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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

2010

Open to Public Inspection

B Che	eck if ap	pplicable C Name of organization Hartford Hospital		-2011		D Emplo		lentification number
	ne char	Doing Business As				E Teleph		
	ıal retur		x if mail is not delivered to street address)	I Por	om/suite			
Ten	mınated	d 80 Seymour Street PO Box 503	,	Roc	om/suite			-6200 s \$ 1,163,585,472
	ended r	return City or town, state or country, Hartford, CT 061025037 n pending	and ZIP + 4			G Gloss I	есетр	5 \$ 1,103,303,472
		F Name and address o	f principal officer	H(a) Isthisa	group return fo	or affilia	tes? Yes V No
		80 Seymour Street Hartford, CT 06102		Н(affiliates inc		☐ Yes ☐ No
I Tax	k-exem	npt status) 4 (insert no)	Н(_	exemption		
J W	ebsite	:► HARTHOSP ORG						
K Form	n of org	ganization 🔽 Corporation 🗀 Trust 🦳 Asso	ciation Other ►	<u>'</u>	Year of for	mation 185	4 M	State of legal domicile CT
	rt I	Summary						-
Activīties & Governance	Jefferson House, a 104-bed long-term care facility. The hospital's active medical staff includentists within 17 departments. In 2011, the hospital had 40,674 discharges and 95,567 deposition of the State's only Air Ambulance System (LifeStar). 2 Check this box if the organization discontinued its operations or disposed of more than Number of voting members of the governing body (Part VI, line 1a)							ssets 14 10 7,944
		•	• •			⊢	6	1,361
			om Part VIII, column (C), line 12 . me from Form 990-T, line 34	•		\vdash	7a 7b	1,809,179
			······································		Prior	Year		Current Year
a.	8	Contributions and grants (Part VI	🗀		42,109,4	52	39,885,454	
Revenue	9		II, line 2g)	_		63,898,0	-	911,673,420
Нэу	10 11		lumn (A), lines 3, 4, and 7d) (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	_	10,341,574 25,439,041 941,788,138			26,731,204 7,662,857
	12	Total revenue—add lines 8 throug	h 11 (must equal Part VIII, column (A					985,952,935
	13		Part IX, column (A), lines 1–3)	. [70,0	_	1,390,713
	14		art IX, column (A), line 4)		0			
82	15	Salaries, other compensation, emp	ployee benefits (Part IX, column (A), lii	nes	4	99,138,8	559,021,985	
Expenses	16a	Professional fundraising fees (Par	t IX, column (A), line 11e)	. [0	0
ਡੋ	b	Total fundraising expenses (Part IX, colun	nn (D), line 25) ▶ 1,312,918					
	17		(A), lines 11a-11d, 11f-24f)	_		25,027,4	-	389,765,452
	18 19	·	(must equal Part IX, column (A), line 2 line 18 from line 12	· —		24,236,3 17,551,7	-	950,178,150
± 07	19	Nevenue 1635 Expenses Subtract	and to nom me 12		Beginning	of Curren		35,774,785 End of Year
က္က		Total assets (Part X, line 16) .			1,0	21,484,9	68	1,166,702,504
ssets o Jakance	20		4	85,865,7	40	659,754,390		
et Assets o ind Bafance	20 21	Total liabilities (Part X, line 26)		• ⊢		00,000,		
et Assets o nd Bafance		Total liabilities (Part X, line 26)		• _		00,000,		=======================================
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Form 990 (2010)

Statement of Program Service Accomplishments Part III

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

Briefly describe the organization's mission

To offer comprehensive services in an environment where innovation and teaching are integral to care, where we are proud to serve all, where meeting the challenge of complex medical needs is viewed as a defining competency, and where quality and safety of care are a constant

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ▼ Yes
 No

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

3

 $\hbox{\it Did the organization cease conducting, or make significant changes in how it conducts, any program}$ ┌ Yes ┌ No If "Yes," describe these changes on Schedule O

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

128,515,522) (Revenue \$ 4a) (Expenses \$ including grants of \$

CardiologyAt the completion of fiscal year 2011 (FY2011), there were 67 medical staff members in Hartford Hospital's Division of Cardiology. The staffing was comprised of fourteen full-time hospital-employed faculty cardiologists, 44 private practice cardiologists, seven full-time employed hospitalists and two doctoral-level researchers Additions to the Cardiology division in FY 11 included Dr. Meir Friedman to Electrophysiology. The Cardiology division members did 58 publications in peer-reviewed journals in 2011 Dr Jeffrey Kluger received the Distinguished Service Award from the Hartford Hospital Medical Staff which recognizes a physician for consistent, extraordinary contributions to the health and welfare of our community Dr Detlef Wencker received the Young Practitioner Award He was honored for his leadership, excellence in clinical care and research, innovation, teaching, advocacy and activism. Dr. Justin Lundbye was named by Hartford Business Journal as one of Hartford's "40 Under Forty" Jeanne Bodett, RN, BSN, MBA, Manager of the Cath Lab, was awarded the President's Award from the Connecticut Nurses' Association Barbara Cordts, RN, MSN, CCRN, a senior critical care nurse for the Cardiothoracic Surgical Intensive Care Unit, was awarded the New England Regional Finalist in the Nursing Spectrum Nurse Excellence program in the Teaching Category Sebastiano Golino, RN, an intensive care nurse for the Cardiac Care Unit, was the first recipient of the Department of Nursing Caring Award Total cardiology full-time equivalent employees including patient care units for 2011 were 360 versus an actual of 345 in 2010 Medical Cardiology Non-ICU units had 5,016 discharges, 264 less than 2010 Patient days were 21,565, 1,060 less than 2010 Medical Cardiology ICU discharges were 1,209 (75 less than 2010) with 4,087 days (67 less days than 2010) In FY 2012, the Division expects increases in the volume of transcatheter aortic valve replacement (TAVR), Ventricular Assist Device (VAD) patients, heart transplants, heart failure patients, electrophysiology device placements, and LDL Apheresis DIVISION OF CARDIOLOGY PATIENT CARE ACTIVITIESCardiac Catheterization Laboratory * 3871 total cases 3,383 Coronary, 488 Peripheral* Coronary 2,101 Diagnostic, 1,282 Interventional -9% increase in Cardiac Interventions -10% decrease in Cardiac Diagnostic Studies* Peripheral 488 total cases, 163 diagnostic, 325 Interventional -21% increase in peripheral cases performed in the Cardiac Catheterization Lab* 95% of all cardiac interventions were stented, 76% received drug-eluting stents and 24% bare metal. This was a 6% increase in drug-eluting stents from 2010 * The PCI length of stay (LOS) was 3 42 days, slightly up from previous year (3 32) ACC NCDR average is 2 92 days The "Emergent" case status for PCI's at Hartford Hospital was 25 2% compared to 15 2% for similar hospitals (source Q2, 2011 ACC NCDR Report) * 12 3% of all PCIs were by radial access, up from 7 9% in FY2010 16 5% (1 in 6) cases were done via the radial artery for Diagnostic Caths * 44 3% of all cardiac cases were elective, a 7 7% drop from FY2010, 42 2% were urgent, a 5% increase, 34% were emergent, up 2 4% *The percent of patients transferred to the Cardiac Lab from our partner hospitals continues to increase In FY2011 it was 26%, up 3% from FY2010 Cardiac Electrophysiology Laboratory* For FY2011, there were a total of 1,105 cases performed. This represented an overall 30% increase in total cases compared to FY2010. *There were 679 patient visits. This represented an overall 12% increase in patient visits compared to FY2010. *There were 230 cardiac ablations, this representing a 26% increase from FY2010. *For the year, 261 implantable cardioverter defibrillator (ICD) cases were performed. Of these, 17% were ICD generator changes, 19% were biventricular ICD generator changes, 27% were initial biventricular ICD implants, and 37% were initial single or dual chamber ICD implants * 116 pacemaker (PM) cases were performed, a 45% increase from FY2010 Of these, 14% were PM generator changes, 10% were initial biventricular PM implants, and 76% were initial single or dual chamber PM implants * 16 laser lead extractions were performed, this represents a 43% decrease from FY2010 * 42 lead cases other than laser, were performed, this represents a 27% increase from FY2010 * 135 Lead / Device explants were preformed, this represents a 25% increase from FY2010 Nuclear Cardiology / Exercise Stress Test LaboratoriesThere was a total 3,522 nuclear cardiology imaging studies performed at Hartford Hospital in FY2011 Cardiac PET represented 536 of the total procedures. Among the satellite nuclear cardiology programs, there were 122 scans performed in Avon, 337 scans performed in Glastonbury, 631 performed at Retreat Avenue, 225 scans performed at Blue Back Square, West Hartford, and 173 performed in Farmington Overall, FY2011 nuclear cardiology volume for both the Hospital and satellites (including Cardiac PET) totaled 4,155 procedures. This volume represented a decrease of approximately 9.0% compared to FY2010. This decrease was due to a recall of the PET isotope and loss of physician coverage at the satellites. There were a total of 2,986 stress tests performed at Hartford Hospital in FY2011. Of these, 362 were standard ETT, 2088 were combined with perfusion imaging, and 536 were with Cardiac PET EchocardiographyIn FY2011, the Hartford Hospital Echocardiography Lab performed 9381 transthoracic studies, 605 transesophageal echocardiographic studies, and 173 stress echocardiograms. These totals represented a 2% increase compared to last year's total. Full-time sonographer staff has increased from 6.5 to 7. Approximately 48% of transthoracic studies were performed at the bedside (a 16% increase from last year's totals and a 40% increase over the last 2 years). 13% of studies were performed on outpatients. The number of late discharges per month due to the Echo Lab continued to remain in the single digits. New services included the establishment of a weekly left ventricular assist device imaging clinic in conjunction with the heart failure service. The lab has also begun offering diastolic stress echocardiography on a routine basis. Cardiac Surgery * 762 cases were done in FY2011, a 1 7% increase from FY2010* There were 390 CABG-only cases, 126 CABG + Valve procedures, 159 Valve only surgeries. There was a slight decrease in CABG surgeries but a compensatory increase in Valve surgeries * 51% of all CABG only surgeries were off pump, a 2% decrease from prior year * Hartford Hospital was in the top 5% in the United States for CAB and CAB/Valve volume and top 10% for Valves. (Source. STS Fall 2011 report.)* Our CABG mortality was 1.3% and our risk adjusted Observed to Expected Mortality ratio continues to go down (which is favorable) Our fall 2011 report showed the ratio at 0.91. In other words our outcomes are better then expected (Source STS Fall 2011 Report)* Hartford Hospital maintained our 2 star (average) rating for avoidance of mortality and morbidity on the National Quality Forum (NQF Measures) * The LOS for isolated CABG went up slightly from the previous FY by almost one day (0.8) * 19 Heart Transplants were done at Hartford Hospital in FY2011, the same as in FY2010 Advanced Heart Failure and Transplant CenterThe Advanced Heart Failure Infusion Center (AHFC) continues to provide successful outpatient therapy for decompensated heart failure patients reducing length of stay, preventing re-admission and allowing patients to stay in the comfort of their own home. Outpatient Infusion Therapy remains to be very popular and highly effective in stabilizing patients with acute heart failure. syndrome During FY2011, a total of 1,278 infusions were performed (40 more than 2010) A number of heart failure (re)admissions to the hospital were prevented due to a new program initiated by Dr Jason Gluck and the Emergency Room Patients with heart failure are screened, and if they meet certain criteria they are assessed for treatment in the Infusion Center rather than being admitted. This has provided better patient care as well as decreased readmissions for this heart failure population. The Hartford Hospital Mechanical Circulatory Support ("VAD") Program has shown continued growth within the last year with a 70% increase of implants from 2010 More than 20 VAD patients are managed in the outpatient setting, many of those as destination therapy (DT) with excellent quality of life and

) (Expenses \$ 48,570,979 including grants of \$) (Revenue \$ The Institute of Living (Hartford Hospital's Department of Psychiatry) is referred to as the IOL. The Substance Abuse and Mental Health Services Administration

the many end-stage HF patients that are not eligible for heart transplantation. Part III, Line 4a Continues on Sch O

functional capacity. This DT Program is a significant milestone in the therapy for advanced heart failure and has the potential for further future growth considering

(SAMHSA) estimates that in 2011 less than 40% of individuals experiencing a mental illness received treatment and less than 60% of those with a severe mental illness received any psychiatric services. The IOL's efforts to meet the demand for services led the Hospital to expand ambulatory services in several program areas (described below) and to improve throughput from our psychiatric emergency service and consultation/liaison service to our inpatient beds. Our multi-year "culture change" program has led to such patient-focused innovations as the introduction of comfort rooms, hourly rounding on all inpatient units, and significant reductions in the use of seclusion and restraint. The IOL's residency programs continued to thrive with an outstanding class of new residents in both our general adult and child and adolescent residencies. Our research programs had an excellent year as well with over \$5 million in new grants awarded and 100 publications generated. As we enter 2012, we look forward to the many challenges that will face our system of care and we anticipate and accommodate the needs of health care reform Statistical Data Total discharges for the year were 4,242. The number of adult day treatments was 8,590. The IOL treated 1,713 patients for eating disorder, 4,107 patients for Schizophrenia rehabilitation, and 2,980 patients went through the DBT program. The average length of stay was 8.7 days and the average daily census was 100 9 35% of admissions were Hartford residents, while the rest were from other areas within the State of Connecticut Patient Care Activities and Program Development Patient care activities and program development were guided by the IOL's internal goals for 2011 Highlights included a focus on significant growth in two ambulatory programs, the Young Adult Program and the Center for Cognitive Behavioral Therapy. Another significant development was the consolidation of The Webb School Bloomfield campus into the Grace Webb School at the IOL. The consolidation provided significant cost savings and creative opportunities for programming within the school. Our Health Psychology Service continued to expand with strategic decisions to staff psychology positions within Hartford Hospital's Transplant Program and the Nascent Epilepsy Program Quality and Performance Measures For the year, the department focused on achieving its internal goals and as a result saw a significant reduction in falls with injury. We continued our program implementation of the IOL's Best Practices, establishing lomentati achievement of the IOL's multi-year culture change program has been the reduction in the use of seclusion and restraint. In 2011, we reduced the number of unique individuals secluded or restrained by 11.5%. This was accompanied by significant reductions in the number of hours spent in seclusion/restraint. A number of other initiatives touched on service excellence/quality or financial strength. We implemented hourly rounding on all inpatient rooms between 7.00 a.m. and 11.00 p.m. We implemented an electronic format for our Emergency Department - IOL handoff and revised and standardized an inpatient satisfaction tool Research, Training and Education Research. The research enterprise at The Institute of Living is organized in four specialized centers. The Olin Neuropsychiatry Research Center, directed by Godfrey Pearlson, M.D., focuses on studies of the major psychiatric disorders using brain imaging and electrophysiological techniques along with genetic analysis. The Anxiety Disorders Center, directed by David Tolin, Ph.D., researches treatments for Obsessive-Compulsive Disorder (OCD), Panic Disorder, Compulsive Hoarding and other disorders on the anxiety spectrum. The Braceland Center for Mental Health and Aging (Karen Blank, M.D., Director) addresses issues related to memory in normal aging and in individuals with Alzheimer's Disease or other dementing processes. Finally, the Burlingame Center for Psychiatric Research and Education directed by John Goethe. M.D. focuses on outsomes and best processes. Education, directed by John Goethe, M D , focuses on outcomes and best practices research as well as pharmacogenetics, metabolic syndrome and treatment resistant mood disorders Our research centers continued to perform well in competitive funding with a total of \$5.5 million awarded to IOL researchers. Three significant projects were funded by the newly established Hartford Healthcare Research Institute. Of these, two reflect a growing trend towards collaboration with other Hartford Hospital Departments. One of these studies, the Neurobiology of Obesity, collaborates with bariatric surgeons Darren Tishler, M.D. and Pavlos Papasavas, M.D. The other, on presurgical mapping for awake craniotomy, is in collaboration with the Chief of Neurosurgery, Inam Kureshi, M.D. The success of our research enterprise can be measured through grants awarded, the dissemination of important findings and the synergy between our research efforts and our training and clinical programs. IOL researchers and scholars published 108 articles, book chapters, and books. Training The IOL's three psychiatry residency programs are complemented by psychology internship and post-doctoral programs as well as training opportunities in psychiatric social work, nursing and occupational/vocational therapies. Our training programs remain extremely competitive Continuing Education. The mission of the Institute's Continuing Medical Education program is to support the hospital's quality care goals by promoting continuous improvement in clinical practice through education. The Institute has received the "Excellence in CME Award" from the CT State Medical Society in each of the last 13 years. Our continuing education program consisted of weekly presentations including Ground Rounds, Case Conferences and Psychopharmacology/Neuroscience Rounds

24,991,460 including grants of \$

IMAGING CENTER AT HARTFORD HOSPITALFor fiscal year 2011 (FY 11), there were approximately 189 full time employees in the Radiology Department The Department remained committed to developing solutions to maintain and grow the expertise it offers to Hartford Hospital's patients, physicians, and community healthcare providers Hartford Hospital and Jefferson Radiology under Connecticut Imaging Partners have a joint ventured MRI in Wethersfield and an office at 100 Hazard Avenue in Enfield, CT, a successful full service imaging office. The volume for MRI patients in this office was 1275 patients. This relationship continued to flourish with other prospects on the horizon. During the year, the Department experienced a drop in the number of activities performed. The decrease in the listed number of procedures performed was actually due to changes in how exams are bundled and coded. In actuality, the Department increased the services provided as well as increased the number of patients served. The number of procedures performed for FY 11 was 186,383 which represented a 3% increase from FY 10. Trends in Frequency of Operations/Procedures General radiology procedures increased from 33,100 to 36,747 for an 11% increase MRI procedures decrease from 9,977 to 9893 CT procedures decreased from 43,826 to 41,322 which is a 5 71% decrease, but patients increased from 26,350 to 28,749 which again is the result of CPT codes being combined Patients increased by 9 1% Fluoroscopy volumes increased by 13 54%, which was an additional 560 procedures or 396 patients Nuclear Medicine nationally has continued to decrease Our decrease was 2 09% ED imaging increased from 40,886 in FY 10 to 43,916 for a 7 4% increase Ultrasound volume increased by 11 47% from 11,487 to 12,805, this was an additional 856 patients. Mammography showed a growth of 14 92% which was an increase of 1453 procedures for FY 11 There were 802 more patients than in the previous year OR imaging showed growth which was more outpatients than inpatients. The increase was 10 3% or 740 more procedures. The number of Interventional Radiology patients increased by 4 18%. The number of Interventional Neuro Radiology volume increased by 32 8%. Diagnostic procedures increased by 33 9% while therapeutic cases increased by 30 9%. In August 2011, a Pipeline Stent procedure was performed at Hartford Hospital by Drs. Gary Spiegel, Martin Ollenschleger and Stephan Ohki. This was a first in New England Medical Staffing The following Radiologists joined the department staff over the past year Dr Anu Bansal Neuroradiologist, trained at Beth Israel and Brigham and Women's hospital, with Fellowship training at Mallinckrodt Institute Dr Niv Decalo General Radiologist completing his Residency at Hartford Hospital Dr Prachi Dubey General Radiologist trained at BI Deaconess and Johns Hopkins Dr Joanna Jacunski Completed her Diagnostic Radiology Residency at Hartford Hospital followed by a Vascular Interventional Fellowship at Brigham & Women's Hospital Dr Diana James Diagnostic Radiology and Breast Imaging Fellowship at Beth Israel Deaconess Medical Center Dr Ryan Kaliney General Radiology Residency followed by MSK Fellowship at University of Virginia Health System Dr David Marinelli Trained in General Radiology followed by Angio/Interventional Fellowship at Hospital of University of Pennsylvania Department Staffing Jefferson Radiology and Hartford Hospital Department of Radiology continue to attract outstanding talent. Once again our doctors are recognized in the 'Best Docs of Greater Hartford publications with 13 of the 17 named Radiologists being members of Jefferson Radiology and on staff at the hospital. This year for the first time, Connecticut Magazine listed the Top Radiologists in CT and Drs. Markowitz and Cronin were recognized in that publication. Dr. Thomas Farquhar will be joining Jefferson Radiology and the Department at Hartford Hospital in January 2012. He completed his training at UCSF with a Fellowship in MRI at UCSD. His specialty is Oncologic Imaging and will bring great expertise and vision to our program. Technology Assessment Radiology's technologic focus during the past year was directed toward improving radiography and interventional radiology (IR) quality and reducing patient radiation dose by upgrading radiography and IR systems to state-of-the-art flat panel digital radiography (DR)-based systems. The radiography DR project is being implemented as a 2-phase, 2-year project to include the following 1) Replace all four radiographic rooms (two in ED, two in Bliss) with flat panel DR systems 2) Replace the portable radiography units with three fully integrated DR-equipped portable units 3) Upgrade trauma radiography capability to DR. The two ED rooms were renovated this fall, and equipped with dual flat panel DR detectors systems. Both rooms are now in full clinical use. Bliss radiography room expansions and renovations for DR installation begin January 2, 2012. The 1st DR portable unit is also now in clinical use, the 2nd and 3rd units are due to arrive the last week of December Negotiations have been completed with Konica to upgrade trauma radiography to flat panel DR. Purchase order award is imminent with installation scheduled for early 2012 Two state-of-the-art Siemens interventional radiology (IR) suites were installed during this past summer. These systems improve image quality by using flat-panel detectors rather than image intensifiers, and provide several new technologies for interventional guidance and to acquire CT-like images from rotational acquisitions. Also, in line with the Hospital's patient radiation dose reduction initiative, these new IR systems provide sophisticated dose-minimizing capabilities such as automatic beam filter adjustment and collimation on last-image-hold Of particular note, this past year is the near fruition of a long-sought overhaul of our mobile mammography program The previous program, using film-based unit transported by a mini-van, is to be replaced with a fully self-contained bus-based system with a modern full-field digital mammography unit. This new program, jointly proposed and developed by HH Radiology and HH Partnership for Breast Care, received enough private donations to acquire the required equipment (vehicle, digital mammography unit and workstation), to build a home base on the Newington campus, and to gear up for beginning the new service in February of 2012. The new service will provide a major improvement in the quality of the service. One other technological advancement implemented during this past year was replacement of the film-based specimen radiography unit with a digital specimen unit. The film-based unit introduced significant delays into the operating room workflow, because specimen radiographs had to be taken to the radiology mammography area for development and the resulting films taken back up to the surgeons in the OR. This process was often repeated 2-3 times per case, adding up to an hour of surgical time. The new digital specimen unit provides instant image availability via the fast digital acquisition (a few seconds) and transmittal via PACS to surgeons Neuroradiology The Department continued to assess radiation dose in all our imaging areas including Neuro CT imaging where it has lowered the doses as much as possible without compromising image quality. We continue to deploy eye and thyroid shielding whenever possible. Multidisciplinary meetings and conferences are continuing including Neuro-oncology, Neurology and ENT services in addition to Neuro-oncology and Neurosurgery. Ear, Nose & Throat (ENT) The biweekly Head and Neck conference continues to be strongly attended by ENT physicians from the region in addition to members of the Dentistry, OMF and Radiology Departments. Teleconferencing is in place with the University of Connecticut staff. New imaging protocols are continually evaluated with plans to investigate the utility of diffusion MRI in the detection of pathological nodal disease in cases of recurrent malignancy CT Imaging A project to standardize all CT imaging protocols between Hartford Hospital and Jefferson Radiology outpatient offices was completed this past spring, bringing the highest quality standardized imaging to our communities. We continue to review our radiation dosages and adjust our systems and protocols whenever possible to provide the lowest imaging doses without significantly compromising image quality. We recently tested the use of a portable head CT system which will allow us to bring CT imaging directly to patients in the ICU setting thereby improving patient safety and providing more effective use of our clinical staff on the intensive care units.

Other program services (Describe in Schedule O) See also Additional Data for Description

820,116,420

art IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? $^{f g}$	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^{\bullet}	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? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	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^{\bullet}	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VIII, 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	Yes	
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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	, , , , ,	14a	Yes	
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	Yes	
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? <i>If</i> "Yes," complete Schedule G, Part I (see instructions)	17		N o
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	Yes	
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	Yes	
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		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	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	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	163	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	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		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	Yes	
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			
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		N o
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 Schedule O contains a response to any question in this Part V \cdot . \cdot . \cdot . \cdot . \cdot . \cdot . $$. [
			Yes	No
3	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 853			
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	1b 0	1		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
1	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			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
1	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? <i>If "No," provide an explanation in Schedule O</i>	3b	Yes	
1	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	Yes	
b	If "Yes," enter the name of the foreign country 🕨 BD			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b		5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	36		
		5c		
1	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).	_	.,	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	70		NI.
d	file Form 8282?	7c		No
_	za yez, maisate ane namber er remie ezez meu daring ane yezi za			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
L	required?	7g		
n	Form 1098-C?	7h		
	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		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
)	Section 501(c)(7) organizations. Enter			
	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			
L	Section 501(c)(12) organizations. Enter			
а	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			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	4		
	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			
c	Enter the amount of reserves on hand			
	13c	ایما		_
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No

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

itains a response to any question in					

_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 tay			
14	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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
ь	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	
ь	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.)			
	veriae code.)		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	Yes	
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	Yes	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?			
		11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	<u> </u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	Yes	
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	Yes	
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶NH			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request			

- 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 🕨 Carol Wardell

80 Seymour Street Hartford, CT 061025037

(860)696-6200

<u>Part VIII</u> 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 organi		elated o	rganı	zatio	on co	ompen	sate	d any current office	er, director, or trust	ee
(A) Name and Title	(B) Average hours	(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)	Individual trustee or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See Additional Data Table										
				<u> </u>	<u> </u>					

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

	(A) Name and Title	(B) A verage hours		(i tion that a			II		Rep	(D) ortable ensation	(E) Reportable compensatior	1	(F) Estima amount o	ited
		per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organız	m the zation (W- 9-MISC)	from related organizations (W- 2/1099- MISC)		compens from t organizati relate organiza	:he on and ed
See A	ddıtıonal Data Table													
												+		
											+			
							-					_		
									_					
							_					_		
							_							
1b	Sub-Total						<u> </u>	F						
<u>c</u>	Total from continuation sheets						-	-		23,432,666		0	2 -	762,599
d 	Total (add lines 1b and 1c) . Total number of individuals (incl											<u> </u>	2,7	02,599
2	\$100,000 in reportable compen	_					above) WIIC	receive	d illore tila	II.			
													Yes	No
3	Did the organization list any fori	mer officer, dired	torort	ruste	e, k	ey e	mploy	ee, o	r highes	t compens	ated employee		1.55	
	on line 1a? If "Yes," complete Sch	hedule J for such	ındıvıdı	ual		•	•	•				3	Yes	
4	For any individual listed on line in organization and related organization and related organization.											4	Yes	
5	Did any person listed on line 1a services rendered to the organiz									janization o	r individual for	5		No
Se	ection B. Independent Con	tractors												
1	Complete this table for your five \$100,000 of compensation from	highest comper		ndep	ende	ent o	ontra	ctors	that rec	eived more	than			
		(A) ne and business ad								Deccr	(B) Iption of services	П	(C) Compen	
	Nai	ne ana pasiness au	u1C33							Desci	ipaon or activices	\rightarrow	Compen	Jaciott

(A)	(B)	(C)
Name and business address	Description of services	Compensation
University of Connecticut Health Center 263 Farmington Avenue Farmington, CT 06030	Medical Services	20,228,325
FIP Construction Inc 10 McKee Place Cheshire, CT 06410	Construction	15,759,521
Eclipsys Solutions Corp Lockbox 077133 PO Box 8538-0133 Philadelphia, PA 19171	Software	4,875,620
CFM Construction Corp 150 Sycamore Street Glastonbury, CT 06033	Construction	4,706,614
Siemens Medical Solutions USA Inc Dept 0733 PO Box 120001 Dallas, TX 75312	Software	4,207,960
2 Total number of independent contractors (including but not limited to those listed above)	who received more than	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).										
			(B) (C), and ((c)	(D)					
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses					
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	1,320,713	1,320,713							
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	70,000	70,000							
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	,								
4	Benefits paid to or for members									
5	Compensation of current officers, directors, trustees, and key employees	17,265,944	10,786,963	6,478,981						
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)									
7	Other salaries and wages	407,425,755	363,337,909	43,040,960	1,046,886					
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	36,231,696	29,577,995	6,653,701						
9	Other employee benefits	67,555,589	55,335,578	12,220,011						
10	Payroll taxes	30,543,001	25,492,251	5,050,750	_					
а	Fees for services (non-employees) Management									
b	Legal	1,689,069		1,689,069						
c	Accounting	309,049		309,049	_					
d	Lobbying	191,673		191,673						
е	Professional fundraising services See Part IV, line 17									
f	Investment management fees	1,712,035	1,355,126	356,909						
g	Other	55,355,115	49,511,148	5,843,967						
12	Advertising and promotion	2,261,293	70,078	2,191,215						
13	Office expenses	148,036,234	144,267,738	3,654,044	114,452					
14	Information technology	551,441	43,652	485,479	22,310					
15	Royalties									
16	Occupancy	24,278,199	20,865,437	3,412,618	144					
17	Travel	1,862,953	1,669,424	187,840	5,689					
18	Payments of travel or entertainment expenses for any federal, state, or local public officials									
19	Conferences, conventions, and meetings	173,680	88,824	84,856						
20	Interest	1,558,782	95,412	1,463,370						
21	Payments to affiliates	7,412,444	3,706,222	3,706,222						
22	Depreciation, depletion, and amortization	44,502,185	31,426,428	13,061,753	14,004					
23	Insurance	15,452,292	12,682,453	2,769,839						
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)									
a	Purchased Services	42,805,628	32,046,664	10,654,811	104,153					
b	Equipment & Ppty Maint	15,470,844	12,914,863	2,555,981						
С	Bad Debt	12,969,171	12,915,771	53,400						
d	Miscellaneous Expenses	5,948,662	5,700,768	247,894						
e	Research	3,148,466	3,148,466							
f	All other expenses	4,076,237	1,686,537	2,384,420	5,280					
25	Total functional expenses. Add lines 1 through 24f	950,178,150	820,116,420	128,748,812	1,312,918					
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									

Pa	rt X	Balance Sheet									
					(A) Beginning of year		(B) End of year				
	1	Cash—non-interest-bearing			23,846,904	1	37,959,740				
	2	Savings and temporary cash investments			23,607,710	2	90, 183, 767				
	3	Pledges and grants receivable, net			5,088,374	3	5,069,321				
	4	Accounts receivable, net			133,062,558	4	136,565,342				
	5	Receivables from current and former officers, directors, truster highest compensated employees Complete Part II of	es, ke	y employees, and							
		Schedule L				5					
	6	Receivables from other disqualified persons (as defined under persons described in section $4958(c)(3)(B)$, and contributing sponsoring organizations of section $501(c)(9)$ voluntary employeganizations (see instructions)	yers, and								
sts		Schedule L				6					
Assets	7	Notes and loans receivable, net				7					
۲	8	Inventories for sale or use			10,906,251	8	11,054,903				
	9	Prepaid expenses and deferred charges			16,917,828	9	10,161,480				
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	926,383,194							
	b	Less accumulated depreciation	10b	606,889,519	292,176,941	10 c	319,493,675				
	11	Investments—publicly traded securities	estments—publicly traded securities								
	12	Investments—other securities See Part IV, line 11		118,043,209	12	114,096,152					
	13	Investments—program-related See Part IV, line 11		15,290,164	13	81,481,163					
	14	Intangible assets			14						
	15	Other assets See Part IV, line 11		44,998,272	15	31,159,046					
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			1,021,484,968	16	1,166,702,504				
	17	Accounts payable and accrued expenses .			133,895,032	17	120,841,013				
	18	Grants payable			18						
	19	Deferred revenue				19					
_	20	Tax-exempt bond liabilities		62,156,676	20	0					
<u>6</u>	21	Escrow or custodial account liability Complete Part IV of Sched	ule D			21					
abilities	22	Payables to current and former officers, directors, trustees, ke employees, highest compensated employees, and disqualified									
Lial		persons Complete Part II of Schedule L				22					
	23	Secured mortgages and notes payable to unrelated third partie	s.			23					
	24	Unsecured notes and loans payable to unrelated third parties				24					
	25	Other liabilities Complete Part X of Schedule D $$. $$. $$.			289,814,032	25	538,913,377				
	26	Total liabilities. Add lines 17 through 25			485,865,740	26	659,754,390				
-		Organizations that follow SFAS 117, check here ▶ 🔽 and con	plete	lines 27							
Balance		through 29, and lines 33 and 34.									
lan	27	Unrestricted net assets			258,064,561	27	240,155,196				
æ	28	Temporarily restricted net assets			92,970,325	28	85,467,133				
Fund	29	Permanently restricted net assets			184,584,342	29	181,325,785				
Œ		Organizations that do not follow SFAS 117, check here ► a	nd co	mplete							
ō		lines 30 through 34.									
£	30	Capital stock or trust principal, or current funds				30					
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31					
	32	Retained earnings, endowment, accumulated income, or other	tunds		FOT 010 555	32	500 010 111				
Net	33	Total net assets or fund balances			535,619,228	33	506,948,114				
	34	Total liabilities and net assets/fund balances			1,021,484,968	34	1,166,702,504				

	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		985	952,93!
2	Total expenses (must equal Part IX, column (A), line 25)	2			178,150
3	Revenue less expenses Subtract line 2 from line 1	3		35,7	774,78!
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) \cdot .	4		535,6	519,228
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-64,4	145,899
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		506,9	948,114
Pai	T XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			৮	
1	Accounting method used to prepare the Form 990 Cash Accrual Other			Yes	No
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
b	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 audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain 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	ıssued		103	
	on a separate basis, consolidated basis, or both				
	☐ Separate basis ☐ Both consolidated and separated basis				
За	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?	ne	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b	Yes	

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DLN: 93493228011782

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Hartford Hospital

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

Public Charity Status and Public Support

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

Inspection

Employer identification number

06-0646668

Pa	rt I	Reas	on for Pu	blic Charity Stat	tus (All org	janizations	must comp	lete this pa	art.) See ır	nstructions		
The	organı	zatıon ıs	not a privat	e foundation becaus	eıtıs (Forl	ines 1 throu	gh 11, check	only one bo	x)			
1	Γ	A chur	ch, conventi	on of churches, or as	sociation of	churches de	escribed in se	ection 170(b))(1)(A)(i).			
2	Γ	A scho	ol described	ın section 170(b)(1)(A)(ii). (At	tach Schedu	le E)					
3	~	A hosp	ıtal or a coo	perative hospital sei	rvice organiz	atıon descril	bed ın sectio ı	n 170(b)(1)(A)(iii).			
4	Γ			n organization operat ty, and state	ed in conjun	ction with a l	hospital desc	rıbed ın seci	ion 170(b)(1)(A)(iii). Er	nter the	
		·	•									
5	Γ	An orga	anızatıon op	erated for the benefit	of a college	or universit	y owned or o	perated by a	government	tal unit descr	ıbed ın	
		section	170(b)(1)(A)(iv). (Complete Pa	art II)							
6	Γ	A feder	al, state, or	local government or	government	al unit descr	rıbed ın secti o	on 170(b)(1)	(A)(v).			
7	Γ	An orga describ		at normally receives	a substantıa	I part of its s	support from	a governmer	ntal unit or fi	rom the gene	ral public	
	_			A)(vi) (Complete Pa								
8		A comr	munity trust	described in section	170(b)(1)(<i>l</i>	4)(vi) (Com	iplete Part II)				
9	Г	An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross										
		receipt	s from activ	ities related to its ex	cempt function	ons—subject	to certain ex	ceptions, ar	nd (2) no mo	re than 331/3	3% of	
		ıts sup	port from gro	oss investment incor	me and unrel	ated busines	ss taxable inc	come (less s	ection 511	tax) from bus	inesses	
		acquire	ed by the org	anızatıon after June	30,1975 S	ee section 5	09(a)(2). (Co	omplete Part	:III)			
10	Г	An orga	anızatıon org	janized and operated	lexclusively	to test for p	ublic safety	See section !	509(a)(4).			
11	Γ	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Functionally integrated d Type III - Other										
e	Γ	By che	cking this bo	ox, I certify that the on managers and oth	organızatıon	is not contro	olled directly	or indirectly	by one or n	nore disqualif	ed persons	
_			1509(a)(2)									
f			rganization this box	received a written de	etermination	from the IRS	5 that it is a 1	ype I, Type	II or Type	III supportin	g organization,	
g				:006, has the organi	zation accep	ted any gift	or contribution	n from any o	of the			
3			ng persons?	,		, 9		,				
		(i) a pe	erson who di	rectly or indirectly c	ontrols, eithe	er alone or to	gether with p	ersons desc	cribed in (ii)		Yes No	
		and (111) below, the	governing body of th	e the suppor	ted organıza	tion?			11g(i)	
				er of a person describ						11g (i	ii)	
				led entity of a persor						11g(i	ii)	
h		Provide	the followin	ng information about	the supporte	ed organızatı	on(s)					
				(iii)	(iv)		()		(
	<i>(</i> :)			Type of	Is the	2	(v) Did you not	ify the	(vi) Is th			
	(i) Name		(ii)	organızatıon (described on	organizati		organizati		organizat		(vii)	
9	suppo		EIN	lines 1- 9 above	col (ı) lıst your gove		col (ı) of		col (ı) org		A mount of	
	rganız			or IRC section	docume		suppor	t?	ın the U	I S ?	support	
				(see			Was No.			T		
				instructions))	Yes	No	Yes	No	Yes	No		
							-					
										1		

Total

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.)

S	ection A. Public Support		and to quanty t			Jaco complete			
	endar year (or fiscal year beginning								
Care	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								
4	Total. Add lines 1 through 3								
5	The portion of total contributions								
	by each person (other than a								
	governmental unit or publicly								
	supported organization) included on line 1 that exceeds 2% of the								
	amount shown on line 11, column								
	(f)								
6	Public Support. Subtract line 5 from								
Ū	line 4								
S	ection B. Total Support		<u> </u>	I I.					
	endar year (or fiscal year beginning								
	ın) >	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total		
7	A mounts from line 4								
8	Gross income from interest,								
Ū	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)					<u> </u>			
12	Gross receipts from related activiti	es, etc (See inst	ructions)			12			
13	First Five Years If the Form 990 is t	for the organizati	on's first, second	, thırd, fourth, or	fifth tax year as a	501(c)(3) organı			
	check this box and stop here						►		
	-tiC Ct-tiC D-l	L'a Carana at B							
<u> </u>	ection C. Computation of Pub Public Support Percentage for 2010			11 column (f))					
	· ·		•	II Column (1))		14			
15	Public Support Percentage for 2009	Schedule A, Pa	rt II, line 14			15			
16a	33 1/3% support test—2010. If the				line 14 is 33 1/3%	or more, check			
_	and stop here. The organization qua						▶ □		
b	33 1/3% support test—2009. If the				5a, and line 15 is 3	33 1/3% or more,	- -		
	box and stop here. The organization				45.46		►		
1/a	10%-facts-and-circumstances test-								
	is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain								
	in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported								
L	organization	_2000 If+ba a	anization did not	chack a hay an l	no 12 165 166 -	r 17a and line	► □		
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ								
	Explain in Part IV how the organization						v		
	supported organization	aon meets the 10	acts and circuilis	tances test file	z organizacion qual	mes as a publici	y ▶[¯		
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	on ala not check	a box on fine 15	, 100, 100, 1700	I by check tills	SON GING SCC	▶ □		

organization

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 Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total in) 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 IV) 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 Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f)) 15 16 Public support percentage from 2009 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage Investment income percentage for **2010** (line 10c column (f) divided by line 13 column (f)) 17 **17** Investment income percentage from 2009 Schedule A, Part III, line 17 18 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

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

▶□

Part IV

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

Schedule A (Form 990 or 990-EZ) 2010

Software ID: Software Version:

EIN: 06-0646668
Name: Hartford Hospital

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

(A) Name and Title	(B) Average hours	rge Position (check all s that apply)				(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other		
	per week	Individual trustee or director	Institutional Trustee	Officei		Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Jeffrey Flaks President & CEO	20 00	х		Х				715,723	0	62,126
Laura R Estes Director	3 00	Х						0	0	0
Douglas G Elliot Chair of the Board	3 00	Х		Х				0	0	0
Greg Deavens Director	2 00	Х						0	0	0
Ramanı Ayer Director	2 00	Х						0	0	0
Mary C Fox Director	2 00	Х						0	0	0
Stuart Markowitz MD Ex-Officio	2 00	Х						0	0	0
Brian MacLean Director	2 00	Х						0	0	0
Jeffry Nestler MD Ex-Officio	2 00	Х						0	0	0
Andrew L Salner MD Dır , Dır of Cancer Prgm	3 00	Х						194,879	0	0
William H Trachsel Director	2 00	Х						0	0	0
Joseph Henry Dırector	2 00	Х						0	0	0
Gregory M Jones Director	2 00	Х						0	0	0
Roger Klene Dırector	2 00	Х						0	0	0
David R McHale Director	2 00	Х						0	0	0
Jarrod B Post Dırector	2 00	Х						0	0	0
Magdalena Rodriguez Director	2 00	Х						0	0	0
Westley V Thompson Dırector	2 00	Х						0	0	0
James M Loree Dırector	2 00	Х						0	0	0
Neil Yeston MD Vice President	40 00			Х				719,743	0	82,819
Joseph J Klimek MD Vice President	40 00			Х				566,813	0	19,417
Harold I Schwartz MD Vice President	40 00			Х				562,657	0	174,455
Jamie M Roche MD Vice President	40 00			Х				420,031	0	71,314
Thomas J Marchozzı Exec VP & CFO	20 00			Х				615,663	0	47,824
Wendy E Elberth Vice President	40 00			Х				275,481	0	57,814

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

(A) Name and Title	(B) A verage hours per		tion (che	/)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		organizations (W- 2/1099- MISC)	from the organization and related organizations
Laurine Bow Vice President	40 00			х				244,758	0	78,127
Carol S Garlick	40 00			x				214,632	0	34,957
Vice President Rocco Orlando	4000			<u> ^</u>				211,932		0.,,50.
Senior Vice President	30 00			×				454,287	0	84,261
Bımal Patel Vıce President	40 00			х				349,305	0	36,138
Donna Handley	40.00			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				277 221	0	26.206
Vice President	40 00			X				277,331	0	26,286
James M Blazar Vice President	20 00			×				513,860	0	59,931
Richard G Stys	20 00			х				367,232	0	46,078
Vice President Sonal Shah										
Vice President	30 00			Х				156,664	0	19,235
Yvette Melendez Vice President	35 00			х				190,166	0	14,569
Mıchele B Bush Esq	20 00			Х				529,800	0	31,738
Vice President Karen T Goyette										
Vice President	40 00			Х				208,030	0	35,161
Betsy Boatman Vice President	40 00			х				230,025	0	27,714
Rita Parisi	20 00			Х				297,723	0	39,074
Vice President Inam Kureshi MD				l						_
Dır Neurosurgery	40 00			Х				256,561	0	0
Cheryl Ficara Vice President	40 00			х				196,798	0	46,328
Tracy Church	20 00			Х				0	0	0
Vice President Luis Taveras	20 00			×				0	0	0
Vice President	20 00							Ů	0	0
Lenworth Jacobs MD Dır EM Trauma Program	40 00				X			631,924	0	25,373
Orlando C Kırton MD Dır Surgery	40 00				Х			662,455	0	88,777
Joel I Sorosky MD	40 00				Х			565,617	0	67,276
Dir Womens Health	40 00				<u> ^</u>			303,017	-	07,270
Paul Thompson MD Dır Cardıology	40 00				Х			559,155	0	170,430
Michael Lindberg MD Dir Medicine	40 00				х			377,264	0	61,504
Kevin P Keating MD	40 00				Х			415,928	0	68,129
Dır Surgıcal Critical Care Judith Pepe										
Dir OP Clinical	40 00				Х			368,452	0	55,868
Vernon Y Kwok MD Dır Dental Clınıc	40 00				х			244,551	0	19,092

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	/)		_	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Robert S Dicks MD Dir Geriatrics Medicine	40 00				х			209,754	0	50,453
Alan Laites Dir Jefferson House	40 00				х			226,472	0	10,465
Christopher Clyne Dir Electrophysiology	40 00				х			428,201	0	65,307
Karyn L Butler Dır Surg Critical Care	40 00				х			414,147	0	44,928
Paul W Crespi Dir Managed Care Contracts	40 00				х			385,932	0	40,182
Alan J Smally Dir ER Physicians	40 00				х			397,654	0	72,638
Detlef Wencker Dır Cardıac Transplant	40 00				х			383,808	0	53,864
Jeffrey Kluger MD Assoc Dır , Cardiology	40 00					Х		1,871,695	0	43,350
Steven L Zweibel Dir Electrophysiology	40 00					Х		406,426	0	50,712
John F Greene Jr Co-Dir WAHS	40 00					Х		430,999	0	63,334
Joseph V Portereiko Assistant Director, Trauma	40 00					Х		385,182	0	36,216
Mark W Sebastian Medical Director - Surgery	40 00					Х		465,246	0	33,574
Elliot T Joseph Former-President & CEO							х	1,516,592	0	195,323
Stephan O'Neill Vice President - Former							х	413,622	0	62,234
James K Kınsella Vıce President - Former							х	435,902	0	91,317
Linda B Spivack Vice President - Former							х	266,453	0	37,243
Paul S Besson Esq Former-Vice President							х	352,594	0	32,851
John J Meehan Former-President & CEO							х	1,189,989	0	33,465
John M Biancamano Former-Vice President & Treas							х	300,397	0	10,977
Alfred Herzog Former-Vice President							х	121,771	0	8,387
Gary V Heller MD Former - Director							х	446,322	0	73,964

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

) (Expenses \$ 618,038,459 including grants of \$ 1,240,873) (Revenue \$ (Code 131,170,470) Founded in 1854, Hartford Hospital is one of the largest teaching hospitals and tertiary care centers in New England and has a robust clinical research program. It is an 867-bed hospital occupying a 65-acre campus in downtown Hartford and operating satellite facilities in A von, Enfield, Glastonbury, Newington, West Hartford, Wethersfield and Windsor Hartford Hospital has New England's second-busiest surgical practice, after Massachusetts General It is ranked among the top 10 centers in the country for experience in robotic surgery and performs more minimally invasive surgery than any hospital in the region. The hospital owns and operates LIFE STAR, the state's only critical-care air transport system, and is Hartford's only Level I trauma center Exciting changes are taking place at Hartford Hospital, which will be of great benefit to our community. These changes are part of our "journey to excellence," a comprehensive, hospital-wide initiative focused on transforming this great institution into one of the country's premier medical centers Our journey to excellence involves every member of the Hartford Hospital staff, who are empowered through our How Hartford Health Care Works program to improve processes throughout our hospital. With every improvement, we become a stronger institution in every respect. We will be better able to meet the fiscal challenges of the 21st century health care environment so that we can continue to fulfill our mission, which includes reaching out to enhance the health and well-being of the people of our community. Caring for our community family is a long-standing tradition at Hartford Hospital, and we look forward to continuing that tradition Hartford Hospital continues to spend a tremendous amount of money on Community Benefit activities As you'll read in this report, The Hospital's community benefit activities took many forms, involved numerous partners and served a variety of populations. But these efforts shared one overarching goal, helping the people of our community, people we consider our extended family, to experience better health at every stage of life. Community benefit activities are programs and services that address a community health need in such a way as to improve residents' access to health care services, enhance the health of the community, advance medical or health knowledge, or relieve/reduce the burden on government or community groups Hartford Hospital uses the reporting model recommended by the Internal Revenue Service Hartford Hospital is committed to promoting and sustaining the health and well-being of the people in our community. We treat the community like family, providing our world-class clinical care to everyone, regardless of their ability to pay. We are the second-largest provider of Medicaid services in the state, with approximately 10 percent of all Medicaid discharges The Hospital collaborates with numerous partners in an ongoing effort to identify the health needs of our community We've taken part in many studies and surveys aimed at obtaining this information. We are currently conducting a Health Needs Assessment in collaboration with the Hartford Department of Health and Human Services, St. Francis Hospital and Medical Center and Connecticut Children's Medical Center. We use the findings from these studies to be sure our programs match the community's health needs The Hospital provides free and low-cost care that respects the dignity of each patient. We offer prompt Medicaid eligibility assessments and financial assistance reviews. Financial assistance brochures are available on-site and online in both English and Spanish Financial assistance coordinators are available in the hospital, in our Emergency Department and at our outpatient locations When necessary, we work with patients to develop payment plans. The Hospital meets the community's multifaceted needs with a multifaceted community benefit effort that includes Partnerships - We partner with numerous community-based organizations to advance our shared goals, stimulate economic development, and improve both the health and quality of life of our neighbors Support Groups -Individuals and families can obtain support and education from our many disease-specific support groups Subsidized Health Services - We operate several low or no-cost outpatient clinics to provide even the poorest among us with high-quality health care Community Outreach We regularly bring health education and screenings out into the community through health fairs, lectures and special events. We particularly reach out to those who are uninsured or underinsured Contributions - We provide financial and in-kind contributions to nonprofit organizations that serve the community Health Professions Education - Hartford Hospital contributes to the long-term health of our community by educating hundreds of physicians, nurses and other health care professionals every year. Since many remain to practice in the area, we help ensure that there will be enough qualified health professionals to meet the community's growing needs Cancer Outreach -Hartford Hospital is a national leader in providing expert, state-of-the-art cancer care. We bring that expertise to the community through * Community-based screenings for prostate and colorectal cancer * Mobile mammography* The Partnership for Breast Care, a comprehensive center that coordinates prompt evaluation and treatment of breast problemsEmergency Services - From minor injuries to large-scale catastrophes, Hartford Hospital is the region's leading resource in an emergency st Our Emergency Department had more than 95,000 visits in 2011 It is the primary source of care for the uninsured in Greater Hartford * We are the area's only Level I Trauma Center * We operate LIFE STAR, the state's only critical care air transport system * We are the state-designated Center of Excellence for Bioterrorism and Emergency Preparedness, responsible for planning and coordinating emergency response throughout north-central and eastern Connecticut Research - In 2011, we supported numerous community-benefit research projects, expending a total of \$16,753,971 Our research helps expand the medical community's knowledge and gives our patients access to leading-edge treatments Helping newborn babies get off to a healthy start is one of a family's most important roles, and Hartford Hospital is reaching out to its community family to help Research shows that breastfeeding is the healthiest choice for infants and mothers and provides benefits that last a lifetime. Recent years have seen a resurgence of breastfeeding among more affluent women. But statistics show that low-income women are less likely to breastfeed. Often they're unaware of the health benefits and don't have access to support services that could help them succeed. Hartford Hospital is working to address this disparity by partnering with the Hispanic Health Council to provide the Breastfeeding Heritage and Pride peer counseling program The Breastfeeding Heritage and Pride program reaches out to pregnant and postpartum low-income women through a team of specially trained peer counselors. Counselors are fluent in both English and Spanish and have successfully breastfed their own babies. They meet with women several times before delivery, either at patients' homes or in Hartford Hospital's Women's Ambulatory Health Services clinic Counselors explain the benefits of breastfeeding and encourage women to choose to nurse their babies They visit new mothers in the hospital daily, helping them learn techniques for successful breastfeeding. After patients are discharged, counselors call them or visit them at home, offering advice and support to empower them to continue to breastfeed exclusively. A program coordinator provides daily administrative support to the program, while a certified lactation consultant provides clinical oversight of the peer counseling services

DLN: 93493228011782

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Davience Conce

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

IIII EII I	ii Neverlide Service			Inspe	ction
If th	e organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 4	6 (Political 6	Cam pai	gn Activit	ies),
	oction 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C				
	ection 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not con	molete Part I-	В		
	ection 527 organizations Complete Part I-A only	npioto i ait i	_		
	e organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 4	7 (Lobbyin	g Activi	ities), the	n
• Se	ection 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part	II-A Do not	complete	e Part II-B	
• Se	ection 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete	e Part II-B D	o not co	mplete Part	: II-A
	e organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Pa	art V, line 3	5a (Pro	xy Tax), th	ıen
	ction 501(c)(4), (5), or (6) organizations Complete Part III				
	me of the organization tford Hospital	Employerid	entifica	tion numbe	er
Hu	·	06-064666	8		
Par	t I-A Complete if the organization is exempt under section 501(c) or is a	section 5	27 org	anizatio	n.
1	Provide a description of the organization's direct and indirect political campaign activities in Par	+ T.V			
2	Political expenditures	· · ·			
3		_	*		
,	Volunteer hours				
Pai	t I-B Complete if the organization is exempt under section 501(c)(3).				
1	Enter the amount of any excise tax incurred by the organization under section 4955	F	\$		
2	Enter the amount of any excise tax incurred by organization managers under section 4955	•	\$		
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?			☐ Yes	┌ No
4a	Was a correction made?			☐ Yes	┌ No
ь	If "Yes," describe in Part IV				
Pai	t I-C Complete if the organization is exempt under section 501(c) except	section 5	01(c)((3).	
1	Enter the amount directly expended by the filing organization for section 527 exempt function ac	tivities 🕨	\$ <u></u>		
2	Enter the amount of the filing organization's funds contributed to other organizations for section	527			
	exempt funtion activities	•	\$		
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line	17b ►	\$		

☐ Yes Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0-

Р	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3)	and filed Form 5768	(election
	Check If the filing organization belongs to a Check If the filing organization checked bo	n affiliated group x A and "limited control" provisions apply		
	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing O rganization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lobbyıng)		
b	Total lobbying expenditures to influence a legisl			
C	Total lobbying expenditures (add lines 1a and 1	o)		
d	O ther exempt purpose expenditures			
е	Total exempt purpose expenditures (add lines 1	c and 1d)		
f	Lobbying nontaxable amount Enter the amount to columns			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
	Grassroots nontaxable amount (enter 25% of lir	e 1f)		
h	Subtract line 1g from line 1a If zero or less, ent			
i	Subtract line 1f from line 1c If zero or less, ente			
j	If there is an amount other than zero on either lii section 4911 tax for this year?	ne 1h or line 1i, did the organization file Form	4720 reporting	┌ Yes ┌ No

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expendit	ures During 4	4-Year Avera	ging 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))					
c	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 section 501(c)(3) and has NOT filed Form 5768	
	(election under section 501(h)).	

		(a)	(b)	
		Yes	No	Amount	
L	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)?		Νo		
C	Media advertisements?		No		
d	Mailings to members, legislators, or the public?		No		
e	Publications, or published or broadcast statements?		No		
f	Grants to other organizations for lobbying purposes?		No		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		191,673	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No		
i	O ther activities? If "Yes," describe in Part IV		No		
j	Total lines 1c through 1i			191,673	
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?				
221	+ TH-A. Complete if the organization is example under section E01(c)(4), section	F01/6	\ <u>(</u> E) \(\(\)	r caction	

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		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 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?

Taxable amount of lobbying and political expenditures (see instructions)

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

Identifier	Return Reference	Explanation
Explanation of Other Lobbying Activities		Hartford Hospital paid Kenneth L Przybysz, LLC and Gaffney Bennett & Associates for their lobbying efforts on behalf of the organization during the fiscal year Przybysz, LLC and Gaffney Bennett & Associates were paid \$16,960 and \$101,500 respectively Efforts mainly included lobbying of Connecticut State Legislators in the interest of a group of specialty hospitals in the State of Connecticut Hartford Hospital also pays annual dues to Connecticut Hospital Association (CHA) and American Hospital Association (AHA) Both CHA and AHA allocate a portion of their dues as lobbying expenses. The portion of dues allocated as lobbying expenses is calculated under current Medicare rules. CHA and AHA conducts lobbying activities under current Medicare rules. CHA and AHA conducts lobbying activities on behalf of their members. The total amount of dues allocated for lobbying expenses for FY11 was \$73,213.

4

DLN: 93493228011782

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

itema	Revenue Service	Form 990. ► See separate instructions.		Inspect	don
	<u> </u>		Employer ide	ntification numbe	er
ı iai	tiona mospitali		06-0646668	<u> </u>	
Pa	Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Ves No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit Preservation for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit Purpose(s) of conservation easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of a certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Total number of conservation easements Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year P No Number of states where property subject to conservation easement is located P No best the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements in holds? Amount of expenses incurred in monitoring, inspecting and enforcing conservation easements during the year P Amount of expenses incurred in monitoring, inspecting and enforcing conservation easements during the year P No Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(h) a				
	organization answered "Yes" to Form	<u> </u>	(h) Funds	and other accou	nts
L	Total number at end of year	(a) Donor advised funds	(b) i dilas	and other accou	1103
2					
3	,				
1	Aggregate value at end of year				
5		<u> </u>	or advised	√Yes	┌ No
6	used only for charitable purposes and not for the b				┌ No
Pa	rt III Conservation Easements. Comple	te if the organization answered "Yes" to	5 Form 990, P	art IV, line 7.	
2	Preservation of land for public use (e.g., recre Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qu	Preservation of an Preservation of a c	ertified historic	structure	
_	Total number of concernation eacoments	-		at the End of the	Year
		nte			
		-			
		` ′			
		L		zation during	
•		sterred, released, extinguished, or terminates	a by the organiz	acion during	
	·				
	• • • •	-			
5			lling of violation		┌ No
5	Staff and volunteer hours devoted to monitoring, in	nspecting and enforcing conservation easem	ents during the	year ►	
7	A mount of expenses incurred in monitoring, inspe	cting, and enforcing conservation easements	during the yea	r ► \$	
В		e 2(d) above satisfy the requirements of sec	tion	┌ Yes	┌ No
9	balance sheet, and include, if applicable, the text	of the footnote to the organization's financial			
ar			or Other Sim	ilar Assets.	
1a	art, historical treasures, or other similar assets he	eld for public exhibition, education or researc	h in furtherance		e,
b		or public exhibition, education, or research in			
	(i) Revenues included in Form 990, Part VIII, line	e 1	► \$		
	(ii) Assets included in Form 990, Part X		► \$		
2	If the organization received or held works of art, h following amounts required to be reported under S				
а	Revenues included in Form 990, Part VIII, line 1		► \$		

b Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art,	His	<u>tori</u>	<u>cal Tre</u>	asures, or	<u>Othe</u>	<u>er Similar A</u>	ssets	(coi	ntınued)
3	Using the organization's accession and other items (check all that apply)	records, check any	of th	e foll	owing tha	at are a signifi	cant ı	use of its colle	tion		
а	Public exhibition		d	Γ	Loan or	exchange pro	grams	5			
b	Scholarly research		e	Γ	Other						
С	Preservation for future generations										
4	Provide a description of the organization's co Part XIV	llections and explair	n hov	v the	y further t	the organizatio	n's e	xempt purpose	ın		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t							mılar	┌ Ye	:S	┌ No
Par	Escrow and Custodial Arrange Part IV, line 9, or reported an am	ements. Complet	te ıf	the	organiza	ation answer		es" to Form	990,		
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					ons or other as	sets	not	┌ Ye	:s	┌ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollow	ıng ta	able				mount		
С	Beginning balance						1c				
d	Additions during the year						1d				
e	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on Fo	rm 990. Part X line	217				<u> </u>	I	┌ Ye		┌ No
	If "Yes," explain the arrangement in Part XIV								,	_	,
	rt V Endowment Funds. Complete		ans	were	ed "Yes"	to Form 990). Pa	rt IV, line 10			
		(a)Current Year) Prior		(c)Two Years Ba		(d)Three Years Back		our Ye	ears Back
1a	Beginning of year balance	112,783,609		106	5,412,056	111,529	,519	Dack	+		
ъ	Contributions	329,266		1	,357,240	175	,575		+		
c	Investment earnings or losses	106,788		6	5,795,833	-2,825	,233		+		
d	Grants or scholarships	0			0		0				
e	Other expenditures for facilities and programs	4,968,376		1	.,781,520	2,467	,805				
f	Administrative expenses										
g	End of year balance	108,251,287		112	2,783,609	106,412	,056				
2	Provide the estimated percentage of the yea	r end balance held as	5								
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment 🕨 62 000 %										
c	Term endowment ► 38 000 %										
3a	Are there endowment funds not in the posses	ssion of the organizat	tıon t	hat a	are held a	ınd admınıster	ed for	the	_		
	organization by							-		es	No No
	(i) unrelated organizations			•				<u> </u>	(i) (ii)	\dashv	No No
b	(ii) related organizations						٠.	· · · · -	8b	廾	
4	Describe in Part XIV the intended uses of the	•									
Par	t VI Investments—Land, Buildings	, and Equipmen	t. S	ee F	orm 990), Part X, line	e 10.				
	Description of investment				Cost or oth			(c) Accumulated depreciation	d (d) Boo	k value
1a	_and					18,38	0,552		\top	18	3,380,552
b i	Buildings					491,89	•	328,769,26	54		3,121,518
c I	_easehold improvements					416,11	1,860	278,120,2	55	137	,991,605
d I	Equipment										
_e (Other										
Tota	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	rm 990, Part X, colum	n (B)	, line	10(c).)					319	,493,675
		·			-			Schedule	D (For	m 99	90) 201

Part VIII Investments—Other Securities. See	Form 990, Part X, line 13		
(a) Description of security or category (including name of security)	(b)Book value		od of valuation f-year market value
(1)Financial derivatives			, , , , , , , , , , , , , , , , , , , ,
(2)Closely-held equity interests			
(3)Other			
(A) Funds Held in Trust	114,096,152		F_
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	114,096,152		
Part VIII Investments—Program Related. See	Form 990, Part X, line		
(a) Description of investment type	(b) Book value		od of valuation
		Cost or end-o	f-year market value
(1) Goodwill	25,811,034		<u> </u>
(2) Investment Malpractice Captive	38,920,554		F
(3) Other Assets	16,749,575		F_
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	01 401 162		
Part IX Other Assets. See Form 990, Part X, III	11		
(a) Descrip			(b) Book value
			(=, = = = = = = = = = = = = = = = = = =
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)		
Part X Other Liabilities. See Form 990, Part X			
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes			
Accrued Post Retirement	340,366,785		
Accrued Asbestos Costs	3,141,783		
Other Net Liabilities	3,816,000		
Long Term Debt - Interco Bonds	169,208,309		
Other Long Term Debt Payable to Affiliate	22,380,500		
State Long Term Debt Fayable to Allillate	22,360,300		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	538,913,377		

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	
Par	XIII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Re	turn
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part 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 F	leturn
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) 2d		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
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 expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	
	t XIV Supplemental Information		
	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pa t V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete t		
רב-	t v, me 7, rait A, rait A1, me 0, rait A11, mes 2u anu 40, anu rait A111, mes 2u anu 40. Also complete t	ms part	. to provide any

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

addıtıonal ınformatıon

Identifier	Return Reference	Explanation
Description of Intended Use of Endowment Funds		The Hospital has adopted investment and spending policies for endowment assets that attempt to provide a predictable stream of funding to programs supported by its endowment while seeking to maintain purchasing power of the endowment assets Endowment assets include those assets of donor-restricted funds that the Hospital must hold in perpetuity or for a donor-specific period(s). Under this policy, as approved by the Board of Directors, the endowment assets are invested in a manner that is intended to produce a real return, net of inflation and investment management costs, of a least 4% over the long term. Actual returns in any given year may vary from this amount. The Hospital's endowment consists of hundreds of individual funds established for a variety of purposes. The endowment includes donor-restricted endowment funds. Net assets associated with endowment funds are classified and reported based on the existence or absence of donor-imposed restrictions.

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493228011782

OMB No 1545-0047

2010

Open to Public Inspection

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service ► Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.

Statement of Activities Outside the United States

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization Hartford Hospital Employer identification number

	•				06-0646668	
Pa	rt I General Information "Yes" to Form 990, Pa	n on Activiti rt IV, lıne 14b	es Outside tl	ne United States. C	omplete if the organiz	ation answered
1	For grantmakers. Does the dassistance, the grantees' eligible the grants or assistance?	gibility for the	grants or assis	stance, and the select	ion criteria used to awa	
2	For grantmakers. Describe in Pa United States	irt V the organiz	atıon's procedur	es for monitoring the us	e of grant funds outside t	he
3	Activites per Region (Use Part	V ıf addıtıonal s	pace is needed :)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	region (by type) (e g ,	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	expenditures for region/investments in region
	North America/Caribbean	0	0	Program Services	Insurance	12,624,224
3a	Sub-total	0	0			12,624,224
b	Total from continuation sheets to Part I	0	0			0
c	: Totals (add lines 3a and 3b)	0	0			12,624,224

Part	Part IV, l	ine 15, for any					plete if the organiza received more thai		
	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2	Enter total nur tax-exempt by	mber of recipie the IRS, or fo	nt organizations lis or which the grante	ted above that are e or counsel has pro	recognized as chari ovided a section 50	ties by the foreign o 1(c)(3) equivalency	country, recognized letter	as . ►	
3	Enter total nur	mber of other o	organizations or en	tities					(Form 990) 2010

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
			I				
			1				
			i				
			1				
			 I		,		
					,		
,			·		,		
,			 I		1		
-			 I		,		
			ı		,		

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	[✓	Yes	Γ	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	┍	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	<u> </u>	Yes	Γ	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	দ	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	্ব	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	দ	No

Schedule F (Form 990) 2010

Additional Data

Software ID:

Software Version:

EIN: 06-0646668

Name: Hartford Hospital

Schedule F (Form 990) 2010

Page **5**

Part V Supplemental Information

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

DLN: 93493228011782

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. See separate instructions.

Name of the organization **Employer identification number** Hartford Hospital 06-0646668 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants Solicitation of government grants Internet and e-mail solicitations Phone solicitations Special fundraising events In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization Form 990-EZ filers are not required to complete this table (i) Name and address of (ii) Activity (iii) Did (iv) Gross receipts (v) A mount paid to (vi) A mount paid to ındıvıdual fundraiser have from activity (or retained by) (or retained by) or entity (fundraiser) custody or fundraiser listed in organization col (i) control of contributions? Yes List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

			(a) Event #1 Black & Red Ball	(b) Event #2 Pink Flamingos	(c) Other Events	(d) Total Events (Add col (a) through col (c))
Revenue			(event type)	(event type)	(total number)	
	1	Gross receipts	1,208,145	52,136		1,260,281
	2	Less Charitable contributions	1,033,145	46,286		1,079,431
	3	Gross income (line 1 minus line 2)	175,000	5,850		180,850
Direct Expenses	4	Cash prizes				
	5	Non-cash prizes				
	6	Rent/facility costs	62,654	1,297		63,951
	7	Food and beverages	152,100	9,041		161,141
	8	Entertainment	95,955			95,955
	9	Other direct expenses .	73,639	7,486		81,125
	10	Direct expense summary Add lir	nes 4 through 9 in column	(d)		402,172
	11	Net income summary Combine li				-221,322
Par ⊕ ∃		Gaming. Complete if the o \$15,000 on Form 990-EZ, li				
9			(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming (Add col (a) through
Revenue	1	Gross revenue		(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	
		Gross revenue			(c) Other gaming	(Add col (a) through
penses Reveilue	2				(c) Other gaming	(Add col (a) through
Expenses	2	Cash prizes			(c) Other gaming	(Add col (a) through
	2 3 4	Cash prizes			(c) Other gaming	(Add col (a) through
Expenses	2 3 4 5	Cash prizes Non-cash prizes Rent/facility costs			(c) Other gaming Yes% No	(Add col (a) through
Expenses	2 3 4 5	Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor	✓ Yes%_ ✓ No s 2 through 5 in column (column (column)	☐ Yes%_ ☐ No	Г Yes% Г No	(Add col (a) through
Direct Expenses	2 3 4 5 6 7 8	Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add line Net gaming income summary Comer the state(s) in which the organization	Yes%_ No s 2 through 5 in column (continue lines 1 and 7 in columation operates gaming act	Yes% No d)	Г Yes	(Add col (a) through col (c))
Expenses	2 3 4 5 6 7 8 Ent Is t	Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Add line Net gaming income summary Com	Yes%_ No s 2 through 5 in column (on the lines 1 and 7 in column ation operates gaming activities in each	Yes	Г Yes	(Add col (a) through col (c))

11	Does the organization operate ga	aming activities with nonmembers? .		Γ_{Yes} Γ_{No}			
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity						
	formed to administer charitable (gaming?		. Г _{Yes} Г _{No}			
13	Indicate the percentage of gamir	ng activity operated in					
а	The organization's facility		13a				
b	An outside facility		13b				
14	Provide the name and address of records	f the person who prepares the organıza	tion's gaming/special events books and				
	Name 🟲						
	Address ►						
15a	Does the organization have a co	ntract with a third party from whom the	organization receives gaming				
revenue?							
b			tion 🟲 \$ and the	,			
	amount of gaming revenue retain						
c	If "Yes," enter name and address	S					
	Name 🟲						
	Address ▶						
16	Gaming manager information						
	Name 🕨						
	Gaming manager compensation ► \$						
	Description of services provided						
	Director/officer	□ Employee	Independent contractor				
17	Mandatory distributions						
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to						
	retain the state gaming license?						
b		·	o otner exempt organizations or spent				
Par		activities during the tax year * \$	responses to question on Schedule G (See			
	instructions.)	provide additional information for	responses to question on schedule of (
	Identifier	ReturnReference	Explanation				

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DLN: 93493228011782

OMB No 1545-0047

Open to Public Inspection

SCHEDULE H (Form 990)

Department of the Treasury Internal Revenue Service

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

Hospitals

Name of the organization Hartford Hospital

Employer identification number

Pa	rt I Financial Assista	ance and C	ertain Oth	er Community Be		004000			
								Yes	No
1a	Did the organization have a fi	nnancıal assı	stance policy	y during the tax year?	If "No," skip to questio	n 6 a .	1a	Yes	
Ь	If "Yes," is it a written policy	·					1b	Yes	
2	If the organization has multip assistance policy to its vario				describes application of	of the financial			
	Applied uniformly to all ho Generally tailored to indiv		ıls	Applied uniform	y to most hospitals				
3	Answer the following based o organization's patients during			nce eligibility criteria	that applied to the large	st number of the			
а	Does the organization use Fe income individuals? If "Yes,"						3a	Yes	
	Γ 100% Γ 150%	F 20	oo% 🔽	Other 250.000000	000000 %				
b	Does the organization use FP "Yes," indicate which of the fo					dıvıduals? If			
		_	_		_		3b	Yes	
	200% 250%		00% I	330 /0 4	_	<u> </u>			
С	If the organization does not u determining eligibility for free test or other threshold, regar	or discounte	d care Inclu	de in the description v	hether the organization				
4	Did the organization's financi					urıng the tax year	4	Yes	
5a	provide for free or discounted Did the organization budget amount			=		x year?	5a	Yes	
b	If "Yes," did the organization					ŀ	5b	Yes	
c	If "Yes" to line 5b, as a resul care to a patient who was elig					or discounted	5c		No
6a	Does the organization prepar			ort during the tax			6a	Yes	
6b	If "Yes," did the organization			ublic?			6b	Yes	
	Complete the following table worksheets with the Schedule	_	ksheets prov	rided in the Schedule H	Instructions Do not s	ubmit these			
7	Financial Assistance and C	Certain Other	Community I	Benefits at Cost				ı	
	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 b expense	enefit	(f) Perototal ex	
а	Financial Assistance at cost (from Worksheets 1 and 2)			6,001,571	706,177	5.29	5,394	n	570 %
b	Unreimbursed Medicaid (from			, ,	,	26,27			800 %
c	Worksheet 3, column a) Unreimbursed costs—other means-tested government programs (from Worksheet 3, column b)			141,512,659	113,237,803	20,27	4,034		800 70
d	Total Financial Assistance and Means-Tested Government Programs			147,514,230	115,943,982	31,57	0,248	3	370 %
e	Other Benefits Community health improvement services and community benefit operations (from								
f	(Worksheet 4) Health professions education			4,037,014	0	4,03	7,014	0	430 %
	(from Worksheet 5) Subsidized health services			47,539,845	15,238,469	32,30	1,376	3	450 %
_	(from Worksheet 6)			9,530,774			6,450		570 %
h i	Research (from Worksheet 7) Cash and in-kind contributions			16,753,971	0	16,75	3,9/1	1	790 %
	to community groups (from Worksheet 8)			18,038,006	10,819,676	7,21	8,330	0	770 %
-	Total Other Benefits			95,899,610	· · · · · ·	65,61	_		010 %
k	Total. Add lines 7d and 7j	İ		243,413,840	146,226,451	97,18	7,389	10	380 %

Schedule Part I	activities during the	tax year, an								ldıng	age 2 ealth
	of the communities i	t serves. (a) Number of activities or programs (optional)	(b) Persons served (optional)	(c) Total community building expense		rect offs revenue		(e) Net communit building expense		(f) Perce total exp	
1 Phys	sical improvements and housing			295,80	3			295,	803	0	030 %
2 Ecor	nomic development										
_	munity support			1,217,24	1			1,217,	244	0	130 %
4 Envi	ronmental improvements			3,31	2			3,	312		0 %
	ership development and training			25,35				25,	350		0 %
6 Coal	ition building			24,87)			24,	870		0 %
	imunity health improvement ocacy			18,03	5			18,	036		0 %
8 Worl	kforce development			21,63					631		0 %
9 Othe	er										
LO Tota				1,606,24	5			1,606,	246	0	160 %
Part II	Bad Debt, Medicar	e, & Collec	tion Practic	es							
	A. Bad Debt Expense									Yes	No
	d the organization report bac atement No 15?	d debt expense	e in accordance	e with Heathcare Fin	ancıal M	anage •	ment A	ssociation	1		No
	ter the amount of the organi	zation's bad d	ebt expense (a	t cost)		2		3,766,940			
	ter the estimated amount of ributable to patients eligible	_			olicy .	3		1,092,413			
In rat	ovide in Part VI the text of t addition, describe the costi ionale for including a portio 3. Medicare	ng methodolog	gy used in dete	rmining the amounts				· ·			
5 En	ter total revenue received fi	rom Medicare ((including DSH	and IME)		5		252,938,360			
6 En	ter Medicare allowable cost	s of care relati	ing to payment:	s on line 5		6		221,607,433			
7 Su	btract line 6 from line 5 Th	ıs ıs the surplu	ıs or (shortfall)			7		31,330,927			
Als	scribe in Part VI the extent so describe in Part VI the c eck the box that describes	osting methód	ology or source					,			
Γ	Cost accounting system	r c∘	st to charge ra	tio Г	Other						
ection (C. Collection Practices										
	es the organization have a v 'Yes," does the organization				· ·	 oractic	 es to b	· · · · · · · · · · · · · · · · · · ·	9a	Yes	
	tients who are known to qua				ribe in P	art VI			9b	Yes	
Part I	Management Com (a) Name of entity		Joint Ventu) Description of pi		(c) Organı	zation's	1,4	l) Officers, directors,	Τ,	e) Physic	
	(a) Name of entity	(L	activity of entit		profit % o ownersh	r stock	e	trustees, or key mployees' profit % r stock ownership%	pro	ofit % or ownership	stock
1								·			
2											
3							+				
4							+				
5											
5											
7							+				
8							+				
 9							+				
10							+		+		

Part	V Facility Information									
(list in	on A. Hospital Facilities order of size, measured by total revenue per facility, from t to smallest)	Licensed hospital	General medical &	Children's h	Teaching hospital	Critical access hospital	Research facility	ER-24 hours	ER-other	
	nany hospital facilities did the organization operate during c year? 1	spital	tical & surgical	. hospital	sp#al	es hospital	olity			
Name	and address									Other (Describe)
1	Hartford Hospital 80 Seymour Street Hartford, CT 06102	x	х		х		х	х		
		<u> </u>			-					
		-				-				
		<u> </u>								
		-								
	<u> </u>	1		1		t e	1			

	er Facilities That Are Not Licensed, Registered, or Similarly Recognize, measured by total revenue per facility, from largest to smallest)	nized as a Hospital Facility	
How many non-	hospital facilities did the organization operate during the tax year?	10	
Name and address	Type of Facility (Describe)		_
		Schedule H (Form 990) 2010	

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
		Part I, Line 3c Hartford Hospital used Federal Poverty Guidelines to determine eligibility

Identifier	ReturnReference	Explanation
		Part I, Line 7 The organization utilized an overall cost to charge ratio, (RCC), developed from the audited Financial Statements, (AFS) Total expense was adjusted for bad debt expense, directly identified community benefit expense and non-patient care expense, (as adjusted from the Medicare cost report) This was then divided by the total AFS gross revenue to develop the cost to charge ratio This cost to charge ratio was used to calculate costs for Part I lines 7a, b, & g, and Part III Section A2 The costs associated with the activities reported on Part I, Line 7e were captured using actual time multiplied by an average salary rate. The costs associated with Line 7h, were the actual costs reported in the organization's general ledger less any industry funded studies. These costs were removed from the calculations above to avoid duplication. Costs reported in Part III, Section B6, were calculated from the Medicare cost report and reduced for Medicare costs previously

Identifier	ReturnReference	Explanation
		Part I, Line 7g No physician clinic costs were included in the subsidized Health Services cost calculations

Identifier	ReturnReference	Explanation
		Part I, L7 Col(f) The Bad Debt Expenses included on Form 990, Part IX, Line 25, Column (A), but subtracted for purposes of calculating the percentage in this column is \$ 12,969,171

Identifier	ReturnReference	Explanation
		Part II Hartford Hospital recognizes the impact that the social
		determinants of health have on the wellness of the community it serves. The Hospital spent in excess of \$1.6M on Community.
		Building activities for for fiscal 2011 The Hospital has
		addressed quality of life issues affecting residents in our
		community, who are predominantly minorities Examples of these efforts to affect job opportunities and poverty, quality of
		housing, neighborhood safety, and education can be found in the
		following Community Building activities Advocacy for
		Community Health Improvement - Since the community the
		Hospital serves is predominantly minorities, senior management provides expertise and resources to organizations
		in order to address social inequities and civil rights issues
		Among these organizations are the Connecticut Coalition for
		Environmental Justice, Community Partners in Action (to assist people in the criminal justice system), Community Solutions (to
		provide alternatives to incarceration programs), and the Anti
		Defamation League Coalition Building - Hartford Hospital
		provides senior management support and resources to affect the allocation decisions and fundraising efforts by local
		organizations such as the United Way, Hartford Foundation for
		Giving, and the Connecticut Council for Philanthropy to ensure
		programs to improve the wellness of local residents. These organizations make financial contributions to local agencies to
		provide free social services to our underprivileged population
		Community Support - To address the personal safety for
		participants at evening activities, as well as to prevent vandalism and break-ins, Hartford Hospital provides security
		patrols around the Girl Scout campus 24/7 Management
		participates on the boards of local homeless and domestic
		violence shelters and supports periodic employee activities to provide personal care and food items to those in need. The
		Hospital has donated funds to provide free ice skating at
		Bushnell Park during the winter season to allow underprivileged
		children and their families an opportunity to exercise outdoors in a safe environment Economic Development - Hartford
		Hospital is active in the marketing efforts to promote Hartford
		by the following organizations in order to bring more jobs and
		commerce to the city Greater Hartford Visitors Convention
		Bureau, Metro Hartford Alliance, The Children's Museum, Connecticut Center for Advanced Technology, and Chambers of
		Commerce for towns in the Hospital's service
		area Environmental Improvements - Working with the City of Hartford, Hartford Hospital responded to serious traffic
		accidents on a street adjacent to the campus by installing an
		ısland, ıncreasıng vısıbılıty at crosswalks and ınstallıng a speed
		detector These road safety improvement changes have helped
		to reduce accidents and injuries Another example is the organizing, support and promotion of clean-up projects such as
		the one held at the Thirman L Miller School, which not only
		cleaned up the property, but included planting flowers and
		shrubs to encourage student pride to keep the property in good condition Housing - Hartford Hospital is a member of the
		Southside Institutions Neighborhood Alliance (SINA), a
		collaborative effort of Hartford Hospital, Connecticut Children's
		Medical Center and Trinity College The City of Hartford has one of the lowest percentages of home ownership in the country
		Renters are often exposed to lead paint, a potentially dangerous
		toxin to children SINA is currently developing a construction
		project of 10 new one family homes for sale to first time home buyers to address the need for safe, clean housing and to
		provide commitment to the community and neighborhood
		through home ownership Leadership Development - Hartford
		Hospital supported the Latinas and Power Symposium, which provided professional development sessions on financial
		stability, personal growth, entrepreneurship and career building
		This effort enhanced the job opportunities and improved the
		financial judgment of those currently living in poverty Mentoring Programs - Hartford Hospital provides support to programs
		such as Our Piece of the Pie for social and personal growth of
		urban youth, spelling bees, Hartford Public Schools city-wide
		Science Fair, and college scholarships through Capital
		Community College and Southside Institutions Neighborhood Alliance
!		r

ability to pay. A patent is classified as a charity patient by reference to the established policies of the Hospital Essentially, these policies define charity care services as those services for which payment is anticipated. In assessing a patent's inability to pay, the Hospital utilizes the generally recognized powerly income levels for the State of Connecticut, but also includes certain cases where incurred charges are significant with compared to incomes." In the event a patient fails to qualify for financial assistance or fails pay their portion of discounted charges, and the patient does not pay timely their obligation to the Hospital, the Hospital reserves the right to institute and pursue collection actions at to pursue any remedies available at law or in equity, including but not limited to, imposing wage garnishments or filing and foreclosing on lien so in prayr residences or other assets, instituting and prosecuting legal actions and reporting the matter to one or more criticating agencies. In the event the Hospital is unable to collect, the outstanding amounts are written off as shad debt. Frose patients who qualify for financial assistance and are cooperating in good faith to resolo outstanding accounts, thospital may offer extended paying plans and will not impose collection efforts described above? Organization utilized an organic cost to charge ratio, (RCC.), developed from the audited Financial Statements, (AFS). This cost to charge ratio was developed and applied to the Bad Del expense on Part III, Line 2.8.3 In FY10, in order to determin the amount of bad debt to could be reasonably attributable to patients who would likely qualify for financial assistance, the organization reviewed analyzed random patient accounts order to determine the likelihood of the ability for those patients who would have qualified for charty care reported on Part III, Line 2.8.3 In FY10, in order to determine the patients who would kind you wair for financial assistance, the organization reviewed and analyzed random	Identifier	ReturnReference	Explanation
care and divided the amount by the total bad debt expense at cost from prior year, thus establishing a percentage This	Identifier		Part III, Line 4 The organization's financial statements are prepared in accordance with Generally Accepted Accounting Principles (GAAP) GAAP does not require a foot note for bad debt expenses, however, the charity care footnote reads as follows "The Hospital accepts all patients regardless of their ability to pay A patient is classified as a charity patient by reference to the established policies of the Hospital Essentially, these policies define charity care services as those services for which no payment is anticipated In assessing a patient's inability to pay, the Hospital utilizes the generally recognized poverty income levels for the State of Connecticut, but also includes certain cases where incurred charges are significant when compared to incomes "In the event a patient fails to qualify for financial assistance or fails to pay their portion of discounted charges, and the patient does not pay timely their obligation to the Hospital, the Hospital reserves the right to institute and pursue collection actions and to pursue any remedies available at law or in equity, including but not limited to, imposing wage garnishments or filing and foreclosing on liens on primary residences or other assets, instituting and prosecuting legal actions and reporting the matter to one or more credit rating agencies. In the event the Hospital is unable to collect, the outstanding amounts are written off as bad debt. For those patients who qualify for financial assistance and are cooperating in good faith to resolve outstanding accounts, the Hospital may offer extended payment plans and will not impose collection efforts described above The organization utilized an overall cost to charge ratio, (RCC), developed from the audited Financial Statements, (AFS). This cost to charge ratio was developed and applied to the Bad Debt expense on Part III, Line 2 & 3. In FY10, in order to determine the likelihood of the ability for those patients to pay based upon certain criteria. Eligibility criteria for financial assistance included,
percentage was applied to the bad debt expense at cost for FY 11 and the amount was reported on line 3			care and divided the amount by the total bad debt expense at cost from prior year, thus establishing a percentage This percentage was applied to the bad debt expense at cost for FY

Identifier	ReturnReference	Explanation
		Part III, Line 8 Providing for those in need, including Medicare patients and serving all patients regardless of their ability to pay is an essential part of the organization's mission. The hospital serves all patients without regard to any payment shortfall. The organization Medicare Cost Report was used to accumulate actual costs related to Part III, Section B, Line 6.

Identifier	ReturnReference	Explanation
		Part III, Line 9b The Financial Assistance Policy states In
		the event a patient fails to qualify for Financial Assistance or
		fails to pay their portion of discounted Charges pursuant to this
		Policy, and the patient does not pay timely their obligations to
		Hartford Hospital, the Hospital reserves the right to begin
		collection actions, including but not limited to, imposing wage
		garnishments or liens on primary residences, instituting legal
		action and reporting the matter to one or more credit rating
		agencies For those patients that qualify for Financial
		Assistance and who are cooperating in good faith to resolve the
		Hospital's outstanding accounts, the Hospital may offer
		extended payment plans to eligible patients, will not impose
		wage garnishments or liens on primary residences, will not send
		unpaid bills to outside collection agencies and will cease all
		collection efforts

Identifier	ReturnReference	Explanation
		Part VI, Line 2 In FY2011, Hartford Hospital conducted a Community Health Needs Assessment in collaboration with the Hartford Department of Health and Human Services, St Francis Hospital and the Connecticut Children's Medical Center, which was completed in March, 2012 The consortium hired a nationa consulting firm to conduct Key Respondent interviews with loca social service, health, government and community leaders In addition, the results from a survey of over 400 Hartford residents by the Urban Alliance were incorporated into the findings

Identifier	ReturnReference	Explanation
		Part VI, Line 3 Hartford Hospital disseminates information about its Financial Assistance Policy as follows (i) provide signage regarding this Policy and written summary information describing the Policy along with financial assistance contact information in the Emergency Department, Labor and Delivery areas and all other Hospital patient registration areas (ii) directly provide to each patient written summary information describing the Policy along with financial assistance contact information in all admission, patient registration discharge, billing and collection written communications, (iii) post the Policy on the Hospital's Home page, (iv) educate all admission and registration personnel regarding the Policy so that they can serve as an informational resource to patients regarding the Policy

ReturnReference	Explanation
	Part VI, Line 4 Hartford Hospital is located in the capital of the
	State of Connecticut, which is one of the poorest cities in the
	nation with 31 9% of all of its residents and 38 3% of its
	families with children under the age of 18 living below the
	poverty line (US Census 2010) According to the CHNA just
	completed, the City of Hartford's population of 124,775+/-
	remains overwhelmingly minority and is comprised of 42%
	Hispanic, 37% Black White and other groups make up the rest
	of the population The median age of Hartford residents is 31
	(CERC, 2011) This compares unfavorably with Hartford
	County's median age of 40 In 2010, the median income per
	household within the City of Hartford was \$26,055(CERC,
	2011) This compares unfavorably with Hartford County's
	median household income of \$60,177 (CERC, 2011)
	According to the Connecticut Department of Labor, the
	unemployment rate in the City of Hartford was estimated to be
	15 4% in October, 2011 versus a statewide rate of 8 2%
	There is one other acute care hospital in Hartford proper and
	two smaller acute care hospitals in nearby suburbs

Identifier	ReturnReference	Explanation		
		Part VI, Line 6 The majority of Hartford Hospital's governing		
		board is comprised of persons who either reside or work in its		
		primary service area, and they are neither employees nor		
		contractors of the Hospital Hartford Hospital extends medical		
		staff privileges to all qualified physicians in its community. The		
		Hospital has partnered with the City of Hartford Department of		
		Health and Human Services and the Hispanic Health Center to		
		provide health services to the underserved in the community. In		
		addition, the Hospital participates in research projects with the		
		Hispanic Health Council to improve community health and well-		
		being The Hospital has contracted to use the services of an		
		organization to assist its patients in determining eligibility and		
		applying for state and federal means-tested programs, as well		
		as for the Hospital's Financial Assistance Program As a tertiary		
		health center, teaching hospital and Level 1 Trauma Center,		
		Hartford Hospital provides specialized services not available at		
		other hospitals These services are provided regardless of a		
		patient's ability to pay Hartford Hospital is the Center for		
		Emergency Medical Preparedness for the Connecticut		
		Department of Emergency Management and Homeland Security		
		for Regions 3 and 4 These regions include 15 hospitals HH		
		has responsibility for planning and training activities that		
		service all of these hospitals. The hospital uses its surplus		
		funds to provide additional benefits to its patients and the		
		community it serves as detailed in Sch O		

Identifier	ReturnReference	Explanation
		Part VI, Line 7 Hartford Hospital is an affiliate of Hartford HealthCare Corporation (HHC) HHC strives to provide compassionate care designed to deliver the necessary health services needed by the community. The Strategic Planning and Community Benefit Committee of the HHC Board of Directors ensures the oversight for these services by each hospital community. In addition, HHC continues to take important steps toward achieving its vision of being "nationally respected for excellence in patient care and most trusted for personalized, coordinated care "HHC affiliation creates a strong, integrated health care delivery system with a full continuum of care across a broader geographic area. This allows the small communities easy and expedient access to the more extensive and specialized services the larger hospitals are able to offer. This includes continuing education of health care professionals at all the affiliated institutions through the Center of Education, Simulation and Innovation located at Hartford Hospital, the largest of the system hospitals. The affiliation further enhances the hospitals' abilities to support their missions, identity, and respective community roles. This is achieved through integrated planning and communication to meet the changing needs of the region. This includes responsible decision making and appropriate sharing of services, resources and technologies, as well as containment strategies. Additionally, the hospital is affiliated with several other non-hospital charitable organizations. These organizations provide significant benefits to the community. These benefits are not reported in the Community Benefit data provided by the hospital

Identifier	ReturnReference	Explanation
Reports Filed With States	Part VI, Line 7	СТ

Schedule H (Form 990) 2010

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Part I General Information on Grants and Assistance

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

Inspection

DLN: 93493228011782 OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization Hartford Hospital

Schedule I

(Form 990)

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

Employer identification number

06-0646668

Form 990, Part I	ner Assistance to V, line 21 for any	o Governments and recipient that received eded	Organizations in more than \$5,000.	the United States Check this box if n	no one recipient rec	ceived more than \$5,0	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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) Connecticut Childrens Medical Center282 Washington Street Hartford, CT 06106	06-0646755	501(c)(3)	170,873		FMV		"The Mature Driver Safety Program" and "A Matter of Balance Program"
(2) VNA HealthCare Inc103 Woodland Street Hartford, CT 06105	06-0646938	501(c)(3)	250,000		FMV		"The Care Tansition Program" and "Telemonitoring of CHF Patients"
(3) Southside Institutions Neighborhood Alliance Inc 207 Washington Street Hartford, CT 06106	06-0993174	501(c)(3)	750,000		FMV		Redevelopment efforts on affordable housing, revitalization of commercial properties and streetscape improvements
(4) State of CT Health Dept - Maternal and Infant Outreach Program131 Coventry Street Hartford, CT 06112	06-6001870	12-412(1)	105,000		FMV		To provide a free case management and home visitation program with the goal of reducing infant mortality and low birth weight rates, as well as to improve the overall health and well-being of women, children, and their families under the auspices of the Department of Health and Human Services in response to the high infant mortality rate in Hartford
(5) Hispanic Health Council - Comadrona Program175 Main Street Hartford,CT 06106	06-1018979	501(c)(3)	19,840		FMV		To provide assistance to low income Latina pregnant women and their babies up to 2 years of age, including helping with insurance coverage, applying for WIC assistance, and providing baby items The program makes contact with the mothers every 2 months after the baby is born to provide support and assistance
(6) American Liver Foundation39 Broadway Suite 2700 New York, NY 10006	36-2883000	501(c)(3)	25,000		FMV		To promote education, support and research for the prevention, treatment and cure for liver disease

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

(a)Type of grant or assistance	(b) Number of recipients	(c) 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
(1) Tapestry Awards	3	9,000			
(2) Sons and Daughters Scholarship Awards	61	61,000			

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

Identifier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 The hospital works closely with Connecticut Children's Medical Center and the VNA Health Care, Inc. to help promote the programs for which the dollars are granted. The hospital also partners with SINA on various community projects. In addition, the gifts are restricted to specific purposes by the Hospital in written communication that accompanies these payments.
O ther Information	Part IV	Schedule I, Part III Once recipients are determined, the funds are sent directly to the institutions and not to individuals Required qualifications * The applicant must be financially dependent on the employee by being claimed on either parent's tax return. The applicant must be enrolled as a full-time student in an Accredited Undergraduate Program or attending any of Hartford Hospital's School of Allied Health Programs. The applicant must be the son or daughter (biological, adopted, stepchild, or legal ward) of a Hartford Hospital, Institute of Living, Jefferson House, or Cedar Mountain employee (full-time or part-time, budgeted to work at least 20 hours per week). The dependent of a Hartford Hospital employee who is also employed at Hartford Hospital is eligible to apply if they are budgeted to work less than 20 hours per week at Hartford Hospital. If the student is budgeted to work more than 20 hours at Hartford Hospital, the student is not eligible for the scholarship, but may instead apply for tuition reimbursement from the hospital. Applicant must have a verifiable GPA of 3 0 or higher to apply Applicants are chosen on 3 criteria. 1 Based on parent's years of service to Hartford Hospital. 2 GPA (must be at least a 3 0 or higher to apply).

Compensation Information

DLN: 93493228011782

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Internal Revenue Service

Department of the Treasury

Name of the organization

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.

Open to Public Inspection

Har	tford Hospital 06-0646668			
Pa	rt I 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		No
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee Independent compensation consultant Form 990 of other organizations V 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	Yes	
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?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
5	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. 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		Νo
b	Any related organization?	5b		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		No
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	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations			

section 53 4958-6(c)?

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 o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
	(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	Return Reference	Explanation
	Part I, Line 1a	Tax indemification and gross-up payments to individuals for benefits are included as taxable income on Form W-2 The box related to health or social club dues or initiation fees is checked. Hartford Hospital, a member of Hartford HealthCare Corporation maintains memberships at two local clubs. These clubs do not allow for corporate memberships, therefore, the membership fees are paid directly to the clubs, but accounts are assigned to individual executives. These executives do not derive any personal benefit from the use of the clubs and any use is for business purposes only. These executives are not taxed, and are required to sign an annual attestation that they do not derive any personal benefit from the use of these club memberships. The memberships resides at Hartford Hospital and can be reassigned at will
	Part I, Line 1b	The organization does not have a formal written policy relating to gross-up payments. Requests for gross-up payments are reviewed by both the Tax & Payroll departments to ensure compliance with Federal and State regulations. Payments are included in the recipient's form W-2 and are taxed as required.
	4a-b	In John Meehan's (former CEO) severance agreement began in January of 2009. Per the agreement, Mr. Meehan received 24 months of severance based upon an annual salary of \$568,400 plus incentives. Total payments to Mr. Meehan for Severance and other benefits totaled \$1,23,454 Mr.) John Bancammon's (former CFO) severance agreement began in January of 2009 and ended in June 2010. Per the agreement, Mr. Biancamman received 15 months of severance based upon an annual salary of \$545,160 plus additional incentives. Total payments to Mr. Biancamman for Severance and other benefits totaled \$311,274. Dr. Jeffrey Kluger was paid a lump sum amount of \$1,425,540.99 for his participation in the Hartford Hospital Supplemental Employee Retirement Pland SERP). Total compensation to Dr. Kluger including the SERP payment was \$1,915,045. 2010. SERP accrual made on behalf of the following individuals. Dr. Hardd Schwartz \$71,166. Dr. Paul Thompson \$70,242. Dr. Offond aktrion \$2,073. Mr. Eliliot Joseph \$121,155. SERP Description. Eliliot Joseph The purpose of the SERP Agreement is to provide a Supplemental Retirement Benefit to Eliliot Joseph upon certain termination events or upon disability, death or attainment of age 6.5 while employed. The Agreement is intended to (a) Constitute an unfinided plan maintained primarily for the purpose of providing deferred compensation benefits for a select group of management or highly compensated employees under Sections 201 (2), 301 (a)(3) and 401 (a)(1) of the Employee Retirement Income Security Act of 1974, as amended (the "Code") and Treasury Regulation Section 18.7-2(h), and (c) be excepted from Section 409A of the Code as a "short term deferral," and it shall be interpreted and administered accordingly Monotin of Benefit. The amount of the Suppliemental Retirement Benefit shall be calculated as folious (a) minus the sum of (b) and (c), as each is defined below (a) The amount that would be Executive Section 415, did not apply to Executive Section 415, did not defended below (a) The summan and
	Part I, Line 7	The hospiital has an At Risk Plan that encourages and rewards achievements of significant functional goals for management that contribute to organization(s) strategic and financial direction. The Plan utilizes market practice alignment to ensure competitive recruitment and retention. Awards are based on CEO and/or Compensation Committee discretionary assessment of overall performance and individual contribution to results.

Andrew L Salner MD

Harold I Schwartz MD

Jamie M Roche MD

James M Blazar

Richard G Stys

Yvette Melendez

Karen T Goyette

Betsy Boatman

Inam Kureshi MD

Lenworth Jacobs MD

Orlando C Kırton MD

Joel I Sorosky MD

Paul Thompson MD

Michael Lindberg MD

Kevin P Keating MD

Vernon Y Kwok MD

Robert S Dicks MD

Christopher Clyne

Karyn L Butler

Paul W Crespi

Alan J Smally

Detlef Wencker

Jeffrey Kluger MD

Steven L Zweibel

John F Greene Jr

Joseph V Portereiko

Mark W Sebastian

Elliot T Joseph

Stephan O'Neill

James K Kınsella

Linda B Spivack

John J Meehan

Alfred Herzog

Gary V Heller MD

Paul S Besson Esq

John M Biancamano

Judith Pepe

Alan Laites

Cheryl Ficara

Rıta Parısı

Michele B Bush Esq

Sonal Shah

(F) Compensation reported in prior Form

990 or Form 990-EZ

0

0 0

0 0

0

0

0

0

0

0

1,425,541

777,849

194,879

802,562

586,230

737,112

491,345

303,617

573,791

413,310

175,899

204,735

561,538

243,191

257,739

336,797

256,561

243,126

657,297

751,232

632,893

729,585

438,768

484,057

424,320

263,643

260,207

236,937

493,508

459,075

426,114

470,292

437,672

1,915,045

457,138

494,333

421,398

498,820

1,711,915

475,856

527,219

303,696

385,445

1,223,454

311,374

130,158

520,286

Software ID: **Software Version:**

EIN: 06-0646668 Name: Hartford Hospital

Thomas J Marchozzı	(I)	479,348 0	135,150 0	1,165 0	19,600 0	28,224 0	663,487 0	
Wendy E Elberth	(I) (II)	233,731 0	28,166 0	13,584 0	42,613 0	15,201 0	333,295 0	
Laurine Bow	(I) (II)	198,303 0	33,129 0	13,326 0	55,255 0	22,872 0	322,885 0	
Carol S Garlick	(I) (II)	182,499 0	31,709 0	424 0	20,639 0	14,318 0	249,589 0	
Rocco Orlando	(I) (II)	360,637 0	75,000 0	18,650 0	59,375 0	24,886 0	538,548 0	
Bimal Patel	(I) (II)	259,002 0	65,000 0	25,303 0	24,451 0	11,687 0	385,443 0	
Donna Handley	(1)	248,003	28,563	765	14,791	11,495	303,617	

	[(11)]	0	0	0	0	0	
Neil Yeston MD	(I) (II)	485,404 0	211,914	22,425 0	53,083 0	29,736 0	
Joseph J Klimek MD	(I) (II)	477,143 0	55,852 0	33,818 0	0	19,417 0	

78,704

64,272

28,563

117,420

60,600

22,031

29,333

102,640

26,033

19,125

58,904

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0

29,176

32,824

75,000

0

375,000

53,255

143,838

24,415

4,935

45,310

0

(ii) Bonus & (i) Base incentive Compensation compensation compensation Jeffrey Flaks 539,289 159,250 (11)

194,879

448,673

337,846

393,987

305,789

109,344

160,132

424,528

181,797

181,153

237,671

256,561

196,549

600,508

594,160

546,795

539,101

362,313

401,111

359,796

236,260

208,982

189,227

410,779

413,296

308,622

365,337

373,884

405,018

396,425

393,782

381,406

464,576

1,029,754

341,560

252,327

235,305

351,181

106,605

398,068

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17,913

2,453

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2,632

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29,747

1,148

0

0

249

31,416

39,119

18,822

20,054

14,951

14,817

8,656

8,291

772

4,421

17,422

851

2,310

32,317

9,924

1,466,677

10,001

37,217

3,776

670

111,838

18,807

39,737

6,733

1,413

1,185,054

300,397

15,166

2,944

25,289

0

∢ ey	, Employees, and	d Highest Compen	sated Employees	
IS	Compensation	(C) Deferred	(D) Nontaxable	(E) To
	(iii) Other	compensation	benefits	(

32,425

146,973

45,900

14,791

36,269

22,301

8,317

11,812

17,150

12,821

13,928

23,275

24,151

59,848

39,775

146,112

36,734

42,775

31,202

28,112

39,775

19,600

18,375

59,375

28,976

25,519

37,211

19,425

17,150

157,255

39,775

69,585

25,905

21,117

51,264

0

(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	

0

29,701

27,482

25,414

11,495

23,662

23,777

10,918

2,757

14,588

22,340

13,786

15,799

22,177

25,373

28,929

27,501

24,318

24,770

25,354

24,666

19,092

22,341

10,465

25,532

25,328

21,807

13,263

24,888

43,350

25,193

26,123

16,791

16,424

38,068

22,459

21,732

11,338

11,734

33,465

10,977

8,387

22,700

0

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 Cabadula	Dawk II Officers	Dinastana	T	Man Francisco	d 11:-b t C-	managed Empl	

Form 990, Schedule J, Part I	II - Officers, Directors, Trustees, Key Employees, and	d Highest Compen	sated Employee
(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation	(C) Deferred	(D) Nontaxable

Employees	and Highest Compensated Employees

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As Filed Data -

DLN: 93493228011782

Employer identification number

Schedule L Tra

(Form 990 or 990-EZ)

Name of the organization

Department of the Treasury

Internal Revenue Service

Transactions with Interested Persons

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

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

OMB No 1545-0047

2010

Open to Public Inspection

Hartford Hospital							0	6-06466	68		
Part I Excess Benefit Train Complete if the organizat							organı	zations d	only).	ne 40b	
1 (a) Name of disq					(b) Desc						(c) rected?
										Yes	No
2 Enter the amount of tax impos section 49583 Enter the amount of tax, if any								•	r · \$ · \$		
Part III Loans to and/or I Complete if the organiz). Part IV. line 26	. or For	m 990-E	Z. Part V	. line 38	a	
(a) Name of interested person and purpose	(b) Loan to or from the (c)		(c)Orig	jinal	(d)Balance due	(e) In default?		(f) Approved		(g) Writt	
	То	From				Yes	No	Yes	No	Yes	No
Total				▶ \$				1			
Part III Grants or Assistar Complete if the orga	nce Be	nefitt	ing Intere	ested I	Persons.	l / line :	77				
(a) Name of interested pers			b) Relationsh	ııp betwe	een interested per ganization			ount of g	rant or ty	pe of assis	stance
						-+					
						+					

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	organı	narıng of zatıon's nues?
	organization			Yes	No
(1) See Part V	See Part V		See Part V		Νo

Part V Supplemental Information

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

Identifier	Return Reference	Explanation
	business transactions involving interested persons	(a)Name of Person Douglas Elliot(b)Relationship Between Interested Person and Organization Board Member(c)A mount of Transactions \$76,156 (d)Description of Transaction Mr Douglas Elliot is a board member of Hartford Hospital He is also an executive at the The Hartford Insurance Group (The Hartford) The Hartford provided property casualty insurance to Hartford Hospital and received premium fees for the risk Premium paid for the year was \$76,156 (e)Sharing of Organization's Revenue? No(a)Name of Person Brian MacLean (b)Relationship Between Interested Person and Organization Board Member(c)A mount of Transactions \$5,718,119(d) Description of Transaction Mr Brian MacLean is a board member of Hartford Hospital and Hartford HealthCare Corporation (related organization) Mr MacLean is the President and Chief Operating Officer of the Travelers Insurance Company The company provides certain insurance coverages for Hartford HealthCare and affliates Mr MacLean has no personal involvement in any of these transactions which are not material to the financial position of Travelers (e)Sharing of Organization's Revenue? No(a)Name of Person Stuart Markowitz(b)Relationship Between Interested Person and Organization Ex-Officio(c)Amount of Transactions \$100,000 (d)Description of Transaction Dr Stuart Markowitz is a board member of Hartford Hospital Dr Markowitz served as Chairman of the Department of Radiology at Hartford Hospital and is also an officer at Jefferson Radiology Jefferson Radiology is engaged in a joint venture relationship with Hartford Hospital under an entity called CT Imaging Partners There are management fees that were paid directly to Dr Markowitz Hartford Hospital paid Dr Markowitz \$100,000 for his duties as Medical Staff Officer (e)Sharing of Organization's Revenue? No

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DLN: 93493228011782

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

NonCash Contributions

Open to Public Inspection

	e of the organization ord Hospital				Employer identificat	ion nu	mber	
iaiti	ora nospital				06-0646668			
Pa	rt I Types of Property			-				
		(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d Method of determining of amounts		ontribut	tion
1	Art—Works of art							
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications							
	Clothing and household							
9000								
	Cars and other vehicles .							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded	X	8	1,282,604	FMV			
	Securities—Closely held stock							
11	Securities—Partnership, LLC, or trust interests .							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
	Drugs and medical supplies							
	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
	Archeological artifacts							
25	O ther ► ()							
	O ther ►()							
	·							
28	Other►()							
29	Number of Forms 8283 received b for which the organization complete				29			0
							Yes	No
30a	During the year, did the organization							
	must hold for at least three years f			•	d to be used			
	for exempt purposes for the entire	holding p	eriod?			30a		No
b	If "Yes," describe the arrangement	t ın Part I	I					
31	Does the organization have a gift a					31	Yes	<u> </u>
32a	Does the organization hire or use t contributions?	hırd partı	es or related organizations	to solicit, process, or sell	non-cash	32a		No
b	If "Yes," describe in Part II							
33	If the organization did not report re	evenuesı	n column (c) for a type of p	roperty for which column (a) is checked,			1

describe in Part II

Page 2

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2010

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As Filed Data -

DLN: 93493228011782

OMB No 1545-0047

2010

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

SCHEDULE 0

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

	Employer identification number
Hartford Hospital	
	06-0646668

ldentifier	Return Reference	Explanation
New Program Services	Form 990, Part III, line 2	On February 4, 2011 the Hospital acquired certain assets of an Eye Surgery Center from Constitution Surgery Centers. The acquisition was to enhance ophthalmology services available to patients. Cash paid for the transaction was \$27.5 million. The purchase price paid in excess of fair value of identified assets aggregated \$25.8 million which has been recorded as goodwill. The Eye Surgery Center results (net patient revenue of \$11.8 million and operating expense of \$4.3 million) are included in the consolidated statement of operations since the acquisition date.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 1		There were several board members whose term expired in May, 2011 As a result, they were not considered voting members at the end of the tax year

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 6		Hartford Hospital is organized as a non-stock not for profit entity. Hartford HealthCare Corporation is the sole member

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7a		The sole member of the organization has the authority to approve/deny members of the governing body

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7b		The sole member of the organization has the right to review, approve, disapprove and deny significant transactions such as mergers, acquisitions, dissolutions etc

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		The Form 990 was prepared by Hartford HealthCare's Tax Department. It was then reviewed by an independent accounting firm. It was then forwarded to the organization's top management including the CFO for review. The Form was also reviewed by the Finance Committee prior to submission to the Board. The final form was provided to the entire Board and reviewed by the Board at one of its scheduled meetings. Once the entire review process was completed, the form was signed by the CFO and then filed with the Internal Revenue Service.

ldentifier	Return Reference	Explanation
	Form 990, Part VI, Section B, Inne 12c	The hospital's board has adopted the policy of the member organization, Hartford HealthCare Corporation All directors and officers of the organization shall complete and sign a Conflict of Interest statement. The statement will include an itemization and description of any actual or potential conflict of interest and all material facts related thereto for such director or officer by virtue of his or her activities or the activities of related persons. Directors and officers are urged to be inclusive in this disclosure since the disclosure of potential and actual conflicts of interest is essential to ensuring discussion of the conflict Conflict of Interest disclosure statements shall be returned to the Compliance Officer. All disclosures made will be reviewed by the Compliance Officer and the Director of Compliance and Audit, under the direction of the Chairman and the President, who shall exercise good faith judgment as to whether a conflict exists. The Chairman and President shall be responsible for monitoring transactions or arrangements in which a director or officer may have a conflict of interest and for assuring that the director or officer serves the hospital's best interests. The Compliance Officer, Director of Compliance and Audit, Chairman and/or President may consult with any director or officer and obtain information necessary for an ordinarily prudent person to make a judgment as to whether a conflict exists and each director and officer shall cooperate with such requests. The Compliance Officer, Director of Compliance and Audit, Chairman and/or the President shall provide guidance to the director or officer and to the board of directors as to the appropriate course of action. The Chairman and the President shall seek the advice and approval of the full Board of Directors in determining whether a conflict of interest exists and that the director or officer serves the organization's best interests. When a conflict of interest is discovered, such director and/or officer with the conflict will be requ

ldentifier	Return Reference	Explanation
	Form 990, Part VI, Section B, Iine 15	The Compensation Committee hires an outside Consultant, Integrated Healthcare Strategies, to determine best practices in governing executive compensation. The following steps are taken - Executive Compensation. Committee (Committee) of the Board of Directors of Hartford HealthCare established and regularly reviews. Executive Compensation Philosophy - Committee regularly reviews scope and depth of positions taking into account complexity and the financial impact and accountability of all "disqualified persons" - National and regional peer groups are determined based on organizational size, operating revenue, geography and other relevant factors - Analysis of current total compensation versus market performed by independent third party compensation consulting firm, reviewed by the committee - Recommendations made based on data analysis to ensure appropriate competitive positioning within parameters of compensation philosophy - CEO compensation determined by Committee based on organizational performance - All changes reviewed and approved by Executive Compensation Committee The compensation determination process is reviewed on an annual basis

Identifier	Return Reference	Explanation
	Form 990, Part VI, Section C, line 19	Form 990, 990T and Form 1023 and its attachments are available upon request. Hartford Hospital's governing documents, financial statements and Conflict of Interest statements are also made available upon request.

ldentifier	Return Reference	Explanation
Changes in Net Assets or Fund Balances	Form 990, Part XI, line 5	Net unrealized losses on investments -28379625 Sch K-1 Reconciling Items 1223482 Pension Adjustment -34379210 Transfer to Affiliates -2910546 Total to Form 990, Part XI, Line 5 -64445899

	ldentifier	Return Reference	Explanation					
I		Form 990 Part XII, Line 2c	The process did not change from prior year					

Identifier	Return Reference	Explanation
Cardiology	Form 990 Part III, Line 4a	Heart Transplant Program (HHTP) The Heart Transplant Center continues to grow during the FY2011 remaining the largest referral center and heart transplant program in the state of CT. In FY11, the Hartford Hospital Heart Transplant Program (HHHTP) performed 19 orthotopic heart transplants with a one year survival rate over 90%. Approximately 149 previously transplanted heart patients are followed by the Hartford Hospital Transplant team. The Heart Transplant program's waiting list for the United Network for Organ Sharing (UNOS) continues to be one of the northeast "shorter than average" wait times. Sara Thompson, APRN has joined the Transplant Team as a Coordinator with Lynn O'Bara, Dr. Detlef Wencker, Dr. Jason Gluck and Dr. Joseph Radojevic in the Heart Failure and Transplant Center. The HHHTP continues to expand its use of Allomap blood testing which remains an adjunct to endomyocardial biopsy to help with the surveillance and management of rejection in Heart Transplant patients. The continued growth of the program has resulted in further integration of Dr. Hammond and his surgical colleagues. Preventive Cardiology Preventive Cardiology includes cholesterol management, LDL-apheresis, cardiovascular sports medicine consultation, counseling/stress management, smoking cessation and cardiac rehabilitation. LDL. Apheresis was relocated to the Cardiology Department and serves patients from Connecticut and Western. Massachusetts. The program has doubled in size over the last few years and is one of the largest programs in the country. Cardiac Rehabilitation continued to expand with an automatic referral system for patients being discharged with cardiac diagnoses. There were over 12,000 Cardiac Rehabilitation visits at the four sites. Hartford, Glastonbury, Avon and West Hartford. The smoking cessation program continues to provide services to both patients and employees. Community Outreach Hartford Hospital actively supported the American Heart Association's Annual Heart Walk. Multiple heart health screenings were we

Identifier	Return Reference	Explanation
	Form 990 Part III, Line 4d	In 2010, Breastfeeding Hertage and Pride served more than 1,200 women Two-thirds were La tino, and many were African American Overall, a remarkable 61 percent of women served by this program were still breastfeeding 90 days after giving pirth. The program's model has proven so successful that it's been replicated elsewhere in Connecticut. In addition to Hairtford Hospital and the Hispanic Health Council, partners in the Breastfeeding Heritage and Pride Program are the federal Women, Infants and Children (WICC) program and the University of Connecticut. Sharing good food is a family tradition. At Hartford Hospital, we want to help our community family enjoy foods that taste great, but are also good for their health. That's why we're collaborating with key partners to support. "Revolucion de Nutricion," or "Nutrition Revolution," a local television program aimed at the Latino community." Revolucion de Nutricion," or "Nutrition Revolution," a local television program aimed at the Latino community. "Revolucion de Nutricion," or "Nutrition Revolution," a local television program aimed at the Latino community. "Revolucion de Nutricion," or "Nutrition Revolution," a local television program aimed at the Latino community. "Revolucion de Nutricion," or "Nutrition Revolution" alocal television program aimed at the Latino community. "Revolucion de Nutricion," or "Nutrition Revolution" and the state of the program and the Latino community. "Revolucion de Nutricion" aimed to control television (WICC) to contain few or calories and less fat and sodium. The program meets a significant need among our community family foods at the market Hartford Hispital and CEO Eliot Joseph and Ramon Jimenez, MD, of our medical staff have both appeared on the program. The program meets a significant need among our community family, which is largely Latino Urban, low-income Latinos have high rates of obesity, type 2 diabetes, heart disease and other cardiovascular problems. The reasons are many Tradition ald shess tend to be high in fat, sait

Identifier	r Return Explanation Reference									
	Form 990 Part III, Line 4d	pective toward people with psychiatric problems. The program also seeks to educate student's about current neuroscience findings suggesting physical causes for mental illness and to promote students' interest in mental health careers. Hundreds of students have participated in BrainDance over the years, including 132 in 2010, and they've submitted a wide range of high-quality projects. Winners receive their awards at a special ceremony on The Institute of Living campus. Each winner presents his or her project, and the program features a talk by a leading mental health professional. Through BrainDance, Hartford Hospital is he lping to educate both students and the broader community about mental illness.								

Identifier	Return Reference	Explanation
	Part IV, Line 12 and Part XII, Line 2b	Hartford Hospital did not receive a separate audited financial statement and is included in a consolidated audited financial statement

ldentifier	Return Reference	Explanation
Average Hours Per Week	Form 990 Part VII, Column B	Certain employees listed on Part VII of Form 990 share their time between Hartford Hospital and other related organizations. These are all full time employees that average 40-60 hours per week. Their hours and salaries are allocated between Hartford Hospital and Hartford Health Care Corporation for expenditure purposes.

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DLN: 93493228011782

2010

OMB No 1545-0047

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entity

SCHEDULE R (Form 990)

(1) Clinical Laboratory Partners LLC

Related Organizations and Unrelated Partnerships ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

Department of the Treasury Internal Revenue Service

Name of the organization Hartford Hospital			Employer identification number						
				06-0646668					
Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)									
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state	(d) Total income	(e) End-of-year assets	(f) Direct controlling				

► Attach to Form 990. ► See separate instructions.

or foreign country)

Newington, CT 06111 06-1525596	Medical Laboratories	Medical Laboratories			C			0	N/A			
(2) Practice Central LLC 85 seymour Street Hartford, CT 06102 36-4692507	Information Technology		СТ					0 1	N/A			
Part II Identification of Related Tax-Exempt Organiz or more related tax-exempt organizations during the	ations (Complete ne tax year.)	ıf the	e organizatior	n ans	wered "Yes"	on F	Form 990, Part	ΙV,	line 34 becaus	se it had	one	
(a) Name, address, and EIN of related organization	(b) Primary activity	Lega or fo	(c) I domicile (state oreign country)	(d) Exempt Code section		Pul (ıf s	(e) Public charity status (if section 501(c)(3))		(f) Direct controlling entity		(g) 512(b)(13 trolled nızatıon	
										Yes	No	
See Additional Data Table												
	l .											

Part III Identifi because				ble as a Partner reated as a partne					answe	ered "\	es" on Fo	rm 990,	Part	IV, lıı	ne 34																																						
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	Share of t	(f) total income	(g) Share of end-of-year assets		Share of end-of-year		Share of end-of-year		Share of end-of-year		Share of end-of-year		Share of end-of-year		Share of end-of-year		Share of end-of-year		Share of end-of-year		Share of end-of-year		Share of end-of-year		Share of end-of-year		Share of end-of-year		Share of end-of-year		Share of end-of-year		Share of end-of-year		Share of end-of-year		Share of end-of-year				Share of end-of-year		(h Disprop alloca	prtionate	(i) Code V- amount in b Schedule (Form 1	ox 20 of : K-1	(j Gene mana parti	ral or aging	(k) Percentage ownership
									Yes	No			Yes	No																																							
See Additional Data Table													-																																								
				ble as a Corpora ations treated as a							nswered "\	es" on	Form	990,	Part IV,																																						
Name, address, and	(a) d EIN of related organiz	ation	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) (e) Direct controlling Type of e entity (C corp, S or trus		corp,			(g) Share of end-of-year assets		(h) Percentage ownership																																								
See Additional Data Table				Journal, ,										+																																							

(6)

Fe	LV	Transactions with Related Organizations (Complete in the organization answered Tes	oli i olili 330, Pai	(1v, line 34, 33, 3	JA, 01 JU.)				
	Note.	Complete line 1 if any entity is listed in Parts II, III or IV				Ye	es l	No	
1 Du	1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?								
а	a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity								
b	b Gift, grant, or capital contribution to other organization(s)								
c	c Gift, grant, or capital contribution from other organization(s)								
d	Loans	or loan guarantees to or for other organization(s)			10	d Ye	es		
е	e Loans or loan guarantees by other organization(s)								
f	Sale of	fassets to other organization(s)			1	f		No	
g	Purcha	ase of assets from other organization(s)			1			No	
h	Excha	nge of assets			1	_		No_	
i I	Lease	of facilities, equipment, or other assets to other organization(s)			1	i Ye	es		
j	Lease	of facilities, equipment, or other assets from other organization(s)			1				
k	k Performance of services or membership or fundraising solicitations for other organization(s)								
1 1	l Performance of services or membership or fundraising solicitations by other organization(s)								
m	m Sharing of facilities, equipment, mailing lists, or other assets								
n	Sharın	g of paid employees			1	n Ye	es		
		ursement paid to other organization for expenses				o Ye	_		
р	Reımb	ursement paid by other organization for expenses			1	p Ye	es		
		transfer of cash or property to other organization(s)			_	q Ye			
r	Other	transfer of cash or property from other organization(s)			1	r		No	
_2	If the a	answer to any of the above is "Yes," see the instructions for information on who must complete this line, in		onships and transact					
		(a)	(b) Transaction	(c)	(d) Method of determ		amour	nt	
		Name of other organization	type(a-r)	Amount involved	ınvolv				
(1)									
See Add	litional E	Oata Table							
(2)									
(3)									
(3)									
(4)									
` ,									
(5)									

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

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

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

Part VII Supplemental Information

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

Identifier	Return Reference	Explanation
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Schedule R (Form 990) 2010

Software ID: **Software Version:**

> **EIN:** 06-0646668 Name: Hartford Hospital

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations										
(a) Name, address, and EIN of related organization	(b) Primary activity	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	(g Section (b)(1 contro organiz	n 512 13) olled				
						Yes	No			
Connecticut Health System Inc 80 Seymour Street Hartford, CT06102 22-2779421	Coordination of Health Care Delivery	СТ	501(C)(3)	11 (c)	N/A	Yes				
Hartford HealthCare Corporation 80 Seymour Street Hartford, CT06102 22-2672834	Support and Management Services to Hartford Hospital and Affiliates	СТ	501(C)(3)	11 (c)	N/A	Yes				
Institute of Living 200 Retreat Avenue Hartford, CT06106 06-0646683	Psychiatric Services	СТ	501(C)(3)	11 (c)	Hartford HealthCare Corp	Yes				
Windham Community Memorial Hospital 112 Mansfield Avenue Willimantic, CT06226 06-0646966	Healthcare Services	СТ	501(C)(3)	3	Hartford HealthCare Corp	Yes				
Windham Hospital Foundation Inc 112 Mansfield Avenue Willimantic, CT06226 56-2546632	Supporting Organization	СТ	501(C)(3)	11 (a)	Windham Community Memorial Hospital	Yes				
Midstate Medical Center 435 Lewis Avenue Meriden, CT06451 06-0646715	Healthcare Services	СТ	501(C)(3)	3	Hartford HealthCare Corp	Yes				
Natchaug Hospital Inc 189 Storrs Road Mansfield Center, CT06226 06-0966963	Behavioral Health	СТ	501(C)(3)	3	Hartford HealthCare Corp	Yes				
VNA Health Care Inc 103 Woodland Street Hartford, CT06105 06-0646938	Home Healthcare	СТ	501(C)(3)	7	Hartford HealthCare Corp	Yes				
Rushford Center Inc 883 Paddock Avenue Meriden, CT06450 06-0932875	Substance Abuse Healthcare Services	СТ	501(C)(3)	7	Hartford HealthCare Corp	Yes				
VNA Health Resources Inc 103 Woodland Street Hartford, CT06105 06-1161422	Home Healthcare	СТ	501(C)(3)	9	Hartford HealthCare Corp	Yes				
Hartford Hospital Auxiliary co Hartford Hospital 80 Seymour Street Hartford, CT06115 06-6040747	Fundraising	СТ	501(C)(3)	11 (c)	Hartford Hospital	Yes				
The Hospital of Central CT and Bradley Memorial 100 Grand Street New Britain, CT06050 06-0646768	Healthcare Services	СТ	501(C)(3)	3	Central CT Health Alliance	Yes				

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

Form 990, Schedule R, Part II - Identification of Rela	ated Tax-Exempt Or	ganizations	1	T	1		
(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 (b)(g) on 512 (13) rolled ization
						Yes	No
Central CT Senior Health Svc dba Southington Care					Central CT Health		
45 Meriden Avenue Southington, CT06489 22-2635676	Sub-Acute & Long Term Healthcare	СТ	501(C)(3)	9	Alliance	Yes	
Bradley Health Services							
100 Grand Street New Britain, CT06050 06-1367014	Healthcare Services	СТ	501(C)(3)	9	Central CT Health Alliance	Yes	
Central CT Health Alliance							
100 Grand Street New Britain, CT06050 22-2785033	Support & Management Svcs to TOCC and Affiliates - Shell	СТ	501(C)(3)	11 (b)	Hartford HealthCare Corp	Yes	
VNA of Central CT Inc							
205 West Main Street New Britain, CT06050 06-0646940	Public Health Nursing & Home Care	СТ	501(C)(3)	9	Central CT Health Alliance	Yes	
The Orchards of Southington							
34 Hobart Street Southington, CT06489 06-1490803	Residential Services for Senior Care	СТ	501(C)(3)	9	Central CT Senior Health Services Inc	Yes	
Community Mental Health Affiliates 270 John Downey Drive New Britain, CT06051 06-0934544	Mental Health & Substance Abuse Treatment Provider	СТ	501(C)(3)	7	Central Ct Health Alliance	Yes	
Mulberry Gardens of Southington LLC	+						+-
58 Mulberry Street Plantsville, CT06479 82-0586577	Assisted Living & Adult Day Care Facility	СТ	501(C)(3)	9	Central CT Senior Health Services Inc	Yes	
						Yes	
The Hatch Hospital Corp	†						\top
112 Mansfield Avenue Willimantic, CT06226 06-6076412	Healthcare Services	СТ	501(C)(3)	3	Windham Community Memorial Hospital	Yes	
Windham Community Memorial Hospital Women's Auxiliary Inc							
112 Mansfield Avenue Willimantic, CT06226 06-0677728	Fundraising	СТ	501(C)(3)	11 (a)	Windham Community Memorial Hospital	Yes	
Midstate Medical Center Auxiliary					Madaal		
435 Lewis Avenue Meriden, CT06451 06-6063082	Fundraising	СТ	501(C)(3)	3	Midstate Medical Center	Yes	

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership												
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	Controlling Entity	(e) Predominant income (related, unrelated, excluded from tax under sections	(f) Share of total income (\$)	(g) Share of end-of-year assets (\$)	anocations		(i) Code V-UBI amount on Box 20 of K-1 (\$)	(j) General or Managing Partner?		(k) Percentage ownership
				512-514)			Yes	No		Yes	No	
Central CT Sports Medicine Center LLC 15 Masairio Drive Suite 104 Berlin, CT06037 22-3196509	Physical Therapy	СТ	N/A									
New Britain MRI Limited Partnership 100 Grand Street New Britain, CT06050 06-1271349	Magnetic Resonance Imaging	СТ	N/A									
New Britain Occupational Health Center LLC 440 New Britain Avenue Plainville, CT06062 06-1484904	Occupational Healthcare	СТ	N/A									
Ambulance Service of Manchester LLC PO Box 300 Manchester, CT06450 06-1557358	A mbulatory Services	СТ	N/A									
Connecticut Imaging Partners LLC 111 Founders Plaza East Hartford, CT06108 13-4298940	Imaging Service	СТ	N/A	Unrelated	283,223	801,673		No			Νo	50 000 %
Glastonbury Endoscopy Center LLC 300 Western Boulevard Glastonbury, CT06033 26-1721234	Endoscopy Services	СТ	N/A	Related	410,457	116,841		No			No	50 000 %
Glastonbury Surgery Center 195 Eastern Boulevard Glastonbury, CT06033 26-2600828	Surgery Services	СТ	N/A	Related	-454,193	145,794		No			Νo	50 000 %
Hartford - Middlesex Clinical System LLC 80 Seymour Street Hartford, CT06110 06-1543605	Affiliate Support Services	СТ	N/A	Unrelated	-135			No			Νo	50 000 %

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	Primary activity	(c) Legal Domicile (State or Foreign Country)	Controlling Entity	(e) Predominant Income (related, unrelated, excluded from tax under sections	(f) Share of total Income (\$)	(g) Share of end-of- year assets (\$)	(h) Disprop allocati	ortionate	(i) Code V-UBI amount on Box 20 of K-1 (\$)	(j) General or Managing Partner?		(k) Percentage ownership
				512-514)			Yes	No		Yes	No	
	Outpatient Care Clinic	СТ	N/A									
	Endowment Management	СТ	N/A									

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust

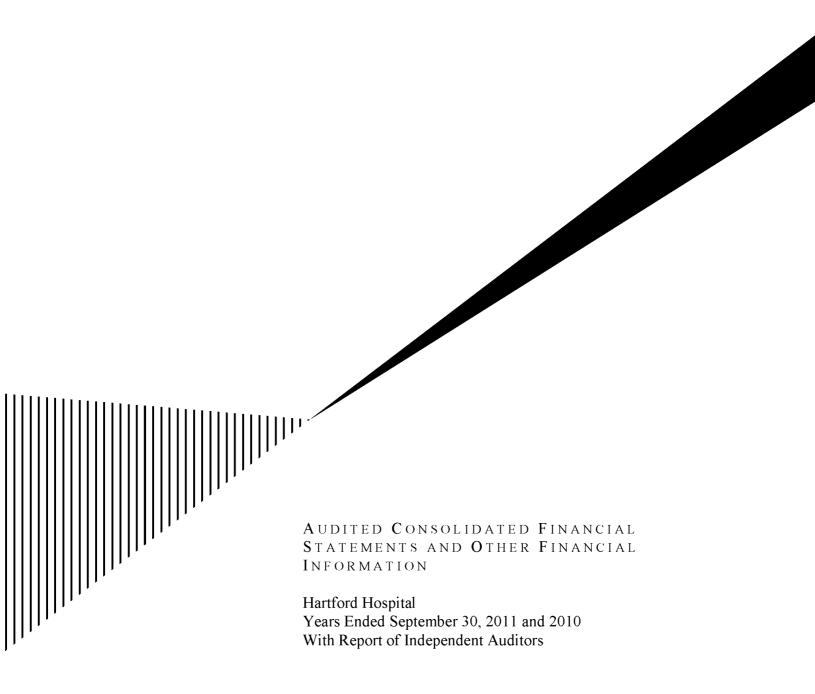
Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation of Trust										
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income (\$)	(g) Share of end-of-year assets (\$)	(h) Percentage ownership			
HHMOB Corporation & Subsidiary 80 Seymour Street Hartford, CT06102 06-1140244	Real Estate Parking	СТ	N/A	С						
CHS Insurance LTD FB Perry Bld 40 Church St Hamilton BD	Captive Insurance	BD	N/A	С	20,669,407	175,625,615	72 500 %			
Windham Health Services Inc 112 Mansfield Avenue Willimantic, CT06226 06-1461101	Home Healthcare	СТ	N/A	С						
Windham Physician Hospital Organization 112 Mansfield Avenue Willimantic, CT06226 06-1441614	Medical Services	СТ	N/A	С						
Windham Family Medical Services 112 Mansfield Avenue Willimantic, CT06226 06-1491649	Medical Services	СТ	N/A	С						
CenConn Services Inc 100 Grand Street New Britain, CT06050 22-2836001	Investment Management	СТ	N/A	С						
Grand Indemnity Co LTD 40 Church Street Hamilton BD 98-0609499	Professional Liability	BD	N/A	С						
Hartford Physician Services PC 80 Seymour Street Hartford, CT06102 06-1254082	Medical Services	СТ	N/A	С						
Meriden Imaging Center 101 North Plains Industrial Road Meriden, CT06429 06-1541468	Imaging	СТ	N/A	S						
Hartford Physician Hospital Organization Inc 80 Seymour Street Hartford, CT06102 22-2785918	Physician & Hospital Support	СТ	N/A	С	-118,509	1,119,015	50 000 %			

Form 990, Schedule R, Part V - Transactions With Related Organizations

	990, Schedule R, Part V - Transactions With Related Organizations (a) Name of other organization	(b) Transaction type(a-r)	(c) A mount Involved (\$)	(d) Method of determining amount involved
(1)	CHS Insurance Ltd	К	1,184,052	FMV
(2)	CHS Insurance Ltd	Q	12,624,000	FMV
(3)	CHS Insurance Ltd	Р	321,255	FMV
(4)	Eastern Rehabilitation Network	L	2,201,908	FMV
(5)	Eastern Rehabilitation Network	N	11,045,518	FMV
(6)	Eastern Rehabilitation Network	Р	312,179	FMV
(7)	ННМОВ	N	623,748	FMV
(8)	ННМОВ	I	125,337	FMV
(9)	ННМОВ	Р	1,069,799	FMV
(10)	ННМОВ	J	807,680	FMV
(11)	ННМОВ	А	9,673	FMV
(12)	ННМОВ	0	887,138	FMV
(13)	Immediate Medical Care Center	Р	3,672,468	FMV
(14)	Immediate Medical Care Center	К	378,770	FMV
(15)	Immediate Medical Care Center	А	219,578	FMV
(16)	Immediate Medical Care Center	N	314,933	FMV
(17)	Immediate Medical Care Center	L	673,603	FMV
(18)	Midstate Medical Center	Р	3,672,468	FMV
(19)	Midstate Medical Center	К	7,747,286	FMV
(20)	Midstate Medical Center	N	1,868,574	FMV
(21)	Rushford Center Inc	Р	159,937	FMV
(22)	The Hospital of Central Connecticut	К	1,775,179	FMV
(23)	The Hospital of Central Connecticut	Р	50,139	FMV
(24)	Institute Of Living	J	239,236	FMV
(25)	Institute Of Living	Р	70,483	FMV
(26)	VNA Health Care Inc	К	144,772	FMV
(27)	Natchaug Hospital Inc	Р	191,468	FMV
(28)	Windham Hospital	К	275,413	FMV
(29)	Windham Hospital	Р	1,244,787	FMV
(30)	Windham Hospital	D	1,062,629	FMV

Form 990, Schedule R, Part V - Transactions With Related Organizations

	(a) Name of other organization	(b) Transaction type(a-r)	(c) A mount I nvolved (\$)	(d) Method of determining amount involved
(31)	Hartford Hospital Auxiliary	С	165,204	FMV



Ernst & Young LLP

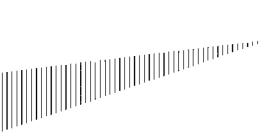


Audited Consolidated Financial Statements and Other Financial Information

Years Ended September 30, 2011 and 2010

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Report of Independent Auditors

Board of Directors Hartford Hospital

We have audited the accompanying consolidated balance sheets of Hartford Hospital (the Hospital) as of September 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 the Hospital'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 and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. We were not engaged to perform an audit of the Hospital's internal control over financial reporting. Our audits included consideration of internal control over financial reporting as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Hospital's internal control over financial reporting. Accordingly, we express no such opinion. An audit also includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements, assessing the accounting principles used and significant estimates made by management, and evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the consolidated financial position of the Hospital as of September 30, 2011 and 2010, and the consolidated results of their operations and changes in net assets and their cash flows for the years then ended in conformity with accounting principles generally accepted in the United States

Ernst + Young LLP

January 27, 2012

Consolidated Balance Sheets

Temper T		September 30				
Current assets 6 4,109,337 \$ 14,299,371 Accounts recervable. less allowances for doubtful accounts of S29,331,000 in 2011 and \$35,400,000 in 2010 125,443,406 117,350,353 Other recervables 14,345,622 18,740,405 Due from affiliates, net 16,779,424 10,040,619 Investments of supplies 11,051,490 11,205,707 Prepad expenses and other assets 10,161,480 13,043,70 Current portion of assets whose use is limited 3,02,280 4,304,307 Total current assets 216,442,837 219,207,458 Investments and other assets 216,442,837 219,207,458 Investments for restricted purposes 175,595,417 184,054,444 Escrow funds for long-term debt 54,673,488 -4,745,444 Escrow funds for long-term debt 54,673,488 -4,913,009 Funds held in trust by others 115,839,220 18,917,009 Other assets 81,811,613 40,644,647 Property, plant and equipment, net 325,855,975 29,913,334 Current portion and equipment, net 18,622,403 22,051,313 Salaries, w			2011		2010	
Cash and eash equivalents \$ 64,109,337 \$ 1,4299,375 Accounts receivable. less allowances for doubtful accounts of \$29,31,000 m. 2011 and \$35,400,000 m. 2010 125,443,406 \$17,359,353 Other receivables 14,436,221 18,746,745 Due from affiliates, net Inventories of supplies 110,519,33 10,906,251 Inventories of supplies 10,161,489 112,05,370 Current portion of assets whose use is limited 3,902,281 4,304,370 Total current assets 216,442,837 219,207,458 Investments and other assets 216,442,837 219,207,458 Investments for restricted purposes 175,954,417 184,054,444 Escrow funds for long-term debt 54,673,488 - Funds designated for debt service 69,33,069 - Funds sets 31,881,631 40,644,647 Forperty, plant and equipment, net 325,855,972 299,013,33 Other assets 31,881,631 40,644,647 Property, plant and equipment, net 325,855,972 299,013,33 Solarities and net assets 31,882,555 299,013,33 Current portion o						
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Other receivables 14,36,21 18,746,745 Due from affiliates, net Inventores of supplies 16,79,424 10,006,019 Inventories of supplies 11,054,093 10,006,251 Prepaid expenses and other assets 10,161,480 11,205,707 Current portion of assets whose use is limited 3,902,820 4,304,570 Assets whose use is limited 216,442,837 219,207,458 Investments and other assets 175,054,417 184,054,444 Escrow funds for long-term debt 44,673,488 Funds designated for debt service 453,113,811 403,261,902 Funds held in trust by others 115,839,220 119,917,040 Other assets 81,481,163 40,644,647 Property, plant and equipment, net 5,122,177,788 40,944,647 Property, plant and equipment						
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Inventories of supplies 11,054,003 10,006,251 Prepaid expenses and other assets 10,161,480 11,205,707 Current portion of assets whose use is limited 245,887,591 216,862,479 Assets whose use is limited 216,442,837 219,207,458 Investments and other assets 175,954,417 184,054,444 Escroy funds for long-term debt 45,673,483 - Funds designated for other service 6,943,609 - Funds seld in trust by others 115,839,220 119,917,040 Other assets 81,881,163 40,644,647 Property, plant and equipment, net 325,855,972 299,013,341 Current babilities 1,222,177,758 1,909,009,000 Accounts paya ble \$1,222,177,758 1,909,009,000 Salaries, wages, pay roll taxes and amounts withheld from employees 18,652,603 22,051,316 Accrued expenses 3,326,848 21,380,477 Current portion of other labilities 16,971,54 30,300,808 Current portion of other labilities 46,640,46 8,823,41 Current portion of other labilities <t< td=""><td></td><td></td><td></td><td></td><td></td></t<>						
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Current portion of assets whose use is limited 3,902,820 4,304,370 Total current assets 245,887,591 216,862,470 Assets whose use is limited 3,002,000 210,207,488 Investments and other assets 216,442,837 219,207,488 Investments for restricted purposes 175,054,417 184,054,444 Escrow funds for long-term debt 546,73,488 -6 Funds designated for debt service 69,30,69 -6 Funds held in trust by others 115,839,220 119,917,004 Other assets 81,811,163 40,644,647 Property, plant and equipment, net 325,855,972 299,013,349 Chillities and net assets 81,811,163 40,644,647 Current habitities 81,965,830 41,938,359 Salaries, wages, payrell taxes and amounts withheld from employees 18,652,603 22,051,316 Accrued expenses 83,265,488 21,380,475 Estimated third-party payor settlements 45,971,484 30,300,808 Current portion of long-term debt 16,971,544 30,300,808 Current portion of eccrued pension liability						
Total current assets 245,887,591 216,82,479 Assets whose use is limited Investments and other assets Investments for restricted purposes 216,442,837 219,207,458 Investments for restricted purposes 175,054,417 184,054,444 Escrow funds for long-term debt 54,673,488 - Funds designated for debt service 6,943,069 - Funds held in trust by others 115,839,220 119,917,040 Other assets 81,481,163 40,644,647 Property, plant and equipment, net 325,855,972 299,013,304 Current plant these 81,481,163 40,644,647 Property, plant and equipment, net 325,855,972 299,013,304 Extract by a state of the second property of the						
Assets whose use is limited 216,442,837 219,207,458 Investments and other assets 175,054,417 184,054,444 Escrow funds for long-term debt 54,673,488 - Funds designated for debt service 6,943,069 - Funds held in trust by others 115,839,220 119,917,040 Other assets 81,481,163 40,644,647 Property, plant and equipment, net 325,855,972 299,013,334 Current liabilities and net asset 219,685,830 \$ 1,98,09,00 Current liabilities \$ 19,685,830 \$ 41,938,359 Salaries, wages, pay roll taxes and amounts withheld from employees 18,652,603 22,051,316 Accounts pay able \$ 19,685,830 \$ 41,938,359 Salaries, wages, pay roll taxes and amounts withheld from employees 18,652,603 22,051,316 Accrued expenses 38,265,848 21,380,477 Estimated third-party pay or settlements 6,850,045 1,980,663 Current portion of long-term debt 16,971,544 30,300,808 Current portion of other habilities 6,640,464 8.823,417 Total current habi	1		3,902,820		4,304,570	
Investments for restricted purposes 175,054,417 184,054,444 Escrow funds for long-term debt 54,63,488 - Funds designated for debt service 6,943,099 - Funds held in trust by others 115,839,220 119,917,040 Other assets 81,481,63 40,644,647 Property, plant and equipment, net 325,855,972 299,013,33 Chibilities and net assets 18,622,077,88 107,099,401 Liabilities 8 19,685,830 \$ 41,938,359 Salaries, wages, pay roll taxes and amounts withheld from emploves 18,652,603 22,051,316 Accrued expenses 38,265,848 21,380,477 Estimated third-party pay or settlements 6,850,045 1,980,663 Current portion of long-term debt 16,971,544 30,300,808 Current portion of accrued pension liability 13,884,957 9,051,278 Current portion of other liabilities 46,404,64 823,241 Total current liabilities 10,951,291 135,526,318 Accrued expension liability 340,366,785 279,113,922 Long-term debt, less current portion	Total current assets		245,887,591		216,862,479	
Investments for restricted purposes 175,054,417 184,054,444 Escrow funds for long-term debt 54,673,488 -	Assets whose use is limited					
Escrow funds for long-term debt 54,673,488 - Funds designated for debt service 6,943,069 - Funds held in trust by others 115,839,220 119,917,040 Other assets 81,481,63 40,644,647 Property, plant and equipment, net 325,855,972 299,013,334 Exibilities and net assets 1,222,177,758 1,079,699,401 Current habilities \$19,685,80 41,938,359 Salaries, wages, pay roll taxes and amounts withheld from employees 18,652,603 22,051,316 Accrued expenses 18,652,603 22,051,316 Current portion of long-term debt 6,850,045 1,980,603 Current portion of accrued pension liability 13,884,957 9,051,278 Current portion of other habilities 6,640,464 8,823,417 Total current liabilities 120,951,278 2,791,13,922 Accrued pension liability 340,366,785 279,113,922 Long-term debt, less current portion 191,588,306 6,215,678 Other liabilities 271,222,49 290,590,525 Current portion of other liabilities 271,222,4	Investments and other assets		216,442,837		219,207,458	
Funds designated for debt service 6,943,069 — Funds held in trust by others 115,839,220 119,917,040 Other assets 81,481,163 40,644,647 Property, plant and equipment, net 325,855,972 299,013,334 Current Debilities and net assets 81,9685,389 1,079,699,401 Current Inabilities \$ 19,685,303 \$ 1,988,509 Salaries, wages, pay roll taxes and amounts withheld from employees 18,652,603 22,051,316 Accounts pay able \$ 19,685,303 \$ 1,988,603 21,380,477 Estimated third-party pay or settlements 8,850,465 1,980,603 Current portion of long-term debt 16,971,544 30,300,808 Current portion of corrued pension liability 13,884,957 9,051,278 Current portion of other liabilities 46,404,464 8,823,417 Total current liabilities 46,404,464 8,823,417 Accrued pension liability 340,366,785 279,113,922 Accrued pension liability 340,366,785 279,113,922 Long-term debt. less current portion 91,588,806 62,156,676	Investments for restricted purposes		175,054,417		184,054,444	
Funds designated for debt service 6,943,069 — Funds held in trust by others 115,839,220 119,917,040 Other assets 81,481,163 40,644,647 Property, plant and equipment, net 325,855,972 299,013,334 Current Debilities and net assets 81,9685,389 1,079,699,401 Current Inabilities \$ 19,685,303 \$ 1,988,509 Salaries, wages, pay roll taxes and amounts withheld from employees 18,652,603 22,051,316 Accounts pay able \$ 19,685,303 \$ 1,988,603 21,380,477 Estimated third-party pay or settlements 8,850,465 1,980,603 Current portion of long-term debt 16,971,544 30,300,808 Current portion of corrued pension liability 13,884,957 9,051,278 Current portion of other liabilities 46,404,464 8,823,417 Total current liabilities 46,404,464 8,823,417 Accrued pension liability 340,366,785 279,113,922 Accrued pension liability 340,366,785 279,113,922 Long-term debt. less current portion 91,588,806 62,156,676			54,673,488		_	
Funds held in trust by others 453,113,811 403,261,902 Other assets 81,481,163 40,644,647 Property, plant and equipment, net 325,855,972 299,013,334 Temperty, plant and equipment, net 81,222,177,758 1,079,699,401 Liabilities and net assets 81,9685,830 \$1,079,699,401 Current habilities 81,9685,830 \$41,938,359 Salaries, wages, payroll taxes and amounts withheld from employees 18,652,603 22,051,316 Accrued expenses 38,265,848 21,380,477 Estimated third-party payor settlements 6,850,045 1,980,663 Current portion of long-term debt 16,971,544 303,00,808 Current portion of accrued pension liability 13,884,957 9,051,278 Current portion of other liabilities 6,640,464 8,823,417 Total current liabilities 120,951,291 135,526,318 Accrued pension liability 340,366,785 279,113,922 Long-term debt, less current portion 191,588,806 62,156,676 Other liabilities 271,222,494 290,596,252 Unrestricted	-				_	
Other assets 81,481,63 40,644,647 Property, plant and equipment, net 325,855,972 299,013,334 Liabilities and net assets 81,222,177,758 1,079,699,401 Current labilities Accounts payable \$ 19,685,830 \$ 41,938,359 Salaries, wages, pay roll taxes and amounts withheld from employees 18,652,603 22,051,316 Accrued expenses 38,265,848 21,380,477 Estimated third-party pay or settlements 6,850,045 1,980,663 Current portion of long-term debt 16,971,544 30,300,808 Current portion of accrued pension liability 13,884,957 9,051,278 Current portion of other liabilities 6,640,464 8,823,417 Total current liabilities 340,366,785 279,113,922 Accrued pension liability 340,366,785 279,113,922 Long-term debt, less current portion 191,588,806 62,156,676 Other liabilities 257,786 9,234,293 Net assets 271,222,494 290,596,252 Unrestricted 298,786,922 107,378,948 Tempora					403,261,902	
Property, plant and equipment, net 325,855,972 299,013,334 Liabilities and net assets Current habilities Accounts payable \$ 19,685,830 \$ 41,938,359 Salaries, wages, pay roll taxes and amounts withheld from employees 18,652,603 22,051,316 Accrued expenses 38,265,848 21,380,477 Estimated third-party payor settlements 6,850,045 1,980,663 Current portion of long-term debt 16,971,544 30,300,808 Current portion of accrued pension liability 13,884,957 9,051,278 Current portion of other liabilities 6,640,464 8,823,417 Total current liabilities 120,951,291 135,526,318 Accrued pension liability 340,366,785 279,113,922 Long-term debt, less current portion 191,588,906 6,2156,676 Other liabilities 271,222,494 290,596,252 Vier assets 271,222,494 290,596,252 Urrestricted 98,786,922 107,378,948 Permanently restricted 98,786,922 107,378,948 Permanently restricted 562,313,090 593	Funds held in trust by others		115,839,220		119.917.040	
Liabilities and net assets Current liabilities Current liabilities Accounts payable \$ 19,685,830 \$ 41,938,359 Salaries, wages, payroll taxes and amounts withheld from employees 18,652,603 22,051,316 Accrued expenses 38,265,848 21,380,477 Estimated third-party payor settlements 6,850,045 1,980,663 Current portion of long-term debt 16,971,544 30,300,808 Current portion of accrued pension liability 13,884,957 9,051,278 Current portion of other liabilities 6,640,464 8,823,417 Total current liabilities 340,366,785 279,113,922 Long-term debt, less current portion 191,588,806 62,156,676 Other liabilities 6,957,786 9,234,293 Net assets 271,222,494 290,596,252 Temporarily restricted 98,786,922 107,378,948 Permanently restricted 192,303,674 195,692,992 Temporarily restricted 562,313,090 593,668,192	Other assets		81,481,163		40,644,647	
Liabilities and net assets Current liabilities Current liabilities Accounts payable \$ 19,685,830 \$ 41,938,359 Salaries, wages, payroll taxes and amounts withheld from employees 18,652,603 22,051,316 Accrued expenses 38,265,848 21,380,477 Estimated third-party payor settlements 6,850,045 1,980,663 Current portion of long-term debt 16,971,544 30,300,808 Current portion of accrued pension liability 13,884,957 9,051,278 Current portion of other liabilities 6,640,464 8,823,417 Total current liabilities 340,366,785 279,113,922 Long-term debt, less current portion 191,588,806 62,156,676 Other liabilities 6,957,786 9,234,293 Net assets 271,222,494 290,596,252 Temporarily restricted 98,786,922 107,378,948 Permanently restricted 192,303,674 195,692,992 Temporarily restricted 562,313,090 593,668,192	Property, plant and equipment, net				299,013,334	
Current habilities \$ 19,685,830 \$ 41,938,359 Salaries, wages, pay roll taxes and amounts withheld from employees 18,652,603 22,051,316 Accrued expenses 38,265,848 21,380,477 Estimated third-party payor settlements 6,850,045 1,980,663 Current portion of long-term debt 16,971,544 30,300,808 Current portion of accrued pension liability 13,884,957 9.051,278 Current portion of other liabilities 6,640,464 8,823,417 Total current liabilities 120,951,291 135,526,318 Accrued pension liability 340,366,785 279,113,922 Long-term debt, less current portion 191,588,806 62,156,676 Other liabilities 6,957,786 9,234,293 Net assets 271,222,494 290,596,252 Temporarily restricted 98,786,922 107,378,948 Permanently restricted 192,303,674 195,692,992 562,313,090 593,668,192		\$	1,222,177,758	\$	1.079.699.401	
Accounts payable \$ 19,685,830 \$ 41,938,359 Salaries, wages, payroll taxes and amounts withheld from employees 18,652,603 22.051,316 Accrued expenses 38,265,848 21.380,477 Estimated third-party payor settlements 6,850,045 1.980,663 Current portion of long-term debt 16,971,544 30.300,808 Current portion of accrued pension liability 13,884,957 9.051,278 Current portion of other liabilities 6,640,464 8.823,417 Total current liabilities 120,951,291 135,526,318 Accrued pension liability 340,366,785 279,113,922 Long-term debt, less current portion 191,588,806 62,156,676 Other liabilities 6,957,786 9,234,293 Net assets Unrestricted 271,222,494 290,596,252 Temporarily restricted 98,786,922 107,378,948 Permanently restricted 192,303,674 195,692,992 562,313,090 593,668,192	Liabilities and net assets					
Salaries, wages, payroll taxes and amounts withheld from employees 18,652,603 22,051,316 Accrued expenses 38,265,848 21,380,477 Estimated third-party payor settlements 6,850,045 1,980,663 Current portion of long-term debt 16,971,544 30,300,808 Current portion of accrued pension liability 13,884,957 9,051,278 Current portion of other liabilities 6,640,464 8,823,417 Total current liabilities 120,951,291 135,526,318 Accrued pension liability 340,366,785 279,113,922 Long-term debt, less current portion 191,588,806 62,156,676 Other liabilities 6,957,786 9,234,293 Net assets Unrestricted 271,222,494 290,596,252 Temporarily restricted 98,786,922 107,378,948 Permanently restricted 192,303,674 195,692,992 562,313,090 593,668,192	Current liabilities					
Accrued expenses 38,265,848 21,380,477 Estimated third-party pay or settlements 6,850,045 1.980,663 Current portion of long-term debt 16,971,544 30,300,808 Current portion of accrued pension liability 13,884,957 9.051,278 Current portion of other liabilities 6,640,464 8.823,417 Total current liabilities 120,951,291 135,526,318 Accrued pension liability 340,366,785 279,113,922 Long-term debt, less current portion 191,588,806 62,156,676 Other liabilities 6,957,786 9.234,293 Net assets Unrestricted 271,222,494 290,596,252 Temporarily restricted 98,786,922 107,378,948 Permanently restricted 192,303,674 195,692,992 562,313,090 593,668,192	Accounts payable	\$	19,685,830	\$	41,938,359	
Estimated third-party pay or settlements 6,850,045 1.980.663 Current portion of long-term debt 16,971,544 30.300.808 Current portion of accrued pension liability 13,884,957 9.051.278 Current portion of other liabilities 6,640,464 8.823.417 Total current liabilities 120,951,291 135.526.318 Accrued pension liability 340,366,785 279.113.922 Long-term debt, less current portion 191,588,806 62.156.676 Other liabilities 6,957,786 9.234.293 Net assets Unrestricted 271,222,494 290.596.252 Temporarily restricted 98,786,922 107.378.948 Permanently restricted 192,303,674 195.692.992 562,313,090 593.668.192			18,652,603		22,051,316	
Current portion of long-term debt 16,971,544 30,300,808 Current portion of accrued pension liability 13,884,957 9,051,278 Current portion of other liabilities 6,640,464 8.823,417 Total current liabilities 120,951,291 135,526,318 Accrued pension liability 340,366,785 279,113,922 Long-term debt, less current portion 191,588,806 62,156,676 Other liabilities 6,957,786 9,234,293 Net assets Unrestricted 271,222,494 290,596,252 Temporarily restricted 98,786,922 107,378,948 Permanently restricted 192,303,674 195,692,992 562,313,090 593,668,192	Accrued expenses		38,265,848		21,380,477	
Current portion of accrued pension liability 13,884,957 9.051.278 Current portion of other liabilities 6,640,464 8.823,417 Total current liabilities 120,951,291 135.526.318 Accrued pension liability 340,366,785 279.113.922 Long-term debt, less current portion 191,588,806 62.156.676 Other liabilities 6,957,786 9.234.293 Net assets Unrestricted 271,222,494 290.596.252 Temporarily restricted 98,786,922 107.378.948 Permanently restricted 192,303,674 195.692.992 562,313,090 593.668.192			6,850,045		1,980,663	
Current portion of other liabilities 6,640,464 8.823,417 Total current liabilities 120,951,291 135.526,318 Accrued pension liability 340,366,785 279.113.922 Long-term debt, less current portion 191,588,806 62.156,676 Other liabilities 6,957,786 9.234,293 Net assets Unrestricted 271,222,494 290.596,252 Temporarily restricted 98,786,922 107,378,948 Permanently restricted 192,303,674 195,692,992 562,313,090 593,668,192	Current portion of long-term debt		16,971,544		30,300,808	
Total current habilities 120,951,291 135.526.318 Accrued pension hability 340,366,785 279.113.922 Long-term debt, less current portion 191,588,806 62.156.676 Other habilities 6,957,786 9.234.293 Net assets 271,222,494 290.596.252 Temporarily restricted 98,786,922 107.378.948 Permanently restricted 192,303,674 195.692.992 562,313,090 593.668.192	Current portion of accrued pension liability		13,884,957		9,051,278	
Accrued pension liability 340,366,785 279.113.922 Long-term debt, less current portion 191,588,806 62.156.676 Other liabilities 6,957,786 9.234.293 Net assets 271,222,494 290.596.252 Temporarily restricted 98,786,922 107.378.948 Permanently restricted 192,303,674 195.692.992 562,313,090 593.668.192	Current portion of other liabilities		6,640,464		8,823,417	
Long-term debt, less current portion 191,588,806 62.156,676 Other liabilities 6,957,786 9.234,293 Net assets Unrestricted 271,222,494 290,596,252 Temporarily restricted 98,786,922 107,378,948 Permanently restricted 192,303,674 195,692,992 562,313,090 593,668,192	Total current liabilities		120,951,291		135,526,318	
Long-term debt, less current portion 191,588,806 62.156,676 Other liabilities 6,957,786 9.234,293 Net assets Unrestricted 271,222,494 290,596,252 Temporarily restricted 98,786,922 107,378,948 Permanently restricted 192,303,674 195,692,992 562,313,090 593,668,192	Accrued pension liability		340,366,785		279,113,922	
Other liabilities 6,957,786 9.234.293 Net assets 271,222,494 290.596.252 Temporarily restricted 98,786,922 107.378.948 Permanently restricted 192,303,674 195.692.992 562,313,090 593.668.192	·				62,156,676	
Unrestricted 271,222,494 290.596.252 Temporarily restricted 98,786,922 107.378.948 Permanently restricted 192,303,674 195.692.992 562,313,090 593.668.192	·		6,957,786		9,234,293	
Unrestricted 271,222,494 290.596.252 Temporarily restricted 98,786,922 107.378.948 Permanently restricted 192,303,674 195.692.992 562,313,090 593.668.192	Net assets					
Temporarily restricted 98,786,922 107.378.948 Permanently restricted 192,303,674 195.692.992 562,313,090 593.668.192			271,222,494		290,596.252	
Permanently restricted 192,303,674 195.692.992 562,313,090 593.668.192						
562,313,090 593.668.192	• •					
		<u> </u>	1,222,177,758	\$	1,079,699,401	

See accompanying notes

Consolidated Statements of Operations and Changes in Net Assets

	Year Ended September 30 2011 2010			
Unrestricted revenues, gains and other support				
Net patient service revenue	\$	853,959,278	\$	800,993,375
Other operating revenue		121,952,140		123,272,080
Net assets released from restrictions for operations		9,465,204		8,674,254
		985,376,622		932,939,709
Operating expenses				
Salaries		433,339,431		398,505,926
Employee benefits		128,868,720		100,636,264
Supplies and other		185,496,450		181,562,261
Purchased services		157,979,941		158,481,981
Depreciation and amortization		43,924,697		42,799,056
Provision for uncollectible accounts		12,919,784		37,824,767
Interest		1,556,400		614,483
		964,085,423		920,424,738
Income from operations before loss on early extinguishment of debt		21,291,199		12,514,971
Loss on early extinguishment of debt		(447,904)		_
Income from operations		20,843,295		12,514,971
Nonoperating income				
Income from investments, gifts and bequests, net		9,871,898		5,015,303
Other		2,736,082		393,644
		12,607,980		5,408,947
Excess of revenues over expenses before change in				
unrealized gains and losses on investments		33,451,275		17.923.918
Change in unrealized gains and losses on investments		(17,370,175)		23,166,870
Excess of revenues over expenses		16,081,100		41,090,788

Continued on next page

Consolidated Statements of Operations and Changes in Net Assets (continued)

	Year Ended September 30		
		2011	2010
Unrestricted net assets			
Excess of revenues over expenses (continued)	\$	16,081,100 \$	41,090,788
Transfer to affiliated entity		(3,748,398)	(2.539.035)
Net assets released from restrictions for the purchase of			
equipment		2,672,750	2,998,555
Change in pension and post-retirement funding obligation		(34,379,210)	(29,490,791)
(Decrease) increase in unrestricted net assets		(19,373,758)	12,059,517
Temporarily restricted net assets			
Restricted contributions		5,743,213	5,278,212
Restricted investment income		7,989,646	488,806
Change in unrealized gains and losses on investments		(10,186,931)	11,702,938
Net assets released from restrictions for operations		(9,465,204)	(8,674,254)
Net assets released from restrictions for the purchase of			
equipment		(2,672,750)	(2,998,555)
(Decrease) increase in temporarily restricted net assets		(8,592,026)	5,797,147
Permanently restricted net assets			
Restricted contributions		329,266	1,357,240
Restricted investment income		359,236	59,472
Change in unrealized gains and losses on funds held in trust			
by others		(4,077,820)	5,514,545
(Decrease) increase in permanently restricted net assets		(3,389,318)	6,931,257
(Decrease) increase in net assets		(31,355,102)	24,787,921
Net assets at beginning of year		593,668,192	568,880,271
Net assets at end of year	\$	562,313,090 \$	593,668,192

See accompanying notes

Consolidated Statements of Cash Flows

	Year Ended September 30		
	2011	2010	
Cash flows from operating activities			
(Decrease) increase in net assets	\$ (31,355,102) \$	24,787,921	
Adjustments to reconcile change in net assets to net cash			
provided by operating activities			
Noncash items			
Depreciation and amortization	43,924,697	42,799,056	
Change in unrealized gains and losses on investments	27,557,106	(34,869,808)	
Change in unrealized gains and losses on funds held in			
trust by others	4,077,820	(5,514,545)	
Provision for uncollectible accounts	12,919,784	37,824,767	
Change in net assets related to post-retirement and			
pension plans	34,379,210	29,490,791	
Loss on early extinguishment of debt	447,904	_	
Transfer to affiliated entity	3,748,398	2,539,035	
Other changes in net assets			
Restricted contributions and investment income	(14,421,361)	(7,183,730)	
Changes in assets and liabilities, net (Note 14)	(14,195,790)	(58, 285, 478)	
Net cash provided by operating activities	67,082,667	31,588,009	
Cash flows from investing activities			
Purchase of property, plant and equipment, net	(69,067,336)	(58,788,362)	
(Increase) decrease in assets whose use is limited, net	(77,007,265)	3,873,690	
Cash paid in the acquisition of Constitution Surgery Centers	(27,526,034)	_	
Net cash used in investing activities	(173,600,635)	(54,914,672)	
Cash flows from financing activities			
Pay ments on long-term debt	(99,924,420)	_	
Proceeds on long-term debt	215,579,391	36,516,473	
Transfer to affiliated entity	(3,748,398)	(2.539.035)	
Restricted contributions and investment income	14,421,361	7,183,730	
Net cash provided by financing activities	126,327,934	41,161,168	
Net increase in cash and cash equivalents	19,809,966	17.834.505	
Cash and cash equivalents at beginning of year	44,299,371	26,464,866	
Cash and cash equivalents at end of year	\$ 64,109,337 \$	44,299,371	

See accompanying notes

Notes to Consolidated Financial Statements

September 30, 2011

1. Significant Accounting Policies

The accounting policies that affect significant elements of Hartford Hospital's (the Hospital) consolidated financial statements are summarized below and in Note 2

Organization

The Hospital is a voluntary association incorporated under the General Statutes of the State of Connecticut, and is an affiliate of Hartford HealthCare Corporation (HHC) The Board of Directors of the Hospital, appointed by HHC, controls the operations of the Hospital The accompanying consolidated financial statements include Hartford Hospital, Jefferson House and Cedar Mountain Commons (both of which are departments of the Hospital), and the Institute of Living All material intercompany accounts and transactions have been eliminated in the accompanying consolidated financial statements

Eye Surgery Center Acquisition

On February 4, 2011, the Hospital acquired certain assets of an eye surgery center from Constitution Surgery Centers The acquisition was to enhance ophthalmology services available to patients Cash paid for the transaction was \$27.5 million. The Hospital accounted for this transaction as an asset purchase under Accounting Standards Codification (ASC) 958-805, Business Combinations, with the allocation of the purchase price to the related assets acquired and liabilities assumed based upon their respective fair values. The purchase price paid in excess of the fair value of identified assets aggregated \$25.8 million which have been recorded as goodwill. The eye surgery center results (net patient revenue of \$11.8 million and operating expenses of \$4.3 million) are included in the consolidated statement of operations since the acquisition date.

Goodwill

Goodwill represents the excess of cost of an acquired entity over the net of the amounts assigned to the fair value of assets acquired and liabilities assumed. As of September 30, 2011, goodwill of \$25.8 million is recorded in the Hospital's consolidated balance sheets within other assets. Goodwill is reviewed annually for impairment or more frequently if events or circumstances indicate that the carrying value of an asset may not be recoverable. The impairment test for goodwill requires a comparison of fair value of each reporting unit that has goodwill associated with its operations with its carrying amount.

Notes to Consolidated Financial Statements (continued)

1. Significant Accounting Policies (continued)

The impairment analysis includes estimating the fair value of each of the reporting units which have goodwill associated with their operations using discounted cash flow and multiples of cash earnings valuation techniques, plus valuation comparisons to recent public sale of similar businesses, if any These valuation methods require the Hospital to make estimates and assumptions regarding future operating results, cash flows, changes in working capital and capital expenditures, profitability, and the cost of capital Although the Hospital believes that the estimates and assumptions used are reasonable, actual results could differ from the estimates and assumptions

Use of Estimates

The preparation of financial statements in conformity with U S generally accepted accounting principles (GAAP) 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 Estimates also affect the reported amounts of revenues and expenses during the reporting period. There is at least a reasonable possibility that certain estimates will change by material amounts in the near term. Actual results could differ from those estimates.

Regulatory Matters

The Hospital is required to file annual operating information with the State of Connecticut Office of Health Care Access

Fair Value of Financial Instruments

The carrying value of financial instruments classified as current assets and current liabilities approximate fair value. The fair values of the Hospital's financial instruments are disclosed in Note 5.

Investments

The Hospital's investment portfolio is classified as trading, with unrealized gains and losses included in the excess of revenues over expenses

Notes to Consolidated Financial Statements (continued)

1. Significant Accounting Policies (continued)

Investments in equity securities with readily determinable fair values and all investments in debt securities are measured at fair value using quoted market prices or model-driven valuations at the balance sheet date. Alternative investments, those assets whose market value is not readily determinable, are stated at fair value as estimated in an unquoted market. Valuations of those investments and, therefore, the Hospital's holdings may be determined by the investment manager and are primarily based on the underlying securities. Assets temporarily restricted (by donor) are recorded at fair value at the date of donation, which is then considered cost Investment income (including realized gains and losses) is included in nonoperating income unless the income or loss is restricted by the donor or law. The cost of securities sold is based on the specific identification method.

The Hospital holds non-marketable equity investments in private companies At September 30, 2011 and 2010, the carrying value of the Hospital's portfolio of strategic investments totaled \$5,546,866 and \$5,716,091, respectively, of which \$76,751 and \$624,052 are accounted for at cost and \$5,470,115 and \$5,015,288 are accounted for using the equity method of accounting at September 30, 2011 and 2010, respectively These investments are included in other assets on the consolidated balance sheets The Hospital's share of the income or losses of all equitymethod investees, using the most current financial information available, which reflects the financial performance three months in arrears, is included in nonoperating income

Patient Accounts Receivable

Patient accounts receivable result from the health care services provided by the Hospital Additions to the allowance for doubtful accounts result from the provision for bad debts Accounts written off as uncollectible are deducted from the allowance for doubtful accounts

The amount of the allowance for doubtful accounts is based upon management's assessment of historical and expected net collections, business and economic conditions, trends in Medicare and Medicaid health care coverage and other collection indicators. See Note 2 for additional information relative to third party payor programs

The Hospital's primary concentration of credit risk is patient accounts receivable, which consist of amounts owed by various governmental agencies, insurance companies and private patients. The Hospital manages the receivables by regularly reviewing its patient accounts and contracts, and by providing appropriate allowances for uncollectible amounts. Significant concentrations of gross patient accounts receivable include 29% and 10%, and 28% and 14%, for Medicare and Medicaid, respectively, for the fiscal years ending September 30, 2011 and 2010, respectively

Notes to Consolidated Financial Statements (continued)

1. Significant Accounting Policies (continued)

Inventories

Inventories are stated at the lower of cost or market The Hospital values its inventories using the first-in, first-out method

Property, Plant and Equipment

Property, plant and equipment is stated on the basis of cost The Hospital provides for depreciation of property, plant and equipment using the straight-line method in amounts sufficient to depreciate the cost of the assets over their estimated useful lives

Conditional asset retirement obligations recorded under the provisions of ASC 410-20, *Asset Retirement Obligations*, amounted to \$3,141,783 and \$5,640,539 as of September 30, 2011 and 2010, respectively. These obligations are recorded in other liabilities in the accompanying consolidated balance sheets. There are no assets that are legally restricted for purposes of settling asset retirement obligations. During 2011, retirement obligations incurred and settled were approximately \$2.5 million. Accretion expense was immaterial for the years ended September 30, 2011 and 2010, respectively

Assets Whose Use is Limited

Assets whose use is limited includes assets that are set aside internally for future capital improvements, research, education, escrow funds and debt service funds for existing obligations on outstanding long-term debt Restricted investment income in excess of a predetermined spending limit has also been set aside as long-term investments Investments for restricted purposes are those restricted based on donors' intents

Temporarily and Permanently Restricted Net Assets

Temporarily restricted net assets are those where use by the Hospital has been limited by donors, to a specific time frame or purpose Permanently restricted net assets have been restricted by donors and are maintained by the Hospital in perpetuity. The Hospital is a partial beneficiary to various perpetual trust agreements. Assets recorded under these agreements are recognized at fair value. The investment income generated from these funds is expendable to support healthcare services and the assets are classified as permanently restricted.

Notes to Consolidated Financial Statements (continued)

1. Significant Accounting Policies (continued)

Contributions, including unconditional promises to give, are recognized as revenue in the period received Conditional promises to give are not recognized until the conditions on which they depend are substantially met Unrestricted contributions are recorded, net of expenses, within other operating revenue

Pledges receivable to be received after one year are discounted at a discount rate commensurate with the risks involved Amortization of the discount is recognized as revenue and is reflected in accordance with donor-imposed restrictions, if any, on the contributions

Donor-Restricted Gifts

Unconditional promises to give cash and other assets are reported at fair value at the date the promise is received. The gifts are reported as either temporarily or permanently restricted support if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reclassified as unrestricted net assets and reported in the consolidated statements of operations and changes in net assets as net assets released from restrictions. Donor-restricted contributions whose restrictions are met within the same year as received are unrestricted contributions in the accompanying financial statements, except those relating to donations of long-lived assets

Excess of Revenues over Expenses

The consolidated statements of operations and changes in net assets include the excess of revenues over expenses as the performance indicator Changes in unrestricted net assets, which are excluded from the excess of revenues over expenses, include the changes in pension and post-retirement funding obligations, net assets released from restrictions for the purchase of equipment, and permanent transfers of assets to and from affiliates

Nonoperating Income

Nonoperating income includes income on invested funds, realized and unrealized gains and losses on invested funds, restricted gifts, bequests, and the excess of revenues over expenses of Jefferson House and Cedar Mountain Commons

Other Operating Revenue

Other operating revenue includes services to other subsidiaries of HHC and other institutions, school tuition, rental income, grant income, research income and unrestricted contributions

Notes to Consolidated Financial Statements (continued)

1. Significant Accounting Policies (continued)

Professional Liability and Workers' Compensation Insurance

Coverage for medical malpractice insurance is provided on a claims-made basis. The primary level of coverage is \$10,000,000 per claim and \$39,000,000 in the aggregate. The excess indemnity coverage is layered with four different insurance companies at \$15,000,000 per claim and \$15,000,000 in the aggregate per layer. The primary coverage is with CHS Insurance Limited, a captive insurance company in which the Hospital has a 25% ownership interest. The Hospital's ownership is accounted for under the equity method in the accompanying statements of operations. The investment in CHS Insurance Limited is included in other assets in the consolidated balance sheets.

The Hospital has an established policy of self-insuring the deductible portion of its workers' compensation insurance. The deductible limits are \$1,000,000 per claim for fiscal years ended September 30, 2011 and 2010. In connection with this self-insurance program, Bank of America issued an irrevocable direct pay letter of credit to the Travelers Indemnity Company, the primary insurer, for an amount not to exceed \$7,100,000.

Bond Issuance Costs

Bond issuance costs associated with long-term debt for capital projects are amortized over the term of the debt using the effective interest method Bond issuance costs of \$1,109,768 and \$447,904 are recorded in other assets in the consolidated balance sheets as of September 30, 2011 and 2010, respectively

Income Taxes

The Hospital and its subsidiaries are not-for-profit corporations as described in Section 501(c)(3) of the Internal Revenue Code (the Code) and are exempt from federal income taxes on related income pursuant to Section 501(a) of the Code

Cash and Cash Equivalents

Cash and cash equivalents include cash, commercial paper and corporate and government bonds, which are available to be converted to liquid assets within three months Cash and cash equivalents are maintained with domestic financial institutions with deposits that exceed federally insured limits It is the Hospital's policy to monitor the financial strength of these institutions

Notes to Consolidated Financial Statements (continued)

1. Significant Accounting Policies (continued)

New Accounting Standards

In January 2010, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update (ASU) 2010-06, Improving Disclosures about Fair Value Measurements, (ASU 2010-06) ASU 2010-06 amended ASC 820 to clarify certain existing fair value disclosures and require a number of additional disclosures. The guidance in ASU 2010-06 clarified that disclosures should be presented separately for each "class" of assets and liabilities measured at fair value and provided guidance on how to determine the appropriate classes of assets and liabilities to be presented ASU 2010-06 also clarified the requirement for entities to disclose information about both the valuation techniques and inputs used in estimating Level 2 and Level 3 fair value measurements. In addition, ASU 2010-06 introduced new requirements to disclose the amounts (on a gross basis) and reasons for any significant transfers between Levels 1, 2 and 3 of the fair value hierarchy and present information regarding the purchases, sales, issuances and settlements of Level 3 assets and liabilities on a gross basis With the exception of the requirement to present changes in Level 3 measurements on a gross basis, which is delayed until 2012, the guidance in ASU 2010-06 becomes effective for reporting periods beginning after December 15, 2009 The adoption of the provisions of ASU 2010-06 did not have a significant impact on the Hospital's consolidated financial statements

In January 2011, the FASB issued ASU No 2010-07, *Not-for-Profit Entities: Mergers and Acquisitions*, (ASU 2010-07), which establishes accounting and disclosure requirements for how a not-for-profit entity determines whether a combination is a merger or an acquisition, how to account for each, and the required disclosures In addition, ASU 2010-07 included amendments to FASB's Accounting Standards Codification (the Codification, or ASC) Topic 350, *Intangibles – Goodwill and Other*, (ASC Topic 350), and Topic 810, *Consolidation*, (ASC Topic 810) to make both applicable to not-for-profit entities ASC Topic 350 clarifies the accounting for goodwill and indefinite-lived identifiable intangible assets recognized in a not-for-profit entity's acquisition of a business or nonprofit activity Such assets are not amortized and are tested for impairment at least annually The Hospital adopted the guidance relative to ASU 2010-07 as of October 1, 2010

In August 2010, the FASB issued ASC 2010-23, *Measuring Charity Care for Disclosure* ASC 2010-23 requires that the level of charity care provided be presented based on the direct and indirect costs of the charity services provided ASC 2010-23 also requires separate disclosure of the amount of any cash reimbursements received for providing charity care ASC 2010-23 is effective for fiscal years, and interim periods within those years, beginning after December 15, 2010 The Hospital is evaluating the effect of ASC 2010-23 on its consolidated financial statements

Notes to Consolidated Financial Statements (continued)

1. Significant Accounting Policies (continued)

In July 2011, FASB issued ASU 2011-07, Presentation and Disclosure of Patient Service Revenue, Provision for Bad Debts, and the Allowance for Doubtful Accounts ASU 2011-07 requires certain health care entities to present the bad debt expense associated with patient service revenue as a deduction from patient service revenue (net of contractual allowances and discounts) rather than as an operating expense with enhanced footnote disclosures on the policies for recognizing revenue and assessing bad debts, and qualitative and quantitative information about changes in the allowance for doubtful accounts The guidance is effective for fiscal years and interim periods within those fiscal years beginning after December 15, 2011, with early adoption permitted

In August 2010, the FASB also issued ASU 2010-24, *Presentation of Insurance Claims and Related Insurance Recoveries* Under ASU 2010-24 anticipated insurance recoveries and estimated liabilities for medical malpractice claims or similar contingent liabilities will be presented separately on the balance sheet. The guidance is effective for fiscal years, and interim periods within those years, beginning after December 15, 2010. The Hospital is evaluating the effect of ASU 2010-24 on its consolidated financial statements.

Reclassifications

Certain reclassifications have been made to the year ended September 30, 2010 balances previously reported in the consolidated balance sheets and statements of operations and changes in net assets in order to conform with the year ended September 30, 2011 presentation. For the year ended September 30, 2010, \$279,113,922 related to accrued pension liability have been reclassified out of other liabilities, and \$5,716,091 of prepaid assets and other assets have been reclassified to other assets.

2. Revenue from Services to Patients and Charity Care

Revenues from the Medicare and Medicaid programs accounted for approximately 40% and 13%, and 40% and 12%, respectively, of the Hospital's net patient service revenue for the years ended September 30, 2011 and 2010, respectively Laws and regulations governing the Medicare and Medicaid programs are complex and subject to interpretation As a result, there is at least a reasonable possibility that recorded estimates will change by material amounts in the near term

The Hospital believes that it is in compliance with all applicable laws and regulations, and is not aware of any pending or threatened investigations involving allegations of potential wrongdoing Compliance with such laws and regulations can be subject to future government review and interpretation as well as significant regulatory action including fines, penalties, and exclusion from the Medicare and Medicaid programs Changes in the Medicare and Medicaid programs and the reduction of funding levels could have an adverse impact on the Hospital

Notes to Consolidated Financial Statements (continued)

2. Revenue from Services to Patients and Charity Care (continued)

The following table summarizes net patient service revenue

	Year Ended	Year Ended September 30		
	2011	2010		
Gross revenues from patients				
Inpatients	\$ 1,378,020,729	\$ 1,323,691,384		
Outpatients	671,298,555	578,027,739		
	2,049,319,284	1,901,719,123		
Deductions				
Allowances	1,175,001,400	1,070,922,058		
Charity care	20,358,606	29,803,690		
	1,195,360,006	1,100,725,748		
	\$ 853,959,278	\$ 800,993,375		

The Hospital has agreements with third-party payors that provide for payments to the Hospital at amounts different from its established rates. The difference is accounted for as allowances. Payment arrangements include prospectively determined rates per discharge, reimbursed costs, fee-for-service, discounted charges and per diem payments. Net patient service revenue is affected by the State of Connecticut Disproportionate Share program and is reported at the estimated net realizable amounts due from patients, third-party payors and others for services rendered and includes estimated retroactive revenue adjustments due to future audits, reviews and investigations. Retroactive adjustments are considered in the recognition of revenue on an estimated basis in the period the related services are rendered and such amounts are adjusted in future periods as adjustments become known or as years are no longer subject to such audits, reviews and investigations. During 2011 and 2010, the Hospital recorded net changes in estimates of approximately \$3.2 million and \$780,000, respectively, which primarily relate to better than previously estimated third party payor settlements

The Hospital has established estimates based on information presently available, of amounts due to or from Medicare, Medicaid and third-party payors for adjustments to current and prior year payment rates, based on industry-wide and Hospital-specific data. Such amounts are included in the accompanying balance sheets. Additionally, certain payors' payment rates for various years have been appealed by the Hospital. If the appeals are successful, additional income applicable to those years might be realized.

Notes to Consolidated Financial Statements (continued)

2. Revenue from Services to Patients and Charity Care (continued)

The Hospital has agreements with various health maintenance organizations (HMOs) to provide medical services to subscribing participants. Under these agreements, the HMOs make fee-for-service payments to the Hospital for certain covered services based upon discounted fee schedules. In addition, the Hospital receives monthly capitation payments from certain HMOs based on the number of each HMO's participants, regardless of services actually performed by the Hospital

The Hospital accepts all patients regardless of their ability to pay A patient is classified as a charity patient by reference to the established policies of the Hospital Essentially, these policies define charity services as those services for which no payment is anticipated In assessing a patient's inability to pay, the Hospital utilizes the generally recognized poverty income levels for the State of Connecticut, but also includes certain cases where incurred charges are significant when compared to incomes

3. Net Assets

Temporarily restricted net assets are available for the following purposes at September 30

	 2011	2010
Health care services		
Free beds	\$ 24,458,498	\$ 24,311,156
Research	30,689,521	34,206,414
Education	10,094,964	11,351,456
Capital replacement	7,237,273	8,692,378
Other health care services	 26,306,666	28,817,544
	\$ 98,786,922	\$ 107,378,948

Permanently restricted net assets at September 30 are restricted for

	2011	2010
Investments to be held in perpetuity, the income		
from which is expendable to support health care		
services	\$ 55,190,045	\$ 54,860,780
Endowment requiring income to be added to		
original gift to support health care services	21,274,409	20,915,172
Restricted funds held in trust by others, the income		
from which is expendable to support health care		
services	 115,839,220	119,917,040
	\$ 192,303,674	\$ 195,692,992

Notes to Consolidated Financial Statements (continued)

3. Net Assets (continued)

The Hospital's endowment consists of hundreds of individuals funds established for a variety of purposes. The endowment includes donor-restricted endowment funds. Net assets associated with endowment funds are classified and reported based on the existence or absence of donor-imposed restrictions.

The Board of Directors of the Hospital has interpreted UPMIFA as requiring the preservation of the fair value of the original gift as of the gift date of the donor-restricted endowment funds absent explicit donor stipulations to the contrary. As a result of this interpretation, the Hospital classifies as permanently net restricted assets (a) the original value of gifts donated to the permanent endowment, (b) the original value of subsequent gifts to the permanent endowment, and (c) accumulations to the permanent endowment made in accordance with the direction of the applicable donor gift instrument at the time of the accumulation is added to the fund. The remaining portion of the donor-restricted endowment fund that is not classified in permanently restricted net assets is classified as temporarily restricted net assets until those amounts are appropriated for expenditure by the organization in a manner consistent with the standard of prudence prescribed by UPMIFA. In accordance with UPMIFA, the Hospital considers the following factors in making a determination to appropriate or accumulate donor-restricted funds

- 1) The duration and preservation of the fund
- 2) The purposes of the Hospital 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 Hospital
- 7) The investment policies of the Hospital

The Hospital has adopted investment and spending policies for endowment assets that attempt to provide a predictable stream of funding to programs supported by its endowment while seeking to maintain purchasing power of the endowment assets Endowment assets include those assets of donor-restricted funds that the Hospital must hold in perpetuity or for a donor-specific period(s) Under this policy, as approved by the Board of Directors, the endowment assets are invested in a manner that is intended to produce a real return, net of inflation and investment management costs, of at least 4% over the long term Actual returns in any given year may vary from this amount

To satisfy its long-term rate-of-return objectives, the Hospital 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) The Hospital targets a diversified asset allocation that places a greater emphasis on equity-based alternative investments to achieve its long-term objective within prudent risk constraints

Notes to Consolidated Financial Statements (continued)

3. Net Assets (continued)

The Hospital has a policy of appropriating for distribution each year of 4% of the trailing twelve quarter average market value of each fiscal year in which the distribution is planned This is consistent with the Hospital's objective to maintain the purchasing power of the endowment assets held in perpetuity or for a specified term as well as to provide additional real growth through new gifts and investment returns

Changes in endowment funds for the fiscal year ended September 30, 2011 consisted of the following

	Temporarily Restricted	Permanently Restricted	Total
Endowment net assets at beginning of year	\$ 59,918,239	\$ 75,775,952	\$ 135,694,191
Investment return			
Investment income	421,733	359,236	780,969
Net depreciation (realized and unrealized)	(839,351)	_	(839,351)
Total investment return	(417,618)	359,236	(58,382)
Contributions Appropriation of endowment assets for	_	329,266	329,266
expenditure	(5,637,904)	_	(5,637,904)
Endowment net assets at end of year	\$ 53,862,717	\$ 76,464,454	\$ 130,327,171

Changes in endowment funds for the fiscal year ended September 30, 2010 consisted of the following

	Temporarily Restricted	Permanently Restricted	Total
Endowment net assets at beginning of year	\$ 53,476,892	\$ 74,359,240	\$ 127.836,132
Investment return			
Investment income	1,006,454	59,472	1,065,926
Net appreciation (realized and unrealized)	7,930,368	_	7,930,368
Total investment return	8,936,822	59,472	8,996,294
Contributions Appropriation of endowment assets for	-	1,357.240	1,357,240
expenditure	(2,495,475)	_	(2,495,475)
Endowment net assets at end of year	\$ 59.918.239	\$ 75,775,952	\$ 135,694,191

Notes to Consolidated Financial Statements (continued)

3. Net Assets (continued)

From time to time, the fair value of assets associated with individual donor-restricted endowments funds may fall below the level that the donor, as stipulated by, UPMIFA requires the Hospital to retain as a fund of perpetual duration. These deficiencies periodically result from unfavorable market fluctuations that occurred shortly after the investment of new permanently restricted contributions in which case the Board of Directors may deem unprudent the continuation of appropriation for a limited period. There were no significant deficiencies of this nature which are reported in unrestricted net assets as of September 30, 2011 or 2010.

4. Assets Whose Use is Limited

Included in assets whose use is limited at September 30 are the following

		2011		2010
Cash and cash equivalents	\$	2,071,049	\$	1,364,494
Money market funds	Φ	65,519,377	Ψ	, ,
5		, ,		4,304,570
Domestic equity securities		34,729,511		35,026,257
Fixed income bonds				
US		25,730,197		71,121,342
International		8,844,634		_
Mutual funds				
US		73,786,682		71,005,896
International		62,759,657		62,471,962
Common collective funds				
US		127,659,082		107,950,102
International		40,179,160		36,868,287
Other notes and accounts receivable		200,522		114,631
Pledges receivable, net		1,752,715		2,048,767
Due from affiliated entities, net		13,784,045		15,290,164
	\$	457,016,631	\$	407,566,472

The Hospital advances funds to affiliates to provide capital for the expansion of certain mission-related activities. The Hospital expects these advances to be repaid, generally with interest Periodically, amounts outstanding are reviewed for collectability and adjustments are provided where collection is doubtful

Notes to Consolidated Financial Statements (continued)

4. Assets Whose Use is Limited (continued)

The composition and presentation of unrestricted investment income and gains from investments, which are included in nonoperating income in the consolidated statements of operations and changes in net assets, are as follows

	Year Ended September 30				
	2011	2010			
Interest and dividend income	\$ 4,079,303	\$ 6,354,615			
Realized gain (loss) on investments, net	7,928,671	(433,507)			
Contributions	650,919	995,454			
Other	(50,913)	(1,507,615)			
	\$ 12,607,980	\$ 5,408,947			

5. Fair Values of Financial Instruments

As defined in ASC 820-10, fair value is based on the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. In order to increase consistency and comparability in fair value measurements, ASC 820-10 establishes a fair value hierarchy that prioritizes observable and unobservable inputs used to measure fair value into three broad levels, which are described below

- Level 1: Quoted prices (unadjusted) in active markets that are accessible at the measurement date for identical assets or liabilities. The fair value hierarchy gives the highest priority to Level 1 inputs
- Level 2: Observable inputs that are based on inputs not quoted in active markets, but corroborated by market data
- Level 3: Unobservable inputs are used when little or no market data is available. The fair value hierarchy gives the lowest priority to Level 3 inputs

A financial instrument's categorization within the valuation hierarchy is based upon the lowest level of input that is significant to the fair value measurement. In determining fair value, the Hospital utilizes valuation techniques that maximize the use of observable inputs and minimize the use of unobservable inputs to the extent possible and considers nonperformance risk in its assessment of fair value.

Notes to Consolidated Financial Statements (continued)

5. Fair Values of Financial Instruments (continued)

Financial assets carried at fair value in the accompanying consolidated balance sheets, excluding assets invested in the Hospital's defined benefit pension plan, are classified in the table below in one of the three categories described above

	September 30, 2011						
	Level 1	Level 2	Level 3	Total			
Assets							
Cash and cash equivalents	\$ 64,109,337	\$ -	\$ -	\$ 64,109,337			
Assets limited as to use							
Cash and cash equivalents	2,071,049	_	_	2,071,049			
Money market funds	65,519,377	_	_	65,519,377			
Domestic equity securities	34,729,511	_	_	34,729,511			
Fixed income bonds							
US	_	25,730,197	_	25,730,197			
International	_	8,844,634	_	8,844,634			
Mutual funds							
US	73,786,682	_	_	73,786,682			
International	62,759,657	_	_	62,759,657			
Common collective funds							
U S	_	127,659,082	_	127,659,082			
International	_	40,179,160	_	40,179,160			
Other assets							
Domestic mutual funds	4,208,400	_	_	4,208,400			
Funds held in trust by others							
Cash and cash equivalents	2,848,274	_	_	2,848,274			
Equity securities							
US	51,737,201	_	_	51,737,201			
International	5,449,937	_	_	5,449,937			
Fixed income bonds							
US	_	34,684,027	_	34,684,027			
International	_	3,462,188	_	3,462,188			
Common collective funds							
US	_	10,571,639	_	10,571,639			
International	_	3,213,731	_	3,213,731			
Domestic mutual funds	2,181,006	_	_	2,181,006			
Other	_	1,691,217	_	1,691,217			

Notes to Consolidated Financial Statements (continued)

5. Fair Values of Financial Instruments (continued)

Financial assets and liabilities carried at fair value as of September 30, 2010 are classified in the table below in one of the three categories described above

	September 30, 2010					
	Level 1	Level 2	Level 3	Total		
Assets						
Cash and cash equivalents	\$ 44,299,371	\$ -	\$ -	\$ 44,299,371		
Assets limited as to use						
Cash and cash equivalents	1,364,494	_	_	1.364,494		
Money market funds	4,304,570	_	_	4,304,570		
Domestic equity securities	35,026,257	_	_	35,026,257		
Domestic fixed income bonds	_	71,121,342	_	71,121,342		
Mutual funds						
US	71,005,896	_	_	71,005,896		
International	62,471,962	_	_	62,471,962		
Common collective funds						
US	_	107,950,102	_	107,950,102		
International	_	36,868,287	_	36,868,287		
Other assets						
Domestic mutual funds	2,104,200	_	_	2,104,200		
Funds held in trust by others						
Cash and cash equivalents	2,948,541	_	_	2,948,541		
Equity securities						
US	53,558,475	_	_	53,558,475		
International	5,641,788	_	_	5,641,788		
Fixed income bonds						
US	_	35,904,989	_	35,904,988		
International	_	3,584,065	_	3,584,065		
Common collective funds						
US	_	10,943,786	_	10,943,786		
International	_	3,326,862	_	3,326,862		
Domestic mutual funds	2,257,783	_	_	2,257,783		
Other	_	1,750,752	_	1,750,752		

Notes to Consolidated Financial Statements (continued)

5. Fair Values of Financial Instruments (continued)

Financial assets carried at fair value included in the cash balance retirement plan as of September 30, 2011 are classified in the table below in one of the three categories described above

	 Level 1	Level 2]	Level 3	Total
Cash and cash equivalents	\$ 10,518,470	\$ _	\$	_	\$ 10,518,470
Domestic equity securities Fixed income bonds	40,514,124	_		_	40,514,124
U S	_	49,049,039		_	49,049,039
International	_	14,305,453		_	14,305,453
Mutual funds					
U S	91,097,250	_		_	91,097,250
International	59,483,410	_		_	59,483,410
Common collective funds					
U S	_	201,803,168		_	201,803,168
International	_	45,570,541		_	45,570,541

Financial assets carried at fair value included in the defined benefit cash balance retirement plan as of September 30, 2010 are classified in the table below in one of the three categories described above

	 Level 1	Level 2	Level 3	Total
Cash and cash equivalents	\$ 17,885,811	\$ _	\$ _	\$ 17,885,811
Domestic equity securities	65,080,633	_	_	65,080,633
Fixed income bonds				
U S	_	78,548,061	_	78,548,061
International	_	15,939,404	_	15,939,404
Mutual funds				
U S	68,644,290	_	_	68,644,290
International	67,613,513	_	_	67,613,513
Common collective funds				
U S	_	194,741,633	_	194,741,633
International	_	16,349,239	_	16,349,239
Other	28,182,476	_	_	28,182,476

Notes to Consolidated Financial Statements (continued)

5. Fair Values of Financial Instruments (continued)

Fair value for Level 1 is based upon quoted market prices Fair value for Level 2 is based upon model-based valuation techniques for which all significant assumptions are observable in the market or can be corroborated by observable market data for substantially the full term of the assets Inputs are obtained from various sources including public market participants, dealers and brokers

The Hospital's long-term debt obligations were reported in the accompanying consolidated balance sheets at the carrying value which totaled approximately \$208,560,000 at September 30, 2011 approximated fair value. The fair value of these obligations at September 30, 2011 was determined by the Hospital's investment advisor using a discounted cash flow analysis. At September 30, 2010, the carrying value of the Hospital's long term debt approximated fair value.

6. Property, Plant and Equipment

Property, plant and equipment consist of the following at September 30

	2011	2010
Land and land improvements Buildings and fixed equipment Movable equipment	\$ 23,011,190 526,586,817 383,220,441	\$ 21,176,794 483,427,457 348,893,625
	932,818,448	853,497,876
Less accumulated depreciation	635,128,928	593,621,312
	297,689,520	259,876,564
Construction in process (estimated cost to complete - \$23,191,300)	28,166,452	39,136,770
1	\$ 325,855,972	\$ 299,013,334

7. Pensions and Other Post-retirement Benefits

The Hospital has a cash balance retirement plan, the Retirement Plan for Employees of Hartford Hospital, covering substantially all employees, and a noncontributory, supplemental defined-benefit retirement plan for certain executive employees (collectively, the pension plans)

The Hospital provides health care and life insurance benefits to its retired employees who meet certain eligibility requirements. The Hospital's policy is to fund the cost of post-retirement benefits, other than pensions, as incurred

Notes to Consolidated Financial Statements (continued)

7. Pensions and Other Post-retirement Benefits (continued)

Included in unrestricted net assets at September 30 are the following amounts that have not yet been recognized in net periodic benefit cost

2011

	2011	2010
Unrecognized actuarial loss	\$ 344,687,961	\$ 313,925,513
Unrecognized prior service credit	(5,530,954)	(9,147,716)
	\$ 339,157,007	\$ 304,777,797

The actuarial loss and prior service credit included unrestricted net assets at September 30, 2011, and expected to be recognized in net periodic benefit cost during the year ending September 30, 2012, are as follows

Unrecognized actuarial loss	\$ 16,052,399
Unrecognized prior service credit	(3,016,211)_
	\$ 13,036,188

The following table sets forth the plans' funded status and amounts recognized in the consolidated balance sheets

	Pension	Benefits	Other Post-Reti	rement Benefits
	2011	2010	2011	2010
Change in benefit obligations				_
Benefit obligations at beginning of year	\$ (757,387,873)	\$ (699,558,199)	\$ (76,107,566)	\$ (75,294,534)
Service cost	(31,499,870)	(27,786,254)	(2,247,313)	(2,242,868)
Interest cost	(38,240,998)	(38,469,092)	(3,887,066)	(4,184,958)
Benefits paid	46,950,284	45,781,962	3,840,944	3,352,378
Actuarial gains and losses	(2,083,677)	(35,144,571)	3,020,947	(2,358,216)
Plan amendments	_	(2,211,719)	(568,702)	4,620,632
Benefit obligations at year-end	(782,262,134)	(757,387,873)	(75,948,756)	(76,107,566)
Change in plan assets				
Fair value of plan assets at beginning of				
year	552,985,060	540,181,936		
Actual return on plan assets	6,223,548	57,159,545		
Benefits paid	(46,950,284)	(45,781,962)	(3,840,944)	(3,352,378)
Employ er contributions	83,131	1,425,541	3,840,944	3,352,378
Fair value of plan assets at year-end	512,341,455	552,985,060	_	_
Funded status of the plans	\$ (269,920,679)	\$ (204,402,813)	\$ (75,948,756)	\$ (76,107,566)

Notes to Consolidated Financial Statements (continued)

7. Pensions and Other Post-retirement Benefits (continued)

	Pension	Bei	nefits	Ot	her Post-Ret	irem	ent Benefits
	2011		2010		2011		2010
Components of net periodic benefit							_
cost							
Service cost	\$ 31,499,870	\$	27,786,254	\$	2,247,313	\$	2,242,868
Interest cost	38,240,998		38,469,092		3,887,066		4,184,958
Expected return on plan assets	(48,967,204)		(53,168,189)		_		_
Net amortization and deferral	7,676,567		782,781		319,311		629,820
Loss on settlement	_		199,126		_		_
Benefit cost	\$ 28,450,231	\$	14,069,064	\$	6,453,690	\$	7,057,646

The accumulated benefit obligation for the pension plans were \$739,738,503 and \$714,833,444 as of September 30, 2011 and 2010, respectively

The weighted-average assumptions used to develop net periodic benefit cost and the projected benefit obligation were as follows

	2011	2010
Discount rate for projected benefit obligation	5.00%	5 05%
Discount rate for net periodic benefit cost	5.05%	5 50%
Expected long-term rate of return on plan assets	8.00%	8 00%
Measurement date	September 30	September 30

The Hospital has a defined contribution plan for all new employees The cash balance retirement plan is frozen to all new members effective in fiscal year 2010 Expense for employer contributions was approximately \$4,504,911 and \$1,798,937 in 2011 and 2010, respectively These amounts are included in accrued pension liability on the consolidated balance sheets

The expected rate of return on plan assets was determined by the expected return on each asset class based on a model that considers historical and expected future performance

The weighted-average annual assumed rate of increase in the per capita cost of covered benefits (i.e., health care cost trend rate) is assumed to be 9% Rates are assumed to decline to 5% through 2019. This health care cost trend rate assumption has a significant effect on the amounts reported. To illustrate, a one percentage point increase in the assumed health care cost trend rate would increase the service and interest cost and accumulated post-retirement benefit obligation by approximately \$151,324 and \$3,397,780 at September 30, 2011, respectively. A one percentage point decrease in the assumed health care cost trend rate would decrease the service and interest cost and accumulated post-retirement benefit obligation by approximately \$167,428 and \$2,989,773 at September 30, 2011, respectively

Notes to Consolidated Financial Statements (continued)

7. Pensions and Other Post-Retirement Benefits (continued)

Plan Assets

The pension plan weighted-average asset allocations at September 30, by asset category, are as follows

	<u> 2011</u>	2010
Equity securities	59%	67%
Fixed income/debt securities	33	25
Commodities/inflation/real assets	7	5
Other	1	3
Total	100%	100%

The goals of the plan are to provide a secure retirement benefit for plan participants and to manage plan assets for the exclusive benefit of the participants. The Investment Committee of the Board of Directors has responsibility for the development, review and monitoring of the investment policy. The plan assets are invested in accordance with the policy.

Contributions

The Hospital expects to contribute \$32,654,000 to its pension plans and \$4,303,100 to its other post-retirement benefit plan in 2012

Estimated Future Benefit Payments

The following benefit payments, which reflect expected future service, are expected to be paid as follows

	Pension Benefits	Other Post- Retirement Benefits
2012	\$ 64,626,200	\$ 4,303,107
2013	57,717,451	4,515,185
2014	55,316,617	4,780,787
2015	56,001,002	4,960,133
2016	58,776,056	5,249,718
2017-2021	323,836,935	29,026,153

Notes to Consolidated Financial Statements (continued)

7. Pensions and Other Post-Retirement Benefits (continued)

As discussed in the Fair Value Measurements note (Note 5), the Hospital follows a three-level hierarchy to categorize assets measured at fair value. In accordance with this hierarchy, as of September 30, 2011, 39% and 61% of the Hospital Plan's assets which are measured at fair value on a recurring basis were categorized as Level 1 and Level 2 investments, respectively Securities with readily determinable values are carried at fair value as determined based on independent published sources

8. Long-Term Debt

Details of long-term debt are as follows

	September 30		
	2011	2010	
Intercompany debt with HHC			
Series A, consisting of a tax-exempt serial bond and			
term bonds, interest at rates ranging from 4 4% to			
5 0%	\$ 90,364,187		
Series B, tax-exempt variable rate term bond	48,221,793		
Series C, taxable variable rate term bond	28,831,592		
State of Connecticut Health and Educational Authority			
(CHEFA) variable rate demand bonds	_	\$ 45,940,000	
CHEFA Easy Loan	16,221,042	20,000,000	
Capital lease obligations	8,243,545	_	
Line of credit	10,059,865	25,000,000	
Other notes	4,827,560	1,517,484	
Premium on long-term debt	1,790,766		
	208,560,350	92,457,484	
Less current portion	16,971,544	30,300,808	
	\$ 191,588,806	\$ 62,156,676	

Notes to Consolidated Financial Statements (continued)

8. Long-Term Debt (continued)

On September 29, 2011, HHC issued approximately \$375,815,000 of CHEFA Revenue Bonds Series A, B, and C (the HHC 2011 Bonds) In conjunction with the issuance of the 2011 Bonds, an obligated group was formed The members of the obligated group are HHC, Hartford Hospital, The Hospital of Central Connecticut at New Britain General and Bradley Memorial, Windham Community Memorial Hospital and MidState Medical Center (collectively referred to as the "Obligated Group") Obligated Group members are jointly and severally liable under a Master Trust Indenture (MTI) to make all payments required with respect to obligations under the MTI HHC does have the right to name designated affiliates, although presently none exist Though designated affiliates are not obligated to make debt service payments on the obligations under the MTI, each designated affiliate would have an independent designated affiliate agreement and promissory note with HHC with stipulated repayment terms and conditions, each subject to the governing law of the obligated groups' state of incorporation In addition, HHC may cause each designated affiliate to transfer such amounts as necessary to enable the obligated group members to comply with the terms of the MTI, including payment of the outstanding obligations

The HHC 2011 Bonds were issued to refund portions of existing debt under HHC, and to obtain funds for future capital needs. As such, the HHC 2011 Bonds are reflected as intercompany debt in the schedule above. The HHC Series A Revenue Bonds consist of serial bonds that mature annually from July 1, 2014 through July 1, 2023 and the term bonds mature from July 1, 2024 through July 1, 2041. The HHC Series B Revenue Bonds consist of term bonds that mature from July 1, 2042 through July 1, 2049. The HHC Series B Revenue Bonds are secured by an irrevocable letter of credit issued by Bank of America which expires on September 29, 2018. The HHC Series C Revenue Bonds consist of term bonds that mature from July 1, 2042 through July 1, 2049. The HHC Series C Revenue Bonds are secured by an irrevocable letter of credit issued by JP Morgan Chase Bank which expires on October 1, 2016. The reimbursement terms of the letters of credit for the HHC Series B and C Revenue Bonds are such that in the event a letter of credit is drawn upon due to a failed remarketing the components available shall equal the aggregate principal and interest amount of bonds outstanding

The MTI and Supplemental MTI provide for the potential establishment and maintenance of a Debt Service Reserve Fund, a pledge of gross receipts, as defined, and parity with the HHC Series A Revenue Bonds that remain outstanding. The MTI and loan agreements establish certain restrictive covenants, including a debt service coverage ratio and days cash on hand requirement No violations of covenants existed as of September 30, 2011

Notes to Consolidated Financial Statements (continued)

8. Long-Term Debt (continued)

In August 2000, \$30,675,000 of \$31,175,000 of CHEFA Variable Rate Demand Revenue Bonds, Hartford Hospital Issue Series B (Hartford Hospital Series B Bonds), were issued and were secured by an irrevocable direct pay letter of credit issued by Bank of America The Hartford Hospital Series B Bonds were issued to finance the construction of a 78-unit, independent living and assisted living facility (Cedar Mountain Commons) and the funding of various equipment purchases, software purchases and renovation projects The Hartford Hospital Series B Bonds were extinguished during 2011 in conjunction with the HHC 2011 bonds

In March 2002, \$15,265,000 of \$36,110,000 CHEFA Variable Rate Demand Revenue Bonds, Health Care Capital Asset Program Issue, Series A-1 (Hartford Hospital Series A-1 Bonds), were issued to the Hospital and secured by an irrevocable direct pay letter of credit issued by Bank of America The letter of credit expires on May 1, 2012 The Hartford Hospital Series A-1 Bonds were issued to purchase a parking garage from Hartford Hospital Real Estate Corporation and were extinguished during 2011 The Hartford Hospital Series A-1 Bonds were extinguished during 2011 in conjunction with the HHC 2011 bonds

Under the Hartford Hospital Series A-1 and B Bonds, the Hospital had balloon principal payments of \$30,675,000 and \$15,265,000 due on July 1, 2030 and 2031, respectively The financing documents contain certain restrictive covenants including the maintenance of a minimum debt service coverage ratio As of September 30, 2010, the variable interest rate approximated 26%

In September 2010, the Hospital entered into a master financing agreement with CHEFA, for funds to be used to purchase all or a portion of the costs of various capital expenditures. The interest rate is 2.75% and payable in monthly installments of \$357,156 for a period of five years. The outstanding balance related to the master financing agreement as of September 30, 2011 was \$16,221,042

The Hospital entered into a capitalized lease for a satellite location. The lease is a twenty year lease with an option to purchase at the end of the thirty-seventh month. The monthly installments are \$71,637 with interest at 6.25%. The outstanding capital lease obligation was \$8,243,545 as of September 30, 2011.

As part of the HHC 2011 Bonds, the Obligated Group entered into a new line of credit for \$20,000,000 from Bank of America which expires in September 2012. As of September 30, 2011, the Hospital drew \$10,059,865 on this line of credit, with a variable rate of 1 25% and is included in current portion of long-term debt on the consolidated balance sheets As of September 30, 2010, the Hospital drew \$26,500,000 on a then existing revolving loan of \$35,000,000, included in current portion of long-term debt, which was paid in conjunction with the HHC 2011 Bonds

Notes to Consolidated Financial Statements (continued)

8. Long-Term Debt (continued)

Scheduled principal repayments are as follows

2012	\$ 16,971,544
2013	7,031,545
2014	12,104,492
2015	5,339,199
2016	1,330,294
Thereafter	165,783,276
	\$ 208,560,350

Interest paid for the years ended September 30, 2011 and 2010 was \$1,558,782 and \$619,197, respectively

9. Pledges Receivable

Pledges receivable, included in board-designated investments and other assets, include the following unconditional promises to give as of September 30

	2011	2010
Due within one year Due in one to five years	\$ 1,178,882 810,117	\$ 956,204 1,340,333
	1,988,999	2,296,537
Less allowance and discount to present value	236,284	247,770
Pledges receivable, net	\$ 1,752,715	\$ 2,048,767

The discount recognizes the present value of the pledges The allowance recognizes the estimated uncollectible portion of the pledges

10. Commitments and Contingencies

Various lawsuits and claims arising in the normal course of operations are pending or are in progress against the Hospital Such lawsuits and claims are either specifically covered by insurance as explained in Note 1 or are deemed to be immaterial. While the outcomes of the lawsuits cannot be determined at this time, management believes that any loss which may arise from these actions will not have a material adverse effect on the financial position or changes in net assets of the Hospital

Notes to Consolidated Financial Statements (continued)

10. Commitments and Contingencies (continued)

The Hospital has several operating lease agreements for certain real estate, medical equipment and computer equipment Certain of these leases have renewal options for periods up to five years and escalation clauses Rent is payable in equal monthly installments Rent expense was \$21,915,275 and \$19,345,592 for the years ended September 30, 2011 and 2010, respectively

The future minimum lease payments are as follows

2012	\$ 9,507,704
2013	7,350,672
2014	5,062,122
2015	4,851,936
2016	6,069,880
Thereafter	62,226,610
	\$ 95,068,924

11. Related-Party Transactions

The Hospital provides general and administrative services to certain of its affiliates and is reimbursed for the cost of these services Fees charged to affiliates for the year ended September 30, 2011 and 2010, which are included in other operating revenue in the consolidated statement of operations and changes in net assets, were approximately \$35,132,123 and \$33,264,910, respectively

Amounts due from affiliates related to these services at September 30 are as follows

	2011	2010
Intercompany receivable	\$ 790,316	\$ 2,393,227
Notes receivable from affiliates	15,989,108	7,647,392
	\$16,779,424	\$ 10,040,619

Notes to Consolidated Financial Statements (continued)

12. Guarantees

The Hospital guarantees certain debt issues of related parties. The related parties would not have been able to obtain favorable financing terms and rates without the Hospital's guarantee. The term of the guarantees is equal to the term of the related debt, with maturities between 2012 and 2015. The maximum potential amount of future payments the Hospital could be required to make under its guarantees at September 30, 2011 and 2010 was approximately \$1,925,000 and \$60,048,700, respectively. If the related party does not make the necessary principal and interest payments required by the debt agreements, the Hospital is required to pay the monthly debt service.

The Hospital also guarantees the termination value of a swap agreement of a related party. The arrangement relates to an interest rate swap contract with a counterparty with an original notional amount of \$19,745,000 to fix the variable rate debt at a rate of 4.15%. The Hospital would be responsible for any termination payments related to the swap in the event of either nonperformance by the counterparty or by the counterparty's election to terminate the swap agreement. This guarantee is expected to significantly reduce annual debt service payments of the related party. The swap's termination value was approximately \$4,248,129 and \$3,185,500 as of September 30, 2011 and 2010, respectively

In 2009, the Hospital entered into a guarantee agreement with two entities in which the Hospital has non-marketable equity investments in, for the issuance of financial guarantees in order to assist these entities in obtaining bank financing, which expire in June 2016 and September 2016, respectively The Hospital believes that, based on its knowledge of their businesses, these entities continue to be an acceptable credit risk The amount of the financial guarantees is approximately \$5,000,000 at September 30, 2011 and 2010

13. Functional Expenses

The Hospital provides health care services to residents within its geographic location Net expenses related to providing these services are as follows

	Year Ended September 30			
	2011	2010		
Health care services	\$ 870,839,225	\$ 831,807,012		
Research	23,127,300	22,085,415		
Education	69,670,993	66,532,311		
	\$ 963,637,518	\$ 920,424,738		

Notes to Consolidated Financial Statements (continued)

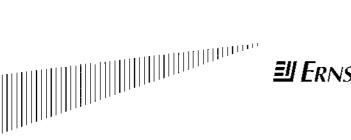
14. Supplemental Cash Flow Information

The changes in assets and liabilities are as follows

	Year Ended September 30						
	2011	2010					
Increase in accounts receivable Decrease (increase) in other receivables Increase in due from affiliates	\$ (21,003,837) 4,310,524 (6,738,805)	\$ (37,198,861) (2,605,021) (3,828,421)					
Decrease (increase) in inventories of supplies and	(0,730,003)	(3,828,421)					
prepaid expenses and other assets	895,438	(2,212,962)					
Increase in other assets	(15,010,483)	(19,219,741)					
Increase in estimated third-party payor settlements	4,869,382	8,953,139					
Decrease in accounts payable	(22,252,539)	(2,849,641)					
Decrease in salaries, wages, payroll taxes and							
amounts withheld from employees	(3,398,713)	(15,728,394)					
Increase (decrease) in accrued expenses	16,885,371	(823,442)					
Increase in accrued pension liability and other							
liabilities	27,247,872	17,227,866					
	\$ (14,195,790)	\$ (58,285,478)					

15. Subsequent Event

The Hospital evaluated subsequent events through January 27, 2012, which is the date the financial statements were issued No events occurred that require disclosure or adjustment to the consolidated financial statements, except for the Hospital acquired an additional one-percent ownership in an existing joint venture in October 2011 As a result, the joint venture will be accounted for as a consolidated entity of the Hospital for fiscal year 2012





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Report of Independent Auditors on Other Financial Information

Board of Directors Hartford Hospital

Our audits were conducted for the purpose of forming an opinion on the basic consolidated financial statements taken as a whole. The consolidating details appearing in conjunction with the consolidated financial statements are presented for purposes of additional analysis and are not a required part of the basic consolidated financial statements. Such information has been subjected to the auditing procedures applied in our audits of the basic consolidated financial statements and, in our opinion, is fairly stated in all material respects in relation to the basic consolidated financial statements taken as a whole

Ernst + Young LLP

January 27, 2012

Consolidating Balance Sheet

	Hartford Hospital			Total
Assets				
Current assets				
Cash and cash equivalents	\$ 60,477,778	\$ 2,146,351	\$ 1,485,208	\$ 64,109,337
Accounts receivable, less allowances for doubtful accounts of \$29,331,000	123,703,917	1.739.489	_	125,443,406
Other receivables	14,438,542	_	(2.321)	14,436,221
Due from affiliates, net	16.276.475	898.005	(395.056)	16,779,424
Inventories of supplies	11.054.903	_	_	11,054,903
Prepaid expenses and other assets	10.118.833	42,647	_	10,161,480
Current portion of assets whose use is limited	3,902,820	_	_	3,902,820
Total current assets	239.973.268	4.826,492	1.087.831	245,887,591
Assets whose use is limited				
Investments and other assets	129.222.699	63,759,587	23,460,551	216,442,837
Investments for restricted purposes	146,779,526	5,453,385	22,821,506	175,054,417
Escrow funds for long-term debt	54,673,488	_	_	54,673,488
Funds designated for debt service	6.943.069	_	_	6,943,069
	337.618.782	69.212.972	46,282,057	453,113,811
Funds held in trust by others	92.291.655	21.804.495	1,743,070	115.839.220
Other assets	81,481,163	_	_	81.481.163
Property, plant and equipment, net	309.372.889	10,120,786	6,362,297	325,855,972
	\$ 1.060,737,758	\$ 105,964,745	\$ 55,475,255	\$ 1,222,177,758

⁽¹⁾ Includes Cedar Mountain Commons

Consolidating Balance Sheet (continued)

	Hartford Hospital								· ·		The In of Li			Total
Liabilities and net assets														
Current liabilities														
Accounts payable	\$	19,542,101	\$	143,729			\$	19,685,830						
Salaries, wages, payroll taxes and amounts withheld from employees		18,445,257		207,346				18,652,603						
Accrued expenses		36,997,829		1.157.741	\$ 11	10.278		38,265,848						
Estimated third-party payor settlements		6,850,045		_		_		6.850.045						
Current portion of long-term debt		16,971,544		_		_		16,971,544						
Current portion of accrued pension liability		13,884,957		_		_		13,884,957						
Current portion of other liabilities		6,640,464		_		_		6,640,464						
Total current liabilities		119.332.197		1,508,816	11	10.278		120,951,291						
Accrued pension liability		340,366,785		_		_		340,366,785						
Long-term debt, less current portion		191,588,806		_		_		191,588,806						
Other liabilities		6,957,786	_					6,957,786						
Net assets														
Unrestricted		163,006,762		77,148,434	31.06	57,298		271,222,494						
Temporarily restricted		82,502,856		2.964.277	13,31	19,789		98,786,922						
Permanently restricted		156,982,566		24,343,218	10,97	77,890		192,303,674						
		402,492,184		104,455,929	55,36	54,977		562,313,090						
	\$ 1	.060,737,758	\$	105,964,745	\$ 55,47	75,255	\$ 1	.222,177,758						

⁽¹⁾ Includes Cedar Mountain Commons

Consolidating Statement of Operations

	Hartford Hospital	Jefferson House Combined (1)		e The Institute of Living				Total
Unrestricted revenues, gains and other support								
Net patient service revenue	\$ 853,959,278						\$	853,959,278
Other operating revenue	121,645,764			\$	545,611	\$	(239,236)	121,952,140
Net assets released from restrictions for operations	9,161,084	\$	26,403		277,717		_	9,465,204
	984,766,126		26,403		823,328		(239.236)	985,376,622
Operating expenses								
Salaries	433,339,431		_		_		_	433,339,431
Employee benefits	128,868,720		_		_		_	128,868,720
Supplies and other	185,371,396		23,281		341,009		(239,236)	185,496,450
Purchased services	157,976,819		3,122		_		_	157.979.941
Depreciation and amortization	43,450,600		_		474,097		_	43,924,697
Provision for uncollectible accounts	12,915,771		_		4,013		_	12,919,784
Interest	1,556,400		_		_		_	1,556,400
	963,479,137		26,403		819,119		(239,236)	964,085,423
Income from operations before loss on early extinguishment of debt	21,286,989		-		4.209		_	21,291,199
Loss on early extinquishment of debt	(447,904)		_		_		_	(447,904)
Income from operations	20,839,085		-		4.209		_	20,843,295
Nonoperating income (loss)								
Income from investments, gifts and bequests, net	8,711,872		_		1,160,026		_	9,871,898
Other	(18.983)		2,755,065		_		_	2,736,082
	8,692,889		2,755,065		1,160,026		_	12,607,980
Excess of revenues over expenses before change in unrealized gains								
and losses on investments	29.531.974		2.755.065		1,164,235		_	33,451,275
Change in unrealized gains and losses on investments	(10.212.490)	ı	(5.359.616)		(1.798.069)			(17,370,175)
Excess (deficiency) of revenues over expenses	\$ 19,319,484	\$	(2.604.551)	\$	(633,834)	\$	- \$	16,081,100

⁽¹⁾ Includes Cedar Mountain Commons

Consolidating Balance Sheet

	Hartford Hospital		 ferson House ombined ⁽¹⁾	The Institute of Living	Total
Assets					
Current assets					
Cash and cash equivalents	\$	33,536,251	\$ 9,613,795	\$ 1.149.325	\$ 44,299,371
Accounts receivable, less allowances for doubtful accounts of \$35,400,000		116,439,803	919,550	_	117,359,353
Other receivables		18.731.666	11,146	3,933	18.746.745
Due from affiliates, net		8.221,672	1,733,413	85,534	10.040.619
Inventories of supplies		10,906,251	_	_	10,906,251
Prepaid expenses and other assets		11,166,296	35,442	3,832	11,205,570
Current portion of assets whose use is limited		4,304,570	_	_	4,304,570
Total current assets		203,306,509	12,313,346	1.242.624	216,862,479
Assets whose use is limited					
Investments and other assets		134,459,350	60,142,730	24,605,378	219,207,458
Investments for restricted purposes		154,816,785	5,581,454	23,656,205	184,054,444
		289,276,135	65,724,184	48.261.583	403,261,902
Funds held in trust by others		95.521.928	22.521.281	1.873.831	119,917,040
Other assets		40,644,647	_	_	40,644,647
Property plant and equipment, net		281,906,249	10,270,691	6.836.394	299,013,334
	\$	910,655,467	\$ 110,829,502	\$ 58,214,432	\$ 1,079,699,401

⁽¹⁾ Includes Cedar Mountain Commons

Consolidating Balance Sheet (continued)

	Hartford Hospital				 ferson House Combined ⁽¹⁾	The Institute of Living	Total
Liabilities and net assets							
Current liabilities							
Accounts payable	\$	41,856,450	\$ 81,909		\$ 41,938,359		
Salaries, wages, payroll taxes and amounts withheld from employees		21,592,183	459,133		22,051,316		
Accrued expenses		20,015,802	1.199.207	\$ 165,468	21,380,477		
Estimated third-party payor settlements		1.980,663	_	_	1,980,663		
Current portion of long-term debt		30,300,808	_	_	30,300,808		
Current portion of accrued pension liability		9.051.278	_	_	9.051.278		
Current portion of other liabilities		8,823,417	_	_	8,823,417		
Total current liabilities		133,620,601	1.740.249	165,468	135,526,318		
Accrued pension liability		279,113,923	_	(1)	279,113,922		
Long-term debt, less current portion		60,966,876	1.189.800	_	62,156,676		
Other liabilities		9,234,293	_	_	9,234,293		
Net assets		178.313.676	79.750.885	32.531.691	290,596,252		
Unrestricted		89,881,759	3,088,566	14,408,623	107,378,948		
Temporarily restricted		159,524,339	25,060,002	11,108,651	195,692,992		
Permanently restricted		427,719,774	107,899,453	58.048,965	593,668,192		
·	\$	910,655,467	\$ 110,829,502	\$ 58,214,432	\$ 1.079.699.401		

⁽¹⁾ Includes Cedar Mountain Commons

Consolidating Statement of Operations

	Hartford Hospital	Jefferson House Combined (1)																																						The Institute of Living	Elim	inations		Total
Unrestricted revenues, gains and other support																																												
Net patient service revenue	\$ 800,993,375						\$ 8	300,993,375																																				
Other operating revenue	122,983,099			\$ 528.217	\$	(239,236)	1	23,272,080																																				
Net assets released from restrictions for operations	8,623,312	\$	29,543	21.399		_		8,674,254																																				
	932,599,786		29,543	549,616	ı	(239,236)	9	932,939,709																																				
Operating expenses																																												
Salaries	398,505,926		_	_		_	3	398,505,926																																				
Employee benefits	100,636,264		_	_		_	1	00,636,264																																				
Supplies and other	181,630,180		24,637	146,680		(239,236)	1	81,562,261																																				
Purchased services	158,477,075		4,906	_		_	1	58,481,981																																				
Depreciation and amortization	42,312,460		_	486,596		_		42,799,056																																				
Provision for uncollectible accounts	37,824,767		_	_		_		37,824,767																																				
Interest	614,483		_	_		_		614,483																																				
	920,001,155		29,543	633,276		(239,236)	9	20,424,738																																				
Income from operations	12,598,631		-	(83,660)		_		12.514.971																																				
Nonoperating income (loss)																																												
Income (loss) from investments, gifts and bequests, net	5,143,396		_	(128,093)		_		5,015,303																																				
Other	69,283		324,361	_		_		393,644																																				
	5,212,679		324,361	(128,093)		_		5,408,947																																				
Excess (deficiency) of revenues over expenses before change in																																												
unrealized gains and losses on investments	17.811.310		324.361	(211.753)		_		17.923.918																																				
Change in unrealized gains and losses on investments	15,769,108		4,988,574	2,409,188		_		23,166,870																																				
Excess of revenues over expenses	\$ 33,580,418	\$	5,312,935	\$ 2.197.435	\$	-	\$	41.090.788																																				

⁽¹⁾ Includes Cedar Mountain Commons

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