounted for as direct charges to the Obligated Group members' unrestricted net assets and direct credits to the subordinate corporations' unrestricted net assets. It is anticipated that Obligated Group members will continue to make asset transfers to the subordinate corporations.

Recent Accounting Pronouncements – In July 2011, the Financial Accounting Standards Board ("FASB") issued Accounting Standards Update ("ASU") No. 2011-07, Presentation and Disclosure of Patient Service Revenue, Provision for Bad Dehts, and the Allowance for Doubtful Accounts for Certain Health Care Entities ("ASU 2011-07") which amended Accounting Standards Codification ("ASC") No. 954, Health Care Entities ("ASC 954") to provide greater transparency regarding a health care entity's net patient revenue and the related allowance for doubtful accounts. ASU 2011-07 requires certain health care entities to change the presentation of the provision for bad debts associated with patient service revenue by reclassifying the provision from operating expenses to a deduction from net patient revenue and requires enhanced disclosures about net patient revenue and the policies for recognizing revenue and assessing bad debts. The adoption of ASU 2011-07 is effective for CHW beginning July 1, 2012. The adoption of ASU 2011-07 is not expected to have a material impact on CHW's consolidated financial statements.

In May 2011, the FASB issued ASU No. 2011-04, Fair Value Measurement (Topic 820), Amendments to Achieve Common Fair Value Measurement and Disclosure Requirements in U.S. GAAP and IFRSs ("ASU 2011-04"), which amended ASC No. 820, Fair Value Measurement ("ASC 820") to change the wording used to describe many of the requirements in U.S. GAAP for measuring fair value and for disclosing information about fair value measurements. The adoption of ASU 2011-04 is effective for CHW beginning January 1, 2012. The adoption of ASU 2011-04 is not expected to have a material impact on CHW's consolidated financial statements.

In August 2010, the FASB issued ASU No. 2010-24, Health Care Entities (Topic 954), Presentation of Insurance Claims and Related Insurance Recoveries ("ASU 2010-24"), which clarifies that a health care entity should not not insurance recoveries against a related claim liability. Additionally, the amount of the claim liability should be determined without consideration of insurance recoveries. The adoption of ASU 2010-24 is effective for CHW beginning July 1, 2011. The adoption of ASU 2010-24 is not expected to have a material impact on CHW's consolidated financial statements.

In August 2010, the FASB issued ASU No. 2010-23, Health Care Entities (Topic 954), Measuring Charity Care for Disclosure ("ASU 2010-23"), which requires that cost be used as a measurement for charity care disclosure purposes and that cost be identified as the direct and indirect costs of providing the charity care. It also requires disclosure of the method used to identify or determine such costs. The adoption of ASU 2010-23 is effective for CHW beginning July 1, 2011. The adoption of ASU 2010-23 is not expected to have a material impact on CHW's consolidated financial statements.

In January 2010, the FASB issued ASU No. 2010-06, *Improving Disclosures about Fair Value Measurements* ("ASU 2010-06"), which amended ASC 820 to require new disclosures related to transfers in and out of Level 1 and Level 2 fair value measurements, including reasons for the transfers, and to require new disclosures related to activity in Level 3 fair value measurements. CHW adopted the provisions of ASU 2010-06 relating to activity in Level 3 fair value measurements beginning July 1, 2010. The adoption of ASU 2010-06 did not have a material impact on CHW's consolidated financial statements.

In June 2009, the FASB issued ASU No. 2009-16, Accounting for Transfers of Financial Assets, an amendment of FASB Statement No. 140 ("ASU 2009-16"). The objective of ASU 2009-16 is to improve the relevance, representational faithfulness, and comparability of the information that a reporting entity provides in its financial reports about a transfer of financial assets; the effects of a transfer on its financial position, financial performance, and cash flows; and a transferor's continuing involvement in transferred financial assets. The provisions of ASU 2009-16 were adopted by CHW effective July 1, 2010, and did not have a material impact on the consolidated financial statements.

In April 2009, the FASB issued ASU 2010-07, *Not-for-Profit Entities: Mergers and Acquisitions, including an amendment of FASB Statement No. 142* ("ASU 2010-07"). This statement provides guidance on accounting for a combination of not-for-profit entities and applies to a combination that meets the definition of either a merger of not-for-profit entities or an acquisition by a not-for-profit entity. This statement amends both Statement of Financial Standards ("SFAS") No. 142. *Goodwill and Other Intangible Assets* and SFAS No. 160. *Noncontrolling Interests in Consolidated Financial Statements* to make their provisions fully applicable to not-for-profit entities. The provisions of ASU 2010-07, which are to be applied prospectively for business combinations, were effective for CHW January 1, 2010, and had no impact on CHW's financial statements. CHW adopted the provisions relating to noncontrolling interests as of July 1, 2010, and reclassified the noncontrolling interest from other liabilities to unrestricted net assets for all periods presented on the condensed consolidated balance sheets and has separately reported the change in the noncontrolling interest in unrestricted net assets in the statements of changes in net assets for all periods presented. CHW adopted the provisions related to goodwill and other intangible assets as of July 1, 2010, and ceased amortization of goodwill. The adoption did not have a material impact on CHW's financial statements.

Subsequent Events - CHW has evaluated subsequent events occurring between the end of the most recent fiscal year and September 16, 2011, the date the financial statements were available to be issued. See Note 2 (provider fee), Note 13, Note 14 and Note 16.

3. MERGERS, ACQUISITIONS AND DIVESTITURES

The accompanying consolidated statements of operations and changes in net assets reflect the results of the operations of facilities sold, closed or held for sale as discontinued operations for all periods presented, including revenues of \$5.3 million and \$4.6 million for 2011 and 2010, respectively.

4. UNSPONSORED COMMUNITY BENEFIT EXPENSE (UNAUDITED)

Unsponsored community benefits are programs or activities that provide treatment and/or promote health and healing as a response to identified community needs. These benefits (a) generate a low or negative margin, (b) respond to the needs of special populations, such as persons living in poverty and other disenfranchised persons, (c) supply services or programs that would likely be discontinued, or would need to be provided by another nonprofit or government provider, if the decision was made on a purely financial basis, (d) respond to public health needs, and/or (c) involve education or research that improves overall community health.

Benefits for the Poor include services provided to persons who are economically poor or are medically indigent and cannot afford to pay for healthcare services because they have inadequate resources and/or are uninsured or underinsured.

Benefits for the Broader Community refer to persons in the general communities that CHW serves, beyond and including those in a target population. Most services for the broader community are aimed at improving the health and welfare of the overall community. Such services include the interest rate differential on below market rate loans that CHW makes to nonprofit community-based organizations that promote the total health of their communities, including the development of affordable housing for low-income persons and families, increasing opportunities for jobs and job training, and expanding access to healthcare for uninsured and underinsured persons. As of June 30, 2011 and 2010, CHW's community investment loan portfolio totaled \$38.7 million and \$35.5 million, respectively, which is included in other assets limited as to use.

Traditional Charity Care is free or discounted health services provided to persons who cannot afford to pay and who meet CHW's criteria for financial assistance. The amount of services quantified at customary charges was \$713.8 million and \$705.6 million, for 2011 and 2010, respectively.

Net Community Benefit, excluding the unpaid cost of Medicare, is the total cost incurred after deducting direct offsetting revenue from government programs, patients, and other sources of payment or reimbursement for services provided to program patients. The comparable amount of net community benefit was \$985.1 million for 2010. Net Community Benefit including the unpaid cost of Medicare was \$1.3 billion for 2010

The following is a summary of CHW's community benefits for 2011, in terms of services to the poor and benefits for the broader community, which has been prepared in accordance with Internal Revenue Service Form 990, Schedule H and the CHA publication, A Guide for Planning and Reporting Community Benefit (dollars in thousands):

			Unaudited		
	Persons Served	Total Benefit Expense	Direct Offsetting Revenue	Net Community Benefit	% of Total Expenses Excluding Bad Debt Expense
Benefits for the poor.					
Traditional charity care	97,422	\$ 158,787	\$ (6,224)		1.6%
Unpaid costs of Medicaid / Medi-Cal	1,035,601	2,219,970	(1.774,997)	444,973	4.7%
Other means-tested programs	253,140	109,368	(45,390)	63,978	0.7%
Community services:					
Community health services	552,089	52,143	(2,858)	49,285	0.5%
Health professions education	21,637	10,998	-	10,998	0.1%
Subsidized health services	219,756	44,417	(7,029)	37,388	0.4%
Donations	233,077	37,214	(234)	36,980	0.4%
Community building activities	15,081	3,219	(1,577)	1,642	0.0%
Community benefit operations	19,210	6,984		6,984	<u>0.1</u> %
Total community services for the poor	1.060,850	154.975	(11,698)	143,277	<u>1.5</u> %
Total benefits for the poor	2,447,013	2,643,100	(1.838,309)	804,791	<u>8.5</u> %
Benefits for the broader community:					
Community services:					
Community health services	2,004,902	29,301	(6,298)	23,003	0.2%
Health professions education	52,255	74,413	(9,284)	65,129	
Subsidized health services	124,290	12,010	(984)		
Research	5.057	24,507	(341)	•	
Donations	202,417	7,935	(29)		
Community building activities	63,555	8,152	(4)		
Community benefit operations	937	2,908	(25)	2,883	0.0%
Total benefits for the broader					
community	2,453,413	159.226	(16,965)	142,261	<u>1.5</u> %
Total Community Benefits	4,900,426	\$2,802,326	<u>\$(1.855,274)</u>	\$ 947,052	<u>10.0</u> %
Unpaid costs of Medicare	1,109,062	2,448,998	(2.019.641)	429,357	4.5%
Total Community Benefits including					
unpaid costs of Medicare	6,009,488	\$5,251,324	\$(3,874,915)	\$1,376,409	<u>14.5</u> %

5. OTHER CURRENT ASSETS

Other current assets consist of the following at June 30, 2011 and 2010 (in thousands):

	2011	2010
Inventories	\$ 159,362	\$ 153,327
Receivables, other than patient accounts receivable	168,713	101,218
Other prepaid expenses	60,552	51,732
Due from brokers for unsettled investment trades and prepaid		
fund subscriptions	200,150	156,244
Deferred provider fee expense	126,363	-
Deposits	2,789	19,668
Other	 25,157	19,593
Total other current assets	\$ 743,086	\$ 501,782

Amounts reported in 2010 have been changed to reflect the breakout of amounts due from brokers for unsettled investment trades previously reported as other.

6. INVESTMENTS AND ASSETS LIMITED AS TO USE

Investments and assets limited as to use, including assets loaned under securities lending program, consist of the following at June 30, 2011 and 2010 (in thousands):

		2011		2010
Cash and cash equivalents	\$	579,206	\$	585,701
U.S. government securities		903,488		789,927
U.S. corporate bonds		636,035		577,337
U.S. equity securities		1,666,690		1,275,687
Foreign government securities		243,329		204,841
Foreign corporate bonds		7,369		9,703
Foreign equity securities		400,339		309,359
Asset-backed securities		36,938		40,705
Structured debt		105,106		106,722
Private equity investments		102,944		83,344
Multi-strategy hedge fund investments		107,889		152,272
Real estate		162,624		133,674
Other		96,881		84,508
Interest in net assets of unconsolidated foundations		222,943		188,004
Total	\$	5,271,781	<u>\$</u>	4,541,784
Assets limited as to use:				
Current	\$	828,632	\$	692,704
Long-term		3,617,300		3,252,773
Short-term investments	_	825,849		596,307
Total	\$	5,271,781	\$	4,541,784

The current portion of assets limited as to use includes the amount of assets available to meet current obligations for debt service and claims payments under the self-insured programs for workers' compensation benefits for employees and hospital professional and general liability risks.

Investment income and losses on assets limited as to use, cash equivalents, collateral held under securities lending program, notes receivable, and investments are comprised of the following for 2011 and 2010 (in thousands):

	2011			2010		
Interest and dividend income	\$	116,293	\$	113,674		
Net realized gains on sales of securities		182,773		92,715		
Net unrealized gains on securities		442,354		215,758		
Other, net of capitalized investment income		(21,809)		(19,673)		
Total investment income, net	\$	719,611	\$	402,474		

7. FAIR VALUE MEASUREMENTS

CHW accounts for certain assets and liabilities at fair value or on a basis that approximates fair value. A fair value hierarchy for valuation inputs prioritizes the inputs into three levels based on the extent to which inputs used in measuring fair value are observable in the market. Each fair value measurement is reported in one of the three levels and is determined by the lowest level input that is significant to the fair value measurement in its entirety. These levels are:

Level 1: Quoted prices are available in active markets for identical assets or liabilities as of the measurement date. Financial assets and liabilities in Level 1 include U.S. Treasury securities and listed equities.

Level 2. Pricing inputs are based upon 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 or liabilities. Financial assets and liabilities in this category generally include asset-backed securities, corporate bonds and loans, municipal bonds, and interest rate swaps.

Level 3: Pricing inputs are generally unobservable for the assets or liabilities and include situations where there is little, if any, market activity for the investment. The inputs into the determination of fair value require management's judgment or estimation of assumptions that market participants would use in pricing the assets or liabilities. The fair values are therefore determined using model-based techniques that include option pricing models, discounted cash flow models, and similar techniques. Financial assets in this category include alternative investments.

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The following represents assets and liabilities measured at fair value on a recurring basis and certain assets accounted for under the equity method as of June 30, 2011 and 2010 (in thousands):

Fair Value Measurements at June 30, 2011 Using **Quoted Prices** in Active Significant Markets for Other Significant Total Unobservable Balance at Identical Observable Instruments Inputs Inputs June 30, 2011 (Level 1) (Level 2) (Level 3) Assets 579,206 579,206 Cash and cash equivalents 903,488 392,981 510,507 U.S. government securities 636,035 U S. corporate bonds 62,061 573,974 U.S. equity securities 1,461,940 204,750 1,666,690 5,896 237,433 243,329 Foreign government securities 7,369 7,369 Foreign corporate bonds 400,339 400,339 Foreign equity securities 36,938 36,938 Asset-backed securities 105,106 105,106 Structured debt 102,944 102,944 Private equity investments 107,889 107,889 Multi-strategy hedge fund investments 6,805 155,819 162,624 Collateral held under securities lending 290,526 290,526 program 8,724 8,724 Other fund investments \$ 5,251,207 2,917,952 1,966,603 366,652 Total assets

110,694

110,694

Liabilities

Interest rate swap instruments

Fair Value Measurements at June 30, 2010 Using

	Quoted Prices in Active Significant Markets for Other Identical Observable Instruments Inputs (Level 1) (Level 2)		Si Uno	gnificant observable Inputs Level 3)	_	Total alance at June 30, 2010	
Assets	\$	585,701	\$	- \$		\$	585,701
Cash and cash equivalents	Ф	340,926	ъ 449,00		-	Þ	789,927
U.S. government securities		72,896			-		•
U.S. corporate bonds		,	504,44		-		577,337
U.S. equity securities		1,113,859	161,823		-		1,275,687
Foreign government securities		23	204,813		-		204,841
Foreign corporate bonds		200.126	9,703		-		9,703
Foreign equity securities		309,136	22:	-	-		309,359
Asset-backed securities		-	40,70		-		40,705
Structured debt		-	106,72	2	-		106,722
Private equity investments		-		-	83,344		83,344
Multi-strategy hedge fund investments		-		-	152,272		152,272
Real estate		5,165		-	128,509		133,674
Collateral held under securities lending							
program		_	272,98	6	-		272,986
Other fund investments		6,250			_		6,250
Total assets	\$	2,433,956	\$ 1,750,42	<u> \$</u>	364,125	<u>\$</u>	4,548,508
Liabilities							
Interest rate swap instruments	\$		\$ 160,73	<u> \$</u>		\$	160,732

Assets and liabilities measured at fair value on a recurring basis and certain assets accounted for under the equity method are reported in short-term investments, assets limited as to use, and other accrued liabilities in the consolidated balance sheet. Such amounts do not include donor-restricted funds or interests in unconsolidated foundations.

There were no significant transfers to or from Levels 1 or 2 during the periods presented.

The Level 2 and 3 instruments listed in the fair value hierarchy tables above use the following valuation techniques and inputs:

For marketable securities such as U.S. and foreign government securities, U.S. and foreign corporate bonds, U.S. and foreign equity securities, asset-backed securities, and structured debt, in the instances where identical quoted market prices are not readily available, fair value is determined using quoted market prices and/or other market data for comparable instruments and transactions in establishing prices, discounted cash flow models and other pricing models. These inputs to fair value are included in industry-standard valuation techniques such as the income or market approach. CHW classifies all such investments as Level 2.

For investments such as private equity funds, multi-strategy hedge funds, or certain real estate fund investments whose fair value is based on pricing not readily determinable, fair value is determined using the calculated net asset value ("NAV"). The value of underlying investments of private equity or hedge funds includes estimates determined based on recent filings, operating results, balance sheet stability, growth, and other business and market sector fundamentals. For Level 3 real estate investments, valuation techniques including the income, sales comparison (market), and cost approaches are used. Significant inputs include contract and market tents, operating expenses, capitalization rates, discount

rates, sales of comparable properties, market rent growth trends, as well as the use of the value of the property plus the cost of building a similar structure of equal utility. Due to the significant unobservable inputs present in these valuations, CHW classifies all such investments as Level 3.

The fair value of collateral held under securities lending program classified as Level 2 is determined using the calculated NAV. The collateral held under this program is placed in commingled funds whose underlying investments are valued using techniques similar to those used for the marketable securities noted above. Amounts reported do not include non-cash collateral of \$23.7 million and \$42.8 million as of June 30, 2011 and 2010, respectively.

The fair value of interest rate swap instruments classified as Level 2 is determined using an industry standard valuation model, which is based on a market approach. A credit risk spread (in basis points) is added as a flat spread to the discount curve used in the valuation model. Each leg is discounted and the difference between the present value of each leg's cash flows equals the market value of the swap. The fair value also considers the risk of each counterparty by including a "credit valuation adjustment" determined by taking into account the nonperformance risk of each counterparty to the swap.

The following table presents the change in the balance of financial assets and liabilities using significant unobservable inputs (Level 3) measured on a recurring basis and certain assets accounted for under the equity method in 2011 and 2010 (in thousands):

	2011					
		ate Equity	Ho	lti-Strategy edge Fund vestments	Real Estate	Total
Balance at beginning of period Total realized and unrealized gains, net,	\$	83,344	\$	152,272	\$ 128,509	\$ 364,125
included in excess of revenues over expenses Purchases, issuances, sales and settlements		11,678		12,751	27,310	51,739
Purchases		18,068		89,563	_	107,631
Sales		(10.146)		(146.697)	_ <u>-</u>	(156,843)
Balance at end of period	\$	102,944	\$	107,889	\$ 155,819	\$ 366,652
Change in unrealized gains included in investment income, net as of June 30, 2011	<u>\$</u>	10,702	\$	1,881	\$ 27,310	\$ 39,893

2011

	2010						
Balance at beginning of period Total realized and unrealized gains (losses), net, included in excess of revenues over		Private Equity Investments		dge Fund vestments	Real Estate	Total	
	\$	63,619	\$	103,780	\$ 101,634	\$ 269,033	
expenses Purchases, issuances, sales and settlements		7,192		15,206	(19,082)	3,316	
Purchases		14,279		28,817	46,000	89,096	
Sales		(1,746)		(552)	(43)	(2,341)	
Transfers into Level 3		-		5,021	<u>-</u>	5,021	
Balance at end of period	\$	83,344	<u>\$</u>	152,272	\$ 128,509	\$ 364,125	
Change in unrealized gains (losses) included							
in investment income, net as of June 30, 2010	\$	7,159	\$	15,475	\$ (19,082)	\$ 3,552	

Included within the assets above are investments in certain entities that report fair value using a calculated NAV or its equivalent. The following table and explanations identify attributes relating to the nature and risk of such investments as of June 30, 2011 and 2010 (in thousands):

	As of June 30, 2011							
						Redemption		
				U	nfunded	Frequency (If	Redemption	
		Ŧ	fair Value	Con	nmitments	Currently Eligible)	Notice Period	
Level 2								
Commingled funds - debt securities	(1)	\$	202,794	\$	-	Daily, Semi-Monthly	1 - 5 days	
Commingled funds - equity securities	(2)		203,352		u.	Daily, Semi-Monthly, Monthly	1 - 30 days	
Collateral held under securities								
lending program	(3)		290,526		_	Daily	10 days	
Total Level 2		\$	696,672	\$				
Level 3								
Multi-strategy hedge funds	(4)	\$	107,889	\$	-	Quarterly, Semi- Annually, Annually	60 - 370 days	
Private equity	(5)		102,944		116,595	-	-	
Real estate	(6)	lease to	155,819			Quarterly	90 days	
Total Level 3		\$	366,652	\$	116,595			
Total Level 2 and Level 3		\$	1,063,324	\$	116,595			

					As of Ju	ne 30, 2010	
						Redemption	
				U	nfunded	Frequency (If	Redemption
		Fa	ir Value	Con	ımitments	Currently Eligible)	Notice Period
Level 2							
Commingled funds - debt securities	(1)	\$	166,950	\$	-	Daily, Semi-Monthly	1 - 5 days
Commingled funds - equity securities	(2)		160,932		-	Daily, Semi-Monthly, Monthly	1 - 30 days
Collateral held under securities							
lending program	(3)	_	272,986		TT	Daily	10 days
Total Level 2		\$	600,868	<u>\$</u>			
Level 3							
Multi-strategy hedge funds	(4)	\$	152,272	\$	-	Quarterly, Semi- Annually, Annually	65 - 370 days
Private equity	(5)		83,344		129,310	-	-
Real estate	(6)		128,509		_	-	-
Total Level 3		\$	364,125	\$	129,310		
Total Level 2 and Level 3		\$	964.993	\$	129,310		

- (1) This category includes investments in commingled funds that invest primarily in domestic and foreign debt and fixed income securities, the majority of which are traded in over-the-counter markets.
- (2) This category includes investments in commingled funds that invest primarily in domestic or foreign equity securities with multiple investment strategies. A majority of the funds attempt to match the returns of specific equity indices.
- (3) This category includes investments of collateral held under securities lending program. CHW participates in a securities lending program administered by its custodian as a means to augment income from its portfolio. Securities are loaned to select brokerage firms who in turn post collateral. The collateral is placed in commingled funds that invest primarily in cash and cash equivalents, and domestic and foreign debt securities. In December 2010, the custodian allocated the collateral pool into two separate pools. While CHW can fully withdraw from the program with its custodian at any time, the redemption conditions differ. For the "duration pool", which represents approximately 5.7% of the value of this category at June 30, 2011, CHW can fully withdraw from the program with its custodian, and in return receive proportional distributions of the investments held by the collateral lending fund. For the "liquidity pool", which represents approximately 94.3% of the value of this category at June 30, 2011, no such redemption restrictions are applicable. The cash flow maturity schedule provided by the custodian anticipates that the cash collateral in the duration pool will fully mature and become available through December 2012, with the majority maturing by September 30, 2011. Earlier redemption from the duration pool would result in CHW receiving a proportional share of the in-kind underlying cash collateral.
- (4) This category includes investments in hedge funds that pursue diversification of both domestic and foreign fixed income and equity securities through multiple investment strategies. The primary objective for these funds is to seek attractive long-term risk-adjusted absolute returns. A redemption limitation imposed for certain investments representing approximately 1% of the value of this category lapsed on October 1, 2010, at which time liquidity is limited to semi-annual withdrawals with 60 days written notice. A redemption limitation imposed for certain investments representing approximately 3% of the value of this category lapsed on March 30, 2011, at which time liquidity is limited to annual withdrawals with 75 days written notice. A redemption limitation imposed for certain investments representing approximately 1% of the value of this category will lapse on March

30, 2013, at which time liquidity is limited to annual withdrawals with 75 days written notice. A redemption limitation imposed for certain investments representing approximately 28% of the value of this category will lapse on July 1, 2012, at which time liquidity is limited to quarterly withdrawals up to one-third of the investor's shares with 60 days written notice. Approximately 8% of the value of this category requires a notice period of 90 days for redemption. Other investments representing approximately 56% of the value of this category require a notice period of 95 days for redemptions of up to 50% of the investor's shares and 370 days written notice for redemptions greater than 50%. Under certain circumstances, an otherwise redeemable investment or portion thereof could become restricted. Such restrictions were not applicable at June 30, 2011.

- (5) This category includes several private equity funds that specialize in providing capital to a variety of investment groups, including but not limited to venture capital, leveraged buyout, mezzanine debt, distressed debt, and other situations. There are no provisions for redemptions during the life of these funds. Distributions from each fund will be received as the underlying investments of the funds are liquidated, estimated at June 30, 2011, to be over the next 2-12 years.
- (6) This category includes an open-ended real estate fund that invests primarily in institutional quality commercial and residential real estate assets within the United States.

The investments included above are not expected to be sold at amounts that are different from NAV.

8. PROPERTY AND EQUIPMENT, NET

Property and equipment, net, consist of the following at June 30, 2011 and 2010 (in thousands).

	2011		2010	
Land	\$ 223,873	3 \$	208,624	
Land improvements	114,379)	105,485	
Buildings	4,371,353	3	4,239,322	
Equipment	3,265,014	1	3,103,405	
Construction in progress	619,223	3	440,971	
Total	8,593,842	2	8,097,807	
Less. Accumulated depreciation	(4,491,291	D _	(4,203,696)	
Property and equipment, net	\$ 4,102,551	<u> </u>	3,894,111	

9. OTHER LONG-TERM ASSETS, NET

Other long-term assets, net, consist of the following at June 30, 2011 and 2010 (in thousands):

	2011	2010	
Notes receivable, primarily secured	\$ 42,371	\$ 50,612	
Deferred financing costs, net	27,924	32,120	
Goodwill	95,549	82,254	
Other	 30,319	 35,074	
Total other long-term assets, net	\$ 196,163	\$ 200,060	

10. OWNERSHIP INTERESTS IN HEALTH-RELATED ACTIVITIES

In August 1995, CHW and Scripps Health ("Scripps") entered into an affiliation agreement to enhance their mutual ability to serve the San Diego community. Through the affiliation, CHW transferred the sole voting membership of one of its subordinate corporations, Mercy Healthcare San Diego ("MHSD") to Scripps, along with the responsibility for its operation and governance. MHSD's principal activity is the operation of a hospital and a network of clinics.

Pursuant to the affiliation agreement, among other things, CHW obtained the right to receive a 20% interest in the annual change in unrestricted net assets of Scripps and the right to 20% of the net proceeds, with certain restrictions, upon the liquidation of Scripps. Scripps has the right to receive from CHW an amount equal to CHW's percentage interest in (i) the annual capital expenditures of Scripps and (ii) the annual amortization of debt principal of Scripps. CHW and Scripps may make an election annually to receive all or a portion of the accumulated but not previously paid amounts under the affihation agreement, subject to certain conditions. No payments have ever been paid by either party under these provisions. Twenty percent of the members of the Scripps Board of Directors are elected from nominees proposed by CHW.

CHW accounts for the affiliation with Scripps under the equity method. Its investment at June 30, 2011 and 2010, is \$334.2 million and \$254.5 million, respectively, and is reflected on the accompanying consolidated balance sheets in ownership interests in health-related activities. CHW recorded income of \$79.7 million and \$50.6 million in revenue from health-related activities, net, for 2011 and 2010, respectively, related to its interest in the unrestricted net assets of Scripps.

In June 1985, CHW and Carondelet Health Network (now a member of Ascension Health) entered into an affiliation agreement by which each affiliate made an investment in Southwest Catholic Healthcare Network, dba Mercy Care Plan. Mercy Care Plan operates a health plan for Arizona's Medicaid program, Arizona Health Care Cost Containment System, with approximately 361,300 enrollees.

CHW accounts for the affiliation with Mercy Carc Plan under the equity method. Its investment at June 30, 2011 and 2010, is \$94.1 million and \$89.4 million, respectively, and is reflected on the accompanying consolidated balance sheets in ownership interests in health-related activities. CHW recorded income of \$29.1 million and \$24.5 million in revenue from health-related activities, net, for 2011 and 2010, respectively, in the accompanying consolidated statements of operations and changes in net assets related to its interest in the excess of revenues over expenses of Mercy Care Plan. Mercy Care Plan classifies its investment portfolio as available-for-sale. As such, CHW recorded its 50% interest in the net unrealized gains of Mercy Care Plan of \$5.5 million and \$2.4 million for 2011 and 2010, respectively, in unrestricted net assets.

The following table summarizes the financial position and results of operations for the health-related organizations discussed above which are accounted for under the equity method, as of and for the 12 months ended June 30, 2011 and 2010 (in thousands):

		Scripps Health				Mercy C	are Plan		
	2011			2010	2011			2010	
Total assets	\$	2,898,114	\$	2,471,030	\$	434,750	\$	406,040	
Total liabilities		1,018,806		998,773		246,637		227,251	
Total net assets		1,879,308		1,472,257		188,113		178,789	
Total revenues, net		2,681,688		2,339,508		1,930,479		1,896,159	
Excess of revenues over expenses	\$	377,269	\$	210,473	\$	57,688	\$	51,260	

In June 2011, C11W transferred and contributed to Phoenix Children's Hospital, Inc., ("PCH"), an Arizona nonprofit corporation, substantially all of the pediatric program services and related assets of its facility in Phoenix, Arizona. Pursuant to the transaction, CHW obtained 20% of the outstanding membership interests of PCH. CHW accounts for the affiliation with PCH under the equity method. Its investment at June 30,

2011, is \$48.2 million and is reflected on the accompanying consolidated balance sheets in ownership interests in health-related activities. CHW recorded a gain on the transaction of \$47.3 million, which is recorded in other operating revenue in the accompanying consolidated statements of operations and changes in net assets. The total assets, liabilities and net assets of PCH as of June 30, 2011, were \$980.0 million, \$666.4 million and \$313.6 million, respectively.

Changes in the noncontrolling interests related to revenues, expenses, gains, and losses of consolidated investments in health-related activities of \$24.1 million and \$19.9 million are included in purchased services and other in the consolidated statements of operations and changes in net assets for 2011 and 2010, respectively. Additional goodwill of \$13.3 million (see Note 9) was recorded in 2011 related to the acquisition of interests in health-related organizations. No goodwill impairment was recorded during 2011

11. OTHER ACCRUED LIABILITIES

Other accrued liabilities, net, consist of the following at June 30, 2011 and 2010 (in thousands):

	2011	2010		
Accrued interest expense	\$ 82,690	\$	84,691	
Deferred provider fee revenue	185,280		-	
Due to brokers for unsettled investment trades	293,063		340,179	
Derivative liabilities	110,694		160,732	
Other	 199,315		206,089	
Total other accrued liabilities	\$ 871,042	\$	791,691	

12. PENSION AND OTHER POSTRETIREMENT BENEFIT PLANS

CHW maintains defined benefit retirement plans that cover substantially all eligible employees of CHW. Benefits are generally based on age, years of service and employee compensation. CHW also offers postretirement healthcare benefits to most of its employees. For the majority of covered employees, the benefits are determined based on age, years of service and compensation up to specified amounts.

The plans are actuarially evaluated and involve various assumptions. These assumptions include the discount rate and the expected rate of return on plan assets (for pension), which are important elements of expense and liability measurement. Other assumptions involve demographic factors such as retirement, mortality, turnover and the rate of compensation increases. CHW evaluates assumptions annually and modifies them as appropriate. The model allocates pension cost and postretirement costs over the service period of the employees in the plans. The principle underlying this accounting is that employees render service ratably over the period and, therefore, the effects in the consolidated statements of operations and changes in net assets follow the same pattern.

Contributions to the defined benefit retirement plans are based on actuarially determined amounts sufficient to meet the benefits to be paid to plan participants. These plans qualify under a Church Plan Exemption, and as such are not subject to Employee Retirement Income Security Act ("ERISA") funding requirements. CHW's funding policy requires that, at a minimum, contributions equal the unfunded normal cost plus amortization of any unfunded actuarial accrued liability. Contributions to these plans are anticipated at \$266.5 million in 2012.

During 2011, CHW amended the retirement plans resulting in a lower benefit obligation as of June 30, 2011, and also lower expense in future years. The most significant provisions include freezing certain ongoing final average pay formulas and replacing them with cash balance formulas, freezing certain past service benefits for employees already in cash balance formulas, modifying the cash balance interest crediting rate

to comply with proposed IRS guidelines, and updating the actuarial equivalence definitions and methodology.

The accumulated benefit obligation exceeds plan assets for each of the defined benefit plans and other postretirement plans for the years ended June 30, 2011 and 2010. The following summarizes the benefit obligations and funded status for the defined benefit pension and other postretirement plans for 2011 and 2010 (in thousands):

	20		2010			
	Retirement Plans		Other Benefit Plans	Retirement Plans		Other Benefit Plans
Change in benefit obligation:						
Benefit obligation at beginning of year	\$ 2,757,644	\$	102,270	\$ 2,183,762	\$	81,694
Service cost	183,712		6,031	145,726		4.784
Interest cost	163,438		5,497	141,984		5,402
Plan changes/amendments	(169,648)		1,190	3,059		1,894
Actuarial loss	191,822		5,870	355,078		13,002
Acquisitions and other	(5,856)		-	(84)		-
Administrative expenses	(14,930)		-	(12,728)		-
Benefits paid	(71,739)		(5,164)	(59,153)	_	(4,506)
Benefit obligation at end of year	\$ 3,034,443	\$	115,694	\$ 2,757,644	\$	102,270
Accumulated benefit obligation	\$ 2,644,136	\$	115,694	\$ 2,332,274	<u>\$</u>	102,270
Change in plan assets:						
Fair value of plan assets at beginning of year	\$ 1,677,799	\$	-	\$ 1,334,519	\$	_
Actual return on plan assets	419,022		-	172,739		-
Employer contributions	270,228		5.164	242,422		4,506
Benefits paid	(71,739)		(5,164)	(59,153)		(4,506)
Acquisitions and other	(4,056)		-	-		_
Administrative expenses	(14,930)			(12,728)		<u>-</u>
Fair value of plan assets at end of year, net	<u>\$ 2,276,324</u>	<u>\$</u>		<u>\$ 1,677,799</u>	\$	
Funded status	\$ (758,119)	\$	(115,694)	\$(1.079,845)	\$	(102,270)

The following table summarizes the amounts recognized in unrestricted net assets as of June 30, 2011 and 2010 (in thousands):

	2011	2010
	Other	Other
	Retirement Benefit	Retirement Benefit
	Plans Plans	Plans Plans
Net actuarial loss	\$ 853,992 \$ 6,456	\$ 1,011,752 \$ 796
Prior service cost (credit)	(178,228) 45,272	(10,899) 50,017
Amounts in unrestricted net assets	<u>\$ 675,764</u> <u>\$ 51,728</u>	<u>\$ 1,000,853</u> <u>\$ 50,813</u>

The estimated net loss and prior service credit for the retirement plans and postretirement plans that will be amortized from unrestricted net assets into net periodic benefit cost in 2012 are \$47.3 million and \$10.7 million, respectively.

The following table summarizes the amounts recognized in the consolidated balance sheets as of June 30, 2011 and 2010 (in thousands):

	20	11	2010		
	Retirement Plans	Other Benefit Plans	Retirement Plans	Other Benefit Plans	
Current liabilities Long-term liabilities	\$ (267,374) (490,745)	\$ (7,718) (107,976)	\$ (270,465) (809,380)	\$ (5,401) (96,869)	
Accrued benefit cost	\$ (758,119)	\$ (115,694)	<u>\$(1,079,845)</u>	\$ (102,270)	

The following table summarizes the weighted-average assumptions used to determine benefit obligations as of June 30, 2011 and 2010 (dollars in thousands):

	201	1	201	00	
	Retirement Plans	Other Benefit Plans	Retirement Plans	Other Benefit Plans	
To determine benefit obligations:					
Discount rate	5.90%	5.70%	6.00%	5,50%	
Rate of compensation increase	5.25%	5.25%	5.25%	5.25%	
To determine net periodic benefit cost:					
Discount rate	6.00%	5.50%	6.60%	6.80%	
Expected return on plan assets	7.50%	N/A	7.50%	N/A	
Rate of compensation increase	5.25%	5.25%	5.32%	5 32%	

The following table summarizes the components of net periodic cost recognized in the consolidated statements of operations and changes in net assets for 2011 and 2010 (in thousands).

	2011				2010			
	R	etirement Plans	1	Other Benefit Plans	Re	etirement Plans		Other Benefit Plans
Service cost	\$	183,712	\$	6,031	\$	145,726	\$	4,784
Interest cost		163,438		5,497		141,984		5,402
Expected return on plan assets		(133,205)		-		(105,407)		-
Net prior service cost (credit) amortization		(2,319)		5,935		(2,574)		5,898
Net loss (gain) amortization		61,965		210		46,311		(556)
Net periodic benefit cost	\$	273,591	\$	17,673	\$	226,040	\$	15,528

The following represents the fair value of plan assets, net, measured on a recurring basis as of June 30, 2011 and 2010 (in thousands). See Note 7 for the definition of Levels 1, 2 and 3 in the fair value hierarchy.

	Fair Value Measurements at June 30, 2011 Using Quoted Prices							ing
	i M In	in Active arkets for Identical astruments (Level 1)	Ol	gnificant Other oservable Inputs Level 2)	Un	gnificant observable Inputs Level 3)		Total alance at June 30, 2011
Assets								
Cash and cash equivalents	\$	249,136	\$		\$	-	\$	249,136
U.S. government securities		40,585		97,683		-		138,268
U.S. corporate bonds		-		94,554		-		94,554
U.S. equity securities		868,368		122,508		-		990,876
Foreign government securities		-		89,000		-		89,000
Foreign corporate bonds		_		3,702		-		3,702
Foreign equity securities		320,516		-		-		320,516
Asset-backed securities		-		5,808		-		5,808
Structured debt		-		18,386		-		18,386
Private equity investments		-		-		96,321		96,321
Multi-strategy hedge fund investments		-		-		84,782		84,782
Real estate		6,919		-		101,539		108,458
Collateral held under securities lending				204,466				204,466
program Other, including due from brokers for		-		204,400		-		204,400
unsettled investment trades and								
prepaid fund subscriptions				151,705		112,000		263,705
		1 105 524	ф.	_	ф.		<u> </u>	
Total assets	<u>\$</u>	1,485,524	\$	787,812	\$	394,642	<u>5</u>	2,667,978
Liabilities								
Payable under securities lending								
program	\$	_	\$	204,466	\$	_	\$	204,466
Other, including due to brokers for	Ψ		4,	201,100	4,		Ψ	201,100
unsettled investment trades				107 100				107 100
	_	<u>-</u>	_	187,188		_		187,188
Total liabilities	<u>\$</u>		<u>\$</u>	391,654	\$	-	<u>\$</u>	391,654
Fair value of plan assets, net	\$	1,485,524	<u>\$</u>	396,158	\$	394,642	\$	2,276,324

Fair Value Measurements at June 30, 2010 Using

	ii Ma Ia Ins	oted Prices of Active of A	Ol	gnificant Other oservable Inputs Level 2)	Un	ignificant observable Inputs (Level 3)		Total clance at une 30, 2010
Assets								
Cash and cash equivalents	\$	117,371	\$	-	\$	-	\$	117,371
U.S. government securities		60,730		90,286		-		151,016
U.S corporate bonds		-		95,955		-		95,955
U.S. equity securities		637,226		87,430		-		724,656
Foreign government securities		-		94,003		-		94,003
Foreign corporate bonds		-		5,196		_		5,196
Foreign equity securities		223,705		-		-		223,705
Asset backed securities		-		6,455		-		6,455
Structured debt		-		18,924		-		18,924
Private equity investments		_		-		69,193		69,193
Multi-strategy hedge fund investments		-		-		133,452		133,452
Real estate		3.019		-		85,992		89,011
Collateral held under securities lending program Other, including due from brokers for		-		203,306		-		203,306
unsettled investment trades				25,703		<u>.</u>		25,703
Total assets	\$	1,042,051	\$	627,258	\$	288,637	\$,957,946
Liabilities Payable under securities lending							_	
program Other, including due to brokers for	\$	-	\$	203,306	\$	-	\$	203,306
unsettled investment trades	_		_	76,841	_			76,841
Total liabilities	\$		\$	280,147	\$		\$	280,147
Fair value of plan assets, net	<u>\$</u>	1,042,051	<u>\$</u>	347,111	\$	288,637	\$	1,677,799

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Amounts payable under the securities lending program of \$203.3 million, and amounts due to and due from brokers for unsettled investment trades of \$76.8 million and \$25.7 million, respectively, at June 30, 2010, were previously omitted in the fair value measurements table above. The weighted-average allocation disclosure by asset category for 2010 reflects the percentage change impact of these balances.

For information about the valuation techniques and inputs used to measure the fair value of plan assets, see discussion regarding fair value measurements in Note 7.

The following table presents the change in the plan assets using significant unobservable inputs (Level 3) measured on a recurring basis in 2011 and 2010 (in thousands):

incustrod on a recurring busis in 2011 and 2010	(o months and of t			2011		
		Private Equity		lti-Strategy edge Fund	Real		
	Inv	estments	In	vestments	Estate	Other	Total
Balance at beginning of period Total realized and unrealized gains, net Purchases, issuances, sales and settlements	\$	69,193 14,034	\$	133,452 10,881	\$ 85,992 18,271	\$ - -	\$ 288,637 43,186
Purchases Sales		17,175 (4,081)		75,362 (134,913)	(2,724)	112,000	204,537 (141,718)
Balance at June 30	\$	96,321	\$	84,782	\$101.539	\$112,000	\$ 394,642
Change in unrealized gains, net as of June 30	<u>\$</u>	13,813	\$	2,677	<u>\$ 18,770</u>	<u>\$ -</u>	\$ 35,260
					2010		
		Private	Mu	lti-Strategy	-	·	
	j	Equity	H	edge Fund	Real		
	lnv	estments	Ĭn	vestments	Estate	Other	Total
Balance at beginning of period Total realized and unrealized gains,	\$	52,053	\$	88,684	\$ 69,616	\$ -	\$ 210,353
(losses), net Purchases, issuances, sales and settlements		6,087		12,068	(18,542)	-	(387)
Purchases Sales		12,169 (1,116)	·	32,777 (77)	35,981 (1,063)		80,927 (2,256)
Balance at June 30	\$	69,193	\$	133.452	\$ 85,992	<u>\$ -</u>	\$ 288,637
Change in unrealized gains (losses), net as of June 30	\$	6,021	<u>\$</u>	12,191	\$(18,222)	<u> </u>	<u>\$ (10)</u>

The following table summarizes the weighted-average asset allocations by asset category for the retirement plans for 2011 and 2010:

	Plan Assets a	nt June 30
	2011	2010
Cash and cash equivalents	11%	7%
U.S. government securities	6%	9%
U S. corporate bonds	4%	6%
U S. equity securities	44%	43%
Foreign government securities	4%	6%
Foreign equity securities	14%	14%
Structured debt	1%	1%
Private equity investments	4%	4%
Multi-strategy hedge fund investments	4%	8%
Real estate	5%	5%
Other, net	3%	-3%
Total	100%	100%

The asset allocation policy for the retirement plans for 2011 is as follows: domestic fixed income, 20% (which may include U.S. government securities, U.S. corporate bonds, asset-backed securities and/or structured debt); domestic equity 30% (including U.S. equity securities), international equity, 27% (including foreign equity securities); private equity, 10% (which may include private equity investments and/or structured debt); hedge funds, 11% (which may include hedge fund investments, asset-backed securities and/or structured debt); and real estate, 2%.

CHW's investment strategy for the assets of the retirement plans is designed to achieve returns to meet obligations and grow the assets of the portfolio longer term, consistent with a prudent level of risk. The strategy balances the liquidity needs of the retirement plans with the long-term return goals necessary to satisfy future obligations. The target asset allocation is diversified across traditional and non-traditional asset classes. Diversification is also achieved through participation in U.S. and non-U.S. markets, market capitalization, and investment manager style and philosophy. The complimentary investment styles and approaches used by both traditional and alternative investment managers are aimed at reducing volatility while capturing the equity premium from the capital markets over the long term. Risk tolerance is established through consideration of plan liabilities, plan funded status, and corporate financial condition Consistent with CHW's fiduciary responsibilities, the fixed income allocation generally provides for security of principal to meet near term expenses and obligations. Periodic reviews of the market values and corresponding asset allocation percentages are performed to determine whether a rebalancing of the portfolio is necessary

CHW's retirement plan portfolio return assumptions of 7.5% for 2011 and 2010, were based on the long-term weighted average return of comparative market indices for the asset classes represented in the portfolio and discounted for retirement plan expenses, and expectations about future returns.

The following benefit payments, which reflect expected future service, as appropriate, are expected to be paid (in thousands):

	Retirement Benefits	Other Benefits		
2012	\$ 85,320	\$ 7.718		
2013	107,003	8,563		
2014	124,050	9,057		
2015	142,463	9,415		
2016	162,888	10,864		
2017 - 2021	_1,169,945	62,605		
Total	\$ 1,791,669	\$ 108,222		

CHW maintains defined contribution retirement plans for most employees. Employer contributions to those plans of \$42.3 million and \$39.2 million for 2011 and 2010, respectively, are primarily based on a percentage of a participant's contribution.

Total pension and other postretirement expense under all plans was \$341.2 million and \$290.0 million for 2011 and 2010, respectively, and is included in salaries and benefits in the consolidated statements of operations and changes in net assets.

13. **DEBT**

Debt consists of the following at June 30, 2011 and 2010 (in thousands):

	2011	2010
Under Master Trust Indenture:		
Fixed rate debt:		
Fixed rate revenue bonds payable in installments through 2042;		
interest at 3.5% to 6.0%	\$ 2.176,089	\$ 2,221.771
Put bonds payable in installments through 2039; interest at		
4.5% to 5.0%	456,996	460,354
Senior secured notes payable from 2013 through 2018; interest	07.100	0.51.055
at 5.7% to 6.5%	374,192	374,075
Total fixed rate debt	3,007,277	3,056,200
Variable rate debt:		
Variable rate demand bonds payable in installments through 2036;		
interest set at prevailing market rates (0.1% at June 30, 2011)	640,700	645,200
Auction rate certificates payable in installments through 2042;		
interest set at prevailing market rates (0.2% to 0.9% at June 30, 2011)	324,400	327,900
Notes payable to banks under credit agreement payable in 2014;	100 800	100 (00
interest set at prevailing market rates (1.2% at June 30, 2011)	133,509	133,602
Total variable rate debt	1.098,609	1,106,702
Total debt under Master Trust Indenture	4,105,886	4,162,902
Other		
Various notes payable and other debt payable in installments		
through 2042; interest ranging up to 8.0%	37,526	26,301
Capitalized lease obligations	94,786	55,176
Total debt	4,238,198	4,244,379
Less current portion of long-term debt	(107,381)	(69,910)
Less demand bonds subject to short-term liquidity arrangements	(574,000)	(483,000)
Total long-term debt	\$ 3,556,817	\$ 3,691,469

Scheduled principal debt payments, net of discounts and considering obligations subject to short-term liquidity arrangements as due according to their long-term amortization schedule, for the next five years and thereafter are as follows (in thousands):

Long-term principal debt payments.	2011	
2012	\$ 107,38	1
2013	245,39	5
2014	305,93	6
2015	150,57	7
2016	99,84	6
Thereafter	3,329,06	3
Total	\$ 4,238,19	8

Master Trust Indenture – CHW issues debt under a Master Trust Indenture of the Obligated Group which requires, among other things, gross revenue pledged as collateral, certain limitations on additional indebtedness, liens on property, and disposition or transfers of assets, and the maintenance of certain cash balances and other financial ratios. CHW is in compliance with these requirements at June 30, 2011.

Debt Arrangements - Fixed Rate Revenue Bonds - CHW has fixed rate revenue bonds outstanding that may be redeemed, in whole or in part, prior to the stated maturities without a premium.

Put Bonds - CHW has put bonds outstanding with interest rates that were fixed at issuance for 3, 5, 7 and 10-year periods, with bond maturities that extend over longer terms. The bonds are not subject to optional redemption during the fixed rate period but are subject to a mandatory purchase on the respective put redemption date. Prior to a put redemption date, CHW will appoint a remarketing agent to convert the bonds to another fixed rate put period or to a short-term interest rate mode, or CHW will repay the par amount of the mandatory purchase. Put bonds have mandatory purchase dates of July 2011, July 2012 and July 2014 in the amounts of \$45.9 million, \$210.5 million and \$195.0 million, respectively.

Senior Secured Notes Payable – CHW has taxable, senior secured notes outstanding at a fixed interest rate that are due at their stated maturity from 2013 to 2018. Early redemption of the debt, in whole or in part, may require a premium depending on market rates.

Variable Rate Demand Bonds — Variable rate demand bonds ("VRDBs") are remarketed weekly and the VRDBs may be put at the option of the holders. CHW maintains bank letters of credit to support \$640.7 million of VRDBs. The letters of credit serve as credit enhancement to ensure the availability of funds to purchase any bonds tendered that the remarketing agent is unable to remarket.

The bank letters of credit supporting \$317.0 million of VRDBs were renewed in August 2010. The renewed letters of credit are set to expire in August 2013. The bank letter of credit supporting \$66.7 million was renewed in July 2010 and is set to expire in July 2013. In January 2010, CHW negotiated new bank letters of credit, supporting \$91.0 million of VRDBs, that expire in June 2012. CHW also has bank letters of credit supporting \$166.0 million of VRDBs that mature in November 2012. In the event that the remarketing agent is unable to remarket the VRDBs, the bond trustee will make a draw on the bank letters of credit and the tendered VRDBs will become bank bonds.

Certain bank bonds are subject to various repayment provisions ranging from two to five years with further accelerations upon successful bond remarketing, early redemptions, bond cancellations, conversion to a different interest rate mode, defaults, substitution of letter of credit providers or under certain other conditions.

VRDBs that are not remarketed and are subsequently funded by amounts drawn under the bank letters of credit and held as bank bonds are reported as extinguishments of debt and new borrowings, respectively, in the consolidated statements of cash flows. Repayments of these draws from proceeds of remarketed VRDBs are reported as extinguishments of debt and new borrowings, respectively, in the consolidated statements of cash flows.

Auction Rate Certificates – CHW has \$240.0 million of auction rate certificates ("ARCs") that are remarketed weekly and \$84.4 million of ARCs that are remarketed every 35 days. The certificates are insured by various bond insurers. Holders of ARCs are required to hold the certificates until the remarketing agent can find a new buyer for any tendered certificates.

Notes Payable to Bank Under Credit Agreement – CHW maintained a \$350.0 million syndicated line of credit facility during 2010 for working capital, letters of credit, capital expenditures and other general corporate purposes. In August 2010, the facility was renegotiated at an increased amount of \$480.0 million. During 2011 and 2010, the maximum amount outstanding under the syndicated credit facility was \$133.5 million and \$133.6 million, respectively. There were no letters of credit issued under this facility as of June 30, 2011 and 2010.

CHW has a \$20.0 million single bank line of credit facility for letters of credit. Letters of credit issued under this facility were \$12.9 million and \$16.7 million as of June 30, 2011 and 2010, respectively, but no amounts have been drawn.

Both credit facilities were renewed in August 2010 with credit facilities that expire August 2013.

2011 Financing Activity – During 2011, CHW renewed several letters of credit and the lines of credit as described above (see "Variable Rate Demand Bonds" and "Notes Payable to Bank Under Credit Agreement").

Subsequent to June 30, 2011, CHW issued \$106.5 million of tax-exempt fixed rate bonds with a premium of \$8 5 million to repay \$115.0 million of previously outstanding bonds. CHW also repaid \$30.5 million of outstanding bonds and the \$45.9 million put bond with a draw on its syndicated line of credit.

No loss on early extinguishment of debt was recorded related to these transactions.

2010 Financing Activity - During 2010, CHW issued \$139.5 million of fixed rate bonds and \$160.6 million of 3 and 5-year put bonds to refund \$306.3 million of previously outstanding bonds. The put bonds mature in installments through July 2029 and have mandatory purchase dates of 2012 and 2014. The proceeds used to refund previously outstanding VRDBs were placed in an irrevocable trust and the bonds were legally defeased.

In November 2009, CHW exchanged \$166.0 million of VRDBs for new VRDBs with identical terms to replace two letters of credit from a bank syndicate with two letters of credit from a single bank. The new letters of credit expire in November 2012.

CHW recorded a loss of \$2.7 million on the early extinguishment of debt related to these transactions.

In January 2010, CHW replaced two letters of credit from a bank syndicate with two new letters of credit from a single bank. The new letters of credit, which expire in June 2012, provide liquidity for \$91.0 million of VRDBs.

Fair Values of Debt - The fair value of CHW's debt is estimated based on the quoted market prices for the same or similar issues or on the current rates offered to CHW for debt of the same remaining maturities. The carrying value of CHW's debt is reported within the current portion of long-term debt, demand bonds subject to short-term liquidity arrangements and long-term debt, net of current portion, on the statement of financial position. The estimated fair values of CHW's long-term debt instruments as of June 30, 2011 are as follows (in thousands):

	Carrying Value		Fair Value		
Debt issued under Master Trust Indenture:					
Fixed rate revenue bonds	\$	2,176,089	\$	2,200,701	
Put bonds		456,996		477,683	
Senior secured notes payable		374,192		426,234	
Variable rate demand bonds		640,700		640,700	
Auction rate certificates		324,400		324,400	
Notes payable to bank under credit agreement		133,509		133,509	
Total debt under Master Trust Indenture		4,105,886		4,203,227	
Other		132,312	, <u>.</u>	132,312	
Total debt	\$	4,238,198	\$	4,335,539	

The fair value amounts do not represent the amount CHW would be required to expend to retire the indebtedness.

14. DERIVATIVE INSTRUMENTS

As of June 30, 2011, CHW has 16 floating-to-fixed interest rate swaps. CHW uses floating-to-fixed interest rate swaps to manage interest rate risk associated with outstanding variable rate debt. Under these swaps, CHW receives a percentage of LIBOR ranging from 57.00% to 58.96% plus a spread ranging from 0.13% to 0.32% and pays a fixed rate. Counterparties to these swaps are JPMorgan and Citibank for \$369.8 million and \$574.7 million, respectively, of the notional amounts outstanding.

In August 2011, CHW novated swaps with a notional amount of \$343.1 million from Citibank to Deutsche Bank.

In December 2010, CHW terminated four floating-to-fixed interest rate swaps prior to their scheduled maturities in the aggregate notional amount of \$201.3 million. The termination payment included the market value of the swaps of negative \$12.0 million which was recorded as a swap cash settlement in interest expense, net. Since swaps are recorded at market value, no gain or loss was recognized on this transaction.

Effective January 1, 2010, all remaining interest rate swaps in qualifying cash flow hedging relationships were dedesignated and discontinued hedge accounting treatment. From the date of dedesignation forward, the changes in fair value of these swaps are recorded in interest expense, net. As of June 30, 2011 and 2010, there were no interest rate swaps designated as cash flow hedging instruments.

In July 2009, certain interest rate swaps with an outstanding notional amount of \$306.3 million discontinued hedge accounting in anticipation of the related hedged bonds being refinanced in November 2009 with fixed rate debt and put bonds. As a result, changes in fair value of these swaps are recorded in interest expense, net.

The following table shows the outstanding notional amount of derivative instruments measured at fair value as reported in other accrued liabilities in the consolidated balance sheet as of June 30, 2011 and 2010 (in thousands).

	Maturity Date of Derivatives	Fixed Rate	Notional Amount Outstanding	Fair Value
Derivatives not designated as hedges	2026 2042	220/ 240/	June 3	
Interest rate swaps	2026 - 2042	3.2% - 3.4%	\$ 944,525 June 3	\$ (110,694) 0, 2010
Derivatives not designated as hedges Interest rate swaps	2023 - 2042	3.0% - 3.4%	\$ 1,161,075	<u>\$ (160,732)</u>

Changes in fair value of derivative instruments have been recorded for 2011 and 2010 as follows (in thousands):

		2011		2010
Loss recognized in unrestricted net assets (effective portion of hedges): Interest rate swaps	<u>\$</u>		<u>\$</u>	(2,002)
Loss reclassified from unrestricted net assets into interest expense, net, related to derivatives in cash flow hedging relationships:				
Interest rate swaps - net settlements Interest rate swaps - amortization		(9,05 <u>5</u>)		(5,187) (6,954)
Total	\$	(9,055)	\$	(12,141)
Gain (loss) recognized in interest expense, net:				
Changes in fair value				
Ineffective portion of hedges - interest rate swaps	\$	-	\$	111
Non-hedged derivatives - interest rate swaps		50,038		(50,292)
Total changes in fair value		50,038		(50,181)
Amortization of amounts in unrestricted net assets - interest				
rate swaps		(9,055)		(6,954)
Total	\$	40,983	\$	(57,135)

Of the amounts classified in unrestricted net assets as of June 30, 2011, CHW anticipates reclassifying approximately \$2.7 million of additional non-cash losses from unrestricted net assets into interest expense, net, in the next twelve months. Amounts in unrestricted net assets will be amortized into earnings as the interest payments being economically hedged are made.

Of the \$944.5 million notional amount of interest rate swaps held by CHW, \$240.0 million are insured and have a negative fair value of \$30.6 million at June 30, 2011. In the event the insurer (FSA) is downgraded below A2/A or A3/A- (Moody's/Standard and Poor's), the counterparties have the right to terminate the swaps if CITW does not provide alternative credit support acceptable to them within 30 days of being notified of the downgrade. If the insurer is downgraded below the thresholds noted above and CHW is downgraded below Baa3/BBB- (Moody's/Standard and Poor's), the counterparties have the right to terminate the swaps. In August 2011, at the request of CHW and Deutsche Bank, the counterparty to the swaps, the insurance was removed from swaps with a notional amount of \$80.0 million.

CHW has \$704.5 million of interest rate swaps that are not insured. While CHW has the right to terminate the swaps prior to maturity for any reason, the counterparties have the right to terminate the swaps at each five-year anniversary date commencing in 2013. The termination value would be the fair market value or the replacement cost of the swaps, depending on the circumstances. These interest rate swaps with a negative fair value of \$80.1 million at June 30, 2011, have certain early termination triggers caused by an event of default or a termination event. The events of default include failure to make payments when due, failure to give notice of a termination event, failure to comply with or perform obligations under the agreements, bankruptcy or insolvency, and defaults under other agreements (cross-default provision) The termination events include credit ratings dropping below Baa1/BBB+ (Moody's/Standard and Poor's) by either party and CHW's cash on hand dropping below 85 days. In August 2011, the counterparty's right to terminate the swaps at each five-year anniversary was removed on swaps with a notional amount of \$263.1 million. These swaps retain the certain early termination triggers caused by an event of default or termination event as described above.

CHW, under the terms of its Master Trust Indenture, is prohibited from posting collateral on derivative instruments.

15. TEMPORARILY AND PERMANENTLY RESTRICTED NET ASSETS

Restricted net assets as of June 30, 2011 and 2010, consist of donor-restricted contributions and grants, which are to be used as follows (in thousands):

	2011	2010
Equipment and expansion	\$ 146,704	\$ 134,331
Research and education	39,155	41,408
Charity and other	 140,644	 115,301
Total temporarily restricted net assets	\$ 326,503	\$ 291,040
Permanently restricted net assets	 107,947	 99,073
Total restricted net assets	\$ 434,450	\$ 390,113

The composition of endowment net assets by type of fund as of June 30, 2011 and 2010, is as follows (in thousands):

	June 30, 2011						
			Permanently				
	Unrestricted	Restricted	Restricted	Total			
Donor-restricted endowment not assets	\$ -	\$ 22,235	\$ 107,947	\$ 130,182			
Board-designated endowment net assets	17,856	<u> </u>		17,856			
Total endowment net assets	<u>\$ 17,856</u>	\$ 22,235	\$ 107,947	\$ 148,038			
		June 30), 2010				
		Temporarily	Permanently				
	Unrestricted	Restricted	Restricted	Total			
Donor-restricted endowment net assets	\$ -	\$ 14,833	\$ 99,073	\$ 113,906			
Board-designated endowment net assets	11,781	_		11,781			
Total endowment net assets	\$ 11,781	\$ 14,833	\$ 99,073	\$ 125,687			

Changes in endowment net assets during 2011 and 2010 are as follows (in thousands):

	Uni	estricted	Ten	30, 2011 aporarily estricted		rmanently estricted	Total
Endowment net assets, beginning of period	\$	11,781	\$	14,833	\$	99,073	\$ 125,687
Investment returns		418		2,079		56	2,553
Unrealized gains		3,706		3,444		7	7,157
Contributions		_		2		2,292	2,294
Change in interest in unconsolidated foundations		-		3,596		5,961	9,557
Appropriation of endowment assets for expenditure Transfers to remove or add to board-designated		(362)		(672)		-	(1,034)
endowment funds		1,474		-		672	2,146
Other		839		(1,047)		(114)	(322)
Endowment net assets, end of period	\$	17,856	<u>\$</u>	22,235	\$	107,947	\$ 148,038
	Unrestricted						
	Uni	restricted	Ter	30, 2010 nporarily estricted		rmanently estricted	Total
Endowment net assets, beginning of period	Umi \$	restricted 9,204	Ter	nporarily		-	\$ Total 104,666
Endowment net assets, beginning of period Investment returns			Ter Re	nporarily estricted	R	estricted	\$
		9,204	Ter Re	nporarily estricted 5,200	R	estricted 90,262	\$ 104,666
Investment returns		9,204 420	Ter Re	nporarily estricted 5,200 1,488	R	90,262 40	\$ 104,666 1,948
Investment returns Unrealized gains		9,204 420	Ter Re	5,200 1,488 2,038	R	90,262 40 28	\$ 104,666 1,948 3,114
Investment returns Unrealized gains Contributions		9,204 420	Ter Ro \$	5,200 1,488 2,038	R \$	90,262 40 28 5,576	\$ 104,666 1,948 3,114 5,576
Investment returns Unrealized gains Contributions Change in interest in unconsolidated foundations Appropriation of endowment assets for expenditure		9,204 420 1,048	Ter Ro \$	5,200 1,488 2,038 - 2,251	R \$	90,262 40 28 5,576	\$ 104,666 1,948 3,114 5,576 6,391
Investment returns Unrealized gains Contributions Change in interest in unconsolidated foundations Appropriation of endowment assets for expenditure Transfers to remove or add to board-designated		9,204 420 1,048	Ter Ro \$	5,200 1,488 2,038 - 2,251	R \$	90,262 40 28 5,576 4,140	\$ 104,666 1,948 3,114 5,576 6,391 (505)

Included in donor-restricted assets limited as to use are unconditional promises to give which are recorded using discount rates ranging from 3.0 % to 6 0% and are due as follows as of June 30, 2011 and 2010 (in thousands):

	2	011	2010	
Less than one year	\$	4,607 \$	12,782	
One to five years		14,962	10,850	
More than five years		818	452	
Less: allowance for uncollectible contributions				
receivable		(1,250)	(3,169)	
Total contributions receivable, net	\$	19,137 \$	20,915	

16. COMMITMENTS, CONTINGENT LIABILITIES, GUARANTEES AND OTHER

Litigation, Regulatory and Compliance Matters - General —The healthcare industry is subject to voluminous and complex laws and regulations of federal, state and local governments. 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. These laws and regulations include, but are not

necessarily limited to, matters such as licensure, accreditation, government healthcare program participation requirements, reimbursement laws and regulations, anti-kickback and anti-referral laws and false claims prohibitions, and in the case of tax-exempt hospitals, the requirements of tax exemption. In recent years, government activity has increased with respect to investigations and allegations concerning possible violations by healthcare providers of reimbursement, false claims, anti-kickback and anti-referral statutes and regulations, and quality of care provided to patients. In addition, during the course of business, CHW becomes involved in htigation. Management assesses the probable outcome of unresolved litigation and investigations and records contingent liabilities reflecting estimated liability exposure. Following is a discussion of matters of note.

Department of Justice and OIG Investigations – Since 2001, CHW facilities have been under investigation by the Department of Justice and Office of Inspector General of the U.S. Department of Health and Human Services ("OIG") for false or otherwise improper claims in connection with Medicare cost reporting, as well as claims for reimbursement of hospital and administrative services. In February 2011, CHW and the government entered into a settlement agreement in this matter which resulted in a payment to the government of \$9.2 million.

Additionally, CHW and/or its facilities periodically receive notices from governmental agencies, such as the Department of Justice or the OIG, requesting information regarding billing, payment, or other reimbursement matters. The health care industry in general is experiencing an increase in these activities, as the federal government increases enforcement resources and institutes new programs designed to identify areas of potential reimbursement irregularities. Based on the information received to date from the government, CHW does not presently have information indicating that these investigations or their resolution will have a material adverse effect on CHW. Nevertheless, investigations of this type and scope could lead to civil and/or criminal charges and material penalties or settlements. Consequently, there can be no assurance that the resolution of these matters will not adversely affect the financial condition or operations of CHW.

Medicare Certification – In August 2011, CMS informed Saint Francis Memorial Hospital ("SFMH") that it would take steps to terminate SFMH's Medicare provider agreement unless SFMH undertook certain corrective actions related to qualification for Medicare participation. The issues relate to three conditions of participation in Medicare, as well as an alleged violation of the Emergency Medical Treatment and Active Labor Act ("EMTALA") SFMH submitted to CMS its plans of corrective action which are typically followed by CMS validation surveys. The survey for the conditions of participation occurred in mid-September 2011. SFMH is awaiting the results. The validation survey for the EMTALA violation is expected to take place prior to November 2011.

In addition, in September 2011, CMS informed Mercy Hospital (Bakersfield) that it would take steps to terminate Mercy Hospital's Medicare provider agreement unless Mercy Hospital achieves compliance with eight conditions of participation. Mercy Hospital submitted its plan of correction in mid-September 2011 and expects to be surveyed by CMS within ninety days of that submission.

Wage and Hour Class Actions and Litigation – Federal law and many states, including California, impose standards related to worker classification, eligibility and payment for overtime, liability for providing rest periods and similar requirements. Large employers with complex workforces, such as hospitals, are susceptible to actual and alleged violations of these standards. In recent years, there has been a proliferation of lawsuits over these "wage and hour" issues, often in the form of large, sometimes multi-state, class actions. For large employers such as hospitals and health systems, such class actions can involve multi-million dollar claims, judgments and/or settlements.

In February 2008, a lawsuit was filed against CHW alleging violations of California state wage and hour laws and regulations. The lawsuit is fashioned as a class action on behalf of nurses and medical technicians employed at CHW's California facilities during the previous four years. CHW is evaluating the lawsuit and its implications. Extensive discovery has been taken by plaintiff's counsel, but it is too early to assess any liability exposure from the lawsuit, but lawsuits of this nature have the potential for a material adverse impact on the financial condition or operations of CHW.

Health Care Reform - In March 2010, President Obama signed the Patient Protection and Affordable Care Act ("PPACA") into law. PPACA will result in sweeping changes across the health care industry, including how care is provided and paid for. A primary goal of this comprehensive reform legislation is to extend health coverage to approximately 32 million uninsured legal U.S. residents through a combination of public program expansion and private sector health insurance reforms. To fund the expansion of insurance coverage, the legislation contains measures designed to promote quality and cost efficiency in health care delivery and to generate budgetary savings in the Medicare and Medicaid programs. Given that the final regulations and interpretive guidelines have yet to be published, CHW is unable to fully predict the impact of PPACA on its operations and financial results. There are multiple lawsuits challenging the constitutionality of major portions of PPACA; to the extent that any significant elements of the law are overturned, additional uncertainty is introduced into the prediction of operational and financial impacts. However, if the law is implemented as adopted, CHW management expects that in the coming years patients that were previously uninsured and unable to pay for care will have basic insurance coverage, and amounts for reimbursement for services from both public and private payers will be reduced and made conditional on various quality measures. Management of CHW is studying and evaluating the anticipated impacts and developing strategies needed to prepare for implementation, and is preparing to work cooperatively with other constituents to optimize available reimbursement.

Operating Leases – CHW leases various equipment and facilities under operating leases. Gross rental expense for 2011 and 2010 was \$111.1 million and \$112.6 million, respectively, which is offset by sublease income of \$2,3 million and \$3.9 million for 2011 and 2010, respectively. These amounts are recorded in purchased services and other on the accompanying statements of operations and changes in net assets.

Net future minimum lease payments under non-cancelable operating leases as of June 30, 2011, arc as follows (in thousands):

	Lease Payments		ublease ncome	Net Future Minimum Lease Payments	
2012	\$	70,052	\$ (2,474)	\$	67,578
2013		56,060	(1,692)		54,368
2014		42,028	(1,141)		40,887
2015		34,510	(940)		33,570
2016		29,446	(951)		28,495
Thereafter	1	30,144	 (13,094)		117,050
Total	\$ 3	362,240	\$ (20,292)	\$	341,948

Long-term Contracts and Agreements — In October 2008, CHW renegotiated a contract for information technology management services which specifies the types and levels of services, which can be modified by mutual agreement, and provides for monthly usage-based adjustments to fees. The agreement contains a mechanism for price adjustments should there be new affiliations or disaffiliations. The base fee under the contract is \$48.1 million per year which increases annually by inflation through October 2015, the term of the agreement. CHW may cancel the agreement without cause subject to significant penalties during the first five years of the contract, and without penalty during the last two years of the contract. Under the terms of this agreement, CHW expensed \$52.7 million and \$49.7 million in 2011 and 2010, respectively, in purchased services and other on the accompanying statements of operations and changes in net assets.

Effective in April 2007. CHW entered into an eight-year agreement for remote hosting and hot site hosting for certain electronic medical record technology for certain CHW facilities. The agreement specifies the types and levels of services, with additional schedules for additional services available for future consideration. Under the terms of the agreement, CHW paid \$12.1 million and \$11.1 million in 2011 and 2010, respectively, and has committed to pay \$40.8 million over the remainder of the contract term. The

agreement may be terminated for material breach including significant failure of service levels but may not be cancelled without cause.

In December 2007, CHW entered into a development agreement with the Sequoia Healthcare District ("District") whereby the District relinquished all control over Sequoia Health Services ("SHS") and agreed to provide funding of \$75.0 million toward the modernization, upgrading and seismic retrolitting of Sequoia Hospital. In return for the funding commitment, the District is entitled to 50% of Sequoia Hospital's annual Operating EBIDA exceeding a 9.3% annual Operating EBIDA Margin for 40 years. Operating EBIDA is defined as operating income adjusted for certain excluded items. CHW has committed to funding \$150.0 million toward the construction project and approximately \$15.0 million in additional funding is anticipated from philanthropic gifts. This transaction is subject to certain reporting requirements to the District as well as certain oversight and enforcement rights by the District. If the construction does not conform to certain agreed-upon specifications or is not completed consistent with the terms of the development agreement related to project timing, the District has the right to require the return of its \$75.0 million contribution. The construction project broke ground in September 2007, and CHW expects to meet the required construction specifications and time requirements.

Capital and Purchase Commitments – CHW has undertaken various construction and expansion projects. At June 30, 2011 and 2010, remaining capital commitments related to these projects were approximately \$254.6 million and \$362.6 million, respectively. Excluding the capital and long-term contract commitments discussed above, outstanding purchase commitments were approximately \$105.9 million and \$61.3 million at June 30, 2011 and 2010, respectively.

Guarantees - CHW has guaranteed the indebtcdness of other organizations in the amount of \$33.8 million and \$40.3 million as of June 30, 2011 and 2010, respectively.

CHW enters into physician recruitment agreements with certain physicians who agree to relocate to its communities to fill a need in the hospitals' service areas and commit to remain in practice there. Under these agreements, CHW makes loans available to the physicians that are earned over the period the physicians fulfill their commitment to the community, which is typically three years, or are repayable by the physicians. The maximum potential amount of future undiscounted payments CHW could be required to make under these guarantees is \$19.8 million and \$20.8 million as of June 30, 2011 and 2010, respectively. CHW recorded \$13.2 million and \$13.0 million in other current liabilities as of June 30, 2011 and 2010, respectively, and \$6.6 million and \$7.7 million in other long-term liabilities as of June 30, 2011 and 2010, respectively, related to these guarantees.

Seismic Standards – The State of California issued seismic safety standards in 1994 which have been amended on several occasions since then. The regulations call for more stringent structural building standards to be in place by January 2013 for buildings remaining in acute care service beyond that date, with a two-year extension in most circumstances by meeting certain milestone dates. These standards affect 14 of CHW's facilities in California. All of CHW's other California facilities already meet the standards, are not subject to the standards, or will not be used for acute care services beyond 2013.

CHW estimates that the remediation costs required to meet the standards for projects specific to structural and non-structural performance in effect until 2030 is approximately \$420.0 million. Management has initiated planning and design efforts at all facilities to meet the deadlines. California law currently imposes a separate more rigorous set of seismic standards for acute care facilities effective in 2030.

17. CATHOLIC HEALTHCARE WEST, SUBORDINATE CORPORATIONS AND SUBSIDIARIES

Following is a list of corporations and subsidiaries that are included in the accompanying consolidated financial statements for 2011 Unless otherwise indicated, such entities are nonprofit corporations. The Obligated Group Members are denoted by an asterisk (*). Unless otherwise indicated, subsidiaries are not Obligated Group Members.

Catholic Healthcare West*

Operating dba's of Catholic Healthcare West

Arroyo Grande Community Hospital

California Hospital Medical Center - Los Angeles

Chandler Regional Medical Center

Dominican Hospital

French Hospital Medical Center

Glendale Memorial Hospital and Health Center

Marian Medical Center

Mercy General Hospital

Mercy Gilbert Medical Center

Mercy Hospital (Bakersfield)

Mercy Hospital of Folsom

Mercy Medical Center (Merced)

Mercy Medical Center Mt Shasta

Mercy Medical Center Redding

Mercy San Juan Medical Center

Mercy Southwest Hospital

Methodist Hospital of Sacramento Northridge Hospital Medical Center

Saint Mary's Regional Medical Center

Sequosa Hospital

St Bernardine Medical Center

St Elizabeth Community Hospital

St. John's Pleasant Valley Hospital

St John's Regional Medical Center

St Joseph's Behavioral Health Center

St Joseph's Hospital and Medical Center

St Joseph's Medical Center of Stockton

St Mary Medical Center

St Mary's Medical Center

St. Rose Dominican Hospital Rose de Lima Campus

St. Rose Dominican Hospital Siena Campus

St. Rose Dominican Hospital San Martin Campus

Woodland Memorial Hospital

Catholic Healthcare West Hospital and Professional

Liability Self-Insurance Trust (California trust)

Catholic Healthcare West Workers' Compensation

Self-Insurance Trust (California trust)

CHW Insurance Ltd (Cayman Island corporation)

Bakersfield Memorial Hospital*

CHW Medical Foundation*

Community Hospital of San Bernardino*

Mercy Senior Housing, Inc *

Saint Francis Memorial Hospital*

Sierra Nevada Memorial-Miners Hospital*

Arroyo Grande Community Hospital Foundation

California Hospital Medical Center Foundation

CHW Foundation East Valley

Community Hospital of San Bernardino Foundation

Dominican Hospital Foundation

French Hospital Medical Center Foundation

Glendale Memoriai Health Foundation

Marian Medical Center Foundation

Mercy Foundation, Bakersfield

Mercy Medical Center Merced Foundation

Northridge Hospital Foundation Saint Mary's Foundation

San Gabriel Valley Medical Center Foundation

St Bernardine Medical Center Foundation

St Francis Foundation of Santa Barbara

St John's Healthcare Foundation (Oxnard and Pleasant Valley)

St Joseph's Foundation (Phoenix)

St Joseph's Foundation of San Joaquin

St Mary Medical Center Foundation

St Mary's Medical Center Foundation

St Rose Dominican Health Foundation

The Congenital Heart Foundation CDS of Nevada, Inc. (taxable)

Dominican Health Services

Dommican Oaks Corporation

Glendale Memorial Services Corporation (taxable)

Golden Umbrella

Inland Health Organization of Southern California (taxable)

Management Services Organization of Santa Maria, Inc.

(taxable)

Marian Community Clinics, Inc

Marian Health Services, Inc. (taxable)

Mark Twain St Joseph's Healthcare Corporation

Saint Mary's Healthfirst (taxable)

Saint Mary's Multi-Specialty Clinic, Inc. (taxable)

Saint Mary's Outpatient Surgery Center at Galena

Saint Mary's Preferred Health Insurance Company, Inc.

(taxable)

Shasta Senior Nutrition Program

St Francis Foundation, LLC

St Francis Hospital Support Corporation

St Mary Catholic Housing Corporation

St. Mary Health Ventures, Inc (taxable)

St Mary Professional Building, Inc. St John's Regional Imaging Center, LLC

TrinityCare, LLC

TrunityCare Infusion Services (taxable)