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 $\mathsf{Form} 990$

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

			lendar year, or tax year beginni C Name of organization	ng 07-01-2011 and ending (06-30-201	2	D Employ	er identification	n number
	eck if a _l dress ch	pplicable	SHANDS TEACHING HOSPITAL AND O	CLINICS INC			59-19	43502	
_	me chai	-	Doing Business As			— I		ne number	
_		-					(352)2	265-7962	
Initial return Number and street (or P O box if mail is not delivered to street address) Room/suit PO BOX 100362								ceipts \$ 1,157,205	5,281
_	rmınate					}			
Am	nended i	return	City or town, state or country, and a GAINESVILLE, FL 326100362	IP + 4					
Ap	plication	pending							
			F Name and address of prir	icipal officer		H(a) Is thi			
			DAVID GUZICK PO BOX 100362			affilia	tes?	ΓY	es 🔽 No
			GAINESVILLE,FL 326100	362		H(b) Are all	affiliates i	ncluded?	┌ Yes ┌ No
			<u> </u>					a list (see inst	ructions)
T Ta	ıx-exem	npt status	▼ 501(c)(3)	nsert no) 4947(a)(1) or	527	H(c) Grou	p exemption	on number ►	
J W	ebsite	:⊩ UF⁄	ANDSHANDS ORG						
K For	m of ord	ganization	Corporation Trust Associatio	n C Other ►		L Year of for	mation 197	9 M State of le	gal domicile FL
	rt I		mary	,					
	1 1	Briefly d	escribe the organization's mission	n or most significant activitie					
	7	TEACHI	S TEACHING HOSPITAL AND O ING HOSPITAL (COMPRISING ON TO BOTH ON-SITE AND O	AN ACUTE CARE HOSPITA	LANDDI	STINCT PART	T UNIT SP	ECIALTY PRE	MISESIN
Governance			SITY OF FLORIDA'S CLINICAI ECIALTY MEDICAL AREAS	., RESEARCH, AND EDUCAT	TION MIS	SSION IN MOF	RETHAN	100 SPECIAL	TY AND
Ě	-								
Š	-								
	2 0	Check th	his box 🛏 if the organization di	scontinued its operations or o	disposed	of more than 2	5% of its i	net assets	
ģ	1 в	Number	of voting members of the govern	ing body (Part VI, line 1a) .			1	3	16
Activities &	4 1	Number	of independent voting members	of the governing body (Part V	I, line 1b)		4	6
្វ	5 1	Total nu	mber of individuals employed in	calendar year 2011 (Part V , I	ine 2a)			5	9,293
•	6	Total nu	mber of volunteers (estimate if n	ecessary)				6	1,601
	7a 1	Total un	related business revenue from P	art VIII, column (C), line 12				7a	1,161,189
	ь	Net unre	elated business taxable income f	rom Form 990-T, line 34 .				7b	-291,585
						Prio	r Year	Curre	nt Year
_	8	Contri	butions and grants (Part VIII, li		12,064,5	9 2	11,312,084		
Revenue	9	Progra	am service revenue (Part VIII, li	ne 2g)		9	58,449,3	66 1,0	066,553,613
9.6	10	Invest	tment income (Part VIII, columr	3	13,358,9	6 2	19,549,423		
ш	11		revenue (Part VIII, column (A),				16,320,3	00	15,318,059
	12		revenue—add lines 8 through 11	• • •			00,193,2	20 1.1	112,733,179
	13		s and similar amounts paid (Part			<u>'</u>	35,821,1	- 	36,883,286
	14		ts paid to or for members (Part I					0	0
	15		es, other compensation, employe						
\$		5-10)			4	57,380,6		473,385,497	
Expenses	16a	Profes	ssional fundraising fees (Part IX,	column (A), line 11e)		30,1	41	38,040	
置	b		ındraısıng expenses (Part IX, column (D	· · · · · · · · · · · · · · · · · · ·					
	17		expenses (Part IX, column (A),				98,444,0		513,345,823
	18		expenses Add lines 13-17 (mu		•		91,675,9		023,652,646
. 09	19	Reven	ue less expenses Subtract line	18 from line 12		- 	08,517,2	+	89,080,533
පිමි කුළු						Beginning Ye	of Curren ear	End o	of Year
ege.	20	Total	assets (Part X, line 16)				49,326,9	02 1,5	570,216,174
Net Assets or Fund Balances	21		liabilities (Part X, line 26)				24,536,2		755,789,817
žŽ	22		ssets or fund balances Subtract				24,790,6		314,426,357
Pa	rt II		ature Block						
know			erjury, I declare that I have examin ef, it is true, correct, and complete.						
		T _k				20	13-05-13		
Sigr	า	Signa	ature of officer			Da			
Her		will	JAM ROBINSON CFO/TREASURER						
		Туре	or print name and title						
		Preparer	r's L	Date		Check If		taxpayer identific	ation number
Paid		signatur	.			self- employed 🕨 🦵	(see instructions)		
	arer's	Firm's name (or yours L							
	Only	ıf self-er	mployed), , and ZIP + 4				EIN 🕨		
	_	audicss,	, Good Edit (T				Phone no	+	
		1					i		

Part	Ш	Statement of Program S Check if Schedule O contains a	ervice Accomplish response to any quest	nments Ion In this Part III			
1	Briefly	describe the organization's mis	sion				
		HEALTH CARE OF A HIGH QU PAY SHANDS EMPHASIZES				IANDICAP, AGE) R
	the pri	e organization undertake any sig or Form 990 or 990-EZ?		•		┌ Yes ┌ No	
	servic	e organization cease conducting				┌ Yes ┌ No	
4	Descri expens	e," describe these changes on So be the organization's program s ses Section 501(c)(3) and 501 and allocations to others, the to	ervice accomplishment (c)(4) organizations and	d section 4947(a)(1) trusts are required to rep		
4a	TERTIL HOSPI APPRO NEEDS BENEF STRAT COMM BENEF THESE CRITE HEALT! AND A IMPRO DELIVE) (Expenses \$ DS TEACHING HOSPITAL AND CLINICS, 1 ARY CARE TEACHING INSTITUTION OF TAL OF 40 BEDS AND A HOSPITAL BASE WHEN TO A HEALTH CARE ORGANIZATION OF THE RESIDENTS - PARTICULARLY TO THE RESIDENTS AND SERVICES ARE IDEN UNITY HEALTH SERVICES, HEALTH PROUITIES AND POLICIES PROVIDE FREE OR DISCOUNTIAL COMMUNITY HEALTH SERVICES IN THE PROFESSIONS EDUCATION INCLUDES WEMENT SERVICES AND SPECIALTY INSTRUMENTS ON THE SESSIONAL JOURNALS DONATIONS INCLUSES SIONAL JOURNALS DONATIONS INCLUSES.	INC IS A FLORIDA NOT-FOR B52 BEDS, AN INPATIENT PS D HOME CARE AGENCY SHAN'S PARTICIPATION IN MEET HE POOR AND OTHER UNDE TIFIED BY HEALTH CARE OR FESSIONS EDUCATION, RES FINANCIAL ASSISTANCE FO TED HEALTH AND HEALTH-R CLUDES COMMUNITY HEALT SEDUCATION PROVIDED IN CONTROL OF THE PROGRAMS TO PRORAPEUTIC PROTOCOLS, EVALUATION OF THE PROTOCOLS, EVALUATION OF THE PROTOCOLS, EVALUATION PROVIDED IN CONTROL OF THE PROTOCOLS, EVALUATION PROVIDED IN CONTROL OF THE PROTOCOLS, EVALUATION PROVIDED IN CONTROL OF THE PROGRAMS TO PRORAMS TO PRORAMS TO PROPERTY OF THE PROTOCOLS, EVALUATION PROVIDED IN CONTROL OF THE PROTOCOLS, EVALUATION PROVIDED IN CONTROL OF THE PROTOCOLS, EVALUATION PROVIDED TO PROTOCOLS.	YCHIATRIC AND SUBSTA NDS' COMMUNITY BENE ING IDENTIFIED COMMUNITY BENE RESERVED GROUPS - BY ING IDENTIFIED COMMUNITY BENE AND COMMUNITY BENE AND DONATIONS R PATIENTS REQUIRING ELATED SERVICES TO PENTE BENE BENE BENE BENE BENE BENE BENE	NCE ABUSE FACILITY OF 81 BEDS FIT IS A PLANNED, MANAGED, OR JUITY HEALTH NEEDS IT IS A COI IMPROVING HEALTH STATUS AND NSE TO FINDINGS OF A COMMUNITY BENFEIT CATEGORIES INCLUDE SHANDS HAS A LONG HISTORY OF CARE BUT HAVE LIMITED OR NO ERSONS WHO QUALIFY UNDER CELING AND SUPPORT SERVICES AN HAS INTERNSHIPS AND PROGRAID HAL EDUCATION RELATED TO PROMMUNITY RESEARCH INCLUDES ETREATMENTS, AND RESEARCH P	, AN INPATIENT REHAI GANIZED, AND MEASU LABORATION TO MEST UTY HEALTH ASSESSME FINANCIAL ASSISTANGOF PROVIDING COMMUMEANS TO PAY FOR TRAIN INCOME AND A D HEALTH CONTONIC COMMUNITY STUDIES ON HEALTH CONTO MEALTH CONTO MEALTH CONTO MEALTH CONTO MEALTH CONTO MEAS FOR PHYSICIANS, INCOME AND HEALTH CONTO MEALTH CONTO MEAT MEAT MEAT MEAT MEAT MEAT MEAT MEAT	IS A BILITATION RED I THE MMUNITY ENT, CE, JNITY HAT CARE SSET ENINGS NURSES HEALTH CARE
4b	(Code) (Expenses \$	ıncl	uding grants of \$) (Revenue \$)	
4 c	(Code) (Expenses \$	incl	uding grants of \$) (Revenue \$)	
4d		r program services (Describe in	Schedule O)) (Revenue \$)	
 4e		program service expenses►\$	801,191,170		, , т	,	
	· Juli	P. January Cybellacat &	001,101,10				

Part TV	Checklist of	Required	Schedules
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			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 instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νo
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 for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If</i> " <i>Yes,"</i> complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part 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, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	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. All Form 990 filers that operated one or more hospitals must attach audited financial statements	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 \blacksquare	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 questions 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
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 owner? If "Yes," complete Schedule L, Part IV	28c		No
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	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	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	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V	•	. [
			Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	1a 498			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
a	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			
L	return			
ט		2b	Yes	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	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	
а	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 or securities account)?	4a		No
ь	If "Yes," enter the name of the foreign country			110
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
3	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	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		Νo
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	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?			
	Sponsoring organizations maintaining donor advised funds.	8		
а	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
5	Section 501(c)(7) organizations. Enter	-		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2a	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? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		
b	Enter the aggregate 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 aggregate amount of reserves on hand			
4-	Did the expaniantion receive any newments for indeer tenning convices during the tay year?	1.4-		B I
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
-	IT YOU DOO IT TIES O LOVE / /// TO POPORT THOSE HOUMANTS? It "No " provide an evaluation in Cahadula A	7/16		

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

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax			
Ia	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	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	evenue Code.)	ı		
		40	Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did 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," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take 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 ▶ FL			

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 made these available.

Own website Another's website Vpon request

- 19 Describe in Schedule O whether (and if so, how), the organization made 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 ► DENNIS CARTER PO BOX 100336

GAINESVILLE,FL 326100336 (352)265-7962

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

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

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

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

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

Check this box if neither the organization nor any related organizations compensated any current or former officer, director, or trustee

◆ 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

(A) Name and Title	(B) A verage hours per week (describe hours	unles an	on (d e thai	n one son er ai	e bo: is bo nd a	x, oth		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related
	for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		MISC)	organizations
(1) DAVID GUZICK President	2 00	х		х				0	875,947	0
(2) J BERNARD MACHEN Chairman	2 00	х		Х				0	853,714	0
(3) TIMOTHY M GOLDFARB CEO	37 00	х		х				1,896,564	0	48,332
(4) CAROLYN K ROBERTS Director	2 00	х						0	0	0
(5) DANNY PONCE Director	2 00	х						0	0	0
(6) DAVIS M REMBERT JR Director	2 00	х						0	0	0
(7) F KAYSER ENNEKING Director	2 00	х						0	476,254	0
(8) JOAN D RUFFIER Director	2 00	х						0	0	0
(9) JOSEPH TYNDALL Director	2 00	х						0	374,989	0
(10) KEVIN BEHRNS Director	2 00	х						0	667,862	0
(11) MATTHEW FAJACK Director	2 00	х						0	252,916	0
(12) MICHAEL GOOD Director	2 00	х						0	658,710	0
(13) PAUL OKUNIEFF Director	2 00	х						0	762,367	0
(14) ROLAND C DANIELS Director	2 00	х						0	0	0
(15) STEPHEN SHEY Director	2 00	х						0	0	0
(16) TERESA DOLAN Director	2 00	х						0	327,475	0
(17) JAMES ROBERTS Secretary	33 00			х				815,591	0	34,882

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

(A) Name and Title	(B) A verage hours per week (describe hours for related	unles an dire	on (d e than s per offic ector	n one son er ar	e bo: is bo nd a stee)	x, oth)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
	organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officer) employee	Highest compensated employee	Former			
(18) WILLIAM J ROBINSON Treasurer	40 00			х				782,570	0	34,491
(19) BRADLEY POLLITT	40 00				x			247,860	0	22,241
VP Facilities Development (20) EDWARD JIMENEZ	40 00				X			683,231	0	40,940
COO (21) IRENE ALEXAITIS				_					0	
VP Nursing Shands UF	40 00				X			283,019	0	29,862
(22) JANET CHRISTIE Sr VP Human Resources	40 00				x			404,473	0	26,032
(23) MARVIN DEWAR UFP CEO/COM Sr Assoc Dean	40 00				х			470,731	0	22,475
(24) MICHAEL LAWTON VP Managed Care & Network Dev	40 00				х			326,302	0	27,652
(25) SCOTT HAWIG VP Finance	40 00				х			299,068	0	26,780
(26) ANTHONY CARVALHO Pres FL Stat Tch Hosp Coun	40 00					х		442,631	0	28,894
(27) JAMES BURKHART President & Adm Shands Jax	40 00					х		641,900	0	32,083
(28) KARI LOU CASSEL Sr VP & CIO	40 00					х		355,540	0	25,474
(29) MARINA CECCHINI Adm Shands Rehab/Vista	40 00					х		300,040	0	27,821
(30) MICHAEL GLEASON VP Finance-Jax	40 00					×		352,783	0	27,367
1b Sub-Total							F			
c Total from continuation sheets t	o Part VII, Sect	ion A					>			
d Total (add lines 1b and 1c)			•				•	8,302,304	5,250,235	455,328
2 Total number of individuals (inclu	dına but not lım	ited to 1	those	list	ed a	bove') who	received more tha	n	

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶473

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

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
CROTHALL HEALTHCARE INC 13028 COLLECTIONS CENTER DRIVE CHICAGO, IL 60693	CONSULTING	9,985,715
EPIC SYSTEMS CORP PO BOX 88314 MILWAUKEE, WI 532880314	ELECTRONIC MEDICAL RECORDS	8,276,860
OWENS & MINOR INC PO BOX 860437 ORLANDO, FL 32886	MANAGEMENT SERVICES	5,602,154
MORRISON MANAGMENT SPECIALISTS PO BOX 102289 ATLANTA, GA 303682289	MANAGEMENT SERVICES	3,747,834
SIEMENS MEDICAL SOLUTIONS USA PO BOX 120001 DEPT 0733 DALLAS, TX 753120733	MEDICAL SERVICES	3,002,890
Total number of independent contractors (including but not limit)	ed to those listed above) who received more than	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►129

g Total. Add lines 2a-2f	(D) Revenue excluded from tax under sections 512,513,or 514
Total revenue Related or exempt function revenue ### Property of the program service revenue Total revenue Related or exempt function revenue Related or exempt function revenue Related or exempt function revenue Related or exempt R	Revenue excluded from tax under sections 512,513,or
b Membership dues 1b 1,596,748	
Business Code	
2a GOVERNMENTAL 622110 518,178,251 518,178,251 b ALL OTHER PROGRAM SERVICE REVENUE 622110 548,375,362 548,375,362 c d	
3 Investment income (including dividends, interest and other similar amounts)	
3 Investment income (including dividends, interest and other similar amounts)	
3 Investment income (including dividends, interest and other similar amounts)	
3 Investment income (including dividends, interest and other similar amounts)	
3 Investment income (including dividends, interest and other similar amounts)	
3 Investment income (including dividends, interest and other similar amounts)	
3 Investment income (including dividends, interest and other similar amounts)	0
3 Investment income (including dividends, interest and other similar amounts)	
and other similar amounts)	
5 Royalties	13,768,064
S Royaldes I I I I I I I I I I I I I I I I I I I	865,115
	1,990
(ı) Real (ıı) Personal	
6a Gross rents 3,581,259	
b Less rental 2,042,945 expenses	
c Rental income 1,538,314 0 or (loss)	
d Net rental income or (loss)	814,209
(ı) Securities (ıı) O ther	
7a Gross amount 46,268,682 869,496 from sales of assets other	
than inventory b Less cost or other basis and sales expenses	
c Gain or (loss) 4,360,876 555,369	
d Net gain or (loss)	
Sa Gross income from fundraising events (not including \$ 1,596,748 of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses b 207,223 c Net income or (loss) from fundraising events • 1,667,639	
See Part IV, line 18	
a 1,874,862	
b Less direct expenses b 207,223 c Net income or (loss) from fundraising events 1,667,639	1,667,639
9a Gross income from gaming activities	1,007,039
See Part IV, line 19	
a 13,376	
b Less direct expenses b	
c Net income or (loss) from gaming activities 13,376	13,376
10a Gross sales of inventory, less returns and allowances .	
b Less cost of goods sold b	
c Net income or (loss) from sales of inventory • 0	
Miscellaneous Revenue Business Code	
11a NON PATIENT REVENUE 900099 8,679,040 8,679,038	2
b NON PATIENT PHARMACY 446110 2,398,887 2,254,696 144,195	
C REFERENCE LAB 621500 1,018,813 1,016,998	· .
a Another revenue	0
e Total. Add lines 11a-11d	
12 Total revenue. See Instructions	

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)

	heck if Schedule O contains a response to any question in this Part IX	<u> </u>	· · ·		(5)
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	36,765,916	36,765,916		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	117,370	117,370		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	6,987,741		6,987,741	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	362,365,059	295,183,949	65,548,068	1,633,042
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	35,013,427	28,522,070	6,333,565	157,792
9	Other employee benefits	40,685,190	29,504,561	11,117,186	63,443
10	Payroll taxes	28,334,080	22,702,618	5,466,080	165,382
11	Fees for services (non-employees)				
а	Management	8,598,633	2,968,239	5,630,394	
b	Legal	516,393		516,393	
c	Accounting	434,956		434,956	
d	Lobbying	0			
e	Professional fundraising See Part IV, line 17	38,040			38,040
f	Investment management fees	0			
g	Other	124,807,544	100,046,161	23,314,792	1,446,591
12	Advertising and promotion	1,758,176	8,996	1,741,924	7,256
13	Office expenses	49,662,819	33,981,720	15,048,197	632,902
14	Information technology	8,661,218	3,063,793	5,565,428	31,997
15	Royalties	0			
16	Occupancy	26,088,667	9,228,525	16,763,762	96,380
17	Travel	6,100,576	4,671,923	1,154,351	274,302
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	655,012	160,196	442,563	52,253
20	Interest	15,998,713	5,659,335	10,280,273	59,105
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	51,687,261	18,283,693	33,212,618	190,950
23	Insurance	8,461,449	2,993,127	5,437,063	31,259
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	PROFESSIONAL FEES	3,965,661	3,953,283	12,378	
b	HCCB AND OTHER TAXES/LICENSES	12,359,460	12,359,460		
c	MEDICAL SUPPLIES	190,700,274	190,700,274	0	0
d	ALL OTHER EXPENSES	2,889,011	315,961	1,095,558	1,477,492
е					
f	All other expenses	0	0	0	0
25	Total functional expenses. Add lines 1 through 24f	1,023,652,646	801,191,170	216,103,290	6,358,186
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	0			rm 990 (2011)

Forn	n 990 ((2011)			Page 11
Pa	ırt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	16,169	1	16,444
	2	Savings and temporary cash investments	4,236,216	2	17,652,856
	3	Pledges and grants receivable, net	2,533,016	3	4,330,182
	4	Accounts receivable, net	153,501,613	4	192,593,235
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$ Complete Part II of			
		Schedule L		6	
Assets	7	Notes and loans receivable, net	40,874,581	7	48,542,030
SS	8	Inventories for sale or use	13,001,235	8	12,733,861
⋖	9	Prepaid expenses and deferred charges	146,844,051	9	218,040,581
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i> 1,270,216,952			
	ь	Less accumulated depreciation 10b 550,571,492	730,943,791	10 c	719,645,460
	11	Investments—publicly traded securities	341,196,292	11	323,813,471
	12	Investments—other securities See Part IV, line 11	13,198,001	12	12,438,149
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	2,981,936	14	2,981,936
	15	Other assets See Part IV, line 11	1	15	17,427,969
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,449,326,902	16	1,570,216,174
	17	Accounts payable and accrued expenses .	182,955,392	17	176,461,567
	18	Grants payable		18	
	19	Deferred revenue	1,650,896	19	2,069,641
	20	Tax-exempt bond liabilities	493,704,528	20	474,053,383
S	21	Escrow or custodial account liability $ ext{\it Complete Part IV of Schedule D}$		21	
bilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
Liab		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	2,320,078	23	11,106,725
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	43,905,369	25	92,098,501
	26	Total liabilities. Add lines 17 through 25	724,536,263	26	755,789,817
-	20	Organizations that follow SFAS 117, check here ► and complete lines 27	724,000,200	20	755,755,617
Balances		through 29, and lines 33 and 34.			
a.	27	Unrestricted net assets	719, 175, 635	27	805,852,913
Ba	28	Temporarily restricted net assets	5,517,821	28	8,476,261
μ	29	Permanently restricted net assets	97,183	29	97,183
or Fund		Organizations that do not follow SFAS 117, check here ► ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	724,790,639	33	814,426,357
	34	Total liabilities and net assets/fund balances	1,449,326,902	34	1,570,216,174

Par	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		1,112,7	733 170
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,023,6	
3	Revenue less expenses Subtract line 2 from line 1	3			080,533
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		724,7	90,639
5	Other changes in net assets or fund balances (explain in Schedule O)	5		5	555,185
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		814,4	126,357
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			୮	
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
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 in the context of th				
	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 in a separate basis, consolidated basis, or both	ssued			
	☐ Separate basis ☐ Both consolidated and separated basis		, [
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	е	За	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the i audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b	Yes	

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493134007473

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

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.

Name of the organization SHANDS TEACHING HOSPITAL AND CLINICS INC **Employer identification number**

59-1943502

	rt I			blic Charity Sta						structions	
The	rgani	zation is	not a priva	te foundation becaus	eitis (Forl	ınes 1 throu	gh 11, check	only one bo	x)		
1	\vdash	A chur	ch, convent	on of churches, or a	ssociation of	churches s	ection 170(b)(1)(A)(i).			
2	\sqcap	A scho	ol described	in section 170(b)(1	L)(A)(ii). (At	tach Schedı	ıle E)				
3	~	A hosp	ital or a cod	perative hospital se	rvice organiz	ation descri	bed in sectio	n 170(b)(1)	(A)(iii).		
4	Γ			n organization opera ity, and state	ted in conjun	ction with a	hospital desc	cribed in sec	tion 170(b)(1)(A)(iii). E	nter the
5 6	Г Г	sect ion	170(b)(1)(erated for the benefi (A)(iv). (Complete Pocal government of	art II)		•		-	al unit desci	ribed in
7	Γ	describ	ed in	at normally receives (A)(vi) (Complete P		il part of its	support from	a governme	ntal unit or fr	om the gene	ral public
8	Г			described in sectio i		A)(vi) (Con	nplete Part II	.)			
9	F	An orga receipt its sup	anization the s from activ port from gr	at normally receives uties related to its e oss investment inco ganization after June	(1) more th xempt function me and unrel	an 331/3% (ons—subjec ated busine	of its support t to certain e: ss taxable in	from contrib xceptions, a come (less s	nd (2) no mo section 511 t	re than 331/	3% of
10	Γ	Anorga	anızatıon or	ganized and operate	d exclusively	to test for p	oublic safety	See section	509(a)(4).		
11	Γ	one or the box	more public	ganized and operated ly supported organiz bes the type of supp b Type I	ations descr oorting organ	ibed in secti ization and d	on 509(a)(1)) or section ! s 11e throug	509(a)(2) Se gh 11h	ee section 50	
e f	l	other tl section	nan foundat 1 509(a)(2)	ox, I certify that the on managers and ot received a written d	her than one	or more pub	licly support	ed organızat	ions describe	ed in section	509(a)(1) or
g		Since A followir	ng persons?								Г
				rectly or indirectly o			=	persons des	cribed in (ii)		Yes No
			•	governing body of th		_	ation?			11g(
			-	er of a person descri						11g(
				lled entity of a perso						11g(iii)
h		Provide	the follow	ng information about	the supporte	ed organizat	ion(s)				
	(i) Name		(ii)	(iii) Type of organization (described on	(iv) Is the	on in	(v) Dıd you not organızatı	•	(vi) Is the	e	(vii)
	ganız	rted	EIN	lines 1- 9 above or IRC section (see	col (ı) lıst your gove docume	rnıng	col (1) of suppor	your	col (ı) orga ın the U	anızed	A mount of support?
				instructions))	Yes	No	Yes	No	Yes	No	
Tota											

instructions

Sch	edule A (Form 990 or 99	90-EZ)2011						Page 2
	(Complet	e only if you	checked the	box on line 5,	7, or 8 of Part	(b)(1)(A)(iv) I or if the orgar	nızatıon faıle	d to qualify
			<u>organızatıon f</u>	fails to qualify ι	<u>under the tests</u>	listed below, pl	<u>lease comple</u>	ete Part III.)
	ection A. Public Su					Т	1	
Cal	endar year (or fiscal ye in)	ar beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contribut	ions, and						
	membership fees recei							
	ınclude any "unusual							
_	grants ") Tax revenues levied fo	rtho						
2	organization's benefit a							
	paid to or expended on							
	behalf							
3	The value of services of							
	furnished by a governme the organization withou							
4	Total. Add lines 1 thro	_						
5	The portion of total cor	-						
-	by each person (other	than a						
	governmental unit or p	•						
	supported organization line 1 that exceeds 2%							
	amount shown on line 1							
	(f)	21,0014						
6	Public Support. Subtractine 4	ct line 5 from						
S	ection B. Total Sup	port						
Cal	endar year (or fiscal yea	r beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
_	ın)	_	(4) 2007	(2) 2000	(4) 2005	(4) 2020	(0) 2022	(1) 1 3 4 4
7 8	A mounts from line 4 Gross income from inte	rost –						
0	dividends, payments re							
	securities loans, rents							
	and income from simila	ır						
_	sources							
9	Net income from unrela business activities, wh							
	not the business is reg							
	carried on							
10	Other income (Explain							
	IV) Do not include gai from the sale of capital							
11	Total support (Add line							
	through 10)							
12	Gross receipts from re	lated activities	s, etc (See inst	ructions)			12	
13	First Five Years If the		r the organizati	on's first, second	l, thırd, fourth, or	fıfth tax year as a	501(c)(3) or	
	check this box and sto	p here						▶ □
S	ection C. Computat	ion of Publ	ic Support F	Percentage				
14	Public Support Percen	tage for 2011	(line 6 column	(f) dıvıded by lıne	11 column (f))		14	
15	Public Support Percen	tage for 2010	Schedule A , Pa	rt II, line 14			15	
16a	33 1/3% support test-					line 14 is 33 1/3%	% or more, che	
h	and stop here. The org 33 1/3% support test					6a and line 15 is	33 1/20% or m	ore check this
D	box and stop here. The					oa, and inte 15 IS	1/3%0 UI M	ore, check this
17a	10%-facts-and-circum	-	•		-	ne 13, 16a, or 16	b and line 14	٠,
	ıs 10% or more, and ıf							
	in Part IV how the orga	anızatıon meet	s the "facts and	d circumstances"	test The organiz	zatıon qualıfıes as	a publicly su	
b	organization 10%-facts-and-circum	stances test—	2010. If the ora	anization did not	check a hov on li	ne 13, 16a 16b	or 17a and lin	▶ □
,	15 is 10% or more, an							-
	Explain in Part IV how	the organizati						
10	supported organization Private Foundation If t		n did not chools	a hov on line 12	16a 16h 17a a	or 17h chack this	hov and coc	► □

▶□

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 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) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (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 persons 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) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) 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 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 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 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. 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

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

33 1/3% support tests-2010. 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

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

▶[

Part IV	Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).
	Facts And Circumstances Test
	Explanation

Schedule A (Form 990 or 990-EZ) 2011

DLN: 93493134007473

OMB No 1545-0047

Political Campaign and Lobbying Activities

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of tl	ne organiz	atıon		
SHANDS TEA	CHING HOSI	PITAL AND	CLINICS	INC

Employer identification number

59-1943502

Part I-A	Complete if t	the organization i	<u>is exempt under</u>	section 501(c)	or is a section 52	7 organization.

- in opposition to candidates for public office in Part IV
- Political expenditures
- 3 Volunteer hours

art I-B	Complete	e if the	orga	<u>nization</u>	<u>is exem</u>	<u>pt under</u>	<u>section</u>	501(c)	(3).	

1 Enter the amount of any excise tax incurred by the organization under section 4955

Provide a description of the organization's direct and indirect political campaign activities on behalf of or

- 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?
- Was a correction made?
- If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

- Enter the amount directly expended by the filing organization for section 527 exempt function activities
- 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
- Did the filing organization file Form 1120-POL for this year?

☐ Yes

┌ Yes

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

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

incuaic c (i c	om 550 or 550 E2/2011	raye
Part II-A	Complete if the organization is exempt under section 501(c)(3) and filed Form 576	8 (election
	under section 501(h)).	_

4	Check		If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,
		_	expenses, and share of excess lobbying expenditures)

3	Check If the filing organization checked box	A and "limited control" provisions apply		
	Limits on Lobbying E (The term "expenditures" means an		(a) Filing O rganization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)	780,080	
c	Total lobbying expenditures (add lines 1a and 1b	o)	780,080	0
d	O ther exempt purpose expenditures		969,159,000	
e	Total exempt purpose expenditures (add lines 1	and 1d)	969,939,080	0
f	Lobbying nontaxable amount Enter the amount f	1,000,000	0	
	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		
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)	250,000	0
h	Subtract line 1g from line 1a If zero or less, ente	er-0-		

i Subtract line 1f from line 1c If zero or less, enter -0 j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

Yes	N

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 Expenditures During 4-Year Averaging Period							
	Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total		
2a	Lobbying non-taxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000		
b	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000		
c	Total lobbying expenditures	1,377,022	932,540	915,010	780,080	4,004,652		
d	Grassroots non-taxable amount	250,000	250,000	250,000	250,000	1,000,000		
e	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000		
f	Grassroots lobbying expenditures				0	0		

_	edule C (Form 990 or 990-EZ) 2011				Page 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has (election under section 501(h)).	NOT f	iled Fo	orm 57	768
		((a)		b)
		Yes	No	Am	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
C	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	O ther activities? If "Yes," describe in Part IV				
j	Total lines 1c through 1i		_		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
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?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5), d	or sect	tion
			_	Y	es 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?		L	2	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3	
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".				tion
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year	2a			
b	Carryover from last year	2b			
C	Total	2c			
3	Aggregate amount reported in section $6033(e)(1)(A)$ notices of nondeductible section $162(e)$ dues	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			

Part IV Supplemental Information

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

Identifier | Return Reference | Explanation

DLN: 93493134007473

OMB No 1545-0047

SCHEDULE D (Form 990) **Supplemental Financial Statements**

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

Open to Public

lema	F Attach to Fo	orm 990. F See separate instructions.			nspect	.011
	me of the organization NDS TEACHING HOSPITAL AND CLINICS INC		Empl	loyer identificatio	n numbe	r
JIIF	NADS TEACHING HOSFITAL AND CLINICS INC		59-1	.943502		
Pa	rt I Organizations Maintaining Donor Ac		unds d	or Accounts.	omplet	e ıf the
	organization answered "Yes" to Form 99	(a) Donor advised funds	(b) Funds and othe	er accour	nts
L	Total number at end of year	(a) Bonor davised fands		b) i anas ana sene	- uccour	
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					
ŀ	Aggregate value at end of year					
5	Did the organization inform all donors and donor advi		or advis		Yes	┌ No
5	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit	efit of the donor or donor advisor, or for ar	ny othei	r purpose 	Yes	┌ No
Pa l	rt II Conservation Easements. Complete		o Form	<u>ı 990, Part IV, l</u>	ıne 7.	
L <u>2</u>	Purpose(s) of conservation easements held by the or Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a quality	on or pleasure) Preservation of an Preservation of a c	ertified	d historic structur		ì
	easement on the last day of the tax year	Г	Ι	Held at the En	d of the	Voar
а	Total number of conservation easements		2a	neid dt the En	u or the	rear
ь	Total acreage restricted by conservation easements		2b			
c	Number of conservation easements on a certified his	toric structure included in (a)	2c			
d	Number of conservation easements included in (c) ac	cquired after 8/17/06	2d			
3	Number of conservation easements modified, transfe	ء rred, released, extinguished, or terminate:	d by th	e organization dui	ıng	
	the taxable year 🗕					
ı	Number of states where property subject to conserva	ation easement is located ►				
;	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		— dling of		_ Yes	┌ No
5	Staff and volunteer hours devoted to monitoring, insp	pecting and enforcing conservation easem	ents du	ırıng the year 🛌		
,	Amount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easements	during	the year		
	► \$					
3	Does each conservation easement reported on line 2 $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	(d) above satisfy the requirements of sec	tion	ı	_ Yes	┌ No
•	In Part XIV, describe how the organization reports cobalance sheet, and include, if applicable, the text of the organization's accounting for conservation easen	he footnote to the organization's financial	•	•		
ar	Complete if the organization answered "	'Yes" to Form 990, Part IV, line 8.				
la	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	for public exhibition, education or research	h in fur			,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research ir				
	(i) Revenues included in Form 990, Part VIII, line 1			► \$		
	(ii) Assets included in Form 990, Part X			► \$		
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFA		r financ			
а	Revenues included in Form 990, Part VIII, line 1			▶ \$		

b Assets included in Form 990, Part X

Par	TIPE Organizations Maintaining Colle	ections of Art, H	ISTO	<u>ricai irea:</u>	sures, or Oth	er Similar Ass	sets (co	<u>ontinued)</u>
3	Using the organization's accession and other ritems (check all that apply)	ecords, check any of	f the f	ollowing that	are a significant	use of its collect	ion	
а	Public exhibition	d	ı ſ	_ Loan or e	xchange program	s		
ь	Scholarly research	e	· 「	– Other				
С	Preservation for future generations							
4	Provide a description of the organization's colle	ections and explain h	now th	nev further th	e organization's e	exempt purpose u	n	
•	Part XIV				-			
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to						_ Yes	□ No
Pai	rt IV Escrow and Custodial Arranger Part IV, line 9, or reported an amo	ments. Complete	ıf the	e organizat		<u>.</u>		140
1a	Is the organization an agent, trustee, custodia included on Form 990, Part X?	•			s or other assets	not	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV a	and complete the foll	owing	ı table		1		
_							ount	
C	Beginning balance				1c			
d	Additions during the year				1d			
e	Distributions during the year				1e			
T	Ending balance				1f			
2a	Did the organization include an amount on Forr	n 990, Part X, line 2:	1 ?			ļ	Yes	∏ No
	If "Yes," explain the arrangement in Part XIV			1 1157 11 1				
Pa	rt V Endowment Funds. Complete if t					irt IV, line 10. (d)Three Years Back	(e)Four	Years Back
1a	Beginning of year balance	193,720,087		80,837,580	96,491,947	141,704,169		rears back
ь	Contributions	2,129,095		13,655,396	89,689,382	2,250,000		
С	Investment earnings or losses	-6,212,587		-99,079	-34,816	-93,188	3	
d	Grants or scholarships							
e	Other expenditures for facilities and programs	45,000,000		673,810	5,308,933	47,369,034	ļ.	
f	Administrative expenses							
g	End of year balance	144,636,595	1	93,720,087	180,837,580	96,491,947	,	
2	Provide the estimated percentage of the year e	nd balance held as						
а	Board designated or quasi-endowment 🕨 9	8 860 %						
b	Permanent endowment ► 1 140 %							
С	Term endowment ▶							
За	Are there endowment funds not in the possess	on of the organizatio	n tha	t are held an	d administered fo	r the		
	organization by					<u> </u>	Yes	No
	(i) unrelated organizations		•			3a(-	No
ь	(ii) related organizations							
4	Describe in Part XIV the intended uses of the	•					1 1 0 0	
Pai	rt VI Land, Buildings, and Equipmen							
	Description of property		(a	a) Cost or other		(c) Accumulated depreciation	(d) Bo	ok value
1a	Land		\top	29,718,62	14,805,879	,	4	14,524,505
ь	Buildings			29,022,24			+	20,235,811
c	Leasehold improvements				6,995,353	446,294		6,549,059
d	Equipment			22,020	5 411,141,925	299,257,303	11	1,906,648
e	Other				38,874,424	2,444,987	3	36,429,437
	II. Add lines 1a-1e (Column (d) should equal Forn		(B), III	ne 10(c).) .			71	9,645,460

Part VII 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			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	•		
Part VIII Investments—Program Related. Se	e Form 990, Part X, line	13.	
(a) Description of investment type	(b) Book value	(c) Metho	od of valuation
(a) Description of investment type	(b) book value	Cost or end-o	f-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	•		
Part IX Other Assets. See Form 990, Part X, III	ne 15.		
(a) Descri	ption		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 3	15.)		
Part X Other Liabilities. See Form 990, Part >			
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes	0		
BOND SWAP LIABILITIES	84,009,179		
SOFTWARE LICENSE FEE	4,799,955		
POST EMPLOYMENT BENEFITS PAYABLE	3,289,367		
	<u> </u>		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	92,098,501		
2 5 40 (100 740) 5	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,112,733,179
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,023,652,646
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	89,080,533
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	8,571,319
9	Total adjustments (net) Add lines 4 - 8	9	8,571,319
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	97,651,852
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	per R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	1,106,997,174
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	3,891,710
3	Subtract line 2e from line 1	3	1,103,105,464
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)		
С	Add lines 4a and 4b	4c	9,627,715
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	1,112,733,179
	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	
1	Total expenses and losses per audited financial statements	1	1,027,544,355
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	1	
c	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	3,891,710
3	Subtract line 2e from line 1	3	1,023,652,645
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	1
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	1,023,652,646
Par	rt XIV Supplemental Information		

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

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

Identifier	Return Reference	Explanation
Intended uses of endowment funds	Schedule D, Part V, Line 4	
Other changes in net assets	Schedule D, Part XI, Line 8	EQUITY TRANSFERS - 5612879, INCREASE IN TEMPORARILY HELD ASSETS - 2958440,
Other revenues in audited financial statements not in form 990	Schedule D, Part XII, Line 2d	EXPENSE OFFSET - 2250169, ELIMINATIONS - 1641541,
Other revenues in form 990 not in audited financial statements	Schedule D, Part XII, Line 4b	CAPITAL DONATIONS - 1611581, ROUNDING - 2, UNREALIZED LOSS ON INVESTMENTS - 8016132,
Other expenses in audited financial statements not in form 990	Schedule D, Part XIII, Line 2d	ELIMINATIONS - 1641541, EXPENSE OFFSET TO REVENUE - 2250169,
Other expenses in form 990 not in audited financial statements	Schedule D, Part XIII, Line 4b	ROUNDING - 1,

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493134007473

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

2011

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service

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.

Open to Public Inspection

Internal Revenue Service	Attach	to Form 990	or Form 99	0-EZ. 🏲 See separate instructi	ons.	Inspection
Name of the organization SHANDS TEACHING HOSPITA	AL AND CLINICS IN	С			Employer ider	tification number
		•			59-1943502	
Part I Fundraising Ac	tivities. Complete	e if the c	rganızat	tion answered "Yes" t	to Form 990, Part IV	, line 17.
1 Indicate whether the orga	nızatıon raısed funds	through a	ny of the	following activities Che	ck all that apply	
a 🔽 Mail solicitations			e	Solicitation of non	-government grants	
b 🔽 Internet and e-mail so	olicitations		f	□ Solicitation of government	ernment grants	
c 🔽 Phone solicitations			g	Special fundraisin	g events	
d 🔽 In-person solicitation	S					
 Did the organization have or key employees listed in If "Yes," list the ten highe to be compensated at least 	n Form 990, Part VII st paid individuals or	or entity) entities (ın conne fundraıse	ction with professional f ers) pursuant to agreeme	undraising services? ents under which the fur	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of utions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
EG PRODUCTIONS 690 SW 1ST CT	CONSULTING		No	552,647	38,040	514,607
MIAMI, FL 33130						
Total				552,647	38,040	514,607
3 List all states in which the licensing	e organization is regis	tered or l	ıcensed t	o solicit funds or has be	en notified it is exempt	from registration or
FL						

Pa	rt II	Fundraising Events. Com more than \$15,000 on Form	plete if the organization 990-EZ, line 6a. List o	on answered "Yes" to events with gross rece	Form 990, Part IV, lineipts greater than \$5,	e 18, or reported 000.
			(a) Event #1 UF DANCE MARATHON	(b) Event #2 FSU DANCE MARATHON	(c) O ther Events 10 (total number)	(d) Total Events (Add col (a) through col (c))
Φ			(event type)	(event type)	262.550	1 000 007
Revenue	1 2	Gross receipts Less Charitable	963,336		268,550	1,880,827
Ą		contributions	904,358	588,116	104,273	1,596,747
	3	Gross income (line 1 minus line 2)	58,978	60,825	164,277	284,080
	4	Cash prizes	0		2,500	2,500
ø	5	Non-cash prizes			7,512	7,512
esu.	6	Rent/facility costs	24,533	18,546	15,983	59,062
Expenses	7	Food and beverages			14,605	14,605
Direct	8	Entertainment			3,800	3,800
₫	9	Other direct expenses .	46,925	42,070	30,749	119,744
	10	Direct expense summary Add line	es 4 through 9 in column	(d)		(207,223)
	11	Net income summary Combine lii	_			76,857
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	rt IV, line 19, or repo	
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
	1	Gross revenue				
see See	2	Cash prizes				
pen	3	Non-cash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	┌ Yes	┌ Yes ┌ No	┌ Yes	_
	7	Direct expense summary Add lines	s 2 through 5 ın column (d)		()
	8	Net gaming income summary Com	bine lines 1 and 7 in colu	mn (d)		
9		er the state(s) in which the organiza				
a b	Ist If"N	he organization licensed to operate No," Explain	gaming activities in each	n of these states?		· Fyes Fno
10a b	Wer	re any of the organization's gaming l Yes," Explain	ıcenses revoked, suspen	ded or terminated during	the tax year?	

Sche	dule G (Form 990 or 990-EZ) 20	11			Page 3			
11	Does the organization operate ga	aming activities with nonmembers? .		Г _{Yes} Г	- No			
12	Is the organization a grantor, be	neficiary or trustee of a trust or a mem	per of a partnership or other entity					
	formed to administer charitable (gamıng?		· · · · F Yes F	- No			
13	Indicate the percentage of gamii	ag activity operated in		1 1				
a				13a				
b								
14		f the person who prepares the organiza		<u> </u>				
	Name ►							
	Address ►							
	revenue?	ntract with a third party from whom the			_ No			
		ed by the third party 🟲 \$						
С	If "Yes," enter name and address	S						
	Name 🟲							
	Address ►							
16	Gaming manager information							
	Name 🟲							
	Gaming manager compensation I	\$ \$						
	Description of services provided -							
17 a		Employee er state law to make charitable distribu		· · ·	- No			
b	Enter the amount of distributions	required under state law distributed to	o other exempt organizations or sp		-			
_		activities during the tax year > \$		hadala C /				
Par	t IV Complete this part to property instructions.)	provide additional information for	responses to quuestion on Sc	nedule G (see				
	Identifier	ReturnReference	Explana	tion				
		•	•					

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 SHANDS TEACHING HOSPITAL AND CLINICS INC **Employer identification number**

						1943502			
Pä	rt I Charity Care and	l Certain O	ther Comr	munity Benefits at	Cost				
						,		Yes	No
1a	Did the organization have a c						1a	Yes	
	If "Yes," is it a written policy						1b	Yes	
2	If the organization had multip care policy to the various ho		ındıcate whic	h of the following best	describes application o	of the charity			
	Applied uniformly to all h	ospitals		Applied uniformly	to most hospitals				
	Generally tailored to indiv	/ıdual hospıta	ls						
3	Answer the following based o organization's patients during			y criteria that applies	to the largest number o	f the			
а	Did the organization use Fedo If "Yes," indicate which of the					are?	2-	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	□ 100% □ 150%	_	00% Г	Other	%		3a	Yes	
b	Did the organization use FPG	to determine	eliaibility foi	r providing <i>discounted</i> o	are? If				
	"Yes," indicate which of the f						3b	Yes	
		_	·		_		שכ	165	
	200% 250%	J 30	00% I	350% ~ 40	0% Other_	<u>%</u>			
С	If the organization did not us determining eligibility for free test or other threshold, regar	or discounte	d care Inclu	de in the description w	hether the organizatior				
4	Did the organization's policy	provide free o	r discounted	care to the "medically	ındıgent"?		4	Yes	
5a	- 1.1	mounts for fre	ee or discour		=		5a	Yes	
b	If "Yes," did the organization	's charity care	e expenses e	exceed the budgeted ar	nount?			Yes	
c	If "Yes" to line 5b, as a resul	t of budget co	nsiderations	, was the organization	unable to provide free o	or discounted	5c	103	No
6a	Did the organization prepare						6a	Yes	110
	If "Yes," did the organization	•	•				6b	Yes	
	Complete the following table worksheets with the Schedule	using the worl					OD	103	
7	Charity Care and Certain C	ther Commu	nıtv Benefits	at Cost					
	Charity Care and Means-Tested	(a) Number of activities or	(b) Persons served	(c) Total community benefit expense	(d) Direct offsetting revenue	(e) Net community be expense	enefit	(f) Pero	
	Government Programs	programs (optional)	(optional)	•		•			•
а	Charity care at cost (from Worksheet 1)	(op normal)		50,963,298		50,96	3,298	4	980 %
b	Medicaid (from Worksheet 3, column a)						0		0 %
С	Costs of other means-tested government programs (from Worksheet 3, column b)						0		0 %
d	Total Charity Care and Means-Tested Government Programs	0	0	50,963,298	0	50,96	3,298	4	980 %
	Other Benefits			, , 0	<u> </u>	22,50	,	<u> </u>	
е	Community health improvement services and community benefit operations (from		42.616	002 022	20 520	000	1 512	0	000 0/
f	(Worksheet 4) Health professions education (from Worksheet 5)		43,616	902,032 70,120,738	20,520 30,747,106	39,37	1,512 3,632		090 % 850 %
g	Subsidized health services (from Worksheet 6)			,		22,31	0		0 %
h	Research (from Worksheet 7)			8,095,208		8,09	5,208	0	790 %
i	Cash and in-kind contributions for community benefit (from Worksheet 8)			557,182		55	7,182	0	050 %
j '	Fotal Other Benefits	0		79,675,160	30,767,626	48,90	7,534		780 %
k	Total. Add lines 7d and 7j	0	43,616	130,638,458	30,767,626	99,87	0,832	9	760 %

	activities.	(a) Number of	(b) Persons	(c) Total communi		rect offse	etting	(e) Net communit		(f) Perc	
		activities or programs (optional)	served (optional)	building expense		revenue		building expense		total ex	pense
1	Physical improvements and housing								0		0
2	Economic development								0		0
3	Community support								0		0 '
4	Environmental improvements								0		0 '
5 6	Leadership development and training for community members								0		0
	Coalition building Community health improvement								0		0
	advocacy								0		0 '
8 9	Workforce development Other		-		_				0		0
0	Total	0	0		0		0		0		0
aı	Bad Debt, Medicar	e, & Collec	tion Practic	es							
ect	ion A. Bad Debt Expense									Yes	No
L	Did the organization report bac Statement No 15?	d debt expens	e ın accordance	with Heathcare F	inancial M	anagen	nent As	sociation [1	Yes	
2	Enter the amount of the organ	ızatıon's bad d	ebt expense .			2		97,426,389			
3	Enter the estimated amount of patients eligible under the org				ble to	3		59,528,809			
1	Provide in Part VI the text of t				• • • ements tha	t desci	ıbes ba				
-	In addition, describe the costi rationale for including a portio	ng methodolog	gy used in deter	rmınıng the amouı							
ect	ion B. Medicare										
5	Enter total revenue received f		-	•		\vdash		276,765,295			
5	Enter Medicare allowable cost					6		289,068,872			
7 3	Subtract line 6 from line 5 Th	· ·									
,	Also describe in Part VI the c Check the box that describes	osting method the method us	ology or source ed	e used to determin							
	Cost accounting system	Гсо	st to charge ra	tio	O ther						
ect	ion C. Collection Practices										
∂a	Did the organization have a wr								9a	Yes	
b	If "Yes," did the organization's contain provisions on the colle assistance? Describe in Part \	ection practice	s to be followed	d for patients who	are known	to qual	lify for f	ınancıal	9b	Yes	
Pa	rt IV Management Com	panies and	Joint Ventu	ires (see instru	ctions)						
	(a) Name of entity	(t	 Description of pr activity of entity 		(c) Organiz profit % o ownersh	r stock	en	Officers, directors, trustees, or key nployees' profit % stock ownership%	pro	Physic fit % or wnershi	r stock
SH	IANDS-SOLANTIC JV	URGENT CARE				50 %)				
SF	IANDS STARKE	HOSPITAL				40 %	,				
SH	IANDS LIVE OAK	HOSPITAL				40 %)				
SH	IANDS LAKE SHORE	HOSPITAL				40 %)				
;											
,		1							 		
,											
;		1									
1		1									
0											
1											
. 2											
13		+					+		+		

Part	V Facility Information									
	on A. Hospital Facilities	Licen	Gener	Children's	Teacl	Ortic	Resea	ER-24	ER-other	
(list in	order of size from largest to smallest)	Licensed hospital	General medical &	en'a ho	Teaching hospital	al acces	Research facility	ER-24 hours	her	
How n the ta	nany hospital facilities did the organization operate during x year? 1	pital	ical & surgical	hospital	phtal	Ortical access hospital	ılıty			
Name	and address									
Name	anu auuress									Other (Describe)
1	SHANDS AT THE UNIVERSITY OF FLORIDA 1600 SW ARCHER RD GAINESVILLE, FL 32610	×	Х	х	х			х		
		_								
		+				-				
		+								
		+	-							

Part V Facility Information (continued) Section B. Facility Policies and Practices.

(Complete a separate Section B for each of the hospital facilities listed in Part V, Section A)

SHANDS AT THE UNIVERSITY OF FLORIDA

Name of Hospital Facility:	
ine Number of Hospital Facility (from Schedule H, Part V, Section A):	1

			Yes	No
	mmunity Health Needs Assessment (Lines 1 through 7 are optional for 2011)			
1	During the tax year or any prior tax year, did the hospital facility conduct a community health needs assessment ("Needs Assessment")? If "No," skip to question 8	1		No
	If "Yes," indicate what the Needs Assessment describes (check all that apply)			
	a A definition of the community served by the hospital facility			
	b Demographics of the community			
	Existing health care facilities and resources within the community that are available to respond to the health			
	needs of the community			
	d How data was obtained			
	e The health needs of the community			
	f Primary and chronic disease needs and other health issues of uninsured persons, low-income persons, and minority groups			
	g The process for identifying and prioritizing community health needs and services to meet those needs			
	h The process for consulting with persons representing the community's interests			
	i Information gaps that limit the hospital facility's ability to assess the community's health needs			
	j Other (describe in Part VI)			
2	Indicate the tax year the hospital facility last conducted a Needs Assessment 20			
	In conducting its most recent Needs Assessment, did the hospital facility take into account input from persons who			
	represent the community served by the hospital facility? If "Yes," describe in Part VI how the hospital facility took into	_		
_	account input from persons who represent the community, and identify the persons the hospital facility consulted	3		
4	Was the hospital facility's Needs Assessment conducted with one or more other hospital facilities? If "Yes," list the other hospital facilities in Part VI	4		
5	Did the hospital facility make its Needs Assessment widely available to the public?	5		
	If "Yes," indicate how the Needs Assessment was made widely available (check all that apply)			
	a			
	b A vailable upon request from the hospital facility			
	c Other (describe in Part VI)			
6	If the hospital facility addressed needs identified in its most recently conducted Needs Assessment, indicate how (check all that apply)			
	a Adoption of an implementation strategy to address the health needs of the hospital facility's community			
	b Execution of the implementation strategy			
	c Development of a community-wide community benefit plan for the facility			
	d Participation in community-wide community benefit plan			
	e Inclusion of a community benefit section in operational plans			
	f Adoption of a budget for provision of services that address the needs identified in the CHNA			
	g Prioritization of health needs in the community			
	h Prioritization of services that the hospital facility will undertake to meet health needs in its community			
	i Other (describe in Part VI)			
7	Did the hospital facility address all of the needs identified in its most recently conducted Needs Assessment? If "No,"			
	explain in Part VI which needs it has not addressed together with the reasons why it has not addressed such needs	7		
Fir	ancial Assistance Policy			
	Did the hospital facility have in place during the tax year a written financial assistance policy that			
	Explains eligibility criteria for financial assistance, and whether such assistance includes free or discounted care?	8	Yes	
9	Used federal poverty guidelines (FPG) to determine eligibility for providing free care?	9	Yes	
	If "Yes," indicate the FPG family income limit for eligibility for free care 200%			
	If "No," explain in Part VI the criteria the hospital facility used			

Pa	art V Facility Information (continued)			
			Yes	No
10	Used FPG to determine eligibility for providing discounted care?	10	Yes	
	If "Yes," indicate the FPG family income limit for eligibility for discounted care $\frac{400}{\%}$			
	If "No," explain in Part VI the criteria the hospital facility used			
11	Explained the basis for calculating amounts charged to patients?	11	Yes	
	If "Yes," indicate the factors used in determining such amounts (check all that apply)			
	a			
	b Asset level			
	c Medical indigency			
	d Insurance status			
	e Uninsured discount			
	f Medicaid/Medicare			
	g 🔽 State regulation			
	h Cother (describe in Part VI)			
	Explained the method for applying for financial assistance?	12	Yes	
13	Included measures to publicize the policy within the community served by the hospital facility?	13		No
	If "Yes," indicate how the hospital facility publicized the policy (check all that apply)			
	The policy was posted at all times on the hospital facility's web site			
	b The policy was attached to all billing invoices			
	c The policy was posted in the hospital facility's emergency rooms or waiting rooms			
	d The policy was posted in the hospital facility's admissions offices			
	e The policy was provided, in writing, to patients upon admission to the hospital facility			
	f The policy was available upon request			
	g			
	ling and Collections			
14	Did the hospital facility have in place during the tax year a separate billing and collections policy, or a written financial		\ _{\ \ -} =	
15	assistance policy (FAP) that explained actions the hospital facility may take upon non-payment? Check all of the following collection actions against an individual that were permitted under the hospital facility's	14	Yes	
13	policies during the tax year before making reasonable efforts to determine the patient's eligibility under the facility's			
	FA P			
	a Reporting to credit agency			
	b Lawsuits			
	c Liens on residences			
	d F Body attachments or arrests			
	e / Other similar actions (describe in Part VI)			
16	Did the hospital facility or an authorized third party perform any of the following actions during the tax year before			
	making reasonable efforts to determine the patient's eligibility under the facility's FAP?	16	Yes	
	If "Yes," check all actions in which the hospital facility or a third party engaged			
	a Reporting to credit agency			
	b Lawsuits			
	c Liens on residences			
	d Body attachments			
	e C Other similar actions (describe in Part VI)			
17	Indicate which efforts the hospital facility made before initiating any of the actions checked in question 16 (check all that apply)			
	a ▼ Notified patients of the financial assistance policy upon admission			
	b Notified patients of the financial assistance policy prior to discharge			
	votified patients of the financial assistance policy in communications with the patients regarding the patients' C ▼ Notified patients of the financial assistance policy in communications with the patients regarding the patients'			
	bills			
	d $\overline{\lor}$ Documented its determination of whether patients were eligible for financial assistance under the hospital			
	facility's financial assistance policy			
	e Cother (describe in Part VI)			

If "Yes," explain in Part VI

Part V Facility Information (continued) Policy Relating to Emergency Medical Care Yes 18 Did the hospital facility have in place during the tax year a written policy relating to emergency medical care that requires the hospital facility to provide, without discrimination, care for emergency medical conditions to individuals **18** | Yes If "No," indicate why a The hospital facility did not provide care for any emergency medical conditions **b** The hospital facility's policy was not in writing The hospital facility limited who was eligible to receive care for emergency medical conditions (describe in Part Other (describe in Part VI)

Inc	ndividuals Eligible for Financial Assistance						
19	Indicate how the hospital facility determined, during the tax year, the maximum amounts that can be charged to FAP-eligible individuals for emergency or other medically necessary care						
	The hospital facility used its lowest negotiated commercial insurance rate when calculating the maximum amounts that can be charged						
	b The hospital facility used the average of it's three lowest negotiated commercial insurance rates when calculating the maximum amounts that can be charged						
	c The hospital facility used the Medicare rates when calculating the maximum amounts that can be charged d Other (describe in Part VI)						
20	Did the hospital facility charge any of its patients who were eligible for assistance under the hospital facility's financial assistance policy, and to whom the hospital facility provided emergency or other medically necessary services, more than the amounts generally billed to individuals who had insurance covering such care?	20		No			
21	If "Yes," explain in Part VI Did the hospital facility charge any of its FAP-eligible patients an amount equal to the gross charge for services provided to that patient?						

21

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chedule H (Fo	rm 990) 2011
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Section C. Other Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility (list in order of size from largest to smallest)

Ho	w many non-hospital facilities did the organization ope	rate during the tax year? 11
Na.	me and address	Type of Facility (Describe)
1	SHANDS HOMECARE	OUTPATIENT HOME CARE PROGRAMS
_	3515 NW 98TH STREET	O O TI ATTENT HOTTE OAKE TROOKATIO
	GAINESVILLE, FL 32609	
2	SHANDS MED GROUP AT MAGNOLIA PARKE	PHYSICIANS CLINICS
	4740 NW 39TH PLACE STE B	
	GAINESVILLE,FL 32606	
3	CARESPOT	URGENT, WELL CARE AND OCCUPATIONAL HEALTH SVCS
	720 SW 2ND AVENUE SUITE 160A	
	GAINESVILLE,FL 32601	
4		
5		
6		
7		
8		
9		
10		

Schedule H (Form 990) 2011

Part VI Supplemental Information

Complete this part to provide the following information

- Required descriptions. Provide the descriptions required for Part I, lines 3c, 6a, and 7, Part III, Part III, lines 4, 8, and 9b, and Part V, Section B, lines 11, 3, 4, 5c, 61, 7, 9, 10, 11h, 13g, 15e, 16e, 17e, 18d, 19d, 20, and 21
- 2 **Community health needs assessment.** Describe how the organization assesses the health care needs of the communities it serves, in addition to any community health 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
Bad Debt Expense excluded from financial assistance calculation	Schedule H, Part I, Line 7, column(f)	0

Schedule H (Form 990) 2011

Identifier	ReturnReference	Explanation
Bad debt expense - financial statement footnote	Schedule H, Part III, Line 4	THE VALUE OF BAD DEBTS REPORTED ON LINE 2 REPRESENTS THE AGGREGATE AMOUNTS REMAINING IN NET PATIENT ACCOUNTS RECEIVABLE THAT ARE DEEMED TO BE UNCOLLECTIBLE AFTER EXERCISING REASONABLE COLLECTION EFFORTS THE AMOUNT ESTIMATED ON LINE 3 AS BEING ATTRIBUTABLE TO PATIENTS ELIGIBLE UNDER THE ORGANIZATION'S FINANCIAL ASSISTANCE POLICY WAS BASED UPON AN ANALYSIS OF CURRENT YEAR MEDICARE BAD DEBTS THAT POPULATION OF BAD DEBTS CAN BE SEGREGATED INTO CHARITY AND NON- CHARITY BAD DEBTS THE AMOUNT REPORTED ON LINE 3 WAS DERIVED BY MULTIPLYING THE AMOUNT ON LINE 2 BY THE RATIO OF MEDICARE CHARITY BAD DEBTS TO

Schedule H (Form 990) 2011

Identifier	ReturnReference	Explanation
Community benefit & methodology for determining medicare costs	Schedule H, Part III, Line 8	THE AMOUNTS REPORTED ON LINES 5 AND 6 WERE DERIVED FROM THE FYE 2012 MEDICARE COST REPORT

Identifier	ReturnReference	Explanation
Collection practices for patients eligible for financial assistance	Schedule H, Part III, Line 90	FOR THOSE PATIENTS WHO QUALIFY FOR DISCOUNTED SERVICES, EFFORTS WILL BE MADE TO ESTABLISH PAYMENT ARRANGEMENTS

Identifier	ReturnReference	Explanation
OTHER BILLING DETERMINATION OF INDIVIDUALS WITHOUT INSURANCE	PART V, SECTION B, LINE 10	THE PATIENTS ARE BILLED STANDARD GROSS CHARGES UNTIL THEIR FINANCIAL STATUS CAN BE CLARIFIED

Identifier	ReturnReference	Explanation
OTHER ACTIONS TOOK BEFORE ANY COLLECTION ACTIONS	PART V, SECTION B, LINE 17	THE PATIENT GETS A FINAL NOTICE STATEMENT INDICATING THE ACCOUNT MAY BE SUBJECT TO COLLECTION ACTIVITY 30 DAYS PRIOR TO BEING TRANSFERRED TO A COLLECTION AGENCY

Identifier	ReturnReference	Explanation
Means used to determine amounts billed	19d	(1) SHANDS AT THE UNIVERSITY OF FLORIDA - SHANDS USES CREDIT COUNSELLORS TO DETERMINE ELIGIBILITY FOR REDUCED/DISCOUNTED PROGRAMS ,

Schedule H (Form 990) 2011		Page 8
Identifier	ReturnReference	Explanation
Needs assessment	Schedule H, Part VI, Line 2	IN MARCH 2010, WELLFLORIDA COUNCIL - NORTH CENTRAL FLORIDA'S LOCAL HEALTH PLANNING COUNCIL
		- RELEASED AN ALACHUA COUNTY HEALTH NEEDS
		ASSESSMENT THE NEEDS ASSESSMENT WAS SPONSORED
		BY SHANDS AND OTHER COMMUNITY HEALTH CARE PROVIDERS COMPONENTS OF THE HEALTH ASSESSMENT
		I NCLUDED DEMOGRAPHICS AND SOCIOECONOMIC
		FACTORS, HEALTH STATUS, CHRONIC DISEASE, LEADING CA USES OF DEATH, HEALTH DISPARITIES, HEALTHY
		BEHAVIORS, ACCESS TO CARE, HEALTH OUTCOMES, HEA
		LTH CARE INFRASTRUCTURE, PUBLIC POLICY, AVOIDABLE HOSPITALIZATIONS, HEALTH PROFESSIONAL SH
		ORTAGES, MEDICALLY UNDERSERVED POPULATIONS,
		HEALTH RESOURCES, COMMUNITY CULTURE, AND HEALT HY CHOICES FINDINGS INCLUDED THE FOLLOWING *
		FIVE OF THE 10 LEADING CAUSES OF DEATH IN A LACHUA
		COUNTY ARE HIGHER THAN THE STATE RATE FOUR OF THESE FIVE (CANCER, STROKE, DIABETES AND
		HYPERTENSION) HAVE LINKS TO OBESITY AND ARE
		HIGHLY SUSCEPTIBLE TO PREVENTION * WHEN
		COMPARED TO DEATH RATES OF BLACK RESIDENTS ACROSS FLORIDA, THE RATES AMONG BLACK RESIDENTS
		IN ALACHUA COUNTY ARE HIGHER FOR EIGHT OF THE 10
		LEADING CAUSES OF DEATH STATEWIDE * IT IS DIFFICULT TO GET A FIRM ESTIMATE ON THE NUMBER OF
		UNINSURED IN ALACHUA COUNTY HOWEVER, THE US
		CENSUS BUREAU AND THE FLORIDA HEALTH INSURANCE STUDY, THE TWO BEST AVAILABLE SOU RCES OF THESE
		ESTIMATES, TELL US THAT BETWEEN 29,000 TO 62,000
		RESIDENTS MAY NOT HAVE HEALTH INSURANCE * [HOWEVER, BASED ON THE MOST RECENT DATA
		AVAILABLE FROM THE CENSUS BUREAU'S SMALL AREA
		HEALTH INSURANCE PROGRAM (% UNINSURED) AND THE UNIVERSITY OF FLORIDA'S BUREAU OF ECONOMIC AND
		BUSINESS RESEARCH (POPULATION), SHANDS ESTIMATES
		THAT IN 2012 THERE WERE 4 5,191 UNINSURED ALACHUA COUNTY RESIDENTS - 18% OF THE COUNTY'S TOTAL
		POPULATION] * BETWEE N 2006 AND 2008, THERE HAVE
		BEEN ON AVERAGE MORE THAN 29,000 ANNUAL POTENTIALLY AVOIDABLE VISITS TO HOSPITAL
		EMERGENCY ROOMS BY ALACHUA COUNTY RESIDENTS *
		IN ADDITION, THERE HAVE BEEN, ON AVERAGE, MORE THAN 2,500 AVOIDABLE INPATIENT HOSPITALIZATIONS
		ANNUALLY WITH ASSOC IATED CHARGES OF MORE THAN
		\$67,000,000 COMMUNITY PERSPECTIVES * ACCESS TO AFFORDABLE HEAL TH CARE WAS IDENTIFIED AS A
		BARRIER TO SEEKING ROUTINE
		MEDICAL/DENTAL/BEHAVIORAL HEALTH CA RE ACROSS THE BOARD * RESIDENTS IDENTIFIED ACCESS BARRIERS
		AS THE PRIORITY CONCERN IN MEE TING HEALTH CARE
		NEEDS LACK OF TRANSPORTATION, LACK OF SATELLITE
		CLINICS IN RURAL/OUTLYIN G AREAS OF THE COUNTY, LACK OF COMPASSION AND UNDERSTANDING FROM
		HEALTH CARE PROVIDERS, AN D RESTRICTIVE
		INSURANCE POLICIES WERE MOST OFTEN MENTIONED * BARRIERS TO ENGAGING IN PREV ENTION AND HEALTH
		CARE ACTIVITIES WERE INADEQUATE HEALTH
		INSURANCE, COST, COMORBIDITY HEAL TH CONDITIONS, ENVIRONMENTAL FACTORS (SAFETY, LACK OF
		INFRASTRUCTURE), LACK OF AWARENESS, UNFAVORABLE
		ATTITUDE OF HEALTH CARE PROVIDERS, SOCIAL NORMS (STIGMA/FEAR), LACK OF TRANSPO RTATION, DIFFICULTY
		FINDING PHYSICIANS ACCEPTING NEW PATIENTS
		(PARTICULARLY MEDICAID), AVA ILABILITY OF TIME, AND RESPONSIBILITY FOR DEPENDENT OTHERS *
		ADMINISTRATIVE BARRIERS THAT WERE IDENTIFIED AS
		REASONS FOR DELAYING OR AVOIDING CARE INCLUDED SCHEDULING, RESTRICTIVE ELIGIBILITY CRITERIA,
		PAPERWORK AND LACK OF AVAILABILITY OF A HEALTH
		CARE PROFESSIONAL AF TER OFFICE HOURS LACK OF AFTER-HOURS CARE AND NOT KNOWING WHERE ELSE TO
		GO WERE ALSO IDEN TIFIED AS THE TOPMOST REASONS
		FOR SEEKING CARE THROUGH EMERGENCY DEPARTMENTS WHAT ARE WE DOING? * FULLY
		IMPLEMENTED AN INTEGRATED ELECTRONIC MEDICAL
		RECORD SYSTEM (EPIC) ACROSS THE UF COLLEGE OF MEDICINE FACULTY PRACTICE AND ALL LOCATIONS OF
		SHANDS AND MET THE FEDERAL "MEANINGFUL USE"
		CRITERIA FOR HOSPITALS * OPENED A DEDICATED PEDIATRIC EMERGENCY ROOM IN JULY 2011 *
		COMPLETED CONSTRUCTION IN JUNE 2012 FOR
		UF&SHANDS FAMILY MEDICINE AT MAIN, AN EXPANDED, REPLACEMENT FAMILY PRACTICE IN EAST GAINESVILLE,
		AND A NEW PRIMARY CARE FACILITY IN WESTERN
		ALACHUA COUNTY (JONESVILLE) * BROKE GROUND IN OCTOBER 2011 FOR CONSTRUCTION OF A NEW MULTI-
		SPECIALTY FACILITY (UF&SHANDS AT SPRINGHILL) THAT
		WILL CONSOLIDATE NUMEROUS SPECIALTY PRACTICES
		AND ANCILLARY SERVICES UNDER ONE ROOF IN A LOCATION THAT IS MORE ACCE SSIBLE FOR THE
		MAJORITY OF ALACHUA COUNTY'S POPULATION THAN IS
		THE SHANDS MAIN CAMPUS * P URCHASED PROPERTY TO BEGIN DEVELOPMENT OF A FREESTANDING EMERGENCY
		DEPARTMENT WHICH WILL A LSO BE LOCATED AWAY FROM
		THE MAIN CAMPUS, NEAR UF&SHANDS AT SPRINGHILL, AND IS SCHEDULED T O OPEN IN JULY 2013 * IN
		ADDITION, SHANDS AND THE UNIVERSITY OF FLORIDA
		ARE AT THE FOREFR ONT OF NEW EFFORTS TO ENGAGE UNDERREPRESENTED POPULATIONS IN THE RESEARCH
		ENTERPRISE THROU GH HEALTHSTREET, ONE OF OUR
		COMMUNITY ENGAGEMENT PROGRAMS HEALTHSTREET AIMS TO PRODUCE OU TCOMES THAT MATTER TO THE
		COMMUNITY BY 1) LINKING PEOPLE TO MEDICAL AND
		SOCIAL SERVICES B ASED ON THEIR NEEDS AND CONCERNS, 2) GIVING PEOPLE AN OPPORTUNITY TO
		LEARN ABOUT AND PARTI CIPATE IN HEALTH RESEARCH,
		AND THE COMMUNITY ALBEADY 2000 PEOPLE IN THE
		AND THE COMMUNI TY ALREADY, 2,000 PEOPLE IN THE GAINESVILLE AREA ALONE HAVE BEEN ASSESSED AND
		LINKED TO M EDICAL AND SOCIAL SERVICES, OF WHOM 75% HAVE BEEN
<u>J</u>	1	
		Schedule H (Form 990) 2011

Identifier	ReturnReference	Explanation
Needs assessment	Schedule H, Part VI, Line 2	GIVEN OPPORTUNITIES TO PARTICIPATE IN HEALTH RESEARCH STUDIES OVER 85% OF THOSE SERVED AR E FROM MINORITY OR UNDERSERVED POPULATIONS - AFRICAN AMERICAN, ASIAN, HISPANIC, ELDERLY, D ISABLED OR PERSONS FROM RURAL AREAS IN NEED OF SERVICES

Identifier	ReturnReference	Explanation			
C - manuscriptor on farmana born	Schedule H, Part VI, Line 4	SHANDS AT THE UNIVERSITY OF FLORIDA IN URBAN GAINESVILLE, FL SERVES RESIDENTS OF ALACHUA COUNTY AND 13 OTHER NORTH CENTRAL FLORIDA COUNTIES IN ADDITION, SHANDS AT THE UNIVERSITY OF FLORIDA IS A STATEWIDE AND REGIONAL SAFETY-NET RESOURCE FOR PATIENTS IN NEED OF TERTIARY AND QUATERNARY LEVELS OF CARE NOTABLE SHANDS AT THE UNIVERSITY OF FLORIDA SERVICES INCLUDE PEDIATRICS, NEONATOLOGY, CANCER, NEUROMEDICINE, CARDIOVASCULAR MEDICINE, TRANSPLANTATION, AND TRAUMA FOLLOWING IS A SNAPSHOT OF THE NORTH CENTRAL FLORIDA SERVICE AREA * POPULATION 970,882 * AVERAGE HOUSEHOLD INCOME \$49,609 * PERCENTAGE OF FAMILIES WITH INCOMES BELOW THE FEDERAL POVERTY GUIDELINES 12 7% * NUMBER OF UNINSURED RESIDENTS 177,700 (18 3% OF THE TOTAL POPULATION) * PERCENTAGE OF NCF RESIDENT DISCHARGES FROM ACUTE CARE HOSPITALS IN FLORIDA FOR PATIENTS WHO ARE UNINSURED OR MEDICAID RECIPIENTS 25 5% * PERCENTAGE OF NCF RESIDENT DISCHARGES FROM SHANDS AT UF FOR PATIENTS WHO ARE UNINSURED OR MEDICAID RECIPIENTS 25 5% * PERCENTAGE OF NCF RESIDENT DISCHARGES FROM SHANDS AT UF FOR PATIENTS WHO ARE UNINSURED OR MEDICAID RECIPIENTS 41 3% * SIX OF OUR SERVICE AREA COUNTIES ARE FEDERALLY DESIGNATED AS MEDICALLY UNDERSERVED POPULATION COUNTIES (ALACHUA, COLUMBIA, GILCHRIST, LEVY, MARION AND PUTNAM) AND THE OTHER EIGHT ARE DESIGNATED AS MEDICALLY UNDERSERVED AREA COUNTIES (BRADFORD, DIXIE, HAMILTON, LAFAYETTE, MADISON, SUWANNEE, TAYLOR AND UNION) WITHIN THE NORTH CENTRAL FLORIDA SERVICE AREA, THERE ARE 10 NON-SHANDS ACUTE CARE HOSPITAL COMPETITORS FIFTY-SIX PERCENT OF THE 2,277 LICENSED ACUTE CARE BEDS IN THE SERVICE AREA ARE OPERATED BY NOT-FOR-PROFIT PROVIDERS SHANDS HAS 55% OF THE 164 LICENSED INPATIENT MENTAL HEALTH BEDS AND 50% OF THE 80 LICENSED COMPREHENSIVE MEDICAL REHABILITATION (CMR) BEDS IN THE NORTH CENTRAL FLORIDA SERVICE AREA			

Identifier	ReturnReference	Explanation
Promotion of community health	Schedule H, Part VI, Line 5	LOCATED IN GAINESVILLE, SHANDS AT THE UNIVERSITY
		OF FLORIDA IS ONE OF THE SOUTHEAST'S PREMIER TEACHING HOSPITALS AND THE STATE'S LEADING
		MEDICAL REFERRAL CENTER NEARLY 900 EXPERT UF COLLEGE OF MEDICINE AND COMMUNITY PHYSICIANS
		ALONG WITH 7,456 SKILLED SHANDS NURSING AND
		SUPPORT STAFF PROVIDE COMPREHENSIVE HIGH- QUALITY PATIENT CARE, FROM PRIMARY CARE AND
		FAMILY MEDICINE TO SUB- SPECIALTY TERTIARY AND
		QUATERNARY SERVICES FOR PATIENTS WITH HIGHLY COMPLEX MEDICAL CONDITIONS PATIENTS COME TO
		SHANDS AT UF FROM ALL 67 FLORIDA COUNTIES AND
		FROM THROUGHOUT THE REGION, NATION AND A DOZEN COUNTRIES EACH YEAR THE MEDICAL CENTER HAS
		EARNED ITS STELLAR REPUTATION BECAUSE OF THE
		DEDICATION TO PATIENT CARE, EDUCATION AND RESEARCH PROVIDED BY UF AND SHANDS
		INTERDISCIPLINARY CLINICAL AND SUPPORT TEAMS
		COMMUNITY BENEFIT FY 2012 - SHANDS TEACHING HOSPITALS AND CLINICS, INC * CHARITY CARE AND
		SOCIAL RESPONSIBILITY *NET UNREIMBURSED FINANCIAL ASSISTANCE (AT COST) - \$55 4M * HEALTH
		PROFESSIONALS EDUCATION - \$39 4M * SCIENTIFIC AND
		CLINICAL RESEARCH IN THE HEALTH SCIENCES - \$8 1M * DONATIONS AND IN-KIND SERVICES TO SUPPORT
		COMMUNITY-BASED EFFORTS - \$1 6M * COMMUNITY AND
		REGIONAL HEALTH SERVICES - \$0 9M * TOTAL COMMUNITY BENEFIT (PROVIDED AT COST) - \$105 4M *
		SHANDS AT UF SERVES UNINSURED PATIENTS FROM
		NEARLY EVERY COUNTY IN FLORIDA * SHANDS AT UF EMPLOYEES AND VOLUNTEERS AND UF COLLEGE OF
		MEDICINE AND HEALTH SCIENCE CENTER MEDICAL
		FACULTY, RESIDENTS AND STUDENTS PARTICIPATED IN 25 HEALTH FAIRS THAT REACHED MORE THAN 10,000
		PEOPLE * SHANDS AT UF OFFERED APPROXIMATELY 400 SEMINARS TO MORE THAN 18,000 PEOPLE ON TOPICS
		INCLUDING DISEASE PREVENTION, DIAGNOSIS AND
		TREATMENT * UF FACULTY PHYSICIANS AND SHANDS NURSES AT THE UF SHANDS EASTSIDE COMMUNITY
		PRACTICE IN GAINESVILLE SERVE CHILDREN AND
		ADULTS WITH PHYSICAL CHECK-UPS, IMMUNIZATIONS, HEALTH SCREENINGS, HEALTHCARE ADVICE AND
		EDUCATION, SOCIAL SERVICES AND LINKS TO OTHER
		VALUABLE COMMUNITY RESOURCES THEY PROVIDE SPACE FOR COMMUNITY GROUPS SUCH AS UF QUIT
		SMOKING NOW * THE SHANDS WOMEN'S ADVANTAGE PROGRAM OFFERS HEALTH-FOCUSED EVENTS ON ALL
		ASPECTS OF WOMEN'S HEALTH TOPICS OF FOCUS FOR
		FY12 INCLUDED BREAST CANCER, CHEST PAIN, DIABETES, EATING DISORDERS, ENDOMETRIOSIS,
		FITNESS AND OSTEOPOROSIS, AMONG OTHERS *
		SHANDS AT UF HAS ONE OF FLORIDA'S SEVEN STATE- DESIGNATED LEVEL I TRAUMA CENTERS DURING THE
		YEAR, OUR UF AND SHANDS TRAUMA TEAMS HOSTED
		NUMEROUS EDUCATIONAL OUTREACH PROGRAMS, INCLUDING SAFETY TRAINING TO NEW DRIVERS, SAFETY
		TIPS AT ACCIDENT SCENES AND HURRICANE
		PREPAREDNESS * SHANDS AT UF CONTRIBUTED \$1 6 MILLION TO SUPPORT COMMUNITY EVENTS IN SUPPORT
		OF THE AMERICAN CANCER SOCIETY, AMERICAN HEART ASSOCIATION, CHILD ADVOCACY CENTER, HAVEN
		HOSPICE, MARCH OF DIMES, MLK CELEBRATION, RONALD
		MCDONALD HOUSE, STOP! CHILDREN'S CANCER, UNITED WAY AND YMCA, AS WELL AS OTHER NATIONAL AND
		LOCAL SPONSORSHIPS SHANDS AT UF INCLUDES
		SHANDS HOSPITAL FOR CHILDREN, SHANDS PEDIATRIC EMERGENCY ROOM, SHANDS CANCER HOSPITAL AND
		SHANDS CRITICAL CARE CENTER, AS WELL AS THE
		HEALTH SYSTEM'S TWO SPECIALTY HOSPITALS, SHANDS REHAB HOSPITAL AND SHANDS VISTA BEHAVIORAL
		HEALTH, BOTH LOCATED IN GAINESVILLE SHANDS AT UF
		IS ALSO AFFILIATED WITH MORE THAN 40 UF PHYSICIANS OUTPATIENT PRACTICES, LOCATED IN THE
		GAINESVILLE AREA, WHICH OFFER PRIMARY AND SPECIALTY CARE TO PATIENTS FROM NORTH CENTRAL
<u> </u>		FLORIDA AND THROUGHOUT THE STATE
		Schedule H (Form 990) 2011

Identifier	ReturnReference	Explanation
Affiliated health care system		SHANDS AT THE UNIVERSITY OF FLORIDA SERVES AS A TRAINING GROUND FOR TOMORROW'S DOCTORS 689 UF COLLEGE OF MEDICINE PHYSICIAN RESIDENTS AND FELLOWS TRAINED IN 62 ACCREDITED GRADUATE MEDICAL EDUCATION PROGRAMS IN GAINESVILLE UNIVERSITY OF FLORIDA HEALTH SCIENCE CENTER COLLEAGUES PARTICIPATE IN SHANDS' COMMUNITY OUTREACH EFFORTS TO HOST HEALTH SEMINARS AND SCREENINGS TO PROMOTE A HEALTH SCIENCE CENTER COLLEGES HOLD A VARIETY OF OUTREACH EFFORTS TO PROMOTE A HEALTH SCIENCE CENTER COLLEGES HOLD A VARIETY OF OUTREACH EFFORTS TO PROMOTE HEALTH AND WELLNESS EXAMPLES INCLUDE * COLLEGE OF NURSING FACULTY AND STUDENTS VOLUNTEERED TO SUPPORT VARIOUS COMMUNITY HEALTH IMPROVEMENT INITIATIVES DURING THE YEAR SERVICES INCLUDED COMMUNITY HEALTH EDUCATION, SCREENINGS, SUPPORT GROUPS AND ACTIVE PARTICIPATION IN THE ALACHUA COUNTY SCHOOL-BASED FLUMIST PROGRAM * THE COLLEGE OF MEDICINE PROSTATE DISEASE CENTER'S COMMUNITY OUTREACH AND EDUCATION PROGRAM TEAM IN GAINESVILLE SEEKS TO ELIMINATE THE DISPARITY AMONG AFRICAN-AMERICAN MALES FOR HIGHER PROSTATE DISEASE INCIDENCE THE TEAM EDUCATES MINORITY AND UNDERSERVED POPULATIONS THROUGH WORKSHOPS, SEMINARS, SPECIAL PROGRAMS AND PROSTATE CANCER SCREENINGS THROUGH THE PROGRAM, PARTNERSHIPS ARE ALSO FORMED WITH BUSINESSES AND ORGANIZATIONS, SUCH AS BARBERSHOPS AND CHURCHES, TO BETTER INFORM AND EDUCATE COMMUNITIES ACROSS THE STATE ABOUT THE IMPORTANCE OF PROSTATE CANCER SCREENING

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DLN: 93493134007473 OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

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

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

Inspection

Name of the organization						Employer identification	on number
SHANDS TEACHING HOSPITAL AN	IANDS TEACHING HOSPITAL AND CLINICS INC					59-1943502	
Part I General Information	n on Grants and	Assistance					
 Does the organization maintain the selection criteria used to av Describe in Part IV the organization 	vard the grants or ass	sistance?					✓ Yes N
Part II Grants and Other A Form 990, Part IV, In Part IV and Schedule	e 21 for any recip	ent that received n	nore than \$5,000. Ch	eck this box if no one	recipient receive	d more than \$5,000.	Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grar or assistance
See Additional Data Table							
2 Enter total number of section 5	1 (c)(3) and govern	nent organizations list	ed in the line 1 table				15

Procedures for monitoring

use of grant funds

Use Schedule I-1 (Form 990) if additional space is needed.

Schedule I, Part I, Line 2

(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
See Additional Data Table					
Part IV Supplemental Inform		part to provide the in	iformation required in Pa	rt I, line 2, and any other	additional information.

Software ID: 11000230

Software Version: v2011.1.0

EIN: 59-1943502

Name: SHANDS TEACHING HOSPITAL AND CLINICS INC

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF FLORIDA 226 TIGERT HALL GAINESVILLE, FL 32610	59- 6002052	501(C)(1)	35,425,000	17,682	CASH		SUPPORT FOR THE COLLEGE OF MEDICINE
RONALD MCDONALD HOUSE CHARITIES OF NCF1600 SW 14TH STREET GAINESVILLE,FL 32608	59- 1887896	501(C)(3)	48,500	32,000	FMV	DONATED SUPPLIES	

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SANTA FE COLLEGE 3000 NW 83RD STREET GAINESVILLE,FL 32608	59- 1207627	501(C)(1)	42,000		CASH		NURSING EDUCATION
GAINESVILLE SUN PO BOX 915007 ORLANDO,FL 32891	06- 1567241		27,344		FMV		CALENDAR OF EVENTS FOR NFPS

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HAVEN HOSPICE 4200 NW 90TH BLVD GAINESVILLE,FL 32606	59- 2490893	501(C)(3)	15,500		CASH		GENERAL SUPPORT
AMERICAN CANCER SOCIETY2119 SW 16TH STREET GAINESVILLE,FL 32609	59- 0657320	501(C)(3)	14,250		CASH		GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MARCH OF DIMES 1831 NW 13TH STREET STE 3 GAINESVILLE,FL 32609	13- 1846366	501(C)(3)	12,500	59,263	CASH	EMPLOYEE TIME TO RUN EVENTS	GENERAL SUPPORT
UNITED WAY OF NCFPO BOX 864790 ORLANDO, FL 32886	59- 0808855	501(C)(3)	12,500	100,851	FM∨	EMPLOYEE SUPPORT OF VARIOUS EVENTS	GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN HEART ASSOCIATION3801 NW 40TH TERRACE STE B GAINESVILLE, FL 32606	13- 5613797	501(C)(3)	10,000	14,426	FMV	EMPLOYEE SUPPORT FOR EVENTS	GENERAL SUPPORT
GAINESVILLE SPORTS COMMISSION300 E UNIVERSITY AVE STE 100 GAINESVILLE,FL 32601	59- 2959383	501(C)(3)	10,000		CASH		GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MLK JR COMMISSION OF FL PO BOX 2092 GAINESVILLE,FL 32602	59- 1932327	501(C)(3)	10,000		CASH		GENERAL SUPPORT
TYLER'S HOPE 13351 PROGRESS BLVD ALACHUA,FL 32615	20- 3733312	501(C)(3)	10,000		CASH		GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STOP CHILDREN'S CANCER2622 NW 43RD STREET GAINESVILLE,FL 32606	59- 2624901	501(C)(3)	6,500		CASH		GENERAL SUPPORT
FLORIDA'S EDENPO BOX 357336 GAINESVILLE,FL 32635	03- 0377374	501(C)(3)	6,000		CASH		GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LIFESOUTH COMMUNITY BLOOD CENTERPO BOX 830469 BIRMINGHAM,AL 35283	59- 1545914	501(C)(3)		31,044	FMV	EMPLOYEE TIME FOR BLOOD DRIVES	
FLORIDA STATE UNIVERSITY1269 W CALL STREET COLLEGE OF MEDICINE TALLAHASSEE,FL	59- 6152180	501(C)(1)	232,630		CASH		GENERAL SUPPORT

Form 990, Schedule I, Part III, Grants and Other Assistance to Individuals in the United States

(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
FOOD AND MEAL TICKETS		30,813		CASH	
DIVERSIONARY PROGRAM		20,717		CASH	
PEDIATRIC ART SUPPLIES		19,998		CASH	
NURSING SCHOLARSHIPS	9	11,936		CASH	
GASOLINE AND LODGING FOR FAMILIES		9,450		CASH	
BURN COMPRESSION GARMETS GRANT		7,700		CASH	
PARKING VOUCHERS FOR FAMILIES		6,000		CASH	
UTILITY GRANTS FOR PATIENT FAMILIES		5,023		CASH	
VARIOUS		5,733		CASH	

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DLN: 93493134007473

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

5П/	ANDS TEACHING HOSPITAL AND CLINICS INC			
Da	art I Questions Regarding Compensation			
ГС	Questions Regarding compensation		Yes	No
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		163	110
	First-class or charter travel Travel for companions Housing allowance or residence for personal use Payments for business use of personal residence			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	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 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	ation		
а	Receive a severance payment or change-of-control payment?	4a	Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	4 c		No
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		No
	Any related organization?	5b		No
U	If "Yes," to line 5a or 5b, describe in Part III	30		110
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		No

payments not described in lines 5 and 6? If "Yes," describe in Part III

For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

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

If "Yes," to line 6a or 6b, describe in Part III

in Part III

section 53 4958-6(c)?

7

8

Νo

Νo

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

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

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(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								

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
	Schedule J, Part I, Line 4a	JODI MANSFIELD \$9,448

Software ID: 11000230

Software Version: v2011.1.0

EIN: 59-1943502

Name: SHANDS TEACHING HOSPITAL AND CLINICS INC

(A) Name		(B) Breakdown of	f W-2 and/or 1099-MI	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
(ii) italiie		(i) Base Compensation	(ii) Bonus & Incentive compensation	(iii) O ther compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
ANTHONY CARVALHO	(I) (II)	385,139 0	0	57,492 0	6,817 0	22,077 0	471,526 0	0 0
BRADLEY POLLITT	(I) (II)		23,200	15,660 0	3,765 0	18,476 0	270,101 0	0
DAVID GUZICK	(I) (II)		0 143,026	0 7,711	0	0	0 875,947	0
EDWARD JIMENEZ	(I) (II)		78,800 0	179,181 0	17,286 0	23,655	724,171 0	0
F KAYSER ENNEKING	(I) (II)	0 463,306	0	0 12,948	0	0	0 476,254	0
IRENE ALEXAITIS	(I) (II)	233,900	34,700 0	14,419 0	8,232 0	21,630 0	312,881 0	0
J BERNARD MACHEN	(I) (II)	0 431,150	0 390,831	0 31,733	0	0	0 853,714	0
JAMES BURKHART	(I) (II)	596,344 0	0	45,556 0	7,350 0	24,733 0	673,982 0	0
JAMES ROBERTS	(I) (II)	365,000 0	67,600 0	382,991 0	7,439 0	27,443 0	850,473 0	0
JANET CHRISTIE	(I) (II)	289,011 0	54,600 0	60,862 0	4,638 0	21,395	430,506 0	0
JOSEPH TYNDALL	(I) (II)		0	0 5,411	0	0	0 374,989	0
KARI LOU CASSEL	(I) (II)	289,600 0	53,600 0	12,340 0	5,431 0	20,043		0
KEVIN BEHRNS	(I) (II)		0 21,532	0 2,994	0	0	0 667,862	0
MARINA CECCHINI	(ı) (ıı)	251,262 0	27,600	21,178	8,304 0	19,517		0
MARVIN DEWAR	(ı) (ıı)	394,900 0	0	75,832 0	0	22,475	493,207 0	0
MATTHEW FAJACK	(I) (II)		0 11,680	0 -3,224	0	0	0 252,916	0
MICHAEL GLEASON	(I) (II)	336,500 0	0	16,283	6,789 0	20,578		0
MICHAEL GOOD	(I) (II)		0	0 17,822	0	0	0 658,710	0

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Deferred	• • • • • • • • • • • • • • • • • • • •		
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
MICHAEL LAWTON	(ı) (ıı)	260,300 0	38,600 0	27,402 0	7,597 0	20,055 0	353,955 0	0
PAUL OKUNIEFF	(ı) (ıı)	0 745,349	0 13,275	0 3,744	0	0 0	0 762,367	0 0
SCOTT HAWIG	(I) (II)	232,900 0	34,500 0	31,668 0	7,844 0	18,936 0	325,848 0	0
TERESA DOLAN	(I) (II)	0 323,755	0 0	0 3,721	0	0 0	0 327,475	0 0
TIMOTHY M GOLDFARB	(ı) (ıı)	733,350 0	1,082,500 0	80,714 0	4,785 0	43,547 0	1,944,897 0	0
WILLIAM J ROBINSON	(I) (II)	480,950 0	89,100 0	212,520 0	7,385 0	27,106 0	817,061 0	0

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

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

OMB No 1545-0047

DLN: 93493134007473

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service Name of the organization

SHANDS TEACHING HOSPITAL AND CLINICS INC

Employer identification number

3114	ANDS TEACHING HOSPITAL AND CLINICS INC							59-1943502								
Pa	art I Bond Issues															
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Pi	rice	(f)) Description	of Purpose	(g) De	efeased		On alf of uer		Pool incing	
		<u> </u>					Щ.			Yes	No	Yes	No	Yes	No	
A	ALACHUA CO HEALTH FACILITIES	59-2442398		03-30-2007	175,000			STRUCT & E	QUIP		x		х	 	х	
В	ALACHUA CO HEALTH FACILITIES	59-2442398	010685HN8	06-30-2008	125,000	ا ٥٥٥,د	REFU	JND PRIOR B	SOND ISSUE		х		Х		Х	
c c	ALACHUA CO HEALTH FACILITIES	59-2442398		11-05-2008	75,000		REFIN ISSUE	NANCE PRIC	OR BOND		х		х		х	
D D	ALACHUA CO HEALTH FACILITIES	59-2442398	010685HT5	11-19-2008	44,340	ا 000,د	REFU	JND PRIOR I	SSUE		х		х		х	
Pa	rt III Proceeds															
					А	1		В	,		С		С		D	
1	A mount of bonds retired						0		0		3,7	750,000	<u> </u>		0	
	A mount of bonds defeased						0		0			0	<u> </u>		0	
3	Total proceeds of issue				75,000,		+	25,000,000		75,0	000,000			,340,000		
4	Gross proceeds in reserve funds				14,371,	-	 	0			0	<u> </u>	4,	,434,000		
5	Capitalized interest from proc				1	18,995,512 0				0	1		0			
6	Proceeds in refunding escrow						0		0	3			1		0	
7	Issuance costs from proceed					1,298,	,417	<u> </u>	463,410	0 0			1		532,424	
8	Credit enhancement from pro						0		0	0			1	0		
9	Working capital expenditures						0		0	0			0		0	
10	Capital expenditures from pro	ceeds			14	40,334,	,263		0			0	ı		0	
11	Other spent proceeds						0		0	0			ı		0	
12	Other unspent proceeds						0		0			0	ı		0	
13	Year of substantial completio	n			200	J 9		1					_			
					Yes	No	<u>, </u>	Yes	No	Yes		No	Yes		No	
14	Were the bonds issued as par					Х		Х		X	\bot		X	\perp		
15	Were the bonds issued as par	t of an advance refu	unding issue?			Х			Х			Х	<u> </u>		Х	
16	Has the final allocation of proceeds been made?			\top				Х	X			Х				
17	allocation of proceeds?			х	I		х		Х			х				
Pa	rt IIII Private Business U	Jse														
					A A			 	В		C		 	D		
					Yes	No	د	Yes	No	Yes		No	Yes	-	No	

property financed by tax-exempt bonds?

financed property?

Was the organization a partner in a partnership, or a member of an LLC, which owned

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

Χ

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Part III Private Business Use (Continued)

	Private Business Use (Continued)			1				1	
			A		В		С		D
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		×		X		х		×
b	If 'Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
С	Are there any research agreements that may result in private business use of bond-financed property?		х		х		х		х
d	If 'Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 %		0 %		0 %		0 %
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		0 % 0		0 %	0 %			0 %
6	Total of lines 4 and 5		0 %		0 %		0 %		0 %
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	Х		Х		Х		Х	

Part IV Arbitrage

		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?	x		×		x		x	
2	Is the bond issue a variable rate issue?	X		X		X			X
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?	x		×		×			x
b	Name of provider	MERILL LYNC	H	MERILL LYNC	CH	COMPASS B	ANK		
С	Term of hedge		30 7		29 4		19 9		0 0
d	Was the hedge superintegrated?	х			X	х			
e	Was a hedge terminated?		Х		Х		Х		
4a	Were gross proceeds invested in a GIC?	×			Х		Х	Х	
b	Name of provider	BAYERISCHE	LA					BAYERISCH	LAN
С	Term of GIC		5 0						5 0
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	х						х	
5	Were any gross proceeds invested beyond an available temporary period?		х		Х		х		Х
6	Did the bond issue qualify for an exception to rebate?		Х	Х		х			×

Part V Procedures To Undertake Corrective Action

Part VI Supplemental Information

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

Identifier Return Reference Explanation

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

DLN: 93493134007473

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

SHANDS TEACHING HOSPITAL AND CLINICS INC

Employer identification number

SH	ANDS TEACHING HOSPITAL AND CLINICS INC									5	59-1943502					
Р	art I Bond Issues			_								ı				
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue P	rice	(f)	Description	of Purpose	(g) De	feased	(h) Beha Iss	ılf of		Pool ncing	
										Yes	No	Yes	No '	Yes	No	
A	ALACHUA CO HEALTH FACILITIES	59-2442398		06-15-2010	70,000			S OF ACQU CONST	ISITION		×		×		Х	
В	ALACHUA CO HEALTH FACILITIES	59-2442398	010685JH9	06-29-2010	44,685	,000 R	REFUN SSUE	ND 1992R B ED 01/	ONDS,		Х		х		Х	
c	ALACHUA CO HEALTH FACILITIES	59-2442398		03-30-2007	45,210			ND A PORTI A BOND	ONOF		Х		х		Х	
P	art II Proceeds												<u> </u>			
						4			3		С			D		
1	Amount of bonds retired					2,386,	,364		7,750,000			0				
2	A mount of bonds defeased						0		0			0				
3	Total proceeds of issue					70,000,	,000		46,735,657		45,2	210,000				
4	Gross proceeds in reserve funds						0		0		3,7	712,854				
5		Italized interest from proceeds					0		0			0				
6	Proceeds in refunding escrov	W					0		46,216,185		41,1	164,723				
7	Issuance costs from proceed	ds					0				332,423					
8	Credit enhancement from pro	oceeds					0		0			0				
9	Working capital expenditures	s from proceeds			0		0			0						
10	Capital expenditures from pr	oceeds				70,000,	,000		0			0				
11	Other spent proceeds						0		0			0				
12	Other unspent proceeds						0		0			0				
13	Year of substantial completion	on			20	10										
					Yes	No		Yes	No	Yes		No	Yes	\perp	No	
14	Were the bonds issued as pa	irt of a current refund	ing issue?			Х		Χ		X						
15	Were the bonds issued as pa	irt of an advance refu	nding issue?			Х			Х			Х				
16	Has the final allocation of proceeds been made?			Х			Х				Х					
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?			Х			Х		х							
Pa	rt IIII Private Business	Use														
				<u> </u>			3		<u> </u>			D				
					Yes	No	•	Yes	No	Yes		No	Yes	-	No	

property financed by tax-exempt bonds?

financed property?

Was the organization a partner in a partnership, or a member of an LLC, which owned

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

Χ

Χ

Χ

Χ

Χ

Par	t IIII Private Business Use (Continued)								
			4		В		С		D
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		×		×		×		
b	If 'Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
С	Are there any research agreements that may result in private business use of bond-financed property?		х		х		х		
d	If 'Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 %		0 %		0 %		
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	0 %		0 %			0 %		
6	Total of lines 4 and 5		0 %		0 %		0 %		
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	Х		Х		Х			

Part IV Arbitrage

		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?	Х		Х		Х			
2	Is the bond issue a variable rate issue?	Х			Х	Х			
3 a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		×		Х	х			
b	Name of provider					MERILL LYNC	CH		
С	Term of hedge		0 0		0 0		30 7		
d	Was the hedge superintegrated?					×			
e	Was a hedge terminated?						Х		
4a	Were gross proceeds invested in a GIC?		Х		Х	Х			
b	Name of provider					BAYERISCHE	LA		
С	Term of GIC		0 0		0 0		5 0		
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?					х			
5	Were any gross proceeds invested beyond an available temporary period?		х		Х		Х		
6	Did the bond issue qualify for an exception to rebate?	×		х			х		

Part V **Procedures To Undertake Corrective Action**

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations

Part VI **Supplemental Information**

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

Identifier Return Reference Explanation efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493134007473

Employer identification number

Schedule L

(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

2011

Open to Public Inspection

SHANDS TEACHING HOSPITAL AND CLINICS	5 INC						5	9-194350	0 2				
Part I Excess Benefit Tran Complete if the organizat							organı	zations c	nly).	ne 40h			
1 (a) Name of disqu				1 330,1	(b) Desc	•		•	uic V , ii		(c) ected?		
										Yes	No		
											<u> </u>		
2 Enter the amount of tax impose	ed on th	ne orgar	nization man	agers or	disqualified pers	ons dui	ing the y	ear under	-	•			
section 4958					e organization .			.	\$ — \$ —				
Part II Loans to and/or F Complete if the organiz					. Dank IV line 26	F	000 [- 7 D+ V	l 20				
(a) Name of interested person and purpose	(b) Le	oan to m the zation?	(c)Orig	ıınal	(d)Balance due	, or For (e) defai	In	(f) Approved by board or committee?		(g)Writt			
	То	From				Yes	No	Yes	No	Yes	No		
							1						
Total				► \$	Persons.								
Complete ıf the orga		n ansv	wered "Yes	" on Fo	rm 990, Part IV		27.						
(a) Name of interested pers	on	(1			een interested per ganization	son	(c) A m	ount of gr	ant or ty	pe of assis	e of assistance		
		+											
		-				+							

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	arıng of zatıon's nues?
	organization			Yes	No
(1) REMBERT DAVIS	DIRECTOR	1	FEE FOR SERVICES PROVIDED		No

Part V Supplemental Information

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

Identifier	Return Reference	Explanation
------------	------------------	-------------

Schedule L (Form 990 or 990-EZ) 2011

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

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

NonCash Contributions

Name of the organization SHANDS TEACHING HOSPITAL AND CLINICS INC

Employer identification number

					59-1943502			
Pa	Types of Property							
		(a) Check If applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line	Method of c contributio	letermi		
	Art—Works of art							
	Art—Historical treasures .							
_	Art—Fractional interests							
	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .							
10	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—O ther							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
	FOOD FOR DM							
25	Other►(<u>DANCERS</u>) RENTALS	Х	6	43,136	MARKET VALUE			
	FOR DANCE		_					
26	Other ► (MARATHON)	X	1		MARKET VALUE			
27	Other► (ADVERTISING)	X	5	95,820	MARKET VALUE			
	GIFT BAGS FOR DM							
28	Other ► (DANCERS)	X	5	46,500	MARKET VALUE			
29	Number of Forms 8283 received	bv the ora	anization during the tax ve					
	for which the organization comp				29		Yes	0 No
30=	During the year, did the organiza	ation receiv	e by contribution any prope	erty reported in Part I lines	1-28 that it		1.63	-10
	must hold for at least three year							
	for exempt purposes for the enti	re holding p	period?			30a		No
Ŀ	If "Yes," describe the arrangem	ent in Part 1	II					
31	Does the organization have a gif	ft acceptan	ce policy that requires the i	review of any non-standard	contributions?	31	Yes	l
32a	Does the organization hire or us contributions?	e third part	es or related organizations	to solicit, process, or sell	non-cash	32a		No
Ŀ	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	t revenues i	n column (c) for a type of p	roperty for which column (a) is checked,			

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.

l 					
Identifier	Return Reference	Explanation			
Explanations of reporting method for number of contributions	·	OTHER NUMBER OF CONTRIBUTING ORGANIZATIONS			
Number of contributions or items contributed	Schedule M, part I, column (b), Line other=FOOD FOR DM DANCERS	NUMBER OF CONTRIBUTING ORGANIZATIONS			
Number of contributions or items contributed	Schedule M, part I, column (b), Line other=RENTALS FOR DANCE MARATHON	NUMBER OF CONTRIBUTING ORGANIZATIONS			
Number of contributions or items contributed	Schedule M, part I, column (b), Line other=ADVERTISING	NUMBER OF CONTRIBUTING ORGANIZATIONS			
Number of contributions or items contributed	Schedule M, part I, column (b), Line other=GIFT BAGS FOR DM DANCERS	NUMBER OF CONTRIBUTING ORGANIZATIONS			

Name of the organization SHANDS TEACHING HOSPITAL AND CLINICS INC

OMB No 1545-0047

Open to Public Inspection

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990 or 990-EZ.

Employer identification number

59-1943502

ldentifier	Return Reference	Explanation				
Significant changes to organizational documents	Form 990, Part VI, Section A, Line 4	THE DOCUMENT CHANGE IS FOUND IN ARTICLE VI - COMMITTEES OF THE BOARD, SPECIFICALLY, SECTION 6 WHICH DEFINES THE ROLE OF THE QUALITY COMMITTEE AND ITS CHARGE				
Classes of members or stockholders	Form 990, Part VI, Section A, Line 6	INDIVIDUALS SERVING ON THE SHANDS BOARD OF DIRECTORS ARE MEMBERS				
Members or stockholders electing members of governing body	Form 990, Part VI, Section A, Line 7a	THE CORPORATE BY-LAWS STATE THAT THE PRESIDENT OF THE UNIVERSITY OF FLORIDA HAS THE RIGHT TO APPOINT UP TO 16 MEMBERS OF THE BOARD OF DIRECTORS				
Review of form 990 by governing body	Form 990, Part VI, Section B, Line 11b	FORM 990 IS CURRENTLY NOT PROVIDED TO THE GOVERNING BODY BEFORE IT IS FILED IT IS REVIEWED BY MANAGEMENT BEFORE FILING				
Conflict of interest policy	Form 990, Part VI, Section B, Line 12c	THE LEGAL DEPARTMENT RECEIVES AND REVIEWS THE INFORMATION DISCLOSED BY EMPLOYEES REGARDING CONFLICT OF INTEREST ISSUES AND IN COOPERATION WITH THE CORPORATE COMPLIANCE DEPARTMENT DETERMINES WHETHER DISCLOSURES MADE BY THE EMPLOYEES WOULD INVOLVE CONFLICT OF INTEREST ISSUES AND HOW TO RESOLVE THEM				
Process used to establish compensation of top management official	Form 990, Part VI, Section B, Line 15a	MERCER, AN INDEPENDENT FIRM ENGAGED IN THE DEVELOPMENT OF COMPENSATION SURVEYS ON EXECUTIVE PAY LEVELS ACROSS DIFFERENT INDUSTRY, PROVIDES COMPETITIVE DATA AND GUIDANCE ON DETERMINING APPROPRIATE AND REASONABLE RANGES AND SALARIES MERCER'S METHODOLOGY CONSISTS OF THE FOLLOWING STANDARD STEPS *ANALYSIS BY POSITION AND BASED ON JOB CONTENT *REFERENCE OF MULTIPLE NATIONAL SURVEY SOURCES FOR NOT-FOR-PROFIT HEALTHCARE EXECUTIVE COMPENSATION *EXISTING BASE SALARY RANGE MIDPOINTS WERE UPDATED TO MORE CLOSELY ALIGN WITH THE MARKET 50TH PERCENTILE VALUE FOR EACH ROLE MERCER FOLLOWED SIMILAR PROCESS TO EVALUATE THE COMPETITIVENESS OF SHANDS TOTAL CASH COMPENSATION LEVELS, AND PROVIDES RECOMMENDED INCENTIVE COMPENSATION RANGES TO INSURE TOTAL CASH COMPENSATION IS REASONABLE MERCER PERIODICALLY REVIEWS ALL OTHER ASPECTS OF EXECUTIVE COMPENSATION-INCLUCING ALL ELEMENTS OF SUPPLEMENTAL BENEFITS-TO INSURE THAT THEY COMPORT WITH COMPETITIVE AND REASONABLE TOTAL				
Process used to establish compensation of other officers/key employees	Form 990, Part VI, Section B, Line 15b	ON A REGULAR BASIS, ALL MANAGEMENT POSITIONS ARE REVIEWED BY MERCER TO ENSURE SALARY SCALES ARE IN LINE WITH COMPARABLE POSITIONS IN SIMILAR INSTITUTIONS				
Governing documents, conflict of interest policy and financial statements available to the public	Form 990, Part VI, Section C, Line 19	THE YEAR END FINANCIAL STATEMENTS ARE ON THE UFANDSHANDS ORG WEBSITE AND THE FEDERAL FORM 990 IS AVAILABLE UPON REQUEST				
Other changes in net assets or fund balances	Form 990, Part XI, Line 5	TRANSFER OF ASSETS - 555185,				

Name, address, and EIN of disregarded entity

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

DLN: 93493134007473

OMB No 1545-0047 2011

Open to Public Inspection

Schedule R (Form 990) 2011

Employer identification number

(f)

Direct controlling

entity

SCHEDULE R (Form 990)

Name of the organization

SHANDS TEACHING HOSPITAL AND CLINICS INC

Related Organizations and Unrelated Partnerships

Department of the Treasury Internal Revenue Service

Part I

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

(c) Legal domicile (state

or foreign country)

(d)

Total income

End-of-year assets

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

(b)

Primary activity

(1) SHANDS-SOLANTIC JOINT VENTURE LLC 8711 PERIMETER PARK BLVD STE 6 JACKSONVILLE, FL 32216 26-4732338	URGENT CARE CENTER	FL	-78,010		373,097 SHANDS TEACHING HOSPIT CLINICS INC		D	
(2) FIRST COAST ADVANTAGE CENTRAL LLC PO BOX 100336 GAINESVILLE, FL 32610 27-4971296	MEDICAID PROVIDER SERVICE NETWORK	FL	-197,978	201,209	SHANDS TEACHING HOSPITAL AND CLINICS INC		D	
(3) SHANDS LAKE SHORE COMMUNITY HEALTH LLC PO BOX 100336 GAINESVILLE, FL 32610 27-2866181	HOSPITAL	FL	-1,169,796		,072 SHANDS TEACHING HOSPITAL A		ND	
(4) SHANDS LIVE OAK COMMUNITY HEALTH LLC PO BOX 100336 GAINESVILLE, FL 32610 27-2867205	HOSPITAL	FL	235,095		SHANDS TEACHING HOSPITAL AND CLINICS INC		D	
(5) SHANDS STARKE COMMUNITY HEALTH LLC PO BOX 100336 GAINESVILLE, FL 32610 27-2867522	HOSPITAL	FL	177,110	6,350,331	SHANDS TEACHING HOSPITAL A CLINICS INC		ND	
Part II Identification of Related Tax-Exempt Organiz or more related tax-exempt organizations during the second control of the secon		ıf the organızatıor	n answered "Ye	s" on Form 990,	Part IV,	line 34 becaus		
(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 sta (if section 501(c)		(f) Direct controlling entity	(g) Section 512(t controlle organizati	
							Yes	No
See Additional Data Table								

Cat No 50135Y

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	,	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h Disprop allocat	rtionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gene mana parti	ral or nging	(k) Percentage ownership
							Yes	No		Yes	No	
												i

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

(a) Name, address, and EIN of related organization	(b) Рптагу 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

(6)

Part V Transactions With Related Organizations (Complete if the organization a	answered "Yes'	' on Form 990, Par	t IV, line 34, 35, 3	5A, or 36.)			
Note. Complete line 1 if any entity is listed in Parts II, III or IV					Yes	No No	
1 During the tax year, did the organization engage in any of the following transactions with one or mo	re related organı	zations listed in Parts	II-IV?				
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity				14	a Yes	5	
b Gift, grant, or capital contribution to related organization(s)							
c Gift, grant, or capital contribution from related organization(s)							
d Loans or loan guarantees to or for related organization(s)				10	d Yes	5	
e Loans or loan guarantees by related organization(s)				10	e	No	
f Sale of assets to related organization(s)				11	f	No	
g Purchase of assets from related organization(s)				19	9	No	
h Exchange of assets with related organization(s)				11	h Yes	<u> </u>	
i Lease of facilities, equipment, or other assets to related organization(s)				1	i Yes	<u> </u>	
${f j}$ Lease of facilities, equipment, or other assets from related organization(s)				1:	j Yes	3	
k Performance of services or membership or fundraising solicitations for related organization(s)				11	k Yes	5	
I Performance of services or membership or fundraising solicitations by related organization(s)				1	<u> </u>	No	
$m{m}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)						
n Sharing of paid employees with related organization(s)							
				_		<u> </u>	
• Reimbursement paid to related organization(s) for expenses				10	o Yes	5	
p Reimbursement paid by related organization(s) for expenses				1	p Yes	•	
				L			
q O ther transfer of cash or property to related organization(s)				10	q Yes		
r Other transfer of cash or property from related organization(s)				1	r Yes	<u> </u>	
2 If the answer to any of the above is "Yes," see the instructions for information on who must comp	plete this line, inc	luding covered relation	onships and transacti	ion thresholds			
(a)		(b) Transaction	(c)	(d) Method of determ	uning ar	nount	
Name of other organization		type(a-r)	Amount involved	involve			
(1) 2)							
-,							
3)							
4)							
5)							
				1			

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) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	org	(e) Are all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	j) eral or aging ener?	(k) Percentage ownership
			,	Yes	No			Yes	No		Yes	No	

Schedule R (Form 990) 2011

Part VII Supplemental Information

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

Identifier Return Reference Explanation

Schedule R (Form 990) 2011

Software ID: 11000230 **Software Version:** v2011.1.0 **EIN:** 59-1943502

Name: SHANDS TEACHING HOSPITAL AND CLINICS INC

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

Form 990, Schedule R, Part II	- Identification of	Related Ta	x-Exempt	Organizatio	ns	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 501(c) (3))	(f) Direct Controlling Entity	g Section 512 (b)(13) controlled organization
SHANDS JACKSONVILLE HEALTHCARE INC 655 WEST 8TH ST JACKSONVILLE, FL 32209 59-2441966	INVESTMENTS FOR SHANDS JACKSONVILLE MEDICAL CENTER, INC	FL	501(C) (3)	N/A	UNIVERSITY OF FLORIDA	No
UNIVERSITY OF FLORIDA 226 TIGERT HALL GAINESVILLE, FL 32611 59-6002052	EDUCATION	FL	501(C) (1)	N/A	NA	No
ELDERCARE OF ALACHUA COUNTY INC PO BOX 100362 GAINESVILLE, FL 32610 59-3051104	SENIOR SERVICES	FL	501(C) (3)	9	SHANDS TEACHING HOSPITAL AND CLINICS INC	No
SHANDS LAKE SHORE INC PO BOX 100362 GAINESVILLE, FL 32610 59-2699965	HOSPITAL	FL	501(C) (3)	3	SHANDS TEACHING HOSPITAL AND CLINICS INC	No
SOUTHEASTERN HEALTHCARE FOUNDATION PO BOX 100362 GAINESVILLE, FL 32610 59-2357609	HOSPITAL SUPPORT	FL	501(C) (3)	11	SHANDS TEACHING HOSPITAL AND CLINICS INC	No
SHANDS AUXILIARIES INC PO BOX 100362 GAINESVILLE, FL 32610 59-3551267	HOSPITAL SUPPORT	FL	501(C) (3)	11	SOUTHEASTERN HEALTHCARE FOUNDATION INC	No
UNIVERSITY ATHLETIC ASSOCIATION PO BOX 14485 GAINESVILLE, FL 32604 59-6002050	COLLEGIATE ATHLETIC ASSOCIATION	FL	501(C) (3)	N/A	UNIVERSITY OF FLORIDA	No
THE UNIVERSITY OF FLORIDA FOUNDATION PO BOX 14425 GAINESVILLE, FL 32604 59-0974739	FUNDRAISING	FL	501(C) (3)	7	UNIVERSITY OF FLORIDA	No
UNIVERSITY OF FLORIDA INVESTMENT COR 4510 NW 6TH PLACE 2ND FLOOR GAINESVILLE, FL 32607 20-1226494	INVESTMENT MANAGEMENT	FL	501(C) (3)	11	UNIVERSITY OF FLORIDA	No
FLORIDA CLINICAL PRACTICE ASSOCIATION PO BOX 100205 GAINESVILLE, FL 32610 59-1680273	EDUCATIONAL SUPPORT	FL	501(C) (3)	N/A	UNIVERSITY OF FLORIDA	No
FLORIDA HEALTH PROFESSIONS ASSOC INC PO BOX 100174 GAINESVILLE, FL 326100174 59-3563965	PROFSVCS/RENT	FL	501(C) (3)	11	UNIVERSITY OF FLORIDA	No

Shands Teaching Hospital and Clinics, Inc. and Subsidiaries

Reports on Federal and State Awards in Accordance with OMB Circular A-133 and Chapter 10.550, *Rules of the Auditor General* June 30, 2012

EIN: 59-1943502

Shands Teaching Hospital and Clinics, Inc. and Subsidiaries Index June 30, 2012

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This section of the Shands Teaching Hospital and Clinics, Inc. and Subsidiaries' ("Shands") annual financial report presents Shands' analysis of its financial performance as of June 30, 2012 and 2011, and for the fiscal years then ended. Please read this analysis in conjunction with the consolidated basic financial statements, which follow this section.

Introduction

Shands includes the following

Shands UF is a major tertiary care teaching institution licensed to operate an 852-bed teaching hospital which provides clinical settings for medical education programs at the University of Florida

Shands Vista is an inpatient psychiatric and substance abuse facility licensed to operate 81 beds, of which 61 are psychiatric and 20 are substance abuse

Shands Rehab Hospital is a 40-bed inpatient rehabilitation hospital located on the same campus as Shands Vista

Shands HomeCare is a hospital-based home care agency providing home care services to the citizens of north central Florida

Property Management leases properties including a condominium medical office building and nonmedical buildings

Elder Care of Alachua County, Inc. provides social and health care support to the elderly in Alachua County

Southeastern HealthCare Foundation, Inc. provides charitable aid to the University of Florida and to Shands and owns and leases various rental properties in Florida

First Coast Advantage Central, LLC is a provider service network ("PSN") established to administer Medicaid in Alachua and certain contiquous counties

On July 1, 2010, Shands sold the operating assets and certain liabilities of three rural community hospitals (Shands Lake Shore, Shands Starke, and Shands Live Oak) to Health Management Associates, LLC ("HMA") Shands then entered into a partnership agreement with HMA for a 40% minority interest in **Lakeshore HMA, LLC, Starke HMA, LLC,** and **Live Oak HMA, LLC** HMA manages the operations of the three facilities Shands also has an equal partnership interest with Solantic of Orlando, LLC for a walk-in urgent care center. Solantic manages the operations of the facility

This section of Shands' consolidated basic financial statements (unaudited) presents analysis of the financial condition, the results of operations and cash flows of Shands as of June 30, 2012 and 2011 and for the years then ended

Overview of the Consolidated Basic Financial Statements

Along with management's discussion and analysis, the annual financial report includes the independent certified public accountants' report, and the consolidated basic financial statements of Shands. The consolidated basic financial statements also include notes that explain in more detail some of the information in the consolidated basic financial statements. By referring to the accompanying notes to the consolidated basic financial statements, a broader understanding of issues impacting financial performance can be realized.

June 30, 2012

Statements of Net Assets

The consolidated basic statements of net assets presents the financial position of Shands as of June 30, 2012 and 2011 and includes all assets and liabilities of Shands. Shands' net assets, or the difference between total assets and total liabilities, are one indicator of the current financial condition of Shands. Changes in net assets are an indicator of whether the overall financial condition of the organization has improved or worsened over a period of time. Assets and liabilities are generally measured using current values, with the exception of capital assets, which are stated at historical cost less allowances for depreciation.

A summary of Shands' consolidated basic statements of net assets at June 30, 2012 and 2011 is presented below

(in thousands of dollars)		2012		2011
Cash and cash equivalents and short-term investments Other current assets Capital assets, net Other assets	\$	152,738 230,766 721,169 452,402	\$	126,736 183,965 732,468 399,410
Total assets	\$	1,557,075	\$	1,442,579
Current liabilities Long-term liabilities Total liabilities	\$	186,261 555,492 741,753	\$	194,662 516,946 711,608
Net assets Invested in capital assets, net of related debt Restricted		234,390		233,936
Nonexpendable		97		97
Expendable		8,750		5,684
Unrestricted	_	572,085	_	491,254
Total net assets		815,322		730,971
Total liabilities and net assets	\$	1,557,075	\$	1,442,579

Cash and cash equivalents and short-term investments increased by \$26.0 million. See "Statements of Cash Flows" section below for further information regarding cash activity. Other current assets increased by \$46.8 million due primarily to an increase in net patient accounts receivable as a result of increased patient service volumes. Capital assets, net decreased by \$11.3 million and included new acquisitions of approximately \$59.5 million. Further changes in the level of capital assets were primarily due to the timing of acquisition of capital assets, as well as reclassification of approximately \$20.0 million in prior year costs associated with the electronic medical record project reclassified to "prepaid expenses and other current assets" and "other assets" categories. In the prior year, the reimbursable portion of the electronic medical record project was not finalized and thereby was reflected in construction-in-progress. Other assets increased by \$53.0 million due primarily to \$23.2 million in increased collateral funding requirements associated with the bond swaps, \$13.2 million in increased funding of the defined-benefit pension plan, \$9.2 million increase in the electronic medical record project receivable referred to previously, and \$7.4 million increase in other receivables.

Current liabilities decreased by \$8.4 million due primarily to decreases in salaries/leave payable and also third-party settlement liabilities offset by increases in accounts payable and accrued expenses. Long-term liabilities increased by \$38.5 million primarily due to changes in the fair value of the bond swaps, as well as the addition of \$10.0 million in new fixed-rate debt.

Total net assets increased by \$84.4 million due primarily to financial results during the year

Statements of Revenues, Expenses and Changes in Net Assets

The following table presents Shands' condensed consolidated basic statements of revenues, expenses and changes in net assets for the years ended June 30, 2012 and 2011

(ın thousands of dollars)	2012	2011
Net patient service revenue	\$ 1,060,568	\$ 960,344
Other operating revenue	 25,598	 17,383
Total operating revenues	1,086,166	977,727
Operating expenses	971,843	938,561
Operating income	114,323	39,166
Nonoperating revenues, net	 6,093	 35,832
Excess of revenues over expenses	120,416	74,998
Other changes in net assets		
Capital contributions	1,612	674
Expenditures in support of the University of Florida	(40.744)	(07.075)
and its medical programs Change in accounting treatment of affective derivative instruments	(40,744)	(37,675)
Change in accounting treatment of effective derivative instruments and change in fair value of hedging derivative instruments	_	39,649
Shands Jacksonville note receivable	_	42,276
Other changes in net assets	3,067	 1,714
Increase in net assets	\$ 84,351	\$ 121,636

Patient Volumes

Compared to the prior year, inpatient and outpatient volumes increased. The following tables reflect the associated volumes of each facility on a comparative basis to the prior year.

	2012	2011	Net Change	% Change
In-Patient Admissions				
Shands UF	37,656	36,150	1,506	4 2%
Shands Vista	3,146	3,009	137	4 6%
Shands Rehab Hospital	873	808	65	8 0%
Total	41,675	39,967	1,708	4 3%
	2012	2011	Net Change	% Change
Out-Patient Visits	2012	2011		
Out-Patient Visits Shands UF	2012 713,964	2011 707,271		
			Change	Change
Shands UF	713,964	707,271	Change 6,693	Change 0 9%

Inpatient admissions exceeded the prior year by 4 3% due primarily to increased medical and surgical volumes. Outpatient visits exceeded the prior year by 1 4% primarily due to increased emergency room and trauma visits.

Operating Revenues

Patient service revenue, net of allowances for contractual discounts, charity care and provision for bad debt increased \$100.2 million, or 10.4% over the prior year. The primary factor for the increase was increased patient volumes, increased patient acuity, and improved utilization management which resulted in improved overall net reimbursement. Other operating revenues increased \$8.2 million, or 47.3%, due to funding recognized from the Medicare and Medicaid programs toward installation of the electronic medical record system. Shands earned the funding by meeting certain measurable benchmarks established by the two programs. Additional funding is available in future years based upon successfully achieving additional requirements.

Operating Expenses

Operating expenses increased \$33 3 million, or 3 5%. The primary factor for the increase was the increase in patient volumes. Operating expenses increased in the areas of salary and benefits expense, as well as supplies expense. On a volume and patient acuity adjusted basis, operating expenses were favorable to the prior year.

Nonoperating Revenues, net

Nonoperating revenues, net decreased by \$29 7 million, or 83 0% Investment income, net was lower by \$25 4 million due primarily to lower market conditions impacting the investment portfolio. State appropriations and interest expense are included in nonoperating revenues, net, in accordance with GASB Statement No. 34, Basic Financial Statements and Management's Discussion and Analysis for State and Local Governments. State appropriations were lower by \$3.5 million. Interest expense was slightly lower by \$0.9 million. Gains in the value of derivative instruments increased \$8.3 million. Disposal of property and equipment activity decreased by \$3.5 million. Other non-operating revenues increased \$1.8 million.

Statements of Cash Flows

The Statements of Cash Flows provide additional information in regards to Shands' financial results by reporting the major sources and uses of cash. Cash and cash equivalents increased by \$6.3 million. Short-term investments increased by \$19.7 million.

Cash activities included capital asset acquisitions of \$59.5 million. Payments of additional collateral related to bond swaps have totaled \$23.2 million. Shands also funded the employee pension plan by \$13.2 million in excess of pension expense. Cash in-flows have been primarily as a result of operational activity.

Debt Outstanding

As of June 30, 2012, Shands had approximately \$487.5 million in debt outstanding compared to approximately \$498.7 million the previous year. Long-term debt is comprised of bond issues, a bank note, and installment debt, described in more detail in Note 6 to the consolidated basic financial statements. Shands utilizes interest rate swaps in order to synthetically convert certain variable rate bonds to fixed rate bonds. Including the effect of the interest rate swaps, approximately 71% of Shands' bonds outstanding are fixed while 29% are variable. The Series 1996A Bonds are fixed rate bonds insured by MBIA. The Series 2007A and B Bonds, Series 2008C Bonds, and \$50 million of the Series 2008A Bonds are variable rate bonds with fixed rate payor interest rate swaps which synthetically converts them to fixed rate bonds. The Series 2008B Bonds, Series 2010A Bonds, and \$25 million of the Series 2008A Bonds are variable rate bonds. Shands entered into a fixed rate taxable loan for \$10 million to finance a property purchase, renovations, and equipment. Shands entered into installment debt agreements for \$8.4 million to finance the costs of implementation of an EMR system, as well as an upgrade to its financial and human resources information services system.

Credit Ratings

Shands has received underlying credit ratings of A2 from Moody's Investor Services on all of its debt with the exception of its 2008A and 2008B Bonds. In September, 2011 Moody's downgraded the 2008A and 2008B Bonds, which is a direct-pay letter of credit with Bank of America, from Aa2 to A1 The A2 Moody's rating was affirmed on all other debt in December, 2011 with an outlook of "Stable"

Shands has received underlying credit ratings of A from Standard & Poor's on all of its debt with an outlook of "Stable" The Standard & Poor's rating was affirmed in August 2011

June 30, 2011

Statement of Net Assets

The consolidated basic statement of net assets presents the financial position of Shands as of June 30, 2011 and includes all assets and liabilities of Shands. Shands' net assets, or the difference between total assets and total liabilities, are one indicator of the current financial condition of Shands. Changes in net assets are an indicator of whether the overall financial condition of the organization has improved or worsened over a period of time. Assets and liabilities are generally measured using current values, with the exception of capital assets, which are stated at historical cost less allowances for depreciation.

A summary of Shands' consolidated basic statement of net assets at June 30, 2011 is presented below

(in thousands of dollars)

Cash and cash equivalents and short-term investments Other current assets Capital assets, net Other assets Total assets	\$ 126,736 183,965 732,468 399,410 1,442,579
Current liabilities Long-term liabilities	\$ 194,662 516,946
Total liabilities	 711,608
Net assets Invested in capital assets, net of related debt Restricted	233,936
Nonexpendable	97
Expendable	5,684
Unrestricted	 491,254
Total net assets	730,971
Total liabilities and net assets	\$ 1,442,579

Cash and cash equivalents and short-term investments decreased by approximately \$40.7 million since June 30, 2010 See "Statement of Cash Flows" section below for further information regarding cash activity

Other current assets decreased by approximately \$44.3 million since June 30, 2010 due primarily to receipt of the proceeds associated with the sale of the operating assets and certain liabilities in the three rural hospitals, Shands at Lake Shore, Shands Starke, and Shands Live Oak to Health Management Associates, Inc ("HMA") on July 1, 2010 Subsequent to the sale, Shands purchased a 40% interest in the newly formed limited liability companies that now own the rural hospitals. HMA is managing the operations of the three rural hospitals' combined 139 beds

Capital assets acquired in the fiscal year totaled approximately \$69.9 million, primarily related to the project costs associated with the installation and implementation of an electronic medical record ("EMR") system and the construction of the Pediatric Emergency Room

Other assets were primarily affected by the change from FASB to GASB as it related to the accounting treatment of Shands' defined benefit pension plan, resulting in prepaid pension assets to increase approximately \$82 million. Assets whose use is restricted, less current portion, increased by approximately \$36.5 million during fiscal year 2011 as a result of increased funding by the Board of Directors for specific purposes such as assets held in trust, strategic capital, post-retirement benefits, and other health programs

Current liabilities decreased by approximately \$13 0 million during fiscal year 2011 due to the conclusion of construction of the Cancer Hospital project which increased vendor payables in 2010 and other timing differences for various vendor payments

Long-term liabilities were primarily affected by the change from FASB to GASB as it related to the accounting treatment of pension and post-employment benefit liabilities and derivatives. Long-term debt, noncurrent portion, and capital lease obligations, noncurrent portion, decreased approximately \$17.7 million during fiscal year 2011 due to principal payments.

Net assets were primarily affected by the excess of revenues over expenses and the change from FASB to GASB as it related to the accounting treatment of pension and post-employment benefit liabilities, derivatives and other changes

Statement of Revenues, Expenses and Changes in Net Assets

The following table presents Shands' condensed consolidated basic statement of revenues, expenses and changes in net assets for the year ended June 30, 2011

Net patient service revenue	\$ 960,344
Other operating revenue	17,383
Total operating revenues	977,727
Operating expenses	938,561
Operating income	39,166
Nonoperating revenues, net	 35,832
Excess of revenues over expenses	74,998
Other changes in net assets	
Capital contributions	674
Expenditures in support of the University of Florida	
and its medical programs	(37,675)
Change in accounting treatment of effective derivative instruments	
and change in fair value of hedging derivative instruments	39,649
Shands Jacksonville note receivable	42,276
Other changes in net assets	1,714
Increase in net assets	\$ 121,636

Patient Volumes

Compared to the prior year, inpatient and outpatient volumes decreased primarily as a result of the closure of Shands AGH in November 2009, and the sale of the three rural hospitals to HMA in July 2010 The following tables reflect the associated volumes of each facility on a comparative basis to the prior year

		2212	Net	%
	2011	2010	Change	Change
In-Patient Admissions				
Shands UF	36,150	34,026	2,124	6 2%
Shands Vista	3,009	2,768	241	8 7%
Shands Rehab Hospital	808	753	55_	7 3%
Subtotal	39,967	37,547	2,420	6 4%
Shands AGH	-	1,995	(1,995)	-100 0%
Lake Shore, Starke, and Live Oak		5,963	(5,963)	-100 0%
Total	39,967	45,505	(5,538)	-12 2%
			Net	%
	2011	2010	Net Change	% Change
Out-Patient Visits	2011	2010		
Out-Patient Visits Shands UF	2011 707,271	2010 667,399		
			Change	Change
Shands UF	707,271	667,399	Change 39,872	Change
Shands UF Shands Vista	707,271 20,930	667,399 18,487	39,872 2,443	6 0% 13 2%
Shands UF Shands Vista Shands Rehab Hospital	707,271 20,930 1,343	667,399 18,487 1,073	39,872 2,443 270	6 0% 13 2% 25 2%
Shands UF Shands Vista Shands Rehab Hospital Subtotal	707,271 20,930 1,343	667,399 18,487 1,073 686,959	39,872 2,443 270 42,585	6 0% 13 2% 25 2% 6 2%

In-patient admissions compared to the prior year were lower by 12 2%. Over the same period, the admission levels for Shands UF, Vista and Rehab increased 6 4% compared to their prior year volumes primarily related to the closure of Shands AGH. Out-patient visits compared to the prior year were lower by 28 2%. Over the same period, the out-patient visit levels for Shands UF, Vista and Rehab increased 6 2% compared to their prior year volumes primarily related to the closure of Shands AGH.

Operating Revenues

Patient service revenue, net of allowances for contractual discounts, charity care and bad debt expense, was approximately \$960.3 million, a decrease of approximately \$56.6 million, or 5.6% from fiscal year 2010. The primary factor for the decrease was the sale of the three rural hospitals in July 2010. Other operating revenues of approximately \$17.4 million were approximately \$1.0 million lower than the prior year primarily related to the closure of Shands AGH.

Operating Expenses

Operating expenses for fiscal year 2011 were approximately \$938.6 million, a decrease of approximately \$53.8 million, or 5.4%, from fiscal year 2010. The primary factor for the decrease was the sale of the three rural hospitals in July 2010 which resulted in a decrease of approximately \$36.2 million in salaries and benefits

Nonoperating Revenues, net

Nonoperating revenues, net for fiscal year 2011 were approximately \$35.8 million. State appropriations and interest expense are included in nonoperating revenues, net, in accordance with GASB Statement No. 34, Basic Financial Statements and Management's Discussion and Analysis for State and Local Governments. State appropriations, net were approximately \$7.5 million. Interest expense was approximately \$16.9 million. Net investment income, including the change in fair value of investments, totaled approximately \$37.5 million. Losses and the change in value of derivative instruments totaled approximately \$0.415 million. Gain on disposal of capital assets totaled approximately \$4.0 million, and other nonoperating revenues totaled approximately \$4.1 million.

Statement of Cash Flows

The statement of cash flows provides additional information in regards to Shands' financial results by reporting the major sources and uses of cash

Total cash and cash equivalents and short-term investments decreased in fiscal year 2011 by approximately \$40.7 million. Capital asset acquisitions during the fiscal year totaled approximately \$58.0 million. Payment of principal on long-term debt and capital lease obligations was approximately \$17.7 million. Shands also funded the employee pension plan by approximately \$40.5 million in excess of pension expense. On July 1, 2010, Shands received net cash proceeds of approximately \$21.1 million from HMA from the sale of the operating assets and certain liabilities of the three rural hospitals. Shands and HMA then entered into a joint partnership for the management and operation of the three facilities.

Debt Outstanding

As of June 30, 2011, Shands had approximately \$498 7 million in debt outstanding compared to approximately \$507 2 million the previous year. Long-term debt is comprised of bond issues and installment debt, described in more detail in Note 6 to the consolidated basic financial statements. Shands utilizes interest rate swaps in order to synthetically convert certain variable rate bonds to fixed rate bonds. Including the effect of the interest rate swaps, approximately 71% of Shands' bonds outstanding are fixed while 29% are variable. The Series 1996A Bonds are fixed rate bonds insured by MBIA. The Series 2007A and B Bonds, Series 2008C Bonds, and \$50 million of the Series 2008A Bonds are variable rate bonds with fixed rate payor interest rate swaps which synthetically converts them to fixed rate bonds. The Series 2008B Bonds, Series 2010A Bonds, and \$25 million of the Series 2008A Bonds are variable rate bonds. Shands entered into installment debt agreements to finance the costs of implementation of an EMR system, as well as an upgrade to its financial and human resources information services system.

Capital Assets

At June 30, 2011, Shands had approximately \$233 9 million invested in net capital assets. A breakdown of these assets can be found in Note 5 to the consolidated basic financial statements. This represents a decrease of approximately \$8 0 million from the previous year. Shands expects to make total capital expenditures of approximately \$81 9 million in fiscal year 2012 primarily on expenditures for the EMR project, facility upgrades, information systems and patient care equipment. These capital purchases are expected to be funded directly from operations.

Credit Ratings

Shands has received underlying credit ratings of A2 and A from Moody's Investor Services and Standard & Poor's, respectively Both firms have assigned an outlook of "Stable" The Moody's rating was affirmed in June 2010 and the Standard & Poor's rating was affirmed in August 2011



Report of Independent Certified Public Accountants

To the Board of Directors of Shands Teaching Hospital and Clinics, Inc. and Subsidiaries

In our opinion, the accompanying consolidated basic statements of net assets and the related consolidated basic statements of revenues, expenses, and changes in net assets and of cash flows present fairly, in all material respects, the financial position of Shands Teaching Hospital and Clinics, Inc and Subsidiaries ("Shands") as of June 30, 2012 and 2011, and the changes in its net assets and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America. These financial statements are the responsibility of Shands' management. Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits of these statements in accordance with auditing standards generally accepted in the United States of America 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. An audit 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

As discussed in Note 2 to the consolidated basic financial statements, Shands adopted Governmental Accounting Standards Board ("GASB") No 62, Codification of Accounting and Financial Reporting Guidance Contained in Pre-November 30, 1989 FASB and AICPA Pronouncements, effective July 1, 2010

The accompanying management's discussion and analysis ("MD&A") for the years ended June 30, 2012 and 2011, the Schedule of Plan Funding Progress as of July 1, 2007 through March 31, 2012 (Unaudited), the Historical Summary of Actual and Required Pension Contributions as of July 1, 2006 through June 30, 2012 (Unaudited), and the Historical Summary of Actual and Required Other Postemployment Contributions under GASB Statement No 45 as of July 1, 2009 through June 30, 2012 (Unaudited) as listed in the index are required by accounting principles generally accepted in the United States of America to supplement the consolidated basic financial statements. Such information, although not a part of the consolidated basic financial statements, is required by the Governmental Accounting Standards Board who considers it to be an essential part of financial reporting for placing the consolidated basic financial statements in the appropriate operational, economic, or historical context. We have applied certain limited procedures to the required supplementary information in accordance with auditing standards generally accepted in the United States of America, which consisted of inquiries of management about the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the consolidated basic financial statements, and other knowledge we obtained during our audits of the consolidated basic financial statements. We do not express an opinion or provide any assurance on the information because the limited procedures do not provide us with sufficient evidence to express an opinion or provide any assurance



Our audits were conducted for the purpose of forming an opinion on the consolidated basic financial statements taken as a whole. The consolidating information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the consolidated basic financial statements. The consolidating information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves and other additional procedures, in accordance with auditing standards generally accepted in the United States of America. In our opinion, the consolidating information is fairly stated, in all material respects, in relation to the consolidated basic financial statements taken as a whole. The consolidating information is presented for purposes of additional analysis of the consolidated financial statements rather than to present the financial position, changes in net assets and cash flows of the individual companies and is not a required part of the consolidated basic financial statements

In accordance with *Government Auditing Standards*, we have also issued our report dated September 26, 2012 on our consideration of Shands' internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements and other matters for the year ended June 30, 2012. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* and should be considered in assessing the results of our audit

Our audit was conducted for the purpose of forming an opinion on the consolidated basic financial statements taken as a whole The accompanying Schedule of Expenditures of Federal Awards and Schedule of State Financial Assistance for the year ended June 30, 2012 are presented for purposes of additional analysis as required by U.S. Office of Management and Budget Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations, and Chapter 10 550, Rules of the Auditor General, and is not a required part of the consolidated basic financial statements. The information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the consolidated basic financial statements. The Schedule of Expenditures of Federal Awards and Schedule of State Financial Assistance have been subjected to the auditing procedures applied in the audit of the consolidated basic financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the consolidated basic financial statements or the consolidated basic financial statements themselves and other additional procedures, in accordance with auditing standards generally accepted in the United States of America In our opinion, the Schedule of Expenditures of Federal Awards and the Schedule of State Financial Assistance are fairly stated, in all material respects. in relation to the consolidated basic financial statements taken as a whole

September 26, 2012

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Shands Teaching Hospital and Clinics, Inc. and Subsidiaries Consolidated Basic Statements of Net Assets June 30, 2012 and 2011

	2012	2011
Assets		
Current assets		
Cash and cash equivalents	\$ 24,060	\$ 17,794
Short-term investments Patient accounts receivable, net of allowance for uncollectibles	128,678	108,942
of \$43,685 and \$35,557, respectively	148,408	112,344
Inventories	12,734	13,001
Prepaid expenses and other current assets	51,438	38,309
Assets whose use is restricted, current portion	18,186	20,311
Total current assets	383,504	310,701
Assets whose use is restricted, less current portion	175,731	201,814
Capital assets, net	721,169	732,468
Other assets	276,671	197,596
Total assets	\$ 1,557,075	\$ 1,442,579
Liabilities and Net Assets		
Current liabilities		
Long-term debt, current portion	\$ 19,848	\$ 20,834
Capital lease obligations, current portion	904 69,348	873 58,277
Accounts payable and accrued expenses Accrued salaries and leave payable	39,664	49,882
Estimated third-party payor settlements	56,497	64,796
Total current liabilities	186,261	194,662
Long-term liabilities		
Long-term debt, noncurrent portion	467,651	477,839
Capital lease obligations, noncurrent portion	542	1,447
Other liabilities	87,299	37,660
Total long-term liabilities	555,492	516,946
Total liabilities	741,753	711,608
Commitments and contingencies		
Net assets	224.222	222 222
Invested in capital assets, net of related debt Restricted	234,390	233,936
Nonexpendable	97	97
Expendable	8,750	5,684
Unrestricted	572,085	491,254
Total net assets	815,322	730,971
Total liabilities and net assets	\$ 1,557,075	\$ 1,442,579

Shands Teaching Hospital and Clinics, Inc. and Subsidiaries Consolidated Basic Statements of Revenues, Expenses and Changes in Net Assets

Years Ended June 30, 2012 and 2011

(In thousands of donato)				
		2012		2011
Operating revenues				
Net patient service revenue, net of provision for bad debts	ው	4 000 500	Φ	000 044
of \$97,310 and \$85,176, respectively	\$	1,060,568	\$	960,344
Other operating revenue	_	25,598		17,383
Total operating revenues		1,086,166		977,727
Operating expenses				
Salaries and benefits		479,817		462,739
Supplies and services		439,675		423,874
Depreciation and amortization		52,351		51,948
Total operating expenses		971,843		938,561
Operating income		114,323		39,166
Nonoperating revenues (expenses)				
State appropriations		4,000		7,500
Interest expense		(15,999)		(16,860)
Net investment income, including change in fair value		11,604		37,051
Gain on disposal of capital assets, net		555		4,037
Other nonoperating revenues		5,933		4,104
Total nonoperating revenues, net		6,093		35,832
Excess of revenues over expenses before transfers, capital contributions, changes in fair value of hedging				
derivative instruments, and other changes in net assets	\$	120,416	\$	74,998

Shands Teaching Hospital and Clinics, Inc. and Subsidiaries Consolidated Basic Statements of Revenues, Expenses and Changes in Net Assets

Years Ended June 30, 2012 and 2011

(In thousands of dollars)		
	2012	2011
Excess of revenues over expenses before transfers, capital contributions, changes in fair value of hedging derivative		
instruments, and other changes in net assets	\$ 120,416	\$ 74,998
Capital contributions	1,612	674
Transfers and expenditures in support of the University of Florida		
and its medical programs	(40,744)	(37,675)
Change in accounting treatment of effective derivative instruments		
and change in fair value of hedging derivative instruments	-	39,649
Shands Jacksonville note receivable	-	42,276
Other changes in net assets	 3,067	1,714
Increase in net assets	84,351	121,636
Net assets		
Beginning of year	 730,971	 609,335
End of year	\$ 815,322	\$ 730,971

Shands Teaching Hospital and Clinics, Inc. and Subsidiaries Consolidated Basic Statements of Cash Flows Years Ended June 30, 2012 and 2011

	2012	2011
Cash flows from operating activities		
Cash received from patients and third-party payors	\$ 1,018,705	\$ 965,769
Other receipts from operations	26,833	14,335
Salaries and benefits paid to employees	(489,662)	(506,511)
Payments to suppliers and vendors	(438,928)	 (414,142)
Net cash provided by operating activities	116,948	 59,451
Cash flows from noncapital financing activities		
Payments received on notes receivable	3,234	1,609
Payments in support of the University of Florida and its medical programs	(40,744)	(37,399)
Donations and pledge receipts	 2,854	 4,108
Net cash used in noncapital financing activities	(34,656)	 (31,682)
Cash flows from capital and related financing activities		
Purchase of capital assets	(59,511)	(58,044)
Proceeds from sale of capital assets	1	35,252
Proceeds from issuance of long-term debt	10,000	- (47.745)
Payments of long-term debt and capital lease obligations	(21,189)	(17,715)
Interest payments Capital contributions	(16,566) 1,583	(17,570) 640
Net cash used in capital and related financing activities	(85,682)	 (57,437)
·	 (65,662)	 (37,437)
Cash flows from investing activities	E 107	E 0EC
Investment income received Interest in joint venture	5,197	5,856 (14,117)
Purchase of short-term investments and assets whose use is restricted	(182,341)	(163,110)
Sale of short-term investments and assets whose use is restricted	186,997	194,306
Partial termination of the 2008A fixed rate payer interest rate swap	-	(3,357)
Other investing activity	(197)	407
Net cash provided by investing activities	9,656	19,985
Net increase (decrease) in cash and cash equivalents	6,266	(9,683)
Cash and cash equivalents		
Beginning of year	17,794	27,477
End of year	\$ 24,060	\$ 17,794

Shands Teaching Hospital and Clinics, Inc. and Subsidiaries Consolidated Basic Statements of Cash Flows Years Ended June 30, 2012 and 2011

		2012		2011
Reconciliation of operating income to net cash provided by operating activities				
Operating income	\$	114,323	\$	39,166
Adjustments to operating income to net cash provided by operating activities				
Depreciation and amortization		52,351		51,948
Provision for bad debts		97,310		85,176
Changes in				
Patient accounts receivable		(131,246)		(75,191)
Prepaid expenses and other current assets		(10,037)		9,924
Inventories		267		(959)
Other assets		2,823		(4,971)
Accounts payable and accrued expenses		8,930		2,690
Accrued salaries and leave payable		(10,218)		(1,645)
Estimated third-party payor settlements		(8,299)		(4,560)
Other liabilities		744		(42,127)
Total adjustments		2,625		20,285
Net cash provided by operating activities	\$	116,948	\$	59,451
Supplemental noncash investing, capital and financing activities				
Shands Jacksonville note receivable (Note 11)	\$	_	\$	42,276
Capital assets financed through long-term debt	•	-	•	8,350

1. Organization

Shands Teaching Hospital and Clinics, Inc. and Subsidiaries ("Shands") was incorporated on October 15, 1979 as a Florida not-for-profit corporation. The President of the University of Florida ("UF"), or his designee, serves as the President of Shands' Board of Directors and retains appointment and termination rights over a majority of the members of Shands' Board of Directors. The President of UF is deemed a state official as the position is appointed by a Board of Trustees that govern UF (the "UF Board"), and the members of the UF Board are appointed by the Governor and the Board of Governors of the state of Florida.

Shands operates a multi-hospital system The accompanying consolidated basic financial statements consolidate the accounts of Shands and its subsidiaries, as described below

- Shands UF, a division of Shands, is a major tertiary care teaching institution located in Gainesville, Florida, licensed to operate an 852-bed teaching hospital. Shands UF is a leading referral center in the State of Florida and provides clinical settings for medical education programs at the University of Florida.
- Shands Vista, a division of Shands, is an inpatient psychiatric and substance abuse facility located in Gainesville, Florida, licensed to operate 81 beds, of which 61 are psychiatric and 20 are substance abuse
- Shands Rehab Hospital, a division of Shands, is a 40-bed inpatient rehabilitation hospital located on the same campus as Shands Vista
- Shands HomeCare, a division of Shands, is a hospital-based home care agency providing home care services to the citizens of north central Florida
- **Property Management**, a division of Shands, leases properties in Gainesville, Florida including a condominium medical office building and nonmedical buildings
- ElderCare of Alachua County, Inc. ("ElderCare"), a Florida not-for-profit corporation, provides social and health care support to the elderly in Alachua County, Florida, through the operations of a Senior Recreation Center and programs such as Meals on Wheels and an Alzheimer's Day Care Center Shands is the sole corporate member of ElderCare
- Southeastern HealthCare Foundation, Inc. ("Foundation"), a Florida not-for-profit corporation, provides charitable aid to the University of Florida and to Shands and owns and leases various rental properties in Florida Shands is the sole corporate member of the Foundation
- First Coast Advantage Central, LLC is a provider service network ("PSN") established to administer Medicaid in Alachua County and certain contiguous counties

On July 1, 2010, Shands sold the operating assets and certain liabilities of three rural hospitals (Shands at Lake Shore, Shands Starke, and Shands Live Oak) to Health Management Associates, Inc ("HMA") Shands then entered into a partnership agreement with HMA for a 40% minority interest in Lake Shore HMA, LLC, Starke HMA, LLC, and Live Oak HMA, LLC and HMA manages the operations of the three facilities Shands also has an equal partnership interest with Solantic of Orlando, LLC for a walk-in urgent care center

Effective September 8, 2010, the Board of Directors of Shands approved a motion to reorganize its corporate structure. Under the reorganization, Shands will no longer be the sole corporate member of Shands Jacksonville HealthCare, Inc. ("Shands Jacksonville"), but will continue as an affiliated entity under common control of UF. Effective September 27, 2010, the Board of Directors of Shands Jacksonville approved the motion for Shands to no longer be the sole corporate member of Shands Jacksonville. The reorganization is being accounted for under the de-pooling method of accounting, and, as such, Shands Jacksonville is no longer consolidated with Shands effective July 1, 2010. Therefore, the financial position and results of operations and changes in net assets of Shands Jacksonville are not included in these consolidated basic financial statements.

The condensed results of operations and changes in net assets of Shands Jacksonville from July 1, 2010 to September 27, 2010 are as follows

(in thousands of dollars)

Net patient service revenue Other operating revenue	\$ 127,459 5,299
Operating revenues	132,758
Operating expenses	 123,404
Operating income	9,354
Nonoperating revenues, net	245
Excess of revenues over expenses	9,599
Other changes in net assets Expenditures in support of the University of Florida and its	
medical programs	(6,479)
Note payable to Shands	(42,276)
Decrease in net assets	\$ (39,156)

2. Summary of Significant Accounting Policies

The following is a summary of the significant accounting policies followed by Shands in the presentation of these consolidated basic financial statements

Basis of Presentation

The accompanying consolidated basic financial statements have been prepared on the accrual basis of accounting and include the accounts of Shands and its subsidiaries Significant intercompany accounts and transactions have been eliminated

As of July 1, 2010, Shands adopted GASB Statement No 62, Codification of Accounting and Financial Reporting Guidance Contained in Pre-November 30, 1989 FASB and AICPA Pronouncements ("GASB No 62") GASB No 62 incorporated into the GASB's authoritative literature certain accounting and financial reporting guidance that is included in the following pronouncements issued on or before November 30, 1989 that don't conflict with GASB pronouncements

- FASB Statements and Interpretations,
- Accounting Principles Board Opinions, and

 Accounting Research Bulletins of the American Institute of Certified Public Accountants' ("AICPA") Committee on Accounting Procedure

GASB No 62 also supersedes GASB No 20, thereby eliminating the election provided in GASB No 20 for enterprise funds and governments engaged in business-type activities to apply post-November 30, 1989 FASB Statements and Interpretations that do not conflict with or contradict GASB pronouncements. However, those entities can continue to apply, as other accounting literature, post-November 30, 1989 FASB pronouncements that do not conflict with or contradict GASB pronouncements. Adoption of GASB No 62 had no impact on the consolidated basic financial statements. Shands uses the proprietary fund method of accounting whereby revenues and expenses are recognized on the accrual basis.

Use of Estimates

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

Tax Status

Shands and its subsidiaries are exempt from federal income taxes pursuant to Section 501(a) as organizations described in Section 501(c)(3) of the Internal Revenue Code and from state income taxes pursuant to Chapter 220 of the Florida Statutes

Cash and Cash Equivalents

Cash and cash equivalents include investments in highly liquid instruments with original maturities of three months or less when purchased, except those classified as assets whose use is restricted in the accompanying consolidated basic financial statements

Investments

Investments primarily consist of domestic and global fixed income funds, global equity funds, hedge funds, and a private equity partnership

Investments are carried at fair value. Interest, dividends, and gains and losses on investments, both realized and unrealized, are included in nonoperating revenues when earned

The estimated fair value of investments is based on quoted market prices, except for alternative investments for which quoted market prices are not available. Alternative investments held by Shands include private equity and hedge funds. Shands classifies its alternative investments as assets whose use is restricted, less current portion in the accompanying consolidated basic statements of net assets as management does not have the intent, and in the case of its investments in private equity, does not have the ability to sell a portion of the alternative investments in the near term. The estimated fair value of the private equity and hedge funds is based on valuations provided by the respective partnerships or funds Shands reviews and evaluates the values provided by the partnerships or funds and agrees with the valuation methods and assumptions used in determining the fair value of the private equity and hedge fund investments As of June 30, 2012, these equity investments in hedge funds and private equity make up approximately 4% and 1%, respectively, of total investments in the accompanying consolidated basic statements of net assets As of June 30, 2011, these equity investments in hedge funds and private equity made up approximately 6% and 1%, respectively, of total investments in the accompanying consolidated basic statements of net assets. Because private equity and hedge funds are not readily marketable, their estimated value is subject to uncertainty

and therefore, may differ from the value that would have been used had a ready market for such investments existed. Such difference could be material. Unrealized gains or losses on investments resulting from fair value fluctuations are recorded in the accompanying consolidated basic statements of revenues, expenses and changes in net assets in the period such fluctuations occur.

Assets Whose Use is Restricted

Assets whose use is restricted primarily include assets held by trustees under indenture agreements and designated assets set aside by the Board of Directors (the "Board"). The Board retains control of the designated assets and may, at its discretion, subsequently determine their use for other purposes. Amounts required to meet current liabilities are reported as current assets

Inventories

Inventories consist principally of medical, surgical, and pharmaceutical supplies that are stated at the lower of cost (average cost method) or market

Pledges Receivable

Pledges receivable represents donor commitments to provide future funding, primarily in association with various capital construction projects at Shands. Pledges receivable are recorded net of an estimated reserve. The current portion of pledges receivable are reported in prepaid expenses and other current assets in the accompanying consolidated basic statements of net assets. The long-term portion of pledges receivable are reported in other assets in the accompanying consolidated basic statements of net assets. For the years ended June 30, 2012 and 2011, pledge discount rates range from 3% - 7% and are generally due in five years or greater

Capital Assets

Capital assets have been recorded at historical cost or fair market value at date of purchase or donation, respectively. Equipment under capital leases is stated at the present value of minimum lease payments at the inception of the lease. Routine maintenance and repairs are expensed when incurred. Expenditures that materially increase the value, change the capacity or extend the useful life of an asset are capitalized. Interest costs incurred on borrowed funds during the period of construction of capital assets are capitalized as a component of the cost of acquiring those assets. Depreciation for financial reporting purposes is computed using the straight-line method over the estimated useful lives of the related depreciable assets as recommended by the American Hospital Association. Capital assets under capital leases are amortized using the straight-line method over the shorter period of the lease term or the estimated useful life of the related assets. Such amortization is included in depreciation and amortization expense in the accompanying consolidated basic statements of revenues, expenses and changes in net assets. Gains and losses on dispositions are recorded in the year of disposal

Goodwill

Goodwill represents the excess of the acquisition cost over the fair value of the net assets of businesses acquired. Goodwill was approximately \$2,982,000 at June 30, 2012 and 2011 and is included in other assets in the accompanying consolidated basic statements of net assets. Goodwill is evaluated for impairment annually. Management evaluated goodwill and based on the analysis performed, no impairment loss was recorded for the years ended June 30, 2012 and 2011.

Joint Ventures

In May 2010, Shands entered into an agreement to sell a 60% controlling interest in its three rural hospitals, Shands at Lake Shore, Shands Starke, and Shands Live Oak to HMA. The closing date of the sale was July 1, 2010. Shands recognized a gain on disposal of capital assets of approximately \$4,711,000 which is included in gain on disposal of capital assets in the accompanying consolidated basic statements of revenues, expenses and changes in net assets for the year ended June 30, 2011. Shands accounts for the investment under the equity method of accounting. An investment of approximately \$12,438,000 and \$12,823,000 at June 30, 2012 and 2011, respectively, was recorded in other assets in the accompanying consolidated basic statements of net assets. An investment loss of approximately \$760,000 and \$1,545,000 for the years ended June 30, 2012 and 2011, respectively, was recorded in other nonoperating revenues in the accompanying consolidated basic statements of revenues, expenses and changes in net assets.

Bond Issuance Costs and Bond Premium and Discounts

Bond issuance costs and bond premiums and discounts are amortized over the period the bonds are outstanding using the effective interest method. Amortization of bond issuance costs of approximately \$294,000 and \$320,000 was recorded for the years ended June 30, 2012 and 2011, respectively, and unamortized bond costs at June 30, 2012 and 2011 of approximately \$2,167,000 and \$2,461,000, respectively, was recorded in other assets in the accompanying consolidated basic statements of net assets

Accrued Personal Leave

Shands provides accrued time off to eligible employees for vacations, holidays, and short-term illness dependent on their years of continuous service and their payroll classification. Shands accrues the estimated expense related to personal leave based on pay rates currently in effect. Upon termination of employment, employees will have their eligible accrued personal leave paid in varying amounts.

Long-Term Debt

The fair value of fixed rate debt is estimated based on dealer quotes for hospital tax-exempt debt with similar terms and maturities and using discounted cash flow analyses based on current interest rates for similar types of borrowing arrangements. The fair value of variable rate debt approximates its carrying value. The carrying value of Shands' long-term debt is approximately \$487,499,000 and \$498,673,000 at June 30, 2012 and 2011, respectively. The fair value is approximately \$454,948,000 and \$461,280,000 at June 30, 2012 and 2011, respectively.

Net Assets

Net assets are categorized as "invested in capital assets, net of related debt," "restricted-expendable," and "unrestricted". Invested in capital assets, net of related debt is intended to reflect the portion of net assets that are associated with non-liquid capital assets, less outstanding balances due on borrowings used to finance the purchase or construction of those assets. Restricted net assets have restrictions placed on the use of net assets through external constraints imposed by contributors. Restricted—nonexpendable net assets are those that have been restricted by donors to be maintained by Shands in perpetuity. Restricted—expendable net assets are those whose use by Shands has been limited by donors to a specific time period or purpose. Unrestricted net assets are net assets that do not meet the definition of invested in capital assets, net of related debt and have no third-party restrictions on use.

Operating Revenues and Expenses

Shands' consolidated basic statements of revenues, expenses and changes in net assets distinguish between operating and nonoperating revenues and expenses. Operating revenues result from exchange transactions associated with providing health care services, Shands' principal activity. State appropriations, net investment income, interest expense, and gain on disposal of assets are reported as nonoperating revenues (expenses). Donations received for the purpose of acquiring or constructing capital assets are recorded below nonoperating revenues as capital contributions. Operating expenses are all expenses incurred to provide health care services, excluding financing costs.

Net Patient Service Revenue and Patient Accounts Receivable

Shands has agreements with third-party payors that provide for payments to Shands at amounts different from its established rates. Payment arrangements include prospectively determined rates per discharge, reimbursed costs, discounted charges, and per diem payments. Net patient service revenue and patient accounts receivable are reported at estimated net realizable amounts from patients, third-party payors, and others for services rendered and include 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. For the years ended June 30, 2012 and 2011, net patient service revenue increased approximately \$15,965,000 and \$13,676,000, respectively, due to such adjustments

Laws and regulations governing the Medicare and Medicaid programs are extremely complex and subject to interpretation. As a result, there is at least a reasonable possibility that recorded estimates will change by a material amount in the near term

Medicare

Shands participates in the federal Medicare program ("Medicare") Approximately 31% of Shands' net patient service revenue in fiscal years 2012 and 2011 was derived from services to Medicare beneficiaries. Inpatient acute care services rendered to Medicare beneficiaries are reimbursed at prospectively determined rates per discharge. These rates vary according to a patient classification system that is based on clinical, diagnostic, and other factors.

Inpatient non-acute services, outpatient services, and defined capital costs related to Medicare beneficiaries are reimbursed based upon a prospective reimbursement methodology. Shands is paid for cost-reimbursable items at a tentative rate with final settlement determined after submission of annual cost reports by Shands and audits by the Medicare fiscal intermediary. Shands' classification of patients under the Medicare program and the appropriateness of their admission are subject to an independent review. As of June 30, 2012, the Medicare cost reports were final settled by Shands' Medicare fiscal intermediary through June 30, 2006.

It is management's opinion that settlements of outstanding Medicare cost reports, when received, will not vary materially from the estimated amounts, which are recorded as current liabilities in the accompanying consolidated basic statements of net assets

Medicaid

Approximately 19% and 22% of Shands' net patient service revenue for fiscal years 2012 and 2011, respectively, was derived under the Medicaid program. Inpatient and outpatient services rendered to Medicaid program beneficiaries are paid based upon a cost reimbursement methodology subject to certain ceilings. Shands is reimbursed at a tentative rate with final

settlement determined after submission of annual cost reports by Shands, and audits by the Medicaid fiscal intermediary. As of June 30, 2012, the Medicaid cost reports have been audited by the Medicaid fiscal intermediary through June 30, 2005. In addition to the tentative payments received by Shands for the provision of health care services to Medicaid beneficiaries, the State of Florida provides supplemental Medicaid and disproportionate share payments to reflect the additional costs associated with treating the Medicaid population in Florida. These amounts are reflected in net patient service revenue in the accompanying consolidated basic statements of revenues, expenses and changes in net assets.

Shands' Medicaid interim rates are based on the most recent "as filed" Medicare/Medicaid cost report. The rates used for 2012 were based on the unaudited cost report for 2010. The rates used for 2011 were based on the unaudited cost report for 2009.

It is management's opinion that settlements of outstanding Medicaid cost reports, when received, will not vary materially from the estimated amounts, which are recorded as current liabilities in the accompanying consolidated basic statements of net assets

Other Third-Party Payors

Shands has also entered into reimbursement agreements with certain commercial insurance carriers, health maintenance organizations, and preferred provider organizations. The basis for reimbursement under these agreements includes prospectively determined rates per discharge, discounts from established charges and prospectively determined per diem rates.

Provision for Bad Debts and Allowance for Uncollectible Accounts

The provision for bad debts is based on management's assessment of historical and expected net collections, considering business and economic conditions, trends in federal and state governmental health care coverage, and other collection indicators. Throughout the year, management assesses the adequacy of the allowance for uncollectible accounts based upon these trends. The results of this review are then used to make any modification to the provision for bad debts to establish an appropriate allowance for uncollectible accounts. Patient accounts receivable are written off after collection efforts have been followed under Shands' policies.

Risk Management

Shands is exposed to various risks of loss from torts, theft of, damage to, and destruction of assets, business interruption, errors and omissions, employee injuries and illnesses, natural disasters, medical malpractice, and employee health, dental, and accident benefits. Commercial insurance coverage is purchased for claims arising from such matters in excess of self-insured limits. Settled claims have not exceeded this commercial coverage for the years ended June 30, 2012 and 2011.

Effective July 1, 2011, Shands was granted sovereign immunity under the provision of Chapter 2011-114, Laws of Florida As such, recovery in tort actions arising subsequent to June 30, 2011 will be limited to \$100,000 for any one person for one incident and all recovery related to one incident is limited to a total of \$200,000 Effective October 1, 2011, the limits increased to \$200,000 for any one person for one incident and \$300,000 in total for one incident

Derivative Financial Instruments

Shands' derivative financial instruments consist of interest rate swaps, which are utilized by Shands to manage net exposure to interest rate changes associated with its variable rate debt and to lower its overall borrowing costs. Shands accounts for its derivative financial instruments under GASB Statement No. 53, *Accounting and Financial Reporting for Derivative Instruments* ("GASB No. 53"). GASB No. 53 addresses the recognition, measurement, and disclosure of information.

regarding derivative instruments entered into by state and local governments (Note 7) Shands entered into the floating to fixed interest rate swap agreements to reduce the market risk associated with the changes in interest rates related to Shands' revenue bonds. For those interest rate swaps that qualify for hedge accounting, as they are highly effective in offsetting changes to expected future cash flows on interest payments, changes in the fair value of the interest rate swap agreement are considered to be deferred inflows or outflows. Deferred outflows related to hedging instruments are recorded in other assets while deferred inflows related to hedging instruments are recorded in other liabilities within the consolidated basic statements of net assets. Changes in fair value of interest rate swaps that do not qualify for hedge accounting are included within net investment income in the accompanying consolidated basic statements of revenues, expenses and changes in net assets.

Accounting Pronouncements

In June 2011, the GASB issued GASB Statement No 63, Financial Reporting of Deferred Outflows of Resources, Deferred Inflows of Resources, and Net Position ("GASB No 63") GASB No 63 improves financial reporting by standardizing the presentation of deferred outflows of resources and deferred inflows of resources and their effects on a government's net position. It alleviates uncertainty about reporting those financial statement elements by providing guidance where none previously existed. The provisions of GASB No 63 are effective for financial statements for periods beginning after December 15, 2011. Shands does not expect the adoption of GASB No. 63 to have a material impact on its consolidated basic financial statements.

In June 2011, the GASB issued GASB Statement No 64, *Derivative Instruments' Application of Hedge Accounting Termination Provisions* ("GASB No 64"), an amendment of GASB No 53 GASB No 64 clarifies whether an effective hedging relationship continues after the replacement of a swap counterparty or a swap counterparty's credit support provider GASB No 64 sets forth criteria that establish when the effective hedging relationship continues and hedge accounting should continue to be applied. The provisions of GASB No 64 are effective for financial statements for periods beginning after June 15, 2011. The adoption of GASB No 64 did not have a material impact on Shands' consolidated basic financial statements.

In March 2012, the GASB issued GASB Statement No 65, *Items Previously Reported as Assets and Liabilities* ("GASB No 65") GASB No 65 establishes accounting and financial reporting standards that reclassify, as deferred outflows of resources or deferred inflows of resources, certain items that were previously reported as assets and liabilities and recognizes, as outflows of resources or inflows of resources, certain items that were previously reported as assets and liabilities. GASB No 65 also provides other financial reporting guidance related to the impact of the financial statement elements deferred outflows of resources and deferred inflows of resources, such as changes in the determination of the major fund calculations, and limits the use of the term 'deferred' in financial statements. The provisions of GASB No 65 are effective for financial statements for periods beginning after December 15, 2012. Shands is currently evaluating the impact GASB No 65 will have on its consolidated basic financial statements.

In March 2012, the GASB issued GASB Statement No 66, *Technical Corrections - 2012, an Amendment of GASB Statements No 10 and No 62* ("GASB No 66") The objective of GASB No 66 is to improve accounting and financial reporting for a governmental financial reporting entity by resolving conflicting guidance that resulted from the issuance of two pronouncements, GASB Statements No 54, *Fund Balance Reporting and Governmental Fund Type Definitions,* and No 62, *Codification of Accounting and Financial Reporting Guidance Contained in Pre-November 30, 1989 FASB and AICPA Pronouncements* GASB No 66 amends GASB Statement No 10, *Accounting and Financial Reporting for Risk Financing and Related Insurance Issues,* by removing the

provision that limits fund-based reporting of an entity's risk financing activities to the general fund and the internal service fund type. As a result, governments should base their decisions about fund type classification on the nature of the activity to be reported, as required in GASB Statement No 54 and GASB Statement No 34, Basic Financial Statements—and Management's Discussion and Analysis—for State and Local Governments GASB No 66 also amends GASB Statement No 62 by modifying the specific guidance on accounting for (1) operating lease payments that vary from a straight-line basis, (2) the difference between the initial investment (purchase price) and the principal amount of a purchased loan or group of loans, and (3) servicing fees related to mortgage loans that are sold when the stated service fee rate differs significantly from a current (normal) servicing fee rate. These changes clarify how to apply GASB Statement No. 13, Accounting for Operating Leases with Scheduled Rent Increases, and result in guidance that is consistent with the requirements in GASB Statement No 48, Sales and Pledges of Receivables and Future Revenues and Intra-Entity Transfers of Assets and Future Revenues, respectively The provisions of GASB No 66 are effective for financial statements for periods beginning after December 15, 2012 Shands is currently evaluating the impact GASB No 66 will have on its consolidated basic financial statements

In June 2012, the GASB issued GASB Statement No 68, Accounting and Financial Reporting for Pensions, an Amendment of GASB Statement No 27 ("GASB No 68") The primary objective of GASB No 68 is to improve accounting and financial reporting by state and local governments for pensions. It also improves information provided by state and local governmental employers about financial support for pensions that is provided by other entities GASB No 68 results from a comprehensive review of the effectiveness of existing standards of accounting and financial reporting for pensions with regard to providing decision-useful information, supporting assessments of accountability and interperiod equity, and creating additional transparency GASB No 68 replaces the requirements of GASB Statement No 27, Accounting for Pensions by State and Local Governmental Employers, as well as the requirements of GASB Statement No 50, Pension Disclosures, as they relate to pensions that are provided through pension plans administered as trusts or equivalent arrangements (hereafter jointly referred to as trusts) that meet certain criteria GASB No 68 establishes standards for measuring and recognizing liabilities, deferred outflows of resources, deferred inflows of resources, and expense/expenditures For defined benefit pensions, GASB No 68 identifies the methods and assumptions that should be used to project benefit payments, discount projected benefit payments to their actuarial present value, and attribute that present value to periods of employee service. Note disclosure and required supplementary information requirements about pensions also are addressed. In addition, GASB No 68 details the recognition and disclosure requirements for employers with liabilities (payables) to a defined benefit pension plan and for employers whose employees are provided with defined contribution pensions GASB No 68 is effective for fiscal years beginning after June 15, 2014 Shands is currently evaluating the impact GASB No 68 will have on its consolidated basic financial statements

3. Unsponsored Community Benefit

Community benefit is a planned, managed, organized, and measured approach to a health care organization's participation in meeting identified community health needs. It implies collaboration with a "community" to "benefit" its residents, particularly the poor and other underserved groups, by improving health status and quality of life. Community benefit projects and services are identified by health care organizations in response to findings of a community health assessment, strategic and/or clinical priorities, and partnership areas of attention.

Community benefit categories include financial assistance, community health services, health professions education, research, and donations. Shands has a long history of providing community benefits and has quantified these benefits using national guidelines developed by the Catholic Health Association in collaboration with the Voluntary Hospital Association.

Shands has policies for providing financial assistance for patients requiring care but who have limited or no means to pay for that care. These policies provide free or discounted health and health-related services to persons who qualify under certain income and asset criteria. Because Shands does not pursue collection of amounts determined to qualify for financial assistance, they are not reported as net patient service revenue. Shands maintains records to identify and monitor the level of financial assistance it provides. Charges foregone for services provided under Shands' financial assistance policy as a percentage of total charges for the years ended June 30, 2012 and 2011 were approximately 6.1% and 5.2%, respectively

In addition to financial assistance, Shands provides benefits for the broader community. The cost of providing these community benefits can exceed the revenue sources available. Examples of the benefits provided by Shands and general definitions regarding those benefits are described below

- Community health services include activities carried out to improve community health. They
 extend beyond patient care activities and are usually subsidized by the health care
 organization. Examples include community health education, counseling and support
 services, and health care screenings.
- Health professions education includes education provided in clinical settings such as
 internships and programs for physicians, nurses, and allied health professionals. It also
 includes scholarships for health professional education related to providing community health
 improvement services and specialty in-service programs to professionals in the community.
- Research includes studies on health care delivery, unreimbursed studies on therapeutic protocols, evaluation of innovative treatments, and research papers prepared for professional journals
- Donations include funds and in-kind services benefiting the community-at-large

Shands' valuation of unsponsored community benefits at cost for the years ended June 30, 2012 and 2011 is as follows

(in thousands of dollars)	2012	2011
Financial assistance provided Government support applied to charity care	\$ 59,679 (4,270)	\$ 49,790 (11,240)
Net unreimbursed financial assistance	55,409	38,550
Benefits for the broader community Community health services Health professions education Research Donations	885 39,373 8,095 1,635	1,501 30,794 10,577 2,550
Total quantifiable benefits for the broader community	49,988	45,422
Total unsponsored community benefits	\$ 105,397	\$ 83,972

The cost of financial assistance provided was determined by applying Shands' overall cost to charge ratio to total charges foregone Cost of benefits for the broader community represents actual expenses incurred

Shands also plays a leadership role in the communities it serves by providing additional community benefits that have not been quantified. This role includes serving as a state designated Level I trauma center in Gainesville, Florida. Shands also maintains air ambulance services at its trauma center, as well as a regional burn intensive care unit in Gainesville, Florida to help meet the emergency needs of citizens. Other specialty services provided at Shands' facilities include a transplant center of excellence for adult and pediatric patients in several disciplines including heart, lung, liver, kidney, pancreas, and bone morrow. In addition, Shands provides specialized pediatric services including several levels of neonatal intensive care, pediatric intensive care, pediatric open heart and cardiac catheterization.

In addition to the community benefits described above, Shands provides additional benefits to the community through advocacy of community service by employees. Shands employees serve numerous organizations through board representation, in-kind and direct donations, fund-raising, youth sponsorship, and other related activities.

4. Investments and Assets Whose Use is Restricted

The composition of investments and assets whose use is restricted at June 30, 2012 is as follows

(ın thousands of dollars)	Investment Maturities											
		Fair Value		Less Than 1 Year		1–5 Years		6-10 Years		More Than 10 Years		N/A
Commercial paper and money												
market funds	\$	1,149	\$	1,149	\$	-	\$	-	\$	-	\$	-
Florida Treasury Investment Pool (SPIA)		98,421		-		98,421		-		-		-
Fixed income mutual funds		42,314		-		7,780	34	,534		-		-
Florida Global Fixed Income Fund, LLC		59,233		-		-		-		-		59,233
Florida Global Equity Fund, LLC		71,373		-		-		-		-		71,373
Florida Hedged Strategies Fund, LLC		14,043		-		-		-		-		14,043
Collateral on deposit with swap counterparty		31,354		31,354		-		-		-		-
Pantheon USA Fund V, L P		3,940		-		-		-		-		3,940
Other investments		768						135				633
	\$	322,595	\$	32,503	\$	106,201	\$ 34	,669	\$		\$ 1	49,222

The composition of investments and assets whose use is restricted at June 30, 2011 is as follows

(ın thousands of dollars)	Investment Maturities											
		Fair	Less Than 1 Year				More Than					
		Value			1-5 Years		6-10 Years		10 Years			N/A
Commercial paper and money												
market funds	\$	2,460	\$	2,460	\$	-	\$	-	\$	-	\$	-
Florida Treasury Investment Pool (SPIA)		65,416		-		65,416		-		-		-
Fixed income mutual funds		39,963		7,687		-	32	,276		-		-
Florida Global Fixed Income Fund, LLC		73,739		-		-		-		-		73,739
Florida Global Equity Fund, LLC		99,518		-		-		-		-	!	99,518
Florida Hedged Strategies Fund, LLC		20,476		-		-		-		-		20,476
Guaranteed Investment Contract (GIC)		16,433		16,433		-		-		-		-
Collateral on deposit with swap counterparty		8,111		8,111		-		-		-		-
Pantheon USA Fund V, L P		4,117		-		-		-		-		4,117
Other investments		834						98				736
	\$	331,067	\$	34,691	\$	65,416	\$ 32	,374	\$		\$1	98,586

Shands has an investment management agreement with the University of Florida Investment Corporation ("UFICO") to manage a portion of its investments. UFICO was created by the University of Florida Trustees for the purpose of managing assets held by UF and its related corporations. As of June 30, 2012 and 2011, a portion of Shands' investments managed by UFICO are invested in the Florida Global Equity Fund, LLC, Florida Global Fixed Income Fund, LLC, and Florida Hedged Strategies Fund, LLC. Shands can redeem 90% of the limited liability company ("LLC") investments with 45 days' notice, and under certain conditions including liquidity needs, can redeem all of its LLC investments with three business days' notice.

Assets whose use is restricted include amounts internally designated by the Board of Directors and amounts held by trustees and swap counterparty with external restrictions and are comprised of the following at June 30, 2012 and 2011

(ın thousands of dollars)	2012	2011
Internally designated by the Board of Directors for		
Capital improvements and debt service	\$ 136,786	\$ 185,501
Other health programs	5,420	5,745
Other postemployment benefits	2,431	2,473
Held by counterparty under swap agreements	31,354	8,111
Held by trustees under indenture agreements	 17,926	20,295
	193,917	222,125
Less Current portion	(18,186)	(20,311)
Long-term portion	\$ 175,731	\$ 201,814

Investment Risk Factors

There are many factors that can affect the value of investments. Some, such as concentration of credit risk, custodial credit risk, interest rate risk and foreign currency risk may affect both equity and fixed income securities. Equity securities respond to such factors as economic conditions, individual company earnings performance and market liquidity, while fixed income securities may be sensitive to credit risk and changes in interest rates.

Credit Rick

This is the risk that an issuer or other counterparty to an investment will not fulfill its obligations. Shands' investment policy provides guidelines for its fund managers and lists specific allowable investments. The policy provides for the utilization of varying styles of managers so that portfolio diversification is maximized and total portfolio efficiency is enhanced.

The credit risk profile of Shands' investments and assets whose use is restricted as of June 30, 2012 is as follows

(ın thousands of dollars)			Ratings							
		Fair Value		AAA		AA	Af		N/A	
Commercial paper and money										
market funds	\$	1,149	\$	-	\$	-	\$ -	\$	1,149	
Florida Treasury Investment Pool (SPIA)		98,421		-		-	98,421		-	
Fixed income mutual funds		42,314		-		-	-		42,314	
Florida Global Fixed Income Fund, LLC		59,233		-		-	-		59,233	
Florida Global Equity Fund, LLC		71,373		-		-	-		71,373	
Florida Hedged Strategies Fund, LLC		14,043		-		-	-		14,043	
Collateral on deposit with swap counterparty		31,354		-		-	-		31,354	
Pantheon USA Fund V, L P		3,940		-		-	-		3,940	
Other investments	_	768			_				768	
	\$	322,595	\$	_	\$	-	\$ 98,421	\$	224,174	

The credit risk profile of Shands' investments and assets whose use is restricted as of June 30, 2011 is as follows

(ın thousands of dollars)			Ratings								
		Fair Value		AAA		AA	Af		N/A		
Commercial paper and money											
market funds	\$	2,460	\$	-	\$	-	\$ -	\$	2,460		
Florida Treasury Investment Pool (SPIA)		65,416		-		-	65,416		-		
Fixed income mutual funds		39,963		-		-	_		39,963		
Florida Global Fixed Income Fund, LLC		73,739		-		-	-		73,739		
Florida Global Equity Fund, LLC		99,518		-		-	-		99,518		
Florida Hedged Strategies Fund, LLC		20,476		-		-	-		20,476		
Guaranteed Investment Contract (GIC)		16,433		-		-	-		16,433		
Collateral on deposit with swap counterparty		8,111		-		-	-		8,111		
Pantheon USA Fund V, L P		4,117		-		-	_		4,117		
Other investments		834						_	834		
	\$	331,067	\$		\$		\$ 65,416	\$	265,651		

Concentration of Credit Risk

Investments in any one issuer that represent 5% or more of Shands' investment portfolio are required to be disclosed. Investments issued or explicitly guaranteed by the U.S. government and investments in mutual funds, external investment pools, and other pooled investments are excluded from this requirement. As of June 30, 2012 and 2011, Shands did not have any investments that equaled or exceeded this threshold.

Custodial Credit Risk

As of June 30, 2012 and 2011, Shands' investments were not exposed to custodial credit risk since the full amount of investments were insured, collateralized, or registered in Shands' name

Interest Rate Risk

Shands does not have a formal investment policy that limits investment maturities as a means of managing its exposure to fair value losses arising from increasing interest rates. Refer to the distribution of Shands' investment in fixed income securities by maturity as of June 30, 2012 and 2011.

Investment income, net for the years ended June 30, 2012 and 2011 is as follows

(in thousands of dollars)	2012	2011
Dividends, interest and other income	\$ 7,063	\$ 7,314
Realized gains, net	4,361	10,332
Net (decrease) increase in the fair value of investments	(7,735)	19,820
Net increase in the fair value of derivative instruments	7,915	2,942
Loss on partial termination of a derivative instrument	-	(3,357)
Net investment income	\$ 11,604	\$ 37,051

5. Capital Assets

A summary of changes in capital assets during fiscal years 2012 and 2011 is as follows

(In thousands of dollars)	Balance at June 30, 2011		Additions		Disposals and Transfers		Balance at June 30, 2012	
Land	\$	45,578	\$	1,990	\$	-	\$	47,568
Buildings and leasehold improvements		765,122		10,818		6,901		782,841
Equipment		396,849	_	16,057		(9,866)		403,040
Totals at historical cost		1,207,549		28,865		(2,965)		1,233,449
Less Accumulated depreciation for								
Buildings and leasehold improvements		(228,651)		(22, 176)		-		(250,827)
Equipment		(274,615)		(30,175)		4,463		(300,327)
		(503,266)		(52,351)		4,463		(551,154)
Construction-in-progress		28,185	_	42,641	_	(31,952)	_	38,874
Capital assets, net	\$	732,468	\$	19,155	\$	(30,454)	\$	721,169

(in thousands of dollars)	Balance at June 30, 2010		Additions		Disposals and Transfers		_	Balance at June 30, 2011
Land	\$	43,829	\$	1,749	\$	-	\$	45,578
Buildings and leasehold improvements		760,663		4,588		(129)		765,122
Equipment		373,361		36,380	_	(12,892)	_	396,849
Totals at historical cost	1	1,177,853		42,717		(13,021)		1,207,549
Less Accumulated depreciation for								
Buildings and leasehold improvements		(206,011)		(22,748)		108		(228,651)
Equipment		(257,203)		(29,200)		11,788	_	(274,615)
		(463,214)		(51,948)		11,896		(503,266)
Construction-in-progress		9,849		27,211	_	(8,875)	_	28,185
Capital assets, net	\$	724,488	\$	17,980	\$	(10,000)	\$	732,468

Depreciation and amortization expense was approximately \$52,351,000 and \$51,948,000 for the years ended June 30, 2012 and 2011, respectively. Amortization expense on equipment held under capital lease which is included within depreciation and amortization expense in the accompanying consolidated basic statements of revenues, expenses and changes in net assets was approximately \$877,000 for each of the years ended June 30, 2012 and 2011. Interest costs capitalized were approximately \$262,000 and \$638,000 for the years ended June 30, 2012 and 2011, respectively. Construction-in-progress at June 30, 2012 consists primarily of costs incurred for a new electronic medical records system, a medical office building and building renovations. Shands has contracts for the construction and remodeling of facilities and equipment purchases. As of June 30, 2012, estimated cost to complete the installation of the projects was approximately \$38,892,000.

6. Long-Term Debt

Long-term debt is comprised of the following at June 30, 2012 and 2011

(in thousands of dollars)	2012	2011
Health Facilities Revenue Bonds		
Series 1996A, final maturity December 2016	\$ 12,695	\$ 14,805
Series 2007A, final maturity December 2037	100,395	100,395
Series 2007B, final maturity December 2037	35,000	35,000
Series 2008A, final maturity December 2037	75,000	75,000
Series 2008B, final maturity December 2037	50,000	50,000
Series 2008C, final maturity October 2028	61,875	65,625
Series 2008D1, final maturity December 2023	21,715	21,715
Series 2008D2, final maturity December 2030	22,625	22,625
Series 2010A, final maturity July 2025	64,432	67,613
Series 2010B, final maturity December 2015	29,115	 36,935
	472,852	489,713
Bank Note Payable, final maturity March 2019	9,660	-
Installment debt, final maturity November 2013	 4,800	 8,350
	487,312	498,063
Less Net unamortized bond premium	 187	 610
Total long-term debt	487,499	498,673
Less Current portion	 (19,848)	(20,834)
Long-term portion	\$ 467,651	\$ 477,839

Changes in Shands' long-term debt, excluding unamortized discounts or premiums were as follows

(in thousands of dollars)	_	alance at June 30, 2011	Ad	lditions	Red	uctions	Jı	lance at une 30, 2012	Du	mounts e Within ne Year
Health Facilities Revenue Bonds Series 1996A, final maturity December 2016 Series 2007A, final maturity December 2037 Series 2007B, final maturity December 2037 Series 2008A, final maturity December 2037 Series 2008B, final maturity December 2037 Series 2008C, final maturity October 2028 Series 2008D1, final maturity December 2023 Series 2008D2, final maturity December 2030 Series 2010A, final maturity July 2025 Series 2010B, final maturity December 2015 Bank Note Payable, final maturity March 2019	\$	14,805 100,395 35,000 75,000 50,000 65,625 21,715 22,625 67,613 36,935	\$	- - - - - - - - - - -		(2,110) - - - (3,750) - (3,181) (7,820) (340)		12,695 100,395 35,000 75,000 50,000 61,875 21,715 22,625 64,432 29,115 9,660	\$	2,240 - - 3,190 3,750 - - 3,182 2,220 1,340
Installment debt, final maturity November 2013 Total long-term debt	\$	8,350 498,063	\$	10,000		(3,550) 20,751)	\$ 4	4,800 487,312	\$	3,550 19,472
(in thousands of dollars)	_	alance at June 30, 2010	Ad	lditions	Red	uctions	Jı	lance at une 30, 2011	Du	nounts e Within ne Year
Health Facilities Revenue Bonds Series 1996A, final maturity December 2016 Series 2007A, final maturity December 2037 Series 2007B, final maturity December 2037 Series 2008A, final maturity December 2037 Series 2008B, final maturity December 2037 Series 2008C, final maturity December 2028 Series 2008D1, final maturity December 2023 Series 2008D2, final maturity December 2030 Series 2010A, final maturity July 2025 Series 2010B, final maturity December 2015	_	June 30,	A d		\$	(1,985)	Ju \$	une 30,	Du	e Within
Health Facilities Revenue Bonds Series 1996A, final maturity December 2016 Series 2007A, final maturity December 2037 Series 2007B, final maturity December 2037 Series 2008A, final maturity December 2037 Series 2008B, final maturity December 2037 Series 2008C, final maturity October 2028 Series 2008D1, final maturity December 2023 Series 2008D2, final maturity December 2030 Series 2010A, final maturity July 2025	,	16,790 100,395 35,000 75,000 50,000 69,375 21,715 22,625 70,000		8.850	\$	(1,985) - - - (3,750) - (2,387)	Ju \$	14,805 100,395 35,000 75,000 50,000 65,625 21,715 22,625 67,613	Du Or	2,110 - - - 3,750 - 3,182

The current portion of net unamortized bond premium was approximately \$376,000 and \$422,000 as of June 30, 2012 and 2011, respectively

Maturities of long-term debt including corresponding interest, over the next five years and in fiveyear increments thereafter are as follows

(in thousands of dollars)

Year Ending June 30	 bt Service Principal	De	ebt Service Interest
2013	\$ 19,472	\$	8,814
2014	20,482		8,263
2015	19,822		7,551
2016	20,457		6,807
2017	15,342		6,300
2018-2022	63,604		27,146
2023-2027	71,773		19,219
2028-2032	96,780		11,025
2033-2037	126,890		4,480
2038	 32,690		112
	\$ 487,312	\$	99,717

Shands has entered into a Master Trust Indenture with U.S. Bank, National Association ("U.S. Bank") which serves as the primary financing document for Shands and its subsidiaries, excluding ElderCare, joint ventures and the Foundation. During 2007, Shands amended the Master Trust Indenture and pledged a security interest in its gross revenues on Shands' debt obligations. The Master Trust Indenture provides for specific restrictive covenants, including a debt service coverage requirement. Shands was in compliance with all such restrictive covenants as of June 30, 2012 and 2011.

Series 1996A Health Facilities Revenue Bonds

In 1996, the Alachua County Health Facilities Authority issued the Series 1996A Health Facilities Revenue Bonds ("Series 1996A Bonds") on behalf of Shands. The proceeds of the Series 1996A Bonds were used to finance capital improvement projects and pay related issuance costs.

The Series 1996A Bonds are fixed rate bonds, which are collateralized by the unconditional and irrevocable guarantee of the Municipal Bond Investors Assurance Corporation and have a termination date which is coterminous with the Series 1996A Bonds. The interest rate on the Series 1996A Bonds is 6 25% and is payable semiannually. The Series 1996A Bonds are covered under the Master Trust Indenture with U.S. Bank

Series 2007A Health Facilities Revenue Bonds and Series 2007B Health Facilities Revenue Refunding Bonds

In 2007, the Alachua County Health Facilities Authority issued the Series 2007A Health Facilities Revenue Bonds ("Series 2007A Bonds") and the Series 2007B Health Facilities Revenue Bonds ("Series 2007B Bonds") on behalf of Shands The proceeds of the Series 2007A Bonds were used to finance capital improvement projects and pay costs associated with the issuance of the Series 2007A Bonds The proceeds of the Series 2007B Bonds were used to partially refund outstanding principal of the Series 1996A Health Facilities Revenue Bonds and to pay costs associated with the issuance of the Series 2007B Bonds

The Series 2007A Bonds and Series 2007B Bonds are variable index rate bonds. The Series 2007A Bonds and Series 2007B Bonds maturing on or after June 1, 2017 are redeemable at Shands' option at par value. The interest rate on the bonds is reset quarterly and the interest rate was 1 18% and 1 04% at June 30, 2012 and 2011, respectively. The Series 2007A Bonds and Series 2007B Bonds are covered under the Master Trust Indenture with U.S. Bank

Series 2008A and 2008B Health Facilities Revenue Bonds

In 2008, the Alachua County Health Facilities Authority issued the Series 2008A Health Facilities Revenue Bonds ("Series 2008A Bonds") and the Series 2008B Health Facilities Revenue Bonds ("Series 2008B Bonds") on behalf of Shands The proceeds of the Series 2008A Bonds and Series 2008B Bonds were used to retire the Series 2007C Bonds and Series 2007D Bonds

The Series 2008A Bonds and Series 2008B Bonds are variable rate bonds issued in the Unit Pricing Mode Interest periods range from 1 to 270 days. The weighted average interest rate on the Series 2008A Bonds and the Series 2008B Bonds was 0 25% and 0 22% at June 30, 2012 and 2011, respectively. The Series 2008A Bonds and Series 2008B Bonds are backed by a bank letter of credit for approximately \$126,798,000 that expires in January 2014. There were no amounts outstanding under this letter of credit at June 30, 2012 and 2011. The Series 2008A Bonds and Series 2008B Bonds are redeemable at the option of Shands at par value plus accrued interest at any interest payment date. The Series 2008A Bonds and Series 2008B Bonds are covered under the Master Trust Indenture with U.S. Bank.

Series 2008C Health Facilities Revenue Bonds

In 2008, the Alachua County Health Facilities Authority issued the Series 2008C Health Facilities Revenue Bonds ("Series 2008C Bonds") on behalf of Shands The proceeds of the Series 2008C Bonds were used to refund the Series 1996B Bonds and pay related costs of issuance

The Series 2008C Bonds are variable rate bonds based upon 65% of the London Interbank Offered Rate ("LIBOR") plus 1 30%. The interest rate on the Series 2008C Bonds was 1 46% and 1 42% at June 30, 2012 and 2011, respectively. The Series 2008C Bonds are covered under the Master Trust Indenture with U.S. Bank

Series 2008D1 and 2008D2 Health Facilities Revenue Bonds

In 2008, the Alachua County Health Facilities Authority issued the Series 2008D1 Health Facilities Revenue Bonds ("Series 2008D1 Bonds") and the Series 2008D2 Health Facilities Revenue Bonds ("Series 2008D2 Bonds") on behalf of Shands The proceeds of the Series 2008D1 Bonds and Series 2008D2 Bonds were used to refund a portion of the Series 2007A Bonds

The Series 2008D1 Bonds and Series 2008D2 Bonds are unenhanced fixed rate bonds. Interest rates on the Series 2008D1 Bonds and Series 2008D2 Bonds range from 6 25% to 6 75% and are payable semiannually. The Series 2008D1 Bonds and Series 2008D2 Bonds maturing on or after December 1, 2018 are redeemable at Shands' option at par value. The Series 2008D1 Bonds and Series 2008D2 Bonds are covered under the Master Trust Indenture with U.S. Bank

Series 2010A Health Facilities Revenue Bonds

In 2010, the Alachua County Health Facilities Authority issued the Series 2010A Health Facilities Revenue Bonds ("Series 2010A Bonds") on behalf of Shands The proceeds of the Series 2010A Bonds were used to finance capital improvement projects and pay related costs of issuance

The Series 2010A Bonds are variable rate bonds based upon 65% of LIBOR plus 1 105%. The interest rate on the Series 2010A Bonds was 1 29% at June 30, 2012 and 2011. The Series 2010A Bonds are covered under the Master Trust Indenture with U.S. Bank.

Series 2010B Health Facilities Revenue Bonds

In 2010, the Alachua County Health Facilities Authority issued the Series 2010B Health Facilities Revenue Bonds ("Series 2010B Bonds") on behalf of Shands The proceeds of the Series 2010B Bonds were used to defease the Series 1992R Bonds

The Series 2010B Bonds are unenhanced fixed rate bonds. Interest rates on the Series 2010B Bonds range from 3 00% to 5 00% and are payable semiannually. The Series 2010B Bonds are covered under the Master Trust Indenture with U.S. Bank.

Bank Note

In 2012, PNC Bank issued a seven year taxable loan to Shands to finance a property purchase, renovations, and equipment
Interest rate on the loan is fixed at 2 08%
Principal and interest payments are payable monthly commencing April 2012 with a final maturity in March 2019

Cash paid for interest, net of amounts capitalized, was approximately \$16,419,000 and \$17,462,000 for the years ended June 30, 2012 and 2011, respectively

7. Interest Rate Swaps

On June 30, 2012 and 2011, Shands had the following derivative instruments outstanding

(ın thou:	sands of dollar	rs)	Shai	ıds	Co	unterparty				2012	2011
ltem	Туре	Objective	Notic Amo			Notional Amount	Effective Date	Maturity Date	Terms	Fair Value	Fair Value
1996B	Fixed rate payer interest rate swap	Hedge of changes in cash flows on the Series 1996B Revenue Bonds refinanced in 2008	\$ 75	000	\$	75 000	7/03/2003	12/01/2026	Pay fixed rate of 3 175% Receive 67% of one month LIBOR	\$ (13 949)	\$ (6 580)
1996B	Fixed rate receiver interest rate swap	Hedge of changes in cash flows on the 1996B fixed rate payer interest rate swap	\$ 75	000	\$	75 000	6/03/2009	12/01/2026	Pay SIFMA Municipal Swap Index rate Receive fixed rate of 3 40%	\$ 12 867	\$ 4 678
2007A	Fixed rate payer interest rate swap	Hedge of changes in cash flows on the Series 2007A Revenue Bonds	\$ 100	395	\$	100 395	3/30/2007	12/01/2037	Pay fixed rate of 4 349% Receive 67% of three month LIBOR plus 87 basis points	\$ (33 275)	\$ (13 140)
2007B	Fixed rate payer interest rate swap	Hedge of changes in cash flows on the Series 2007B Revenue Bonds	\$ 35	000	\$	35 000	3/30/2007	12/01/2037	Pay fixed rate of 4 349% Receive 67% of three month LIBOR plus 87 basis points	\$ (10 837)	\$ (4 459)
2007A	Total return interest rate swap	Hedge of changes in cash flows on the Series 2007A Revenue Bonds	\$ 27	950	\$	40 000	1/27/2011	12/01/2016	Pay SIFMA Municipal Swap Index rate plus 100 basis points Receive 67% of three month LIBOR plus 87 basis points	\$ 4 316	\$ 680
2007B	Total return interest rate swap	Hedge of changes in cash flows on the Series 2007B Revenue Bonds	\$ 24	456	\$	35 000	1/27/2011	12/01/2016	Pay SIFMA Municipal Swap Index rate plus 100 basis points Receive 67% of three month LIBOR plus 87 basis points	\$ 4 382	\$ 923
2008A	Fixed rate payer interest rate swap	Hedge of changes in cash flows on a portion of the Series 2008A Revenue Bonds	\$ 50	000	\$	50 000	11/07/2007	12/01/2037	Pay fixed rate of 3 538% Receive 67% of one month LIBOR	\$ (17 456)	\$ (7 053)
2008C	Fixed rate payer interest rate swap	Hedge of changes in cash flows on the Series 2008C Revenue Bonds	\$ 61	875	\$	61 875	11/05/2008	10/02/2028	Pay fixed rate of 4 18% Receive 65% of one month LIBOR plus 130 basis points	\$ (8 493)	\$ (4 278)
										\$ (62 445)	\$ (29 229)

During the years ended June 30, 2012 and 2011, the fixed rate 2007A, 2007B, 2008A and 2008C interest rate swaps qualified for hedge accounting under GASB No 53. At June 30, 2012, approximately \$21,565,000 and \$84,010,000 related to the fair value of interest rate swaps is recorded in other assets and other liabilities, respectively, and at June 30, 2011, approximately \$6,281,000 and \$35,510,000 related to the fair value of interest rate swaps is recorded in other assets and other liabilities, respectively, in the accompanying consolidated basic statements of net assets

The fair values of the fixed rate payer and fixed rate receiver interest rate swaps are estimated using the zero-coupon discounting method. This method calculates the future payments required by the swap, assuming that the current forward rates implied by the yield curve are the market's best estimate of future spot interest rates. These payments are then discounted using the spot rates implied by the current yield curve for a hypothetical zero-coupon rate bond due on the date of each future net settlement payment on the swaps. The fair values of the 2007A and 2007B total return swaps are estimated using a forecast of expected discounted cash flows assuming that the forward rates would be similar to the rates for a healthcare credit rating similar to Shands

Credit Risk

Shands has sought to limit its counterparty risk by contracting only with highly rated entities. As of June 30, 2012, the credit ratings for the counterparty for the swap agreements with the exception of the 2008C swap agreement were Baa2/A-, and the credit ratings for the counterparty of the 2008C interest rate swap agreement was Baa2/BBB. As of June 30, 2011, the credit ratings for the counterparty for the swap agreements with the exception of the 2008C swap agreement were A2/A, and the credit ratings for the counterparty of the 2008C interest rate swap agreement was A3/A. The counterparty for all of the swap agreements with the exception of the 2008C swap agreement may be required to post collateral should it fail to meet certain minimum credit ratings.

Interest Rate Risk

Shands is not exposed to interest rate risk on all of its fixed rate payer interest rate swap agreements as they are structured in a receive variable, pay fixed rate mode. The 1996B fixed receiver swap is structured in a receive fixed, pay variable rate mode. However, the 1996B fixed receiver swap hedges the cash flows associated with the 1996B fixed payer swap. The 2007A and 2007B total return swaps are structured in a receive variable, pay variable rate mode and hedge the cash flows associated with the Series 2007A Bonds and Series 2007B Bonds.

Basis Risk

Shands is exposed to basis risk on its 2008A fixed rate payer swap agreement because the variable-rate payments received by Shands on the hedging derivative instrument is based on a rate or index other than the interest rates that Shands pays on its hedged variable rate debt, which is remarketed in varying amounts and at various dates. As of June 30, 2012 and 2011, the weighted variable interest rate on Shands hedged variable rate debt is 0.25% and 0.18%, respectively, while the swap index is 67% of one month LIBOR, or 0.16% and 0.12%, respectively

Termination Risk

The interest rate swap agreements use the International Swap Dealers Association Master Agreement, which includes standard termination events provisions, such as failure to pay and bankruptcy

Commitments

Several of Shands' interest rate swap agreements require collateral to be posted if the fair value of the interest rate swap is negative and meets certain thresholds. The threshold amount depends on Shands unenhanced credit rating as determined by Standard & Poor's and Moody's Investor. Services. Collateral in the amount of approximately \$31,354,000 and \$8,111,000 was required to be posted as of June 30, 2012 and 2011, respectively.

Swap Termination

Shands terminated a portion of the 2008A fixed payer interest rate swap in January 2011. The loss recognized on the swap termination was approximately \$3,357,000 which is included within net investment income in the accompanying consolidated basic statements of revenues, expenses and changes in net assets for the year ended June 30, 2011.

8. Retirement Benefit Plans

Defined Contribution Plans

Shands sponsors the Shands HealthCare Matched Savings Plan, which is a defined contribution plan that covers eligible employees of Shands—Under the provisions of the plan, employees' eligible contributions are matched by Shands at established rates—Contributions to the defined contribution plan by Shands were approximately \$9,904,000 and \$5,640,000 for the years ended June 30, 2012 and 2011, respectively

Defined Benefit Pension Plan

Shands sponsors the Shands HealthCare Pension Plan (the "Plan") which is a defined benefit pension plan that covers eligible employees of Shands

During April 2010, Shands' Board of Directors approved an amendment to the Plan Effective July 1, 2011, Shands employees who were vested as of July 1, 2002 will begin to participate in the Retirement Growth Account (account-based benefit) and will no longer accrue traditional plan benefits Employees who were not vested as of July 1, 2002 will continue to participate in the Retirement Growth Account (account-based benefit) Effective July 1, 2010, new employees hired by Shands will participate in the Shands HealthCare Matched Savings defined contribution plan

Contribution Requirements and Contributions Made

The annual required contribution ("ARC") for the current year was determined as part of the actuarial valuation using the projected unit credit actuarial cost method. The Plan's funding policy provides for actuarially determined periodic contributions so that sufficient assets will be available to pay benefits when due. All contributions to the Plan are made by the employer and are intended to fund both the actuarially determined costs, as well as the Plan's operating costs. Shands' practice is to make sufficient annual contributions in accordance with the actuarial funding requirements. Annual required contributions to the Plan for fiscal years 2012 and 2011 totaled approximately \$19,633,000 and \$26,271,000, respectively. The contributions represent approximately 5 44% and 6 63% of current covered payroll for fiscal years 2012 and 2011, respectively. Total pension expense for the years ended June 30, 2012 and 2011 totaled approximately \$27,484,000 and \$30,201,000, respectively. As of June 30, 2012 and 2011, Shands has a pension asset of approximately \$95,237,000 and \$82,021,000, respectively. Pension expense is allocated to Shands' facilities based on valuation of payroll.

Information regarding payroll and participant data used in the calculation of the current-year actuarial information is as follows

	2012	2011
Covered payroll for the calculation of the actuarial information	\$ 361,028,469	\$ 396,053,964
Participant data as of July 1, 2011 (date of most recent valuation)		
Active	7,035	7,688
Retired	1,656	1,472
Terminated vested	3,902	3,812
	12,593	12,972

The more significant actuarial assumptions utilized in the most recent actuarial valuation (April 1, 2012) for computing the annual required contributions for the Plan are as follows

Assumed rate of return on investments	7 25% per year (net of expenses)
Mortality basis	2012 PPA separate static annuitant and nonannuitant mortality tables
Amortization method	Level dollar closed
Remaining amortization period	8 years
Asset valuation method	Market value smoothed over 5 years
Termination	Graduated rates from 20 to 50 are as follows

Table of Select Withdrawal Rates (Cash Balance Plan Benefits)

Withdrawal (Based on Years of Service)

Age	<2	2–2.99	3 or more	
20	38 5%	21 1%	21 0%	
25	35 0%	20 0%	18 5%	
30	31 8%	18 6%	17 0%	
35	29 3%	17 1%	15 5%	
40	27 4%	15 3%	14 0%	
45	25 7%	13 8%	12 0%	
50	24 2%	12 3%	10 0%	

Table of Select and Ultimate Withdrawal Rates (Traditional Plan Benefits)

	Table of Select and Ultimate Withdrawal Rates (Traditional Plan Benefits)				
Age	Percentage				
20	16 7%				
25	16 7%				
30	13 3%				
35	6 4%				
40	5 9%				
45	4 3%				
50	3 6%				
00	3 0 70				

Table of Salar	y Increases
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rable of calary moreages			
Age	Percentage	_	
20	3 65%		
25	3 95%		
30	3 65%		
35	3 45%		
40	3 25%		
45	3 15%		
50+	3 05%		

Retirement Rates

Attained Age	Cash Balance Benefits	Traditional Benefits
50	8 5%	1 5%
51	10 0%	1 7%
52	10 1%	1 9%
53	10 2%	2 0%
54	10 3%	2 0%
55	10 4%	3 5%
56	10 5%	3 5%
57	10 6%	3 5%
58	10 7%	3 5%
59	10 8%	5 0%
60	10 9%	5 0%
61	11 0%	20 0%
62	12 0%	35 0%
63	14 0%	25 0%
64	16 0%	25 0%
65	17 0%	35 0%
66	18 0%	30 0%
67	19 0%	50 0%
68	20 0%	50 0%
69	20 0%	50 0%
70+	100 0%	100 0%

Funding Status and Progress

Shands' actuarial accrued liability ("AAL") as of April 1, 2012 was approximately \$677,705,000. The actuarial value of the Plan assets available to pay these benefits at April 1, 2012 was approximately \$658,953,000, leaving a deficit as compared to the AAL of approximately \$18,752,000 at April 1, 2012. The AAL and the actuarial value of Plan net assets for the current year are based upon the April 1, 2012 actuarial valuation. The schedules of Plan funding progress, presented as required supplementary information ("RSI") following the notes to the consolidated basic financial statements, present multiyear trend information about whether the actuarial values of Plan assets are increasing or decreasing over time relative to the AAL for benefits

The funded status of the Plan as of April 1, 2012, the most recent actuarial valuation date, is as follows

Actuarial Valuation Date	Actuarial Value of Assets (a)	AAL (Projected Unit Credit) (b)	Unfunded AAL ("UAAL") (b-a)	Funded Ratio (a/b)	Covered Payroll (c)	UAAL as a Percentage of Covered Payroll (b-a)/(c)
Aprıl 1, 2012	\$ 658,952,840	\$ 677,704,474	\$ 18,751,634	97 23%	\$ 361,028,469	5 19%

The present value of accumulated plan benefits is computed to measure the funds required as of the valuation date to provide in full the benefits earned to date by all Plan participants. As of April 1, 2012, the present value of accumulated Plan benefits was approximately \$673,529,000.

Trend Information

This information gives an indication of the progress made in accumulating sufficient assets to pay benefits when due. The trend information for each of the last three fiscal years is as follows

	April 1, 2012	April 1, 2011	July 1, 2010 (Unaudited)
Net assets available for benefits as a percentage of the AAL	97 23%	99 45%	95 74%
Unfunded actuarial accrued liability as a percentage of covered payroll	5 19%	0 88%	5 97%
Annual required contributions as a percentage of covered payroll	5 44%	6 63%	5 67%

Showing unfunded pension benefit obligation as a percentage of annual covered payroll approximately adjusts for the effects of inflation for analysis purposes. For the three fiscal years presented, contributions to the Plan were made in accordance with actuarially determined requirements.

A summary of annual pension cost, contribution information, and the change in the net pension obligation for the last three fiscal years is as follows

	2012	2011	2010 (Unaudited)
Annual required contribution Interest on net pension obligation Adjustment to annual required contribution	\$ 19,632,635 (6,151,568) 14,003,186	\$ 26,271,142 (3,210,346) 7,140,114	\$ 23,308,692 (3,098,257) 3,414,877
Annual pension cost	27,484,253	30,200,910	23,625,312
Contributions made by Shands	(40,700,000)	(70,798,000)	(27,494,500)
Decrease in net pension obligation	(13,215,747)	(40,597,090)	(3,869,188)
Net pension (asset) obligation Beginning of year	(82,020,908)	(41,423,818)	(37,554,630)
End of year	\$ (95,236,655)	\$ (82,020,908)	\$ (41,423,818)
Percentage of annual pension cost contributed	148 1%	234 4%	116 4%

The net pension asset of approximately \$95,237,000 and \$82,021,000 at June 30, 2012 and 2011, respectively, is included within other assets in the accompanying consolidated basic statements of net assets

A summary of Plan assets as of June 30, 2012 and 2011 and of the changes in Plan assets for fiscal years 2012 and 2011 is as follows

(in thousands of dollars)	2012		2011
Statements of Plan Net Assets			
Cash and short-term investments	\$ 4,973	\$	2,404
Investments at fair value			
Domestic equity funds and securities	196,738		197,710
International equity funds and securities	186,142		192,593
Fixed income funds	159,447		157,332
High yield fund	52,608		50,884
Private equity	31,593		27,667
Total investments	626,528	_	626,186
Net assets held in trust for pension benefits	\$ 631,501	\$	628,590

(ın thousands of dollars)		2012	2011
Statements of Changes in Plan Net Assets			
Beginning investment value of account	\$	628,590	\$ 467,433
Receipts Employer contributions Realized and unrealized gains (losses), net Interest and dividends Total receipts		40,700 (15,571) 9,804 34,933	70,798 105,385 14,504 190,687
Disbursements Benefit payments Investment management and administrative fees Total disbursements	_	28,066 3,956 32,022	25,243 4,287 29,530
Ending investment value of account	\$	631,501	\$ 628,590

9. Other Postemployment Benefits

In addition to providing pension benefits, Shands provides certain health care benefits for approximately 1,139 eligible active and retired employees through the Shands HealthCare Health Plan ("Health Benefit Plan") Many of Shands' employees may become eligible for those benefits if they reach retirement age while working for Shands

The GASB requires state and local governmental employers to account for and report the annual cost of other postemployment benefits ("OPEB") and the outstanding obligations and commitments related to OPEB in essentially the same manner as they currently do for pensions. Annual OPEB cost will be based on actuarially determined amounts that, if paid on an ongoing basis, generally would provide sufficient resources to pay benefits as they become due. The GASB's provisions may be applied prospectively and do not require governments to fund their OPEB plans. The actuarially determined cost for providing benefits to retirees and current employees during fiscal years 2012 and 2011 was approximately \$306,000 and \$323,000, respectively. This includes approximately (\$68,000) and \$146,000 of actual (contributions) payments and approximately \$374,000 and \$177,000 of additional expense recorded on the accrual basis during fiscal years 2012 and 2011, respectively

Funding Policy

The GASB does not require funding of the OPEB expense. The ARC is based on projected payas-you-go financing requirements, with an additional amount required to be recognized and accumulated as the net OPEB obligation. For fiscal years 2012 and 2011, Shands contributed approximately (\$68,000) and \$146,000, respectively, to the plan, which is net of retiree contributions. Retiree contributions for fiscal years 2012 and 2011 were approximately \$284,000 and \$263,000, respectively, according to the following table.

Average annual retiree contributions (pre and post Medicare)		20)12			20)11	
	F	Retiree		Spouse/ Family	F	Retiree		pouse/ Family
Preferred Plan	\$	8,868	\$	11,280	\$	8,606	\$	10,840
Basic Plan		6,410		8,015		6,221		7,695
Limited Plan		4,980		6,115		4,833		5,865

Annual

OPEB Cost and Net OPEB Obligation – Shands' annual OPEB cost is calculated based on its ARC, an amount actuarially determined in accordance with the GASB parameters. The ARC represents a level of funding that, if paid on an ongoing basis, is projected to cover normal cost each year and amortize any unfunded actuarial liabilities (or funding excess) over an 8 year period. The components of Shands' annual OPEB cost for the year, the amount actually contributed to the plan, and changes in Shands' net OPEB obligation as of June 30, 2012 and 2011 are as follows.

		2012		2011
Annual required contribution Interest on net OPEB obligation Adjustment to annual required contribution	\$	451,258 65,469 (211,101)	\$	447,254 63,100 (187,846)
Annual OPEB cost		305,626		322,508
Contributions made		67,709		(146,133)
Increase in net OPEB obligation		373,335		176,375
Net OPEB obligation Beginning of year End of year		1,378,289 1,751,624	_	1,201,914 1,378,289
Lind of your	Ψ	1,701,027	Ψ	1,070,200

Shands' annual OPEB cost, the percentage of annual OPEB cost contributed to the plan, and the net OPEB obligation for the last three fiscal years was as follows

Fiscal Year Ended	Annual OPEB Cost	% of Annual OPEB Cost Contributed	Net OPEB Obligation
June 30, 2012	\$ 305,626	22 2%	\$ 1,751,624
June 30, 2011	322,508	45 3%	1,378,289
June 30, 2010 (unaudited)	437,721	-4 4%	1,201,914

Funded Status and Funding Progress

As discussed above, the GASB does not require, and Shands has not funded, the AAL As of April 1, 2012, the unfunded actuarial accrued liability ("UAAL") for benefits was approximately \$2,072,000 The covered payroll (annual payroll of active employees covered by the plan) was approximately \$385,138,000 and the ratio of the UAAL to the covered payroll was 0.54%

Actuarial valuations of an ongoing plan involve estimates of the value of reported amounts and assumptions about the probability of occurrence of events far into the future. Examples include assumptions about future employment, mortality, and the health care cost trend. Amounts determined regarding the funded status of the plan and the annual required contributions of the employer are subject to continual revision as actual results are compared with past expectations and new estimates are made about the future. The schedule of funding progress, presented as required supplementary information following the notes to the consolidated basic financial statements, presents multiyear trend information about whether the actuarial value of plan assets is increasing or decreasing over time relative to the actuarial accrued liabilities for benefits

Actuarial Methods and Assumptions

Projections of benefits for financial reporting purposes are based on the substantive plan (the plan as understood by the employer and the plan members) and include the types of benefits provided at the time of each valuation and the historical pattern of sharing of benefit costs between the employer and plan members to that point. The actuarial methods and assumptions used include techniques that are designed to reduce the effects of short-term volatility in actuarial accrued liabilities and the actuarial value of assets, consistent with the long-term perspective of the calculations

In the April 1, 2012 actuarial valuation, the projected unit credit method was used. The actuarial assumptions included a 4 30% discount rate, representing an estimate of the discount rate for an unfunded plan. The UAAL is being amortized as a level dollar base for a closed 8 year period.

The significant actuarial assumptions utilized in the most recent actuarial analysis are as follows

Discount rate 4 30% per year

Retiree contribution increases Retiree contribution increases are calculated so that

the employer claim payments are capped at a 3%

increase each year

increase in employer claims payments

Medical Annual Rates of Increase

Initial Trend Rate 7 50%
Ultimate Trend Rate 4 50%
Year that the rate reaches the ultimate trend rate 2028

10. Commitments and Contingencies

Lease Agreements

Shands entered into a contractual agreement as of July 1, 1980 with the State Board of Education of the State of Florida (the "State Board of Education"), as subsequently restated and amended, which provides for the use of hospital facilities (buildings and improvements) of the patient care and clinical education unit of the J. Hillis Miller Health Center at the University of Florida (the "Health Center") through December 31, 2057, with renewal provisions. The contractual agreement also provided for the transfer to Shands of all other assets and liabilities arising from the operation of the Shands UF hospital facilities prior to July 1, 1980. At termination of the contractual agreement, the net assets of the Shands UF hospital facility revert to the State Board of Education. Legal title to all buildings and improvements transferred to Shands remains with the State of Florida during the term of the contractual agreement. The contractual agreement provides for a 12-month grace period for any event of default, other than the bankruptcy of Shands. In addition, the contractual agreement limits the right of the State Board of Education to terminate the contractual agreement solely to the circumstance when Shands declares bankruptcy and, in such event, requires net revenue derived from the operation of the hospital facilities to continue to be applied to the payment of Shands' debts.

Under the terms of the contractual agreement, Shands is obligated to manage, operate, maintain, and insure the hospital facilities in support of the programs of the Health Center, which include the College of Medicine, and further agrees to contract with the State Board of Education for the provision of these programs

In May 2010, Shands entered into an agreement to sell a 60% controlling interest in its three rural hospitals, Shands at Lake Shore, Shands Starke, and Shands Live Oak to HMA. The closing date of the sale was July 1, 2010. The lease agreement between Shands at Lake Shore and the Lake Shore Hospital Authority was amended effective July 1, 2010. Shands at Lake Shore assigned all of its interest in the lease to HMA Lakeshore, Inc. Under the terms of the amended lease agreement, Shands provides a 40% guaranty and HMA provides a 60% guaranty on the lease payments. Currently the monthly lease payments are \$41,233 and are subject to increases annually based upon the change in the Consumer Price Index. The lease expires June 30, 2040.

The following is a schedule, by year, of future minimum lease payments under capital and noncancelable operating leases together with the present value of net minimum capital lease payments as of June 30, 2012

(in thousands of dollars) Years Ending	Capital Lease	perating Leases
2013	\$ 940	\$ 4,908
2014	549	4,654
2015	-	3,424
2016	-	3,467
2017	-	2,868
Thereafter	 	 10,950
Total minimum lease payments	1,489	\$ 30,271
Less Amount representing interest	 (43)	
Present value of net minimum lease payments	\$ 1,446	

Operating lease expense for the rental of property and equipment for the years ended June 30, 2012 and 2011 was approximately \$5,632,000 and \$5,963,000, respectively At June 30, 2012 and 2011, gross assets under capital leases included in capital assets was \$3,506,000 Accumulated amortization on capital leases as of June 30, 2012 and 2011 was approximately \$2,118,000 and \$1,242,000, respectively

Commitments

Shands has contracts for the construction and remodeling of facilities and equipment purchases As of June 30, 2012, the remaining commitment relating to these contracts was approximately \$38,892,000 (Note 5)

Shands has contracts for the maintenance of computer application software for its core operation systems. As of June 30, 2012, the remaining commitment relating to these contracts was approximately \$11,770,000.

Professional Liabilities

Shands participates with other health care providers in the University of Florida J. Hillis Miller Health Center Self-Insurance Program ("UFSIP"). UFSIP is an operating unit of the Board of Governors of the State of Florida ("FBOG"). UFSIP provides occurrence-based coverage to Shands. Insurance in excess of the coverage provided by UFSIP is provided by the University of Florida Healthcare Education Insurance Company ("UFHEIC"). UFHEIC is wholly-owned by FBOG. UFHEIC provides coverage to Shands on a claims reported basis. UFHEIC obtains reinsurance for a substantial portion of the insurance coverage that it provides to the participants in its insurance program. The policies between UFSIP and UFHEIC and Shands are not retrospectively rated. The costs incurred by Shands related to these policies are expensed in the period that coverage is provided.

Shands could be subject to malpractice claims in excess of insurance coverage through UFSIP or UFHEIC, however, the estimated potential loss, if any, cannot be estimated Management of Shands is not aware of any potential uninsured losses that could materially affect the financial position of Shands

Effective July 1, 2011, Shands was granted sovereign immunity (Note 2)

Health Insurance

Shands has a self-insurance plan for health and medical coverage for its employees. Amounts contributed by Shands and its employees to the plan are determined by the level of benefits coverage selected by each employee. Expense related to the self-insured health and medical plan for the years ended June 30, 2012 and 2011 was approximately \$45,128,000 and \$39,652,000, respectively. The estimated claims incurred, payments on claims and the balance of the reserve for health insurance claims for the years ended June 30, 2012 and 2011 were as follows.

(in thousands of dollars)	2012	2011
Amount of claims liabilities at the beginning of the year Incurred claims Payments on claims attributable to events of both	\$ 7,593 48,487	\$ 12,502 45,137
the current fiscal year and prior fiscal years	 (42,832)	(50,046)
Amount of claims liabilities at the end of the year	\$ 13,248	\$ 7,593

Workers' Compensation Insurance

Shands is self-insured for workers' compensation up to \$600,000 and \$500,000 per occurrence for the years ended June 30, 2012 and 2011, respectively. Shands has purchased excess coverage from a commercial carrier up to the amount allowed by Florida Statutes. Total workers' compensation expenses for the years ended June 30, 2012 and 2011 were approximately \$595,000 and \$543,000, respectively

Litigation

Shands is involved in litigation arising in the normal course of business. After consultation with legal counsel, management believes that these matters will be resolved without material adverse effect on Shands' future financial position or results of operations.

Other Industry Risks

The health care industry is subject to numerous laws and regulations of federal, state, and local governments. Compliance with these laws and regulations can be subject to government review and interpretation, as well as regulatory actions unknown and unasserted at this time. Recently, federal government activity has increased with respect to investigations and allegations concerning possible violations by health care providers of regulations, which could result in the imposition of significant fines and penalties, as well as significant repayments of previously billed and collected revenue from patient services. There have also been numerous lawsuits filed against nonprofit hospitals related to charity care. These lawsuits allege various hospital practices related to the uninsured, including, among other things, charging uninsured patients more than what insurers would pay for the same services, rapidly rising prices, and aggressive collection policies. Management believes that Shands is in compliance with current laws and regulations and that Shands' ultimate exposure from any such matters would not have a material effect on Shands' consolidated basic financial statements.

11. Transactions with Related Parties

Shands has various agreements for services provided by UF for support of the educational, clinical, and research activities of the College of Medicine, maintenance, security, utilities, and various services. Expenses related to these agreements were approximately \$142,884,000 and \$142,088,000 for the years ended June 30, 2012 and 2011, respectively, of which approximately \$40,744,000 and \$37,675,000 for the years ended June 30, 2012 and 2011, respectively, are transfers and expenditures in support of the University of Florida and its medical programs included under this caption in the accompanying consolidated basic statements of revenues, expenses and changes in net assets. At June 30, 2012 and 2011, approximately \$9,387,000 and \$5,566,000, respectively, was owed to UF under these agreements and is included in accounts payable and accrued expenses in the accompanying consolidated basic statements of net assets.

Shands provides contracted services at cost to UF for support of the clinical and research activities of the College of Medicine, maintenance, utilities, telephone communication, and various other services. The amount credited against expenses for these contracted services was approximately \$60,945,000 and \$56,653,000 for the years ended June 30, 2012 and 2011, respectively. At June 30, 2012 and 2011, approximately \$4,499,000 and \$2,068,000, respectively, was owed to Shands under these agreements and is included in prepaid expenses and other current assets in the accompanying consolidated basic statements of net assets

Shands has an agreement with UF to provide billing services for emergency room physician fees UF remits the collections to Shands on a monthly basis less an administrative fee. The amount collected by UF on Shands' behalf less the administrative fee for the years ended June 30, 2012 and 2011 was approximately \$7,104,000 and \$7,673,000, respectively. At June 30, 2012 and 2011, approximately \$531,000 and \$517,000, respectively, was owed to Shands and is included in prepaid expenses and other current assets in the accompanying consolidated basic statements of net assets

During 2010, Shands entered into an investment management agreement with UFICO to manage a portion of its investments. UFICO was created by the UF Trustees for the purpose of managing assets held by UF and its related corporations. As of June 30, 2012 and 2011, the fair value of investments managed by UFICO on Shands' behalf was approximately \$144,649,000 and \$193,733,000, respectively. Investment management fees of approximately \$206,000 and \$228,000 were incurred for the years ended June 30, 2012 and 2011, respectively.

Shands provides contracted services at cost to Shands Jacksonville Medical Center, Inc., a related party entity controlled by UF, for administrative and information services support services. The amount credited against expenses for these contracted services was approximately \$7,511,000 and \$5,712,000 for the years ended June 30, 2012 and 2011, respectively. At June 30, 2012 and 2011, approximately \$2,671,000 and \$831,000, respectively, was owed to Shands under these agreements and is included in prepaid expenses and other current assets in the accompanying consolidated basic statements of net assets

Shands Jacksonville provides organ procurement services to Shands Expenses related to the organ procurement services were approximately \$500,000 and \$513,000 for the years ended June 30, 2012 and 2011, respectively

At June 30, 2012 and 2011, Shands has a note receivable of approximately \$40,268,000 and \$41,635,000, respectively, due from Shands Jacksonville. The original amount of the note was approximately \$42,276,000 to be paid in quarterly installments of \$804,620 including interest of 4.5% and matures on October 1, 2030. The current portion of the note receivable of approximately \$1,431,000 and \$1,368,000 is included within prepaid expenses and other current assets and the long-term portion of the note receivable of approximately \$38,837,000 and \$40,267,000 at June 30, 2012 and 2011, respectively, is included within other assets in the accompanying consolidated basic statements of net assets.

During the past year, construction began in earnest on the 39th Avenue Medical Office Building ("MOB") which will provide additional clinical space for the Florida Clinical Practice Association ("FCPA") During this time, Shands had performed as construction manager and approximately \$14.3 million in project costs are reflected in Shands' construction-in-progress (CIP) balance at June 30, 2012. The construction agreements were assigned to FCPA in June 2012 and their financing was in place as of August 2012. However, accounting treatment requires Shands to continue to reflect the MOB as a component of its CIP and any reimbursement received from FCPA for the benefit of this project is to be reflected as a liability until the project is concluded. Upon conclusion of the project, the building is expected to be conveyed in full to FCPA.

12. Concentrations of Credit Risk

Shands grants credit without collateral to its patients, many of whom are local residents and are insured under third-party payor agreements. Shands does not charge interest on accounts receivable. The composition of receivables from patients and third-party payors is as follows.

	2012	2011
Medicare	28 4%	26 2%
Medicaid	13 3%	13 6%
Other third-party payors	57 9%	59 8%
Patients	0 4%	0 4%
	100 0%	100 0%

Certain financial instruments potentially subject Shands to concentrations of credit risk. These financial instruments consist primarily of cash and cash equivalents and patient accounts receivable. Concentrations of credit risk with respect to patient accounts receivable are limited to Medicare, Medicaid and various commercial payors. Shands places its cash and cash equivalents and investments with what management believes to be high-quality financial institutions and thus limits its credit exposure. Shands has deposits in excess of the federal insured amount of \$250,000. Management does not anticipate nonperformance risk by the financial institutions.

Shands Teaching Hospital and Clinics, Inc. and Subsidiaries Schedule of Plan Funding Progress (Unaudited) July 1, 2007 Through June 30, 2012

Actuarial Valuation Date	Actuarial Value of Assets (a)	tuarial Accrued Liability (AAL) Projected Unit Credit (b)	Unfunded AAL (UAAL) (b–a)	Funded Ratio (a/b)		Covered Payroll (c)	UAAL as a Percentage of Covered Payroll (b–a) / (c)
July 1, 2007	\$ 510,110,923	\$ 446,075,640	\$ (64,035,283)	114 49	6 \$	374,703,980	-17 1%
July 1, 2008	516,653,578	504,184,948	(12,468,630)	102 5%	ó	393,947,017	-3 2%
July 1, 2009	506,841,837	535,105,649	28,263,812	94 7%	o o	410,812,664	6 9%
July 1, 2010	551,570,055	576,104,670	24,534,615	95 7%	ó	410,512,664	6 0%
Aprıl 1, 2011	625,296,308	628,781,832	3,485,524	99 4%	o o	396,053,964	0 9%
Aprıl 1, 2012	658,952,840	677,704,474	18,751,634	97 29	o o	361,028,469	5 2%

Shands Teaching Hospital and Clinics, Inc. and Subsidiaries Historical Summary of Actual and Required Pension Contributions (Unaudited) July 1, 2006 Through June 30, 2012

	Employer Contributions									
(Fiscal) Plan Year	Annual Required Contribution	Annual Contributions Made by Shands	Percentage Contributed							
July 1, 2006 to June 30, 2007 July 1, 2007 to June 30, 2008 July 1, 2008 to June 30, 2009 July 1, 2009 to June 30, 2010 July 1, 2010 to June 30, 2011 July 1, 2011 to June 30, 2012	\$ 18,877,847 14,410,886 20,129,673 23,308,692 26,271,142 19,632,635	\$ 29,647,500 25,735,000 21,992,500 27,494,500 70,798,000 40,700,000	157 2% 178 6% 109 3% 118 0% 269 5% 207 3%							

Shands Teaching Hospital and Clinics, Inc. and Subsidiaries Historical Summary of Actual and Required Other Postemployment Contributions Under GASB Statement No. 45 (Unaudited) July 1, 2009 Through June 30, 2012

		ons			
				Actual	
(Fiscal) Plan Year	F	Annual Required Intribution	Net	ntributions, t of Retiree ntributions	Percentage Contributed
July 1, 2009 to June 30, 2010	\$	448,460	\$	(19,327)	-4 3%
July 1, 2010 to June 30, 2011		447,254		146,133	32 7%
July 1, 2011 to June 30, 2012		451,258		(67,709)	-15 0%

Shands Teaching Hospital and Clinics, Inc. and Subsidiaries Consolidating Basic Statements of Net Assets June 30, 2012

Assets Current assets	Shands UF	Shands AGH	Shands Vista	Shands Rehab Hospital	Eliminations	Total Alachua County Hospital Group	Shands Home Care	Property Management	Shands Starke	Shands Live Oak	Subtotal Other	Eliminations	Total Obligated Group	Shands at Lake Shore	Other	Eliminations	Consolidated Total
	\$ 18 723			e .	e	\$ 18 724	•			e	e	¢	\$ 18 724		\$ 5 336	œ.	\$ 24 060
Cash and cash equivalents	128 665	a -	5 1	a -	a -	128 665	a -	a -	3 -	3 -	a -	5 -	128 665	3 -	a 5 3 3 5 6 1 3	a -	128 678
Short-term investments		-	4 404	2 424	-		4.050	-	-	-	4.05.0	-		-	13	-	
Patient accounts receivable net	139 771	-	4 4 6 1	3 121	-	147 353	1 052	-	-	-	1 052	-	148 405	-	3	-	148 408
Inventories	12 734	-				12 734			-	-		-	12 734			-	12 734
Prepaid expenses and other current assets	49 544	-	767	212	(142)	50 381	562	2	-	-	564	-	50 945	20	473	-	51 438
Assets whose use is restricted current portion	18 186					18 186							18 186				18 186
Total current assets	367 623		5 229	3 333	(142)	376 043	1 614	2			1 616		377 659	20	5 825		383 504
Assets whose use is restricted less current portion	175 711	-	-	-	-	175 711	-	-	-	-	-	-	175 711	-	20	-	175 731
Capital assets net	693 116	1 666	8 608	2 177	-	705 567	163	13 914	-	-	14 077	-	719 644	-	1 5 2 5	-	721 169
Due from affiliates net	4 699	-	-	_	-	4 699	-	-	-	-	-	-	4 699	-	-	(4 699)	-
Other assets	256 779	1	3 611	2 667		263 058	1 133	(1)	-	-	1 132		264 190	-	12 481		276 671
Total assets	\$ 1 497 928	\$ 1 667	\$ 17 448	\$ 8 177	\$ (142)	\$ 1525 078	\$ 2 910	\$ 13 915	s -	<u>s</u> -	\$ 16 825	•	\$ 1541903	\$ 20	\$ 19 851	\$ (4 699)	\$ 1557 075
Total assets	3 1 4 3 7 3 2 6	3 1 007	3 17 440	\$ 6 177	3 (142)	\$ 1323076	\$ 2 5 10	3 13313	<u> </u>	<u> </u>	3 10 023	<u> </u>	3 1341303	3 20	3 13 631	3 (4 055)	3 1337 073
Liabilities and Net Assets																	
Current liabilities																	
Long-term debt current portion	\$ 19848	\$ -	\$ -	\$ -	\$ -	\$ 19848	\$ -	\$ -	S -	S -	\$ -	\$ -	\$ 19848	S -	\$ -	\$ -	\$ 19848
Capital lease obligations current portion	904	-	-	-		904	-	-	-	-	-	-	904	-	-	-	904
Accounts payable and accrued expenses	66 098	16	625	322		67 061	606	121	23	23	773	-	67 834	90	1 4 24	-	69 348
Accrued salaries and leave payable	39 529	-	69	39		39 637	11		-	-	11		39 648	-	16	-	39 664
Estimated third-party payor settlements	55 166	-	496	-	(142)	55 5 20	-	-	273	101	374	-	55 894	603	-	-	56 4 97
Total current liabilities	181 545	16	1 190	361	(142)	182 970	617	121	296	124	1 158		184 128	693	1 440		186 261
Long-term liabilities																	
Long-term debt noncurrent portion	467 651	_	_	_	_	467 651	_	_		_	_	_	467 651	_	_	_	467 651
Capital lease obligations noncurrent portion	542	_	_	_	_	542	_	_		_	_	_	542	_	_	_	542
Due to affiliates net	-	_	_	_	_		_	_		_	_	_	012	_	4 699	(4 699)	012
Other liabilities	87 202		50	26	_	87 278	21	_		_	21	_	87 299	_		(4 000)	87 299
Total long-term liabilities	555 395		50	26		555 471	21				21		555 492		4 699	(4 699)	555 492
Total liabilities	736 940	16	1 240	387	(142)	738 441	638	121	296	124	1 179		739 620	693	6 139	(4 699)	741 753
	730 340		1 240		(142)	730441		121		124			755 020		0 133	(4 033)	741755
Net assets Invested in capital assets net of related debt Restricted	207 861	1 667	8 608	2 177	-	220 313	163	13 914	-	-	14 077	-	234 390	-	-	-	234 390
Nonexpendable	97	_	_	_	-	97	_	-	_	_	_	-	97	_	_	_	97
Expendable	8 476		_	-		8 4 7 6	_		-	_	-		8 4 7 6	_	274	_	8 750
Unrestricted	544 554	(16)	7 600	5 613		557 751	2 109	(120)	(296)	(124)	1 569	_	559 320	(673)	13 4 38	_	572 085
Total net assets	760 988	1 65 1	16 208	7 790		786 637	2 272	13 794	(296)	(124)	15 646		802 283	(673)	13 712		815 322
									(200)	(124)							
Total liabilities and net assets	\$ 1 497 928	\$ 1 667	\$ 17 448	\$ 8 177	\$ (142)	\$ 1525 078	\$ 2 910	\$ 13 915	\$ -	<u>s -</u>	\$ 16 825	<u>s -</u>	\$ 1541903	\$ 20	\$ 19 851	\$ (4 699)	\$ 1557 075

Shands Teaching Hospital and Clinics, Inc. and Subsidiaries Consolidating Basic Statements of Net Assets June 30, 2011

Assets Current assets	Shands UF	Shands AGH	Shands Vista	Shands Rehab Hospital	Eliminations	Total Alachua County Hospital Group	Shands Home Care	Property Management	Shands Starke	Shands Live Oak	Subtotal Other	Eliminations	Total Obligated Group	Shands at Lake Shore	Other	Eliminations	Consolidated Total
	\$ 14 093					44.004	s -								4 0 700		\$ 17.794
Cash and cash equivalents		5 -	5 1	5 -	5 -	\$ 14 094	5 -	5 -	5 -	\$ -	\$ -	5 -	\$ 14 094	5 -	\$ 3700	\$ -	
Short-term investments	108 929	-	4 0 4 7		-	108 929		-	-	-		-	108 929	-	13	-	108 942
Patient accounts receivable net	104 572	-	4 217	2 318	-	111 107	1 044	-	-	-	1 044	-	112 151	193	-	-	112 344
Inventories	13 001			-		13 001			-	-		-	13 001			-	13 001
Prepaid expenses and other current assets	36 499	4	717	568	(498)	37 290	596	6	-	-	602	-	37 892	37	380	-	38 309
Assets whose use is restricted current portion	20 311					20 311			<u>-</u>		<u>-</u>		20 311	<u>-</u>	<u>-</u>		20 311
Total current assets	297 405	4	4 935	2 886	(498)	304 732	1 640	6	<u>·</u>		1 646		306 378	230	4 093		310 701
Assets whose use is restricted less current portion	201 814	-	-	-	-	201 814	-	-	-	-	-	-	201 814	-	-	-	201 814
Capital assets net	704 082	1 666	8 106	2 344	-	716 198	215	14 530	-	-	14 745	-	730 943	-	1 5 2 5	-	732 468
Due from affiliates net	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3 003	(3 003)	-
Other assets	177 629		3 250	2 4 9 0		183 369	981				981		184 350		13 246		197 596
Total assets	\$ 1 380 930	\$ 1 670	\$ 16 291	\$ 7720	\$ (498)	\$1406113	\$ 2 836	\$ 14 536	\$ -	\$ -	\$ 17 372	\$ -	\$ 1 423 485	\$ 230	\$ 21 867	\$ (3 003)	\$ 1442579
Liabilities and Net Assets Current liabilities																	
Long-term debt current portion	\$ 20 834	\$ -	S -	\$ -	\$ -	\$ 20 834	S -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 20 834	S -	\$ -	\$ -	\$ 20 834
Capital lease obligations current portion	873	-	-	-	-	873	-	-	-	-	-	-	873	-	-	-	873
Accounts payable and accrued expenses	54 782	26	532	319	-	55 659	665	98	138	112	1 013	-	56 672	283	1 322	-	58 277
Accrued salaries and leave payable	49 737	-	69	39	-	49 845	11	-	-	-	11	-	49 856	-	26	-	49 882
Estimated third-party payor settlements	62 278	1 062	4 17	-	(498)	63 259	-		410	250	660		63 919	877	-	-	64 796
Total current liabilities	188 504	1 088	1 018	358	(498)	190 470	676	98	548	362	1 684		192 154	1 160	1 348		194 662
Long-term liabilities																	
Long-term debt noncurrent portion	477 839	-	_	_	_	477 839	_	-	_	_	-	_	477 839	_	_	_	477 839
Capital lease obligations noncurrent portion	1 447	-	_	_	_	1 447	_	-	_	_	-	_	1 447	_	_	_	1 447
Due to affiliates net	2 696	_	_	_	_	2 696	_	_	_	_	_	_	2 696	_	307	(3 003)	
Other liabilities	37 583	-	39	21	_	37 643	17	-	_	_	17	_	37 660	_	-		37 660
Total long-term liabilities	519 565		39	21		519 625	17				17		519 642		307	(3 003)	516 946
Total liabilities	708 069	1 088	1 057	379	(498)	710 095	693	98	548	362	1 701		711 796	1 160	1 655	(3 003)	711 608
Net assets																	
Invested in capital assets net of related debt Restricted	207 074	1 667	8 106	2 344	-	219 191	215	14 530	-	-	14 745	-	233 936	-	-	-	233 936
Nonexpendable	97	-	-	-	-	97	-	-	-	-	-	-	97	-	-	-	97
Expendable	5 518	-	-	-	-	5 518	-	-	-	-	-	-	5 518	-	166	-	5 684
Unrestricted	460 172	(1 085)	7 128	4 997		471 212	1 928	(92)	(548)	(362)	926		472 138	(930)	20 046		491 254
Total net assets	672 861	582	15 234	7 341		696 018	2 143	14 438	(548)	(362)	15 671		711 689	(930)	20 212		730 971
Total liabilities and net assets	\$ 1 380 930	\$ 1 670	\$ 16 291	\$ 7 720	\$ (498)	\$1406113	\$ 2 836	\$ 14 536	\$ -	\$ -	\$ 17 372	\$ -	\$ 1 423 485	\$ 230	\$ 21 867	\$ (3 003)	\$ 1442579

	Shands UF	Shands AGH	Shands Vista	Shands Rehab Hospital	Eliminations	Total Alachua County Hospital Group	Shands Home Care	Property Management	Shands Starke	Shands Liv e Oak	Subtotal Other	Eliminations	Total Obligated Group	Shands at Lake Shore	Other	Eliminations	Consolidated Total
Operating revenues																	
Nel patient service revenue nel of provision for bad debts of \$97 310	\$ 1 009 353	\$ 1.040	\$ 25 969	\$ 17 593	\$ (429)	\$ 1 053 526	\$ 6674	\$	\$ 231	s (0)	\$ 6896	s	\$ 1060422	s 146	S	· ·	\$ 1 060 568
Other operating revenue	22 169	\$ 1040	188	9 17 333	9 (423)	22 357	3 0074	1 749	9 231	3 (3)	1 752	(966)	23 143	9 140	2 702	(247)	25 598
	1 031 522	1 040	26 157	17 593	(429)	1 075 883	6 6 7 4	1 749	231		8 648	(966)	1 083 565	146	2 702	(247)	
Total operating revenues	1 03 1 522	1 040	20 157	17 593	(429)	1 0/5 883	0074	1749		(0)	8 048	(900)	1 083 505	146	2 102	(247)	1 086 166
Operating expenses	117.404	(0.1)	45.050	40.000	4.000	170 701			/5				170 750	0.0	4.004		170.047
Salaries and benefits	447 121 426 924	(24) (130)	15 256 6 210	10 329 4 178	1 082 (1 511)	473 764 435 671	4 989 1 527	1 432	(2) 224	(1) 205	4 986 3 388	(966)	478 750 438 093	33 234	1 034 1 595	(247)	479 817 439 675
Supplies and services Depreciation and amortization	50 911	(130)	525	4 178 251	(1511)	435 67 I 51 687	53	611	224	205	3 388 664	(900)	52 351	234	1 595	(247)	52 351
•																	
Total operating expenses	924 956	(154)	21 991	14 758	(429)	961 122	6 569	2 043	222	204_	9 038	(966)	969 194	267	2 629	(247)	971 843
Operating income (loss)	106 566	1 194	4 166	2 835		114 761	105	(294)	9	(210)	(390)		114 371	(121)	73		114 323
Nonoperating revenues (expenses)																	
State appropriations	4 000					4 000							4 000				4 000
Interest expense	(15 999) 11 536					(15 999) 11 536							(15 999) 11 536				(15 999)
Net investment income including change in fair value	11 536 555					11 536 555							11 536 555		68		11 604 555
Gain (loss) on disposal of capital assets inel Other nonoperating revenues (expenses)	6 4 2 0	•	105			6 527		166			166		6 693		(760)		5 933
	6 512																
Total nonoperating revenues (expenses) net	6 512	2	105			6 619		166_			166		6 785		(692)		6 093
Excess (deficit) of revenues over expenses before transfers capital contributions																	
changes in fair value of hedging derivative instruments and other changes in net assets	\$ 113 078	\$ 1 196	\$ 4 271	\$ 2835	\$	\$ 121 380	\$ 105	\$ (128)	<u>s 9</u>	\$ (210)	\$ (224)	<u>s</u>	\$ 121 156	\$ (121)	\$ (619)	\$	\$ 120 416

	Shands UF	Shands AGH	Shands Vista	Shands Rehab Hospital	Eliminations	Total Alachua County Hospital Group	Shands Home Care	Property Management	Shands Starke	Shands Live Oak	Subtotal Other	Eliminations	Total Obligated Group	Shands at Lake Shore	Other	Eliminations	Consolidated Total
Excess (deficit) of revenues over expenses before transfers capital contributions changes in fair value of hedging derivative instruments and other																	
changes in net assets	\$ 113 078	\$ 1196	\$ 4 271	\$ 2835	\$ -	\$121 380	\$ 105	\$ (128)	\$ 9	\$ (210)	\$ (224)	\$ -	\$ 121 156	\$ (121)	\$ (619)	\$ -	\$ 120 416
Capital contributions	1 612	-	-	-	-	1 612	-	-	-	-	-	-	1 612	-	-	-	1 612
Transfers and expenditures in support of the University																	
of Florida and its medical programs	(40 744)	-	-	-	-	(40 744)	-	-	-	-	-	-	(40 744)	-	-	-	(40 744)
Transfer of net assets in association with consolidation	44.000	(407)	(2.207)	(2.200)		5 4 12	24	(646)	242	448	100		5.644	270	(5.000)		
and support of other operations and divisions of Shands		(127)	(3 297)	(2 386)	-		24	(516)	243	448	199	-	5 611	378	(5 989)	-	
Other changes in net assets	2 959					2 959							2 959		108		3 067
Increase (decrease) in net assets	88 127	1 069	974	449	-	90 6 1 9	129	(644)	252	238	(25)	-	90 594	257	(6 500)	-	84 351
Net assets																	
Beginning of year	672 861	582	15 234	7 341		696 018	2 143	14 438	(548)	(362)	15 671		711 689	(930)	20 212		730 971
End of year	\$ 760 988	\$ 1651	\$ 16 208	\$ 7790	\$ -	\$786 637	\$ 2272	\$ 13 794	\$ (296)	\$ (124)	\$ 15 646	\$ -	\$ 802 283	\$ (673)	\$ 13 712	\$ -	\$ 815 322

	Shands	Shands	Shands	Shands Rehab		Total Alachua County Hospital	Shands Home	Property	Shands	Shands Live	Subtotal		Total Obligat e d	Shands at Lake			Consolidated
	UF	AGH	Vista	Hospital	Eliminations	Group	Care	Management	Starke	Oak	Other	Eliminations	Group	Shore	Other	Eliminations	Total
Operating revenues																	
Nel palient service revenue nel of provision for								_									
bad debts of \$85 176	\$ 912 868	\$ 1592	\$ 22319	\$ 15 918	\$ (393)	\$ 952 304	\$ 6975	\$	\$ 46	\$ 233	\$ 7 254	\$	\$ 959 558	\$ 786	\$	\$	\$ 960 344
Other operating revenue	14 182		71	21		14 274		1 713	8	6	1 727	(993)	15 008	5	2 615	(245)	17 383
Total operating revenues	927 050	1 592	22 390	15 939	(393)	966 578	6 975	1 713	54	239	8 981	(993)	974 566	791	2 615	(245)	977 727
Operating expenses																	
Salaries and benefits	432 138		13 856	9 481	956	456 431	5 210		29	55	5 294		461 725	1	1 013		462 739
Supplies and services	408 406	1 284	5 377	3 585	(1 349)	417 303	1 492	1 387	656	541	4 076	(993)	420 386	1 810	1 923	(245)	423 874
Depreciation and amortization	50 433		566	268		51 267	52	629			681		51 948				51 948
Total operating expenses	890 977	1 284	19 799	13 334	(393)	925 001	6 754	2 016	685	596	10 051	(993)	934 059	1 811	2 936	(245)	938 561
Operating income (loss)	36 073	308	2 591	2 605		41 577	221	(303)	(631)	(357)	(1 070)		40 507	(1 020)	(321)		39 166
Nonoperating revenues (expenses)																	
State appropriations	7 500					7 500							7 500				7 500
Interest expense	(16 860)					(16 860)							(16 860)				(16 860)
Net investment income including change in fair value	37 009	3				37 012							37 012		39		37 051
Gain (loss) on disposal of capital assets net	(676)	10				(666)	(4)	(5)	306	78	375		(291)	4 327	1		4 037
Other nonoperating revenues	5 734		59			5 793			(7)	3	(4)		5 789		(1 685)		4 104
Total nonoperating revenues net	32 707	13	59			32 779	(4)	(5)	299	81	371		33 150	4 327	(1 645)		35 832
Excess (deficil) of revenues over expenses before transfers capital contributions																	
changes in fair value of hedging derivative instruments and other changes in net assets	\$ 68 780	\$ 321	\$ 2650	\$ 2605	\$	\$ 74 356	\$ 217	\$ (308)	\$ (332)	\$ (276)	\$ (699)	\$	\$ 73 657	\$ 3 307	\$ (1 966)	\$	\$ 74 998

	Shands UF		Shands AGH	Shands Vista	Shands Rehab Hospital	Eliminations	Total Alachua County Hospital Group	Shands Home Care	Property Management	Shands Starke	Shands Live Oak	Subtotal Other	Eliminations	Total Obligated Group	Shands at Lake Shore	Other	Eliminations	Co	nsolidated Total
Excess (deficit) of revenues over expenses before transfers capital contributions changes in fair value of hedging derivative instruments and other																			
changes in net assets	\$ 68 78		321	\$ 2650	\$ 2605	\$ -	\$ 74 356	\$ 217	\$ (308)	\$ (332)	\$ (276)	\$ (699)	\$ -	\$ 73 657	\$ 3 307	\$ (1966)	\$ -	\$	74 998
Capital contributions	674	1	-	-	-	-	674	-	-	-	-	-	-	674	-	-	-		674
Transfers and expenditures in support of the University of Florida and its medical programs	(37 67	5)	_	_	_	_	(37 675)	_	_	_	_	_	_	(37 675)	_	_	_		(37 675)
Change in accounting treatment of effective derivative instruments and change in fair value of hedging	,	,					(/							(,					(
derivative instruments Transfer of net assets in association with consolidation	39 64	9	-	-	-	-	39 649	-	-	-	-	-	-	39 649	-	-	-		39 649
and support of other operations and divisions of Shands	(67 72	21	2 844	46 068	23 779	_	4 969	2 335	10 321	(14 537)	(5 937)	(7 818)	_	(2 849)	(12 159)	15 008	_		_
Shands Jacksonville note receivable	42 27			-		_	42 276				(0 00.7	(, , , ,	_	42 276	(,	-	_		42 276
Other changes in net assets	1 72	3	-	-	-	-	1 728	-	_	(99)	-	(99)	-	1 629	-	85	-		1 714
Increase (decrease) in net assets	47 71		3 165	48 718	26 384		125 977	2 552	10 013	(14 968)	(6 213)	(8 616)		117 361	(8 852)	13 127	-		121 636
Net assets																			
Beginning of year	625 15	<u> </u>	(2 583)	(33 484)	_(19 043)		570 041	(409)	4 4 2 5	14 4 20	5 851	24 287		594 328	7 922	7 085			609 335
End of year	\$ 672.86	1 \$	582	\$ 15 234	\$ 7341	\$ -	\$696 018	\$ 2143	\$ 14 438	\$ (548)	\$ (362)	\$ 15 671	\$ -	\$ 711 689	\$ (930)	\$ 20 212	\$ -	\$	730 971

Shands Teaching Hospital and Clinics, Inc. and Subsidiaries Schedule of Expenditures of Federal Awards Year Ended June 30, 2012

Grantor/Pass-Through Grantor/Program or Cluster Title	Pass-Thro Identif Grantor/Pass-Through Grantor/Program or Cluster Title CFDA# Nun		Federal Expenditures	
U.S. Department of Health and Human Services: Pass-Through the University of Florida Research and Development Cluster:				
National Center for Advancing Translational Sciences National Center for Research Resources	93 350 93 389	UL1 TR000064 / UF12160 UL1 RR029890 / UF11091	\$ 517,952 1,592,392	
Total Research and Development Cluster			2,110,344	
Pass-Through the Mid-Florida Area Agency on Aging, Inc and Department of Elder Affairs				
Low Income Home Energy Assistance	93 568	EA-10-ALA	4,652	
Low Income Home Energy Assistance	93 568	EA-11-ALA	86,872	
Subtotal 93 568			91,524	
Aging Cluster: Title III-B Grants for Supportive Services and Senior Centers Title III-B Grants for Supportive Services and Senior Centers	93 044 93 044	OAA-11-ALA OAA-12-ALA	58,118 55,172	
Subtotal 93 044			113,290	
Title III-C-1 Nutrition Services Title III-C-1 Nutrition Services Title III-C-2 Nutrition Services Title III-C-2 Nutrition Services Subtotal 93 045	93 045 93 045 93 045 93 045	OAA-11-ALA OAA-12-ALA OAA-11-ALA OAA-12-ALA	69,183 84,059 77,584 76,179 307,005	
Nutrition Services Incentive Program Nutrition Services Incentive Program	93 053 93 053	NSIP-10-ALA NSIP-11-ALA	14,765 31,477	
Subtotal 93 053			46,242	
Total Aging Cluster			466,537	
Title IV and Title II Discretionary Projects (ARRA) Title IV and Title II Discretionary Projects (ARRA) Subtotal 93 048	93 048 93 048	CLP-11-ALA CLP-12-ALA	8,830 5,297 14,127	
Title III-E National Family Caregiver Support Title III-E National Family Caregiver Support	93 052 93 052	IIIE-11-ALA IIIE-12-ALA	21,996 26,420	
Subtotal 93 052			48,416	
Total U.S. Department of Health and Human Services			2,730,948	

The accompanying note is an integral part of this Schedule of Expenditures of Federal Awards

Shands Teaching Hospital and Clinics, Inc. and Subsidiaries Schedule of Expenditures of Federal Awards Year Ended June 30, 2012

Grantor/Pass-Through Grantor/Program or Cluster Title	CFDA#	Pass-Through Entity Identification Number	Federal Expenditures
National Endowment for the Arts:			
Pass-Through the State of Florida			
Promotion of the Arts-Partnership Agreements	45 025	12-8501/10-6100-2011	24,469
Total National Endowment for the Arts			24,469
U.S. Department of Housing and Urban Development: Pass-Through the City of Gainesville			· · · · · · · · · · · · · · · · · · ·
Community Development Block Grants/Entitlement Grants	14 218	N/A	17,741
Community Development Block Grants/Entitlement Grants	14 218	N/A	8,750
Total U.S. Department of Housing and Urban Development			26,491
U.S. Department of Justice Pass-Through the University of Florida			
Legal Assistance for Victims	16 524	2009-WL-AX-0006/UF10169	2,753
Total U.S. Department of Justice			2,753
Total Expenditures of Federal Awards			\$ 2,784,661

Shands Teaching Hospital and Clinics, Inc. and Subsidiaries Schedule of State Financial Assistance Year Ended June 30, 2012

Grantor/Pass-Through Grantor/Program or Cluster Title	CSFA#	Contract Identification Number	Award Amount	Grant Period	State Expenditures
State of Florida, Department of Health:					
Trauma Center Financial Support	64 075	TRA-16	\$ 611,102	7/1/11-6/30/12	<u>\$ 611,102</u>
Pass-Through the University of Florida Children's Medical Services					
Comprehensive Cardiac Program	N/A	COQQY/UF010024	136,368	7/1/09-6/30/12	45,456
Children's Medical Services Consolidated Contract - Hematology	N/A	COQSM/UF10258	72,186	10/1/10-6/30/12	37,880
Regional Genetics Program	N/A	COQSR/UF11084	100,681	7/1/10-6/30/12	67,121
			309,235		150,457
Total State of Florida, Department of Health			920,337		761,559
State of Florida, Department of State					
Cultural and Museum Grants/Culture Builds Florida	45 058	12 5 0033	25,000	7/1/11-6/30/12	25,000
Total State of Florida, Department of State			25,000		25,000
State of Florida, Department of Elder Affairs: Pass-Through Mid-Florida Area Agency on Aging, Inc. and Department of Elder Affairs					
Home Care for the Elderly	65 001	HCE-11-ALA	5,100	7/1/11-6/30/12	5,100
Alzheimer's Disease Initiative - Model Day Care	65 002	ADI-11-ALA-MDC	113,355	7/1/11-6/30/12	113,355
Alzheimer's Disease Initiative - In-Home Respite	65 004	ADI-11-ALA	46,687	7/1/11-6/30/12	46,687
Local Service Program - Expended Adult Day Care	65 009	LSP-11-ALA	25,549	7/1/11-6/30/12	25,549
Community Care for the Elderly	65 010	CCE-11-ALA	310,907	7/1/11-6/30/12	310,904
Total State of Florida, Department of Elder Affairs			501,598		501,595
Total Expenditures of State Financial Assistance			\$1,446,935		\$ 1,288,154

Shands Teaching Hospital and Clinics, Inc. and Subsidiaries Note to Schedule of Expenditures of Federal Awards and Schedule of State Financial Assistance Year Ended June 30, 2012

1. Basis of Presentation

The accompanying Schedule of Expenditures of Federal Awards and Schedule of State Financial Assistance (the "Schedules") include the federal and state grant activity of Shands Teaching Hospital and Clinics, Inc. and Subsidiaries ("Shands"), and are presented on the accrual basis of accounting

The information on these Schedules is presented in accordance with the requirements of OMB Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations* and Chapter 10 550, *Rules of the Auditor General* Because the Schedules present only a selected portion of the operations of Shands, they are not intended to and do not present the financial position, changes in net assets, or cash flows of Shands. The purpose of the Schedules is to present a summary of those activities of Shands for the year ended June 30, 2012, which have been financed by the federal and state of Florida governments. For purposes of the Schedules, federal awards and state financial assistance include any assistance provided by a federal or state agency directly or indirectly in the form of grants and contracts.

Direct and indirect costs are charged to awards in accordance with cost principles contained in the Department of Health and Human Services, Office of the Assistant Secretary Comptroller ("OASC"), OASC-3, *A Guide for Hospitals* Under these cost principles, certain types of expenditures are not allowable or are limited as to reimbursement



Report of Independent Certified Public Accountants on Internal Control Over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance with Government Auditing Standards

To the Board of Directors of Shands Teaching Hospital and Clinics, Inc. and Subsidiaries

We have audited the consolidated basic financial statements of Shands Teaching Hospital and Clinics, Inc. and Subsidiaries ("Shands") as of and for the year ended June 30, 2012, and have issued our report thereon dated September 26, 2012. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States

Internal Control Over Financial Reporting

In planning and performing our audit, we considered Shands' internal control over financial reporting as a basis for designing our auditing procedures for the purpose of expressing our opinion on the consolidated basic financial statements, but not for the purpose of expressing an opinion on the effectiveness of Shands' internal control over financial reporting. Accordingly, we do not express an opinion on the effectiveness of Shands' internal control over financial reporting.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis

Our consideration of internal control over financial reporting was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over financial reporting that might be deficiencies, significant deficiencies, or material weaknesses. We did not identify any deficiencies in internal control over financial reporting that we consider to be material weaknesses, as defined above



Compliance and Other Matters

As part of obtaining reasonable assurance about whether Shands' consolidated basic financial statements are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

We noted certain matters that we reported to management of Shands in a separate letter dated September 26, 2012

This report is intended solely for the information and use of Shands' management, the Board of Directors, the Audit Committee, others within the entity, the state of Florida, federal and state awarding agencies and pass-through entities and is not intended to be and should not be used by anyone other than these specified parties

September 26, 2012

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Report of Independent Certified Public Accountants on Compliance with Requirements
That Could Have a Direct and Material Effect on Each Major Federal Program and State
Financial Assistance Program and on Internal Control Over Compliance in Accordance with
OMB Circular A-133, and Chapter 10.550, Rules of the Auditor General

To the Board of Directors of Shands Teaching Hospital and Clinics, Inc. and Subsidiaries

Compliance

We have audited the compliance of Shands Teaching Hospital and Clinics, Inc. and Subsidiaries ("Shands") with the types of compliance requirements described in the *U.S. Office of Management and Budget ("OMB") Circular A-133 Compliance Supplement*, and the requirements described in the *Department of Financial Services' State Projects Compliance Supplement* that could have a direct and material effect on each of its major federal and state programs for the year ended June 30, 2012 Shands' major federal and state programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs. Compliance with the requirements of laws, regulations, contracts and grants applicable to each of its major federal and state programs is the responsibility of Shands' management. Our responsibility is to express an opinion on Shands' compliance based on our audit

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America, the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States, OMB Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*, and Chapter 10 550, *Rules of the Auditor General* Those standards, OMB Circular A-133 and Chapter 10 550, *Rules of the Auditor General* require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal or state program occurred. An audit includes examining, on a test basis, evidence about Shands' compliance with those requirements and performing such other procedures as we considered necessary in the circumstances. We believe that our audit provides a reasonable basis for our opinion. Our audit does not provide a legal determination of Shands' compliance with those requirements.

In our opinion, Shands complied, in all material respects, with the requirements referred to above that could have a direct and material effect on each of its major federal and state programs for the year ended June 30, 2012

.



Internal Control Over Compliance

Management of Shands is responsible for establishing and maintaining effective internal control over compliance with the requirements of laws, regulations, contracts and grants applicable to federal programs and state financial assistance programs. In planning and performing our audit, we considered Shands' internal control over compliance with the requirements that could have a direct and material effect on a major federal program or state program in order to determine the auditing procedures for the purpose of expressing our opinion on compliance and to test and report on internal control over compliance in accordance with OMB Circular A-133 and Chapter 10 550, *Rules of the Auditor General*, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of Shands' internal control over compliance.

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct noncompliance with a type of compliance requirement of a federal or state program on a timely basis. A material weakness in internal control over compliance is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal or state program will not be prevented, or detected and corrected on a timely basis

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be deficiencies, significant deficiencies, or material weaknesses. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above

This report is intended solely for the information and use of Shands' management, the Board of Directors, the Audit Committee, others within the entity, the state of Florida, federal and state awarding agencies and pass-through entities and is not intended to be and should not be used by anyone other than these specified parties

October 10, 2012

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Shands Teaching Hospital and Clinics, Inc. and Subsidiaries Schedule of Findings and Questioned Costs Year Ended June 30, 2012

Section I: Summary of Auditor's Results

Financial Statements Type of auditor's report issued Internal control over financial reporting Material weaknesses identified? Significant deficiencies identified that are not considered to be material weaknesses? Noncompliance material to the financial statements noted?	Unqualified Yes XNo Yes XNone reported Yes XNo				
Federal Awards and State Financial Assistance Internal control over major programs and state assistance Material weaknesses identified? Significant deficiencies identified that are not considered to be material weaknesses? Type of auditor's report issued on compliance for major	YesXNoYesXNone reported				
Any audit findings disclosed that are required to be reported in accordance with section 510(a) of OMB Circular A-133 or Chapter 10 550, Rules of the Auditor General?	Unqualified YesXNo				
Identification of major programs and state assistance					
Federal Awards:					
CFDA Number 93 389 93 350	Name of Federal Program or Cluster National Center for Research Resources National Center for Advancing Translational Sciences				
Dollar threshold used to distinguish between Type A and Type B programs	\$300,000				
Auditee qualified as low-risk auditee?	XYesNo				
State Financial Assistance:					
CSFA Number 64 075 65 002	Name of State Financial Assistance Project Trauma Center Financial Support Alzheimer's Disease Initiative - Model Day Care				
Dollar threshold used to distinguish Type A and Type B programs	\$300,000				
Auditee qualified as low-risk pursuant to the Single Audit Act of the State of Florida?	XYesNo				

Shands Teaching Hospital and Clinics, Inc. and Subsidiaries Schedule of Findings and Questioned Costs Year Ended June 30, 2012

Section II: Financial Statement Findings

None noted

Section III: Major Federal Awards Programs and State Financial Assistance Projects Findings and

Questioned Costs

None noted

Shands Teaching Hospital and Clinics, Inc. and Subsidiaries Summary Schedule of Prior Audit Findings Year Ended June 30, 2012

Finding 2011-1: Purchases and Payables Cycle - Significant Deficiency

Testing was performed over key controls in the purchases and payables cycle Four key controls were deemed to have not been operating effectively during the year, as follows

- AP 10 Express checks supporting documentation is appropriately reviewed
- AP 13 Check requests submitted timely after the expense is incurred
- AP 3 1 Purchasing card statements are reconciled to the appropriate receipt documentation on a monthly basis
- AP 6 0 Segregation of duties prevents personnel from making unauthorized purchases

Three of the controls related to appropriate supporting documentation for check requests, and included review of the processes over manual checks and purchasing card reimbursements. It was also noted that Shands lacks appropriate segregation of duties over initiation of purchase orders and receiving of goods. There is a compensating control in place to review instances where an employee has both initiated a purchase order and received the goods on that purchase order, however, the compensating control was also found to not be operating effectively. Additionally, an adjustment to increase accounts payable by approximately \$1,231,000 was recorded in the consolidated basic financial statements as a result of testing performed over payments made subsequent to June 30, 2011.

When aggregated, these control failures and the adjustments to the consolidated basic financial statements indicate a significant deficiency in the purchases and payables cycle. A lack of effective segregation of duties over purchasing combined with inadequate support for payables could result in a material misstatement of the consolidated basic financial statements or provide the opportunity for employees to perpetrate fraud

Our external auditors recommended that management strengthen its current controls over the purchases and payables cycle and review current segregation of duties over purchasing and receiving and enforce existing control procedures over requests for payment

Status

All but one of the identified control failures noted for the year ended June 30, 2011 were remediated during the year ended June 30, 2012 Management worked to ensure that reviews were performed timely by the appropriate personnel and that segregation of duties controls were strengthened to eliminate the control failures noted in the prior year. Management continues to enhance its control activities to ensure organizational goals are achieved. Additionally, management performed a detailed review of disbursements after June 30, 2012 to ensure there were no material misstatements of liabilities as of June 30, 2012.

Shands Teaching Hospital and Clinics, Inc. and Subsidiaries

Letter of Comments and Recommendations June 30, 2012



Board of Directors of Shands Teaching Hospital and Clinics, Inc. and Subsidiaries Gainesville, Florida

September 26, 2012

Members of the Board of Directors

We have audited the consolidated basic financial statements of Shands Teaching Hospital and Clinics, Inc. and Subsidiaries ("Shands"), as of and for the fiscal year ended June 30, 2012, and have issued our report thereon dated September 26, 2012

We conducted our audit in accordance with auditing standards generally accepted in the United States of America 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 consolidated basic financial statements are free of material misstatement

In planning and performing our audit of the consolidated basic financial statements of Shands as of and for the year ended June 30, 2012, in accordance with auditing standards generally accepted in the United States of America, we consider its internal control over financial reporting as a basis for designing our auditing procedures for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on Shands' internal control over financial reporting. Accordingly, we do not express an opinion on Shands' internal control over financial reporting.

Our consideration of internal control over financial reporting is for the limited purpose described in the preceding paragraph and is not designed to identify all deficiencies in internal control over financial reporting that might be significant deficiencies or material weaknesses and therefore, there can be no assurance that all deficiencies, significant deficiencies, or material weaknesses have been identified

AU 325, Communicating Internal Control Related Matters Identified in an Audit, of the AICPA Professional Standards includes the following definitions of a deficiency, a significant deficiency and a material weakness

Deficiency—a deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis

Significant Deficiency—a deficiency, or combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance

Material Weakness—a deficiency, or combination of deficiencies, in internal control such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis

We are providing you with the deficiencies identified during our audit procedures to date for your review

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Board of Directors of Shands Teaching Hospital and Clinics, Inc. and Subsidiaries September 26, 2012

Additionally, our audit was conducted in accordance with Chapter 10 550, Rules of the Auditor General, which governs the conduct of local government entity audits performed in the State of Florida and requires that the "Letter of Comments and Recommendations" address the following matters

- The Rules of the Auditor General (Section 10 554(1)(i)1), require that we comment as to whether or not corrective actions have been taken to address recommendations made in the preceding annual financial audit report. The current status of comments reported in fiscal year 2011 is included in the status of prior year's recommendations section of the attachment.
- As required by the Rules of the Auditor General (Section 10 554(1)(i)2), we determined that Shands complied with Section 218 415, Florida Statutes, regarding the investment of public funds
- The Rules of the Auditor General (Section 10 554(1)(i)3), require that we address in the management letter any recommendations to improve financial management. In connection with our audit, we are submitting for consideration the accompanying recommendations designed to help improve financial management.
- The Rules of the Auditor General (Section 10 554(1)(i)4), require that we address violations of provisions of contracts or grant agreements, or abuse, that have occurred, or are likely to have occurred, that have an effect on the financial statements that is less than material but more than inconsequential. In connection with our audit, we did not have any such findings
- The Rules of the Auditor General (Section 10 554(1)(i)5), require, based on professional judgment, the reporting of the following matters that have an inconsequential effect on the financial statements, considering both quantitative and qualitative factors (1) violations of provisions of contracts or grant agreements, fraud, illegal acts, or abuse, and (2) deficiencies in internal control that are not significant deficiencies. We are submitting for consideration the accompanying recommendations designed to help improve internal control and ensure compliance with laws and regulations as required by the Rules of the Auditor General (Section 10 554(1)(i)5)
- The Rules of the Auditor General (Section 10 554(1)(i)6), require that the name or official title and legal authority for the primary government and each component unit of the reporting entity be disclosed in this management letter, unless disclosed in the notes to the financial statements Shands Teaching Hospital was established in 1958 by the University of Florida and leased to Shands Teaching Hospital and Clinics, Inc., a not-for-profit corporation, in 1980 Effective July 1, 2011, Shands was designated an instrumentality of the state under the provision of Chapter 2011-114. Laws of Florida
- The Rules of the Auditor General (Section 10 554(1)(i)7 a), require a statement be included as to whether or not the local governmental entity has met one or more of the conditions described in Section 218 503(1), Florida Statues, and identification of the specific condition(s) met. In connection with our audit, we determined that Shands did not meet any of the conditions described in Section 218 503(1), Florida Statutes.



Board of Directors of Shands Teaching Hospital and Clinics, Inc. and Subsidiaries September 26, 2012

- Section 10 554(1)(i)7 b, Rules of the Auditor General, requires that we determine whether the annual financial report for Shands for the fiscal year ended June 30, 2012, filed with the Florida Department of Financial Services pursuant to Section 218 32(1)(a), Florida Statutes, is in agreement with the annual financial audit report for the fiscal year ended June 30, 2012. In connection with our audit, we determined that these two reports were in agreement.
- As required by the Rules of the Auditor General (Sections 10 554(1)(i)7 c and 10 556(7)), we applied financial condition assessment procedures. It is management's responsibility to monitor the entity's financial condition, and our financial condition assessment was based in part on representations made by management and the review of financial information provided by same. In connection with our audit, our procedures did not disclose deteriorating financial conditions as defined in the aforementioned section.

Pursuant to Chapter 119, Florida Statutes, this management letter is a public record and its distribution is not limited. Auditing standards generally accepted in the United States of America require us to indicate that this letter is intended solely for the information and use of the Board of Directors of Shands and management, and the Florida Auditor General and is not intended to be and should not be used by anyone other than these specified parties.

Yours very truly,

Preciotate Copera 22P

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I. Recent Accounting Pronouncements

1. Governmental Accounting Standards Board ("GASB") Statement No. 65, Items Previously Reported as Assets and Liabilities

In March 2012, the GASB issued GASB Statement No 65, *Items Previously Reported as Assets and Liabilities* ("GASB No 65") GASB No 65 establishes accounting and financial reporting standards that reclassify, as deferred outflows of resources or deferred inflows of resources, certain items that were previously reported as assets and liabilities and recognizes, as outflows of resources or inflows of resources, certain items that were previously reported as assets and liabilities. GASB No 65 also provides other financial reporting guidance related to the impact of the financial statement elements deferred outflows of resources and deferred inflows of resources, such as changes in the determination of the major fund calculations, and limits the use of the term deferred in the financial statements.

The provisions of GASB No 65 are effective for financial statements for periods beginning after December 15, 2012 Shands is currently evaluating the impact GASB No 65 will have on its consolidated basic financial statements

Management's Response:

We will work with our external auditors to assess the impact of this pronouncement to identify any impact that it may have on our consolidated basic financial statements

2. GASB Statement No. 66, Technical Corrections – 2012, an Amendment of GASB Statements No. 10 and No. 62

In March 2012, the GASB issued GASB Statement No 66, *Technical Corrections - 2012, an Amendment of GASB Statements No 10 and No 62* ("GASB No 66") The objective of GASB No 66 is to improve accounting and financial reporting for a governmental financial reporting entity by resolving conflicting guidance that resulted from the issuance of two pronouncements, GASB Statements No 54, *Fund Balance Reporting and Governmental Fund Type Definitions,* and No 62, *Codification of Accounting and Financial Reporting Guidance Contained in Pre-November 30, 1989 FASB and AICPA Pronouncements* GASB No 66 amends GASB Statement No 10, *Accounting and Financial Reporting for Risk Financing and Related Insurance Issues,* by removing the provision that limits fund-based reporting of an entity's risk financing activities to the general fund and the internal service fund type As a result, governments should base their decisions about fund type classification on the nature of the activity to be reported, as required in GASB Statement No 54 and GASB Statement No 34, *Basic Financial Statements—and Management's Discussion and Analysis—for State and Local Governments*

GASB No 66 also amends GASB Statement No 62 by modifying the specific guidance on accounting for (1) operating lease payments that vary from a straight-line basis, (2) the difference between the initial investment (purchase price) and the principal amount of a purchased loan or group of loans, and (3) servicing fees related to mortgage loans that are sold when the stated service fee rate differs significantly from a current (normal) servicing fee rate. These changes clarify how to apply GASB Statement No 13, Accounting for Operating Leases with Scheduled Rent Increases, and result in guidance that is consistent with the requirements in GASB Statement No 48, Sales and Pledges of Receivables and Future Revenues, respectively

The provisions of GASB No 66 are effective for financial statements for periods beginning after December 15, 2012 Shands is currently evaluating the impact GASB No 66 will have on its consolidated basic financial statements

Management's Response:

We will work with our external auditors to assess the impact of this pronouncement to identify any impact that it may have on our consolidated basic financial statements

3. GASB Statement No. 68, Accounting and Financial Reporting for Pensions, an Amendment of GASB Statement No. 27

In June 2012, the GASB issued GASB Statement No 68, Accounting and Financial Reporting for Pensions, an Amendment of GASB Statement No 27 ("GASB No 68") The primary objective of GASB No 68 is to improve accounting and financial reporting by state and local governments for pensions. It also improves information provided by state and local governmental employers about financial support for pensions that is provided by other entities. GASB No 68 results from a comprehensive review of the effectiveness of existing standards of accounting and financial reporting for pensions with regard to providing decision-useful information, supporting assessments of accountability and interperiod equity, and creating additional transparency. GASB No 68 replaces the requirements of GASB Statement No 27, Accounting for Pensions by State and Local Governmental Employers, as well as the requirements of GASB Statement No 50, Pension Disclosures, as they relate to pensions that are provided through pension plans administered as trusts or equivalent arrangements (hereafter jointly referred to as trusts) that meet certain criteria.

GASB No 68 establishes standards for measuring and recognizing liabilities, deferred outflows of resources, deferred inflows of resources, and expense/expenditures. For defined benefit pensions, GASB No 68 identifies the methods and assumptions that should be used to project benefit payments, discount projected benefit payments to their actuarial present value, and attribute that present value to periods of employee service. Note disclosure and required supplementary information requirements about pensions also are addressed. In addition, GASB No 68 details the recognition and disclosure requirements for employers with liabilities (payables) to a defined benefit pension plan and for employers whose employees are provided with defined contribution pensions.

GASB No 68 is effective for fiscal years beginning after June 15, 2014 Shands is currently evaluating the impact GASB No 68 will have on its consolidated basic financial statements

Management's Response:

We will work with our external auditors to assess the impact of this pronouncement to identify any impact that it may have on our consolidated basic financial statements

II. Status of Prior Year's Recommendations

In connection with an audit of Shands' June 30, 2011 consolidated basic financial statements, we made certain comments and recommendations, which have been reviewed in order to determine the status of implementation. A summary of the status of prior year's recommendations is as follows

Recommendations	Status				
Recent Accounting Pronouncements					
 GASB Statement No 63, Financial Reporting of Deferred Outflows of Resources, Deferred Inflows of Resources, and Net Position 	Shands is required to adopt GASB No 63 for the year ended June 30, 2013				
GASB Statement No 64, Derivative Instruments: Application of Hedge Accounting Termination Provisions	The adoption of GASB No 64 did not have a significant impact on Shands' consolidated basic financial statements				
Business Recommendations					
Actuarial Review of Medical Claims Liability	The reserve for medical claims liability for the year ended June 30, 2012 was appropriately stated				
Purchases and Payables Cycle	Many of the control failures noted for the year ended June 30, 2011 were remediated during the year ended June 30, 2012 Additionally, there were no material misstatements noted in the purchases and payables cycle for the year ended June 30, 2012				

Software ID: 11000230 Software Version: v2011.1.0

EIN: 59-1943502

Name: SHANDS TEACHING HOSPITAL AND CLINICS INC

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

(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	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
DAVID GUZICK President	2 0 0	х		Х				0	875,947	0
J BERNARD MACHEN Chairman	2 00	Х		Х				0	853,714	0
TIMOTHY M GOLDFARB CEO	37 00	Х		х				1,896,564	0	48,332
CAROLYN K ROBERTS Director	2 00	Х						0	0	0
DANNY PONCE Director	2 00	Х						0	0	0
DAVIS M REMBERT JR Director	2 00	Х						0	0	0
F KAYSER ENNEKING Director	2 00	Х						0	476,254	0
JOAN D RUFFIER Director	2 00	Х						0	0	0
JO SEPH TYNDALL Director	2 00	Х						0	374,989	0
KEVIN BEHRNS Director	2 00	Х						0	667,862	0
MATTHEW FAJACK Director	2 00	Х						0	252,916	0
MICHAEL GOOD Director	2 00	Х						0	658,710	0
PAUL OKUNIEFF Director	2 00	Х						0	762,367	0
ROLAND C DANIELS Director	2 00	Х						0	0	0
STEPHEN SHEY Director	2 00	Х						0	0	0
TERESA DOLAN Director	2 00	Х						0	327,475	0
JAMES ROBERTS Secretary	33 00			Х				815,591	0	34,882
WILLIAM J ROBINSON Treasurer	40 00			X				782,570	0	34,491
BRADLEY POLLITT VP Facilities Development	40 00				х			247,860	0	22,241
EDWARD JIMENEZ COO	40 00				х			683,231	0	40,940
IRENE ALEXAITIS VP Nursing Shands UF	40 00				х			283,019	0	29,862
JANET CHRISTIE Sr VP Human Resources	40 00				х			404,473	0	26,032
MARVIN DEWAR UFP CEO/COM SrAssoc Dean	40 00				Х			470,731	0	22,475
MICHAEL LAWTON VP Managed Care & Network Dev	40 00				х			326,302	0	27,652
SCOTT HAWIG VP Finance	40 00				Х			299,068	0	26,780

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

(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustée or director	Institutional Trustee	Officei	Key employee	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
ANTHONY CARVALHO Pres FL Stat Tch Hosp Coun	40 00					Х		442,631	0	28,894
JAMES BURKHART President & Adm Shands Jax	40 00					Х		641,900	0	32,083
KARI LOU CASSEL Sr VP & CIO	40 00					х		355,540	0	25,474
MARINA CECCHINI Adm Shands Rehab/Vısta	40 00					Х		300,040	0	27,821
MICHAEL GLEASON VP Finance-Jax	40 00					Х		352,783	0	27,367