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Form 990



Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 10-01-2011 and ending 09-30-2012

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Terminated

☐ Amended return

☐ Application pending

C Name of organization

SHARP HEALTHCARE FOUNDATION

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)

8695 SPECTRUM CENTER BLVD

Room/suite

City or town, state or country, and ZIP + 4

SAN DIEGO, CA 921231489

F Name and address of principal officer

WILLIAM S LITTLEJOHN
8695 SPECTRUM CENTER BLVD
SAN DIEGO, CA 921231489

H(a) Is this a group return for affiliates?

☐ Yes ☒ No

H(b) Are all affiliates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) () ☐ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website:

WWW.SHARP.COM

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation

1979

M State of legal domicile

CA

Part I	Summary
Activities & Governance	<div><div>1</div><div>Briefly describe the organization's mission or most significant activities</div><div>PROVIDE SUPPORT AND ASSISTANCE TO SHARP HEALTHCARE</div></div>
	<div><div>2</div><div>Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets</div></div>
	<div><div>3</div><div>Number of voting members of the governing body (Part VI, line 1a)</div><div>33</div></div>
	<div><div>4</div><div>Number of independent voting members of the governing body (Part VI, line 1b)</div><div>25</div></div>
	<div><div>5</div><div>Total number of individuals employed in calendar year 2011 (Part V, line 2a)</div><div>22</div></div>
	<div><div>6</div><div>Total number of volunteers (estimate if necessary)</div><div>100</div></div>
	<div><div>7a</div><div>Total unrelated business revenue from Part VIII, column (C), line 12</div><div>0</div></div>
	<div><div>7b</div><div>Net unrelated business taxable income from Form 990-T, line 34</div><div>0</div></div>
Revenue	<div><div>8</div><div>Contributions and grants (Part VIII, line 1h)</div></div>
	<div><div>9</div><div>Program service revenue (Part VIII, line 2g)</div></div>
	<div><div>10</div><div>Investment income (Part VIII, column (A), lines 3, 4, and 7d)</div></div>
	<div><div>11</div><div>Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</div></div>
	<div><div>12</div><div>Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)</div></div>
Expenses	<div><div>13</div><div>Grants and similar amounts paid (Part IX, column (A), lines 1–3)</div></div>
	<div><div>14</div><div>Benefits paid to or for members (Part IX, column (A), line 4)</div></div>
	<div><div>15</div><div>Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)</div></div>
	<div><div>16a</div><div>Professional fundraising fees (Part IX, column (A), line 11e)</div></div>
	<div><div>b</div><div>Total fundraising expenses (Part IX, column (D), line 25)</div></div>
	<div><div>17</div><div>Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)</div></div>
	<div><div>18</div><div>Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)</div></div>
	<div><div>19</div><div>Revenue less expenses Subtract line 18 from line 12</div></div>
Net Assets or Fund Balances	<div><div>20</div><div>Total assets (Part X, line 16)</div></div>
	<div><div>21</div><div>Total liabilities (Part X, line 26)</div></div>
	<div><div>22</div><div>Net assets or fund balances Subtract line 21 from line 20</div></div>

Part II Signature Block

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

Sign Here

Signature of officer

WILLIAM S LITTLEJOHN SVP/CEO FOUNDATION

2013-08-08

Date

Paid Preparer's Use Only

Preparer's signature

Firm's name (or yours if self-employed), address, and ZIP + 4

Date

ERNST & YOUNG US LLP
4370 LA JOLLA VILLAGE DR SUITE 500
SAN DIEGO, CA 92122

Check if self-employed

Preparer's taxpayer identification number (see instructions)

EIN

Phone no

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

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2011)

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III ☐ Yes ☒ No

1

Briefly describe the organization's mission

SEE SCHEDULE O

2

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

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

3

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

If "Yes," describe these changes on Schedule O

4

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

4a

(Code) (Expenses \$ 11,039,622 including grants of \$ 10,865,244) (Revenue \$ 3,958,721)

PROVIDED SUPPORT AND ASSISTANCE TO SHARP HEALTHCARE SEE SCHEDULE O FOR COMMUNITY BENEFITS REPORT

4b

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

4c

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

4d

Other program services (Describe in Schedule O)



















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

4e

Total program service expenses \$ 11,039,622

Part IV

Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i> 	1	Yes
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (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? <i>If "Yes," complete Schedule C, Part I.</i> 	3	No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i> 	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? <i>If "Yes," complete Schedule C, Part III.</i> 	5	No
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? <i>If "Yes," complete Schedule D, Part I.</i> 	6	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II.</i> 	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i> 	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? <i>If "Yes," complete Schedule D, Part IV.</i> 	9	No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i> 	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, line 10? <i>If "Yes," complete Schedule D, Part VI.</i> 	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? <i>If "Yes," complete Schedule D, Part VII.</i> 	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? <i>If "Yes," complete Schedule D, Part VIII.</i> 	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? <i>If "Yes," complete Schedule D, Part IX.</i> 	11d	Yes
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> 	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)? <i>If "Yes," complete Schedule D, Part X.</i> 	11f	Yes
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i> 	12a	No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.</i> 	12b	Yes
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>	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? <i>If "Yes," complete Schedule F, Part I.</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 ? <i>If "Yes," complete Schedule F, Part II and IV.</i>	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 ? <i>If "Yes," complete Schedule F, Part III and IV.</i>	16	No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i>	17	No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>	18	Yes
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>	19	No
20a	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H.</i>	20a	No
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	

Part 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? <i>If "Yes," complete Schedule I, Parts I and II</i>	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? <i>If "Yes," complete Schedule I, Parts I and III</i>	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? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i>	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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a	Yes	
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	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? <i>If "Yes," complete Schedule R, Part VI</i>	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 <input checked="" type="checkbox"/>			
		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. .	1a	79
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return.	2a	22
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?	4a	No
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	Yes
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	21
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Yes
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders.	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. 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.	13b	
c	Enter the aggregate amount of reserves on hand.	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a33		
b	Enter the number of voting members included in line 1a, above, who are independent	1b25		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	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	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

Section B. Policies

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	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		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review 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?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
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		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	CA
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon 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.	STACI DICKERSON 8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 92123 (858) 499-5150

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

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

Form **990** (2011)

Part VII

1b	Sub-Total			
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	0	2,718,315	202,094

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization: 0

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete 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? <i>If "Yes," complete Schedule J for such individual</i>	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 "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. 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
NEW WAY TREE SERVICES INC 7485 RONSON RD STE 100 SAN DIEGO, CA 92111		111,397

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶1

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c	408,378				
	d	Related organizations	1d	86,405				
	e	Government grants (contributions)	1e	479,386				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	5,731,546				
	g	Noncash contributions included in lines 1a-1f \$ 192,160						
	h	Total. Add lines 1a-1f		6,705,715				
Program Service Revenue			Business Code					
	2a	FUNDRAISING ACTIVITIES	900099	3,240,909	3,240,909			
	b	HEALTHCARE EDUCATION	900099	705,682	705,682			
	c	SSA BACK-TO-WORK	900099	12,130	12,130			
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f		3,958,721				
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		1,336,302			1,336,302	
	4	Income from investment of tax-exempt bond proceeds . .						
	5	Royalties						
	6a	(i) Real		(ii) Personal				
		Gross rents						
		b Less rental expenses						
		c Rental income or (loss)						
	d	Net rental income or (loss)						
	7a	(i) Securities		(ii) Other				
		Gross amount from sales of assets other than inventory	16,158,321	9,575				
		b Less cost or other basis and sales expenses	16,261,558	16,000				
		c Gain or (loss)	-103,237	-6,425				
	d	Net gain or (loss)		-109,662			-109,662	
	8a	Gross income from fundraising events (not including \$ 408,378 of contributions reported on line 1c) See Part IV, line 18						
	a		224,097					
	b	Less direct expenses	b	250,612				
	c	Net income or (loss) from fundraising events . .		-26,515			-26,515	
	9a	Gross income from gaming activities See Part IV, line 19						
	a		13,280					
	b	Less direct expenses	b	320				
	c	Net income or (loss) from gaming activities . .		12,960			12,960	
	10a	Gross sales of inventory, less returns and allowances						
a								
b	Less cost of goods sold . . .	b						
c	Net income or (loss) from sales of inventory . .							
Miscellaneous Revenue		Business Code						
11a								
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d							
12	Total revenue. See Instructions		11,877,521	3,958,721	0	1,213,085		

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	10,815,244	10,815,244		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	50,000	50,000		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	408,540	20,427	81,708	306,405
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,932,683	96,634	386,536	1,449,513
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	89,592	4,480	17,918	67,194
9	Other employee benefits	265,013	13,251	53,003	198,759
10	Payroll taxes	138,432	6,922	27,686	103,824
11	Fees for services (non-employees)				
a	Management	42,541	2,127	8,508	31,906
b	Legal	5,857		1,464	4,393
c	Accounting	5,560		5,560	
d	Lobbying	131	7	26	98
e	Professional fundraising See Part IV, line 17	11,500			11,500
f	Investment management fees	106,744		106,744	
g	Other	19,666	983	3,933	14,750
12	Advertising and promotion				
13	Office expenses	246,182	12,309	49,236	184,637
14	Information technology	36,373	1,819	7,275	27,279
15	Royalties				
16	Occupancy				
17	Travel	15,539	777	3,108	11,654
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	7,107	355	1,421	5,331
20	Interest	7,440	372	1,488	5,580
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	49,190	2,460	9,838	36,892
23	Insurance	2,700	135	540	2,025
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	DUES, SUBSCRIPTION, FOO	226,399	11,320	45,280	169,799
b					
c					
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	14,482,433	11,039,622	811,272	2,631,539
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing				1	
	2	Savings and temporary cash investments			1,873,111	2	919,028
	3	Pledges and grants receivable, net			12,321,778	3	8,736,431
	4	Accounts receivable, net				4	
	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	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			18,891	9	28,634
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	253,814	187,452	10c	185,964
	b	Less accumulated depreciation	10b	67,850			
	11	Investments—publicly traded securities			23,574,926	11	26,696,703
	12	Investments—other securities See Part IV, line 11				12	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			50,663,142	15	50,386,743
	16	Total assets. Add lines 1 through 15 (must equal line 34)			88,639,300	16	86,953,503
Liabilities	17	Accounts payable and accrued expenses			528,527	17	514,598
	18	Grants payable				18	
	19	Deferred revenue			74,223	19	142,540
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	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			43,009,225	25	41,458,225
	26	Total liabilities. Add lines 17 through 25			43,611,975	26	42,115,363
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			668,333	27	2,635,253
	28	Temporarily restricted net assets			40,057,457	28	37,743,730
	29	Permanently restricted net assets			4,301,535	29	4,459,157
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			45,027,325	33	44,838,140
	34	Total liabilities and net assets/fund balances			88,639,300	34	86,953,503

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	11,877,521
2	Total expenses (must equal Part IX, column (A), line 25)	2	14,482,433
3	Revenue less expenses Subtract line 2 from line 1	3	-2,604,912
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	45,027,325
5	Other changes in net assets or fund balances (explain in Schedule O)	5	2,415,727
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	44,838,140

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization SHARP HEALTHCARE FOUNDATION	Employer identification number 95-3492461
---	--

Part I

Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety Se**section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

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

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

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

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	19,890,398	13,595,968	8,152,106	7,317,682	6,705,715	55,661,869
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	19,890,398	13,595,968	8,152,106	7,317,682	6,705,715	55,661,869
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						14,819,713
6 Public Support. Subtract line 5 from line 4						40,842,156

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	19,890,398	13,595,968	8,152,106	7,317,682	6,705,715	55,661,869
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	567,811	585,651	591,936	972,581	1,336,302	4,054,281
9 Net income from unrelated business activities, whether or not the business is regularly carried on		1,336	4,916	8,358		14,610
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets			16,637			16,637
11 Total support (Add lines 7 through 10)						59,747,397
12 Gross receipts from related activities, etc (See instructions)					12	12,164,293
13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage		
14	Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))	14 68 360 %
15	Public Support Percentage for 2010 Schedule A, Part II, line 14	15 70 900 %
16a	33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>
b	33 1/3% support test—2010. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>
17a	10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization	<input type="checkbox"/>
b	10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization	<input type="checkbox"/>
18	Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions	<input type="checkbox"/>

Part IIIPart 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 in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12.)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage			
15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15		
16 Public support percentage from 2010 Schedule A, Part III, line 15	16		

Section D. Computation of Investment Income Percentage			
17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17		
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18		
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 more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization			
b 33 1/3% support tests—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 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization			
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions			

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the 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, PART II, LINE 10, EXPLANATION OF OTHER INCOME MISCELLANEOUS

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below.

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

OMB No 1545-0047

2011

Open to Public Inspection

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

- 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 the organization SHARP HEALTHCARE FOUNDATION	Employer identification number 95-3492461
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV	
2	Political expenditures	▶ \$
3	Volunteer hours	

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

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," describe in Part IV	

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

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities	▶ \$
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$
4	Did the filing organization file Form 1120-POL for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	

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

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A
- 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)
- B
- Check
- ☐
- if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount Enter the amount from the following table in both columns														
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		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		
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 line 1f)														
h	Subtract line 1g from line 1a If zero or less, enter -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?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

Lobbying 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					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B

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

		(a)		(b)
		Yes	No	Amount
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			
	a Volunteers?		No	
	b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	
	c Media advertisements?		No	
	d Mailings to members, legislators, or the public?		No	
	e Publications, or published or broadcast statements?		No	
	f Grants to other organizations for lobbying purposes?		No	
	g Direct contact with legislators, their staffs, government officials, or a legislative body?		No	
	h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
	i Other activities? If "Yes," describe in Part IV	Yes		131
	j Total lines 1c through 1i			131
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

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

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

Part III-B

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

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	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
EXPLANATION OF LOBBYING ACTIVITIES	PART II-B, LINE 1	SHARP HEALTHCARE FOUNDATION (SHF) PAYS ANNUAL DUES TO THE ASSOCIATION OF FUNDRAISING PROFESSIONALS (AFP) AND THE ASSOCIATION FOR HEALTHCARE PHILANTHROPY (AHP). AFP AND AHP HAVE DETERMINED THAT A PORTION OF THEIR DUES ARE USED FOR LOBBYING PURPOSES.

SCHEDULE D

(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b**
▶ **Attach to Form 990. ▶ See separate instructions.**

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
SHARP HEALTHCARE FOUNDATION

Employer identification number

95-3492461

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

Part II

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

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

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

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

3

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

4

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

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

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

7

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

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III

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

1a

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ _____

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b

Assets included in Form 990, Part X

▶ \$ _____

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

Cat No 52283D

Schedule D (Form 990) 2011

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

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

- ☐ Public exhibition
- ☐ Loan or exchange programs
- ☐ Scholarly research
- ☐ Other
- ☐ Preservation for future generations

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

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

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

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

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

	Amount
1c	
1d	
1e	
1f	

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

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

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

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a Beginning of year balance	7,221,406	7,525,046	6,616,919	6,455,982	
b Contributions	93,034	-10,684	7,629	231,572	
c Investment earnings or losses	927,635	-207,299	966,905	38,551	
d Grants or scholarships	105,600	84,068	66,047	66,504	
e Other expenditures for facilities and programs	138,135	1,589	0	42,682	
f Administrative expenses		0	0	0	
g End of year balance	7,998,340	7,221,406	7,525,406	6,616,919	

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

- Board designated or quasi-endowment 1 000 %
- Permanent endowment 99 000 %
- Term endowment 0 %

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

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

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

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

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		168,408		168,408
b Buildings				
c Leasehold improvements				
d Equipment		85,406	67,850	17,556
e Other				
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				185,964

Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	11,877,521
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	14,482,433
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-2,604,912
4	Net unrealized gains (losses) on investments	4	2,784,540
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-368,813
9	Total adjustments (net) Add lines 4 - 8	9	2,415,727
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-189,185

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return			
1	Total revenue, gains, and other support per audited financial statements	1	5,601,979
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	2,784,540
b	Donated services and use of facilities	2b	77,904
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	-117,881
e	Add lines 2a through 2d	2e	2,744,563
3	Subtract line 2e from line 1	3	2,857,416
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	112,630
b	Other (Describe in Part XIV)	4b	8,907,475
c	Add lines 4a and 4b	4c	9,020,105
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	11,877,521

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return			
1	Total expenses and losses per audited financial statements	1	3,635,057
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	77,904
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	250,932
e	Add lines 2a through 2d	2e	328,836
3	Subtract line 2e from line 1	3	3,306,221
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	112,630
b	Other (Describe in Part XIV)	4b	11,063,582
c	Add lines 4a and 4b	4c	11,176,212
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	14,482,433

Part XIVSupplemental Information

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

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	SHARP HEALTHCARE FOUNDATION HAS 25 BOARD DESIGNATED AND PERMANENT ENDOWMENTS RESTRICTED FOR A VARIETY OF PURPOSES, SUCH AS REHABILITATION, EMERGENCY SERVICES, WOMEN'S RESEARCH, ONCOLOGY, NURSING EDUCATION, LABORATORY, HOSPITAL EQUIPMENT AND TECHNOLOGY, HOSPITAL LIBRARY, AND MORE
PART XI, LINE 8 - OTHER ADJUSTMENTS		PLEDGE WRITE OFF -368,813
PART XII, LINE 2D - OTHER ADJUSTMENTS		DIRECT EXPENSES ON FUNDRAISING EVENTS & GAMING ACTIVITIES 250,932 UNCOLLECTIBLE PLEDGES -368,813
PART XII, LINE 4B - OTHER ADJUSTMENTS		TEMPORARILY RESTRICTED REVENUE 8,756,281 PERMANENTLY RESTRICTED REVENUE 157,620 LOSS ON SALE OF ASSETS -6,426
PART XIII, LINE 2D - OTHER ADJUSTMENTS		DIRECT EXPENSES ON FUNDRAISING EVENTS & GAMING ACTIVITIES 250,932
PART XIII, LINE 4B - OTHER ADJUSTMENTS		TEMPORARILY RESTRICTED EXPENSES 11,070,008 LOSS ON SALE OF ASSETS -6,426
		PART X, LINE 2 SHARP RECOGNIZES TAX BENEFITS FROM ANY UNCERTAIN TAX POSITIONS ONLY IF IT IS MORE LIKELY THAN NOT THE TAX POSITION WILL BE SUSTAINED, BASED SOLELY ON ITS TECHNICAL MERITS, WITH THE TAXING AUTHORITY HAVING FULL KNOWLEDGE OF ALL RELEVANT INFORMATION. SHARP RECORDS A LIABILITY FOR UNRECOGNIZED TAX BENEFITS FROM UNCERTAIN TAX POSITIONS AS DISCRETE TAX ADJUSTMENTS IN THE FIRST INTERIM PERIOD THAT THE MORE LIKELY THAN NOT THRESHOLD IS NOT MET. SHARP RECOGNIZES DEFERRED TAX ASSETS AND LIABILITIES FOR TEMPORARY DIFFERENCES BETWEEN THE FINANCIAL REPORTING BASIS AND THE TAX BASIS OF ITS ASSETS AND LIABILITIES ALONG WITH NET OPERATING LOSS AND TAX CREDIT CARRYOVERS ONLY FOR TAX POSITIONS THAT MEET THE MORE LIKELY THAN NOT RECOGNITION CRITERIA. AT SEPTEMBER 30, 2012 AND 2011, NO SUCH ASSETS OR LIABILITIES WERE RECORDED.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization
SHARP HEALTHCARE FOUNDATION

Employer identification number
95-3492461

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a

☐ Mail solicitations

b

☐ Internet and e-mail solicitations

c

☐ Phone solicitations

d

☐ In-person solicitations

e

☐ Solicitation of non-government grants

f

☐ Solicitation of government grants

g

☐ Special fundraising events

2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☐ Yes ☐ No

b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total ▶						

3

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		SMH GOLF (event type)	SCV GOLF (event type)	2 (total number)	(Add col (a) through col (c))
Revenue	1	Gross receipts	215,066	170,431	246,978
	2	Less Charitable contributions	154,086	86,680	167,612
	3	Gross income (line 1 minus line 2)	60,980	83,751	79,366
Direct Expenses	4	Cash prizes	0	0	0
	5	Non-cash prizes	15,308	5,608	35,104
	6	Rent/facility costs	28,900	20,420	0
	7	Food and beverages	22,012	35,002	75,260
	8	Entertainment	650	900	200
	9	Other direct expenses	653	2,457	0
	10	Direct expense summary Add lines 4 through 9 in column (d)			(242,474)
	11	Net income summary Combine lines 3 and 10 in column (d).			-18,377

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
Revenue	1	Gross revenue			
	2	Cash prizes			
Direct Expenses	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
7 Direct expense summary Add lines 2 through 5 in column (d)					()
8 Net gaming income summary Combine lines 1 and 7 in column (d)					

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," Explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," Explain _____

- 11

Does the organization operate gaming activities with nonmembers?

Yes

No
- 12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

Yes

No

13

Indicate the percentage of gaming activity operated in

a	The organization's facility	13a
b	An outside facility	13b

14

Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name

Address

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

Yes

No

b

If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$

c

If "Yes," enter name and address

Name

Address

16

Gaming manager information

Name

Gaming manager compensation

\$

Description of services provided

Director/officer

Employee

Independent contractor

17

Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

Yes

No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$

Part IV

Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
------------	-----------------	-------------

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization
SHARP HEALTHCARE FOUNDATION

Employer identification number
95-3492461

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

Yes

No
- 2

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

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) SHARP MEMORIAL HOSPITAL8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489	95-3782169	501(C)3		82,922	FMV	EQUIPMENT	PROGRAM SUPPORT
(2) SHARP MEMORIAL HOSPITAL8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489	95-3782169	501(C)3	7,325,785				PROGRAM SUPPORT
(3) SHARP HEALTHCARE 8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489	95-6077327	501(C)3		100	FMV	EQUIPMENT	PROGRAM SUPPORT
(4) SHARP HEALTHCARE 8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489	95-6077327	501(C)3	1,775,149				PROGRAM SUPPORT
(5) SHARP CHULA VISTA MEDICAL CENTER8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489	95-2367304	501(C)3		16,667	FMV	EQUIPMENT	PROGRAM SUPPORT
(6) SHARP CHULA VISTA MEDICAL CENTER8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489	95-2367304	501(C)3	1,061,620				PROGRAM SUPPORT
(7) TORREY PINES KIWANIS FOU8677 VILLA LA JOLLA DR STE 1144 LA JOLLA, CA 92037	33-0329642	501(C)3	15,000				PROGRAM SUPPORT
(8) ASSOCIATED STUDENTS SDSU5250 CAMPANILE DR SAN DIEGO, CA 921821948	95-6042622	501(C)3	6,528				PROGRAM SUPPORT
(9) CAMPANILE FOUNDATION5500 CAMPANILE DRIVE SAN DIEGO, CA 921824124	33-0868418	501(C)3	500,000				PROGRAM SUPPORT
(10) SAN DIEGO WHEELCHAIR ATHLETIC 2425 FENTON ST CHULA VISTA, CA 91914	56-2386514	501(C)3	10,690				PROGRAM SUPPORT

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

7

3

Enter total number of other organizations listed in the line 1 table

Part III

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

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) CONE GRANT	4	50,000			

Part IV

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 THE ORGANIZATION RAISES FUNDS ON BEHALF OF AND PROVIDES ASSISTANCE TO THE SHARP HEALTHCARE SYSTEM THE FUNDS RAISED MAY BE RESTRICTED BY THE DONOR FOR A SPECIFIC PURPOSE OR MAY BE UNRESTRICTED SHARP HEALTHCARE, SHARP MEMORIAL HOSPITAL, AND SHARP CHULA VISTA MEDICAL CENTER SUBMIT REQUESTS FOR SUPPORT BASED ON THE AVAILABILITY OF THESE SPECIFICALLY DESIGNATED FUNDS FUNDS MAY ALSO BE DISPERSED TO GROSSMONT HOSPITAL CORPORATION AND SHARP CORONADO HOSPITAL AND HEALTHCARE CENTER TO AFFECT A SYSTEM-WIDE INITIATIVE THE ORGANIZATION MAY ALSO UTILIZE UNRESTRICTED FUNDS TO PROVIDE ADDITIONAL SUPPORT IN THESE INSTANCES, A COMMITTEE COMPRISED OF ORGANIZATION MANAGEMENT AND BOARD MEMBERS REVIEWS PROPOSALS AND REQUESTS FOR FUNDING AND DETERMINES WHICH PROJECTS TO FUND ADDITIONALLY, THE MANAGEMENT TEAM EVALUATES REQUESTS FOR CONTRIBUTIONS FROM OUTSIDE ORGANIZATIONS TAKING INTO ACCOUNT HOW THEY ALIGN WITH THE ORGANIZATION'S MISSION AFTER AMOUNTS ARE FUNDED THERE IS NO ADDITIONAL MONITORING THAT TAKES PLACE

Software ID:
Software Version:
EIN: 95-3492461
Name: SHARP HEALTHCARE FOUNDATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHARP MEMORIAL HOSPITAL8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489	95-3782169	501(C)3		82,922	FMV	EQUIPMENT	PROGRAM SUPPORT
SHARP MEMORIAL HOSPITAL8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489	95-3782169	501(C)3	7,325,785				PROGRAM SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHARP HEALTHCARE8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489	95- 6077327	501(C)3		100	FMV	EQUIPMENT	PROGRAM SUPPORT
SHARP HEALTHCARE8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489	95- 6077327	501(C)3	1,775,149				PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHARP CHULA VISTA MEDICAL CENTER8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489	95-2367304	501(C)3		16,667	FMV	EQUIPMENT	PROGRAM SUPPORT
SHARP CHULA VISTA MEDICAL CENTER8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489	95-2367304	501(C)3	1,061,620				PROGRAM SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TORREY PINES KIWANIS FOU8677 VILLA LA JOLLA DR STE 1144 LA JOLLA, CA 92037	33- 0329642	501(C)3	15,000				PROGRAM SUPPORT
ASSOCIATED STUDENTS SDSU 5250 CAMPANILE DR SAN DIEGO, CA 921821948	95- 6042622	501(C)3	6,528				PROGRAM SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAMPANILE FOUNDATION5500 CAMPANILE DRIVE SAN DIEGO, CA 921824124	33-0868418	501(C)3	500,000				PROGRAM SUPPORT
SAN DIEGO WHEELCHAIR ATHLETIC2425 FENTON ST CHULA VISTA, CA 91914	56-2386514	501(C)3	10,690				PROGRAM SUPPORT

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2011

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization
SHARP HEALTHCARE FOUNDATION

Employer identification number
95-3492461

Part I

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

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use 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 of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) WILLIAM LITTLEJOHN	(i)	0	0	0	0	0	0	0
	(ii)	298,514	60,165	21,705	14,099	15,141	409,624	0
(2) COLLEEN MCNALLY MD	(i)	0	0	0	0	0	0	0
	(ii)	157,213	0	0	0	0	157,213	0
(3) MICHAEL MURPHY	(i)	0	0	0	0	0	0	0
	(ii)	1,084,909	184,453	52,796	75,714	15,141	1,413,013	0
(4) MARSHA LUBICK	(i)	0	0	0	0	0	0	0
	(ii)	168,800	32,814	19,070	11,926	11,418	244,028	0
(5) KATHRYN DUFF	(i)	0	0	0	0	0	0	0
	(ii)	179,022	32,568	557	8,782	6,833	227,762	0
(6) PAMELA BARNETT	(i)	0	0	0	0	0	0	0
	(ii)	115,332	10,188	6,830	6,936	11,016	150,302	0

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
	PART I, LINE 1A	THE ORGANIZATION PAYS UNIVERSITY CLUB DUES FOR WILLIAM S. LITTLEJOHN, SVP/CEO FOUNDATIONS, FOR BUSINESS PURPOSES, AND THEREFORE, THE AMOUNT WAS NOT REPORTED AS TAXABLE COMPENSATION.
	PART I, LINE 4B	SHARP HEALTHCARE ("COMPANY") SPONSORS AN EXECUTIVE FLEXIBLE BENEFIT PLAN ("PLAN") TO PROVIDE DESIGNATED EXECUTIVES WITH A REASONABLE LEVEL OF BENEFITS IN RETURN FOR THEIR CONTINUED EMPLOYMENT WITH THE COMPANY. THE PLAN IS ADMINISTERED ON A PLAN YEAR BASIS OF JANUARY 1 TO DECEMBER 31. CHANGES IN FLEXIBLE BENEFIT OPTIONS ARE PERMITTED ANNUALLY, EFFECTIVE JANUARY 1 OF THE NEW PLAN YEAR. THE PROVISIONS OF THE PLAN, WHICH WERE RESTATED EFFECTIVE AS OF DECEMBER 31, 2008, ARE DESCRIBED BELOW AS RESTATED. THE PLAN IS AVAILABLE TO THE CHIEF EXECUTIVE OFFICER, EXECUTIVE VICE PRESIDENT OF HOSPITAL OPERATIONS, AND SENIOR VICE PRESIDENTS. THE FLEXIBLE BENEFIT ALLOWANCE AVAILABLE TO EACH PARTICIPANT EACH PLAN YEAR SHALL EQUAL THE SUM OF THE FOLLOWING: - A COMPANY PROVIDED BASE ALLOWANCE EQUAL TO 18% OF THE PARTICIPANT'S BASE SALARY - A PARTICIPANT DEFERRAL UP TO 6% OF THE PARTICIPANT'S PRE-TAX BASE SALARY FOR SUCH PLAN YEAR AS ELECTED BY THE PARTICIPANT - A COMPANY MATCH SHOULD THE PARTICIPANT MAKE AN ELECTIVE DEFERRAL FOR A PLAN YEAR. THE COMPANY MATCH BEGINS AT 2% FOR THE FIRST 1% ELECTIVE DEFERRAL AND INCREASES 0.5% FOR EACH ADDITIONAL 1% ELECTIVE DEFERRAL, TO A MAXIMUM MATCH OF 4.5% ON A 6% ELECTIVE DEFERRAL. THE PLAN ALLOWS PARTICIPANTS TO USE THE FLEXIBLE BENEFIT ALLOWANCE TO PURCHASE ADDITIONAL LONG-TERM DISABILITY COVERAGE, LONG-TERM CARE COVERAGE, AND FLEXIBLE SURVIVOR COVERAGE/ACCUMULATION BENEFITS (LIFE INSURANCE). PARTICIPANTS IN THE FLEXIBLE SURVIVOR COVERAGE/ACCUMULATION BENEFITS PLAN PREVIOUSLY COULD ELECT TO APPLY FLEXIBLE BENEFIT ALLOWANCE TO ACQUIRE ADDITIONAL SURVIVOR COVERAGE, OR TOWARD DEPOSITS TO THE SUPPLEMENTAL SURVIVOR ACCUMULATION BENEFIT PLAN ("SSAB") TO FUND POST-RETIREMENT SURVIVOR BENEFITS, SUBJECT TO THE ERISA LIMIT PROVIDED THEIR POLICIES WERE ISSUED PRIOR TO SEPTEMBER 18, 2003. THE COMPANY SHALL AUTOMATICALLY CONTINUE WHATEVER ELECTIVE COVERAGE AND ADDITIONAL DEPOSIT ELECTIONS THAT WERE IN PLACE FOR THE SSAB DURING THE 2008 PLAN YEAR. NO ELECTIVE COVERAGE OR ADDITIONAL DEPOSITS WERE AVAILABLE TO PARTICIPANTS WHOSE POLICIES WERE ISSUED ON OR AFTER SEPTEMBER 18, 2003. ANY FLEXIBLE BENEFIT ALLOWANCE THAT REMAINS AFTER PURCHASING THESE ADDITIONAL COVERAGES SHALL BE PAID TO THE PARTICIPANT IN CASH IN EQUAL INSTALLMENTS THROUGHOUT THE PLAN YEAR, NOT LESS FREQUENTLY THAN QUARTERLY. IF THE PARTICIPANT SEPARATES FROM SERVICE DURING THE PLAN YEAR, THE PARTICIPANT FORFEITS ANY UNPAID ALLOWANCE.
SUPPLEMENTAL INFORMATION	PART III	PART I, LINE 3: THE COMPENSATION COMMITTEE OF SHARP HEALTHCARE, THE PARENT ORGANIZATION, ESTABLISHES THE COMPENSATION OF THE CHIEF EXECUTIVE OFFICER. THE COMPENSATION COMMITTEE ENGAGES INDEPENDENT COMPENSATION CONSULTANTS AND THE AMOUNT IS APPROVED BY BOTH THE COMPENSATION COMMITTEE AND BOARD OF DIRECTORS.

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
SHARP HEALTHCARE FOUNDATION

Employer identification number
95-3492461

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		31,633	DONOR VALUATION
6 Cars and other vehicles	X	7	29,350	SALE PRICE
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	3	17,392	FMV
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—Other	X	2	8,408	APPRAISAL
18 Collectibles	X	4	8,241	DONOR VALUATION
19 Food inventory				
20 Drugs and medical supplies	X	5	82,153	DONOR VALUATION
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (<u>EQUIPMENT</u>) GIFT	X	2	8,675	DONOR VALUATION
26 Other ► (<u>CERTIFICATE</u>)	X	9	6,908	DONOR VALUATION
27 Other ► (_____)				
28 Other ► (_____)				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement			29	36

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?

b If "Yes," describe in Part II

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II

Yes

No

No

Yes

Yes

Part III

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

Identifier	Return Reference	Explanation
METHOD FOR DETERMINING NUMBER OF CONTRIBUTORS	PART I, COLUMN (B)	THE NUMBER OF CONTRIBUTIONS IS BASED ON THE NUMBER OF DONATED GIFTS OR GIFT PACKAGES
THIRD PARTY USE	PART I, LINE 32B	STOCK GIFTS ARE TRANSFERRED TO THE INVESTMENT MANAGER TO BE SOLD VEHICLES (EXCEPT THOSE DONATED FOR ORGANIZATIONAL USE) ARE SOLD AT AUCTION

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ****Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.**
▶ **Attach to Form 990 or 990-EZ.**

OMB No 1545-0047

2011**Open to Public
Inspection**Name of the organization
SHARP HEALTHCARE FOUNDATION**Employer identification number**

95-3492461

Identifier	Return Reference	Explanation
ORGANIZATIONS MISSION	FORM 990, PART III, LINE 1	TO ENGAGE IN THE SOLICITATION, RECEIPT AND ADMINISTRATION OF PROPERTY, AND FROM TIME TO TIME TO DISBURSE SUCH PROPERTY AND THE INCOME THEREFROM TO, OR FOR THE BENEFIT OF, THE SAN DIEGO HOSPITAL ASSOCIATION, A CALIFORNIA NONPROFIT PUBLIC BENEFIT CORPORATION WHICH IS TAX-EXEMPT UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, AND ITS NONPROFIT SUBSIDIARIES WHICH ARE TAX-EXEMPT UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE DISTRIBUTIONS FOR SHARP REES-STEALY CORPORATION SHALL BE LIMITED TO FUNDS DESIGNATED BY THE DONOR FOR THAT PURPOSE SUCH DISBURSEMENTS SHALL BE USED BY THE FOREGOING ENTITIES FOR THE FOLLOWING PURPOSES (1) MAJOR CAPITAL EXPENDITURES, (2) MAJOR RENOVATION OF BUILDINGS, (3) MAJOR EQUIPMENT PURCHASES, (4) MEDICAL AND OTHER PROFESSIONAL HEALTH CARE EDUCATION, (5) COMMUNITY HEALTH EDUCATION, AND (6) MEDICAL RESEARCH THE CORPORATION MAY ALSO SOLICIT, RECEIVE AND ADMINISTER FUNDS IN THE FORM OF DONOR-ADVISED FUNDS, SUBJECT TO THE FOLLOWING CONDITIONS (1) THE BOARD OF DIRECTORS OF THE CORPORATION MAY CONSIDER THE RECOMMENDATIONS OF DONORS FOR DISTRIBUTIONS FROM SAID FUNDS BUT SHALL AT ALL TIMES HAVE AND RETAIN SOLE AUTHORITY OVER SUCH DISTRIBUTIONS, AND (2) DISTRIBUTIONS FROM ANY SUCH FUND MAY, IN THE SOLE DISCRETION OF THE CORPORATION'S BOARD OF DIRECTORS, BE MADE TO OR FOR THE BENEFIT OF ONE OR MORE ORGANIZATIONS OTHER THAN SAN DIEGO HOSPITAL ASSOCIATION OR A NONPROFIT TAX-EXEMPT SUBSIDIARY OF SAN DIEGO HOSPITAL ASSOCIATION, PROVIDED THAT ANY SUCH ORGANIZATION IS AN ORGANIZATION DESCRIBED IN SECTIONS 170(B)(1)(A), 170(C), 2055(A), AND 2522(A) OF THE INTERNAL REVENUE CODE OF 1986, AS AMENDED

Identifier	Return Reference	Explanation
NUMBER OF EMPLOYEES	FORM 990, PART V, LINE 2A	SHARP HEALTHCARE FOUNDATION EMPLOYEES' SALARIES AND WAGES ARE PAID UNDER SHARP HEALTHCARE'S TAX ID NUMBER (EIN 95-6077327), AND AS SUCH ARE ALSO REPORTED ON SHARP HEALTHCARE'S FORM 990

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	SHARP HEALTHCARE (FEIN 95-6077327) IS THE SOLE MEMBER OF SHARP HEALTHCARE FOUNDATION

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7A	SHARP HEALTHCARE, AS THE SOLE MEMBER OF THE CORPORATION, HAS THE RIGHT TO ELECT AND REMOVE MOST BOARD MEMBERS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7B	SHARP HEALTHCARE, AS THE SOLE MEMBER OF THE CORPORATION, HAS THE RIGHT TO ELECT AND REMOVE MOST BOARD MEMBERS. SHARP HEALTHCARE ALSO RETAINS THE APPROVAL RIGHTS AFFORDED MEMBERS FOR CERTAIN SIGNIFICANT TRANSACTIONS (E.G. DISSOLUTION OR SALE OR TRANSFER OF ALL OR SUBSTANTIALLY ALL OF THE ASSETS).

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE FINAL FORM 990 IS PLACED ON THE ORGANIZATION'S INTRANET, PRIOR TO THE FILING DATE, WHERE IT IS VIEWABLE FOR COMMENT FROM ALL MEMBERS OF THE GOVERNING BODY THE REVIEW PROCESS INCLUDES MULTIPLE LEVELS OF REVIEW INCLUDING KEY CORPORATE AND ENTITY FINANCE DEPARTMENT PERSONNEL COMPRISED OF THE DIRECTOR OF TAX & ACCOUNTING, VICE PRESIDENT OF FINANCE, SENIOR VICE PRESIDENT AND CHIEF FINANCIAL OFFICER, AND ENTITY CHIEF EXECUTIVE OFFICER ADDITIONALLY, THE ORGANIZATION CONTRACTS WITH ERNST & YOUNG, AN INDEPENDENT ACCOUNTING FIRM, FOR REVIEW OF THE FORM 990

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	<p>SHARP HEALTHCARE FOUNDATION HAS A WRITTEN CONFLICT OF INTEREST POLICY WHICH HAS BEEN REVIEWED AND APPROVED BY THE SHARP HEALTHCARE FOUNDATION GOVERNING BOARD. SHARP HEALTHCARE FOUNDATION IS COMMITTED TO PREVENTING ANY PARTICIPANT OF THE CORPORATION FROM GAINING ANY PERSONAL BENEFIT FROM INFORMATION RECEIVED OR FROM ANY TRANSACTION OF SHARP. ONE COMPONENT OF THE WRITTEN CONFLICT OF INTEREST POLICY REQUIRES THAT BOARD MEMBERS, CORPORATE OFFICERS, SENIOR VICE PRESIDENTS AND CHIEF EXECUTIVE OFFICER(S) SUBMIT A CONFLICT OF INTEREST STATEMENT ANNUALLY TO LEGAL SERVICES/SENIOR VICE PRESIDENT OF LEGAL SERVICES WHO WILL REVIEW ALL STATEMENTS. IN ADDITION, ALL VICE PRESIDENTS AND ANY EMPLOYEES IN THE PURCHASING/SUPPLY CHAIN, AUDIT AND COMPLIANCE, AND CASE MANAGEMENT/DISCHARGE PLANNING DEPARTMENTS ARE REQUIRED TO COMPLETE AN ONLINE CONFLICT OF INTEREST QUESTIONNAIRE ANNUALLY THAT IS REVIEWED BY THE CONFLICT REVIEW COMMITTEE COMPRISED OF EMPLOYEES FROM SHARP'S LEGAL, COMPLIANCE, AND INTERNAL AUDIT DEPARTMENTS. IN CONNECTION WITH ANY TRANSACTION OR ARRANGEMENT, WHICH MAY CREATE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, THE PERSON SHALL DISCLOSE IN WRITING THE EXISTENCE AND NATURE OF HIS/HER FINANCIAL INTEREST AND ALL MATERIAL FACTS. BOARD MEMBERS, CORPORATE OFFICERS, SENIOR VICE PRESIDENTS, AND THE CHIEF EXECUTIVE OFFICER(S) SHALL MAKE SUCH DISCLOSURES DIRECTLY TO THE CHAIRMAN OF THE BOARD, AND TO THE MEMBERS OF THE COMMITTEE WITH THE BOARD DESIGNATED POWERS. CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT. UPON DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACTS, THE BOARD MEMBER, CORPORATE OFFICER, SENIOR VICE PRESIDENT OR THE CHIEF EXECUTIVE OFFICER(S) MAKING SUCH DISCLOSURES SHALL LEAVE THE BOARD OR THE COMMITTEE MEETING WHILE THE FINANCIAL INTEREST IS DISCUSSED AND VOTED UPON. THE REMAINING BOARD OR COMMITTEE MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS. IN CERTAIN INSTANCES, SUCH AS IF SOMEONE TAKES A BOARD SEAT ON A COMPETITOR'S BOARD OF DIRECTORS OR HAS A ROLE WITH AN ORGANIZATION WHEREBY THE INFORMATION THAT THEY MAY OBTAIN FROM SHARP WOULD PUT THEM IN A CONSISTENT CONFLICT WITH THEIR TWO ROLES, THE CONFLICT COULD CALL FOR THE INDIVIDUAL'S REMOVAL FROM THE BOARD. THE BYLAWS FOR THE ORGANIZATION PROVIDE FOR THE ABILITY TO REMOVE DIRECTORS IN ACCORDANCE WITH SECTION 5222 OF THE CALIFORNIA CORPORATIONS CODE. THIS CAN GENERALLY BE DONE ON A "FOR CAUSE" OR A "NO CAUSE" BASIS BY THE ACTION OF THE MEMBER.</p>

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE PERSONNEL COMMITTEE OF SHARP HEALTHCARE RETAINS AN INDEPENDENT COMPENSATION CONSULTING FIRM TO REVIEW THE TOTAL COMPENSATION PAID TO EXECUTIVE MANAGEMENT (CEO/PRESIDENT, EXECUTIVE VICE PRESIDENT OF HOSPITAL OPERATIONS, AND SENIOR VICE PRESIDENTS) AND COMPARES IT TO THE TOTAL COMPENSATION PAID TO SIMILAR POSITIONS WITH LIKE INSTITUTIONS. THE INFORMATION IS PRESENTED TO THE PERSONNEL COMMITTEE OF THE BOARD OF DIRECTORS BY THE INDEPENDENT CONSULTANT. THE PERSONNEL COMMITTEE IS COMPRISED OF BOARD MEMBERS WHO ARE NOT PHYSICIANS AND WHO ARE NOT COMPENSATED IN ANY WAY BY THE ORGANIZATION. THE PERSONNEL COMMITTEE APPROVES THE TOTAL COMPENSATION FOR THE PRESIDENT/CHIEF EXECUTIVE OFFICER AND REVIEWS AND APPROVES THE COMPENSATION AND COMPENSATION SALARY RANGES FOR THE REMAINDER OF THE EXECUTIVE TEAM. THE PERSONNEL COMMITTEE PRESENTS ITS DECISION TO THE BOARD OF DIRECTORS. THE PERSONNEL COMMITTEE RETAINS MINUTES OF ITS MEETINGS. THE COMPENSATION AND BENEFITS DEPARTMENT ENGAGES A THIRD PARTY INDEPENDENT CONSULTANT TO CONDUCT A COMPENSATION STUDY COVERING OFFICERS AND KEY EMPLOYEES. THE INDEPENDENT THIRD PARTY COMPARES BASE SALARIES TO SIMILAR POSITIONS WITH LIKE INSTITUTIONS. THE INFORMATION IS REVIEWED BY THE COMPENSATION AND BENEFITS DEPARTMENT AND IS PRESENTED TO THE PRESIDENT/CHIEF EXECUTIVE OFFICER, THE EXECUTIVE VICE PRESIDENT OF HOSPITAL OPERATIONS AND THE APPROPRIATE SENIOR VICE PRESIDENT FOR REVIEW AND APPROVAL.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	POLICIES ARE CONSIDERED PROPRIETARY INFORMATION, HOWEVER IN SHARP HEALTHCARE'S PUBLICLY AVAILABLE CODE OF CONDUCT, SHARP OUTLINES ITS CONFLICT OF INTEREST POLICIES IN A USER FRIENDLY MANNER THE ANNUAL AUDITED FINANCIAL STATEMENTS OF THE CONSOLIDATED GROUP ARE PUBLISHED ON THE DACBOND COM WEBSITE (WWW DACBOND COM), ARE ATTACHED TO THE FORM 990 FILED FOR EACH OF THE SHARP HOSPITALS, AND ARE AVAILABLE UPON REQUEST THE ANNUAL AUDITED FINANCIAL STATEMENTS INCLUDE COMBINING SCHEDULES WHICH DISCLOSE THE FINANCIAL RESULTS (BALANCE SHEET, STATEMENT OF OPERATIONS, STATEMENT OF CHANGES IN NET ASSETS) FOR EACH ENTITY OF THE CONSOLIDATED GROUP QUARTERLY FINANCIAL STATEMENTS OF SHARPS OBLIGATED GROUP ARE PUBLISHED ON THE DACBOND COM WEBSITE (WWW DACBOND COM)

Identifier	Return Reference	Explanation
HOURS PER WEEK DEDICATED TO RELATED ORGANIZATIONS	FORM 990, PART VII, SECTION A	MICHAEL MURPHY 30-SHC, 6-SMH, 6-GHC, 4-SCVMC, 4-SCHHC, 6-SHP COLLEEN MCNALLY 20-SMH BETTY COOPER 35-SMH HENRY KILLMAR 3-SHC JOSEPH STRAZZERI 2-SHC KENNETH ROTH 10-SHC JAMES REOPELLE 2-SCHHC MARK TAMSEN 2-SCHHC JOANNE BOYLE 2-GHF WILLIAM LITTLEJOHN 100% OF HOURS REPORTED ON PART VII ARE DEDICATED TO SHARP HEALTHCARE FOUNDATION MARSHA LUBICK 100% OF HOURS REPORTED ON PART VII ARE DEDICATED TO SHARP HEALTHCARE FOUNDATION KATHRYN DUFF 100% OF HOURS REPORTED ON PART VII ARE DEDICATED TO SHARP HEALTHCARE FOUNDATION PAMELA BARNETT 100% OF HOURS REPORTED ON PART VII ARE DEDICATED TO SHARP HEALTHCARE FOUNDATION SUSAN RESSMEYER 100% OF HOURS REPORTED ON PART VII ARE DEDICATED TO SHARP HEALTHCARE FOUNDATION JAMES SARDINA 100% OF HOURS REPORTED ON PART VII ARE DEDICATED TO SHARP HEALTHCARE FOUNDATION

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 2,784,540 PLEDGE WRITE OFF - 368,813 TOTAL TO FORM 990, PART XI, LINE 5 2,415,727

Identifier	Return Reference	Explanation
	FORM 5471	FORM 5471 HAS BEEN FILED ON BEHALF OF BY SHARP HEALTHCARE (FEIN 95-6077327)

Identifier	Return Reference	Explanation
COMMUNITY BENEFITS REPORT	FORM 990, PART III, LINE 4A	<p>AN OVERVIEW OF SHARP HEALTHCARE SHARP IS AN INTEGRATED, REGIONAL HEALTH CARE DELIVERY SYSTEM BASED IN SAN DIEGO, CALIF. THE SHARP SYSTEM INCLUDES FOUR ACUTE CARE HOSPITALS, THREE SPECIALTY HOSPITALS, TWO AFFILIATED MEDICAL GROUPS, 20 MEDICAL CLINICS, FIVE URGENT CARE FACILITIES, THREE SKILLED NURSING FACILITIES, TWO INPATIENT REHABILITATION CENTERS, HOME HEALTH, HOSPICE, AND HOME INFUSION PROGRAMS, NUMEROUS OUTPATIENT FACILITIES AND PROGRAMS, AND A VARIETY OF OTHER COMMUNITY HEALTH EDUCATION PROGRAMS AND RELATED SERVICES. SHARP OFFERS A FULL CONTINUUM OF CARE, INCLUDING EMERGENCY CARE, HOME CARE, HOSPICE CARE, INPATIENT CARE, LONG-TERM CARE, MENTAL HEALTH CARE, OUTPATIENT CARE, PRIMARY AND SPECIALTY CARE, REHABILITATION, AND URGENT CARE. SHARP ALSO HAS A KNOX-KEENE-LICENSED CARE SERVICE PLAN, SHARP HEALTH PLAN (SHP) SERVING A POPULATION OF APPROXIMATELY 3 MILLION IN SAN DIEGO COUNTY, AS OF SEPTEMBER 30, 2012, SHARP IS LICENSED TO OPERATE 2,069 BEDS, HAS APPROXIMATELY 2,600 SHARP-AFFILIATED PHYSICIANS AND NEARLY 15,500 EMPLOYEES. FOUR ACUTE CARE HOSPITALS: SHARP CHULA VISTA MEDICAL CENTER (343 BEDS) THE LARGEST PROVIDER OF HEALTH CARE SERVICES IN SAN DIEGO'S RAPIDLY EXPANDING SOUTH BAY, SHARP CHULA VISTA MEDICAL CENTER (SCVMC) OPERATES THE REGION'S BUSIEST EMERGENCY DEPARTMENT (ED) AND IS THE CLOSEST HOSPITAL TO THE BUSIEST INTERNATIONAL BORDER IN THE WORLD. SHARP CORONADO HOSPITAL AND HEALTHCARE CENTER (181 BEDS) SHARP CORONADO HOSPITAL AND HEALTHCARE CENTER (SCHHC), AN ACUTE CARE HOSPITAL, PROVIDES SERVICES THAT INCLUDE SUB-ACUTE AND LONG-TERM CARE, REHABILITATION THERAPIES, JOINT REPLACEMENT SURGERY, HOSPICE AND EMERGENCY SERVICES. SHARP GROSSMONT HOSPITAL (536 BEDS) SHARP GROSSMONT HOSPITAL (SGH) IS THE LARGEST PROVIDER OF HEALTH CARE SERVICES IN SAN DIEGO'S EAST COUNTY, AND HAS ONE OF THE BUSIEST EDs IN SAN DIEGO COUNTY (SDC). SHARP MEMORIAL HOSPITAL (675 BEDS) A REGIONAL TERTIARY CARE LEADER, SHARP MEMORIAL HOSPITAL (SMH) PROVIDES SPECIALIZED CARE IN TRAUMA, ONCOLOGY, ORTHOPEDICS, ORGAN TRANSPLANTATION, CARDIOLOGY AND REHABILITATION. THREE SPECIALTY CARE HOSPITALS: SHARP MARY BIRCH HOSPITAL FOR WOMEN & NEWBORNS (169 BEDS) A FREESTANDING WOMEN'S HOSPITAL SPECIALIZING IN OBSTETRICS, GYNECOLOGY, GYNECOLOGIC ONCOLOGY, AND NEONATAL INTENSIVE CARE, SHARP MARY BIRCH HOSPITAL FOR WOMEN & NEWBORNS (SMBHWN) DELIVERS MORE BABIES THAN ANY OTHER PRIVATE HOSPITAL IN CALIFORNIA. SHARP MESA VISTA HOSPITAL (149 BEDS) THE LARGEST PRIVATE FREESTANDING PSYCHIATRIC HOSPITAL IN CALIFORNIA, SHARP MESA VISTA HOSPITAL (SMV) IS A PREMIER PROVIDER OF BEHAVIORAL HEALTH SERVICES. SHARP MCDONALD CENTER (16 BEDS) SHARP MCDONALD CENTER (SMC) IS SAN DIEGO COUNTY'S ONLY LICENSED CHEMICAL DEPENDENCY RECOVERY HOSPITAL. COLLECTIVELY, THE OPERATIONS OF SMH, SMBHWN, SMV AND SMC ARE REPORTED UNDER THE NONPROFIT PUBLIC BENEFIT CORPORATION OF SMH, AND ARE REFERRED TO HEREIN AS THE SHARP METROPOLITAN MEDICAL CAMPUS (SMMC). THE OPERATIONS OF SHARP REES-STEADLY MEDICAL CENTERS (SRS) ARE INCLUDED WITHIN THE NONPROFIT PUBLIC BENEFIT CORPORATION OF SHARP, THE PARENT ORGANIZATION. THE OPERATIONS OF SHARP GROSSMONT HOSPITAL (SGH) ARE REPORTED UNDER THE NONPROFIT PUBLIC BENEFIT CORPORATION GROSSMONT HOSPITAL CORPORATION. MISSION STATEMENT IT IS SHARP'S MISSION TO IMPROVE THE HEALTH OF THOSE IT SERVES WITH A COMMITMENT TO EXCELLENCE IN ALL THAT IT DOES. SHARP'S GOAL IS TO OFFER QUALITY CARE AND SERVICES THAT SET COMMUNITY STANDARDS, EXCEED PATIENT EXPECTATIONS, AND ARE PROVIDED IN A CARING, CONVENIENT, COST-EFFECTIVE AND ACCESSIBLE MANNER. VISION SHARP'S VISION IS TO BECOME THE BEST HEALTH SYSTEM IN THE UNIVERSE. SHARP WILL ATTAIN THIS POSITION BY TRANSFORMING THE HEALTH CARE EXPERIENCE THROUGH A CULTURE OF CARING, QUALITY, SERVICE, INNOVATION AND EXCELLENCE. SHARP WILL BE RECOGNIZED BY EMPLOYEES, PHYSICIANS, PATIENTS, VOLUNTEERS AND THE COMMUNITY AS THE BEST PLACE TO WORK, THE BEST PLACE TO PRACTICE MEDICINE AND THE BEST PLACE TO RECEIVE CARE. SHARP WILL BE KNOWN AS AN EXCELLENT COMMUNITY CITIZEN, EMBODYING AN ORGANIZATION OF PEOPLE WORKING TOGETHER TO DO THE RIGHT THING EVERY DAY TO IMPROVE THE HEALTH AND WELL-BEING OF THOSE IT SERVES. VALUES * INTEGRITY - TRUSTWORTHINESS, RESPECT, COMMITMENT TO ORGANIZATIONAL VALUES, AND DECISION MAKING * CARING - SERVICE ORIENTATION, COMMUNICATION, TEAMWORK AND COLLABORATION, SERVING AND DEVELOPING OTHERS, AND CELEBRATION * INNOVATION - CREATIVITY, CONTINUOUS IMPROVEMENT, INITIATING BREAKTHROUGHS, AND SELF-DEVELOPMENT * EXCELLENCE - QUALITY, SAFETY, OPERATIONAL AND SERVICE EXCELLENCE, FINANCIAL RESULTS, AND ACCOUNTABILITY. CULTURE. THE SHARP EXPERIENCE FOR MORE THAN 12 YEARS, SHARP HAS BEEN ON A JOURNEY TO TRANSFORM THE HEALTH CARE EXPERIENCE FOR PATIENTS AND THEIR FAMILIES, PHYSICIANS AND STAFF THROUGH A SWEEPING ORGANIZATION-WIDE PERFORMANCE AND EXPERIENCE IMPROVEMENT INITIATIVE CALLED THE SHARP EXPERIENCE. THE ENTIRE SHARP TEAM HAS RECOMMITTED TO PURPOSE, WORTHWHILE WORK, AND CREATING THE KIND OF HEALTH CARE PEOPLE</p>

Identifier	Return Reference	Explanation
COMMUNITY BENEFITS REPORT	FORM 990, PART III, LINE 4A	<p>PLE WANT AND DESERVE. THIS WORK HAS ADDED DISCIPLINE AND FOCUS TO EVERY PART OF THE ORGANIZATION, HELPING TO MAKE SHARP ONE OF THE NATION'S TOP-RANKED HEALTH CARE SYSTEMS. SHARP IS SAN DIEGO'S HEALTH CARE LEADER BECAUSE IT REMAINS FOCUSED ON THE MOST IMPORTANT ELEMENT OF THE HEALTH CARE EQUATION: THE PEOPLE. THROUGH THIS EXTRAORDINARY INITIATIVE, SHARP IS TRANSFORMING THE HEALTH CARE EXPERIENCE IN SAN DIEGO BY STRIVING TO BE:</p> <ul style="list-style-type: none">* THE BEST PLACE TO WORK: ATTRACTING AND RETAINING HIGHLY SKILLED AND PASSIONATE STAFF MEMBERS WHO ARE FOCUSED ON PROVIDING QUALITY HEALTH CARE AND BUILDING A CULTURE OF TEAMWORK, RECOGNITION, CELEBRATION, AND PROFESSIONAL AND PERSONAL GROWTH. THIS COMMITMENT TO SERVING PATIENTS AND SUPPORTING ONE ANOTHER WILL MAKE SHARP "THE BEST HEALTH SYSTEM IN THE UNIVERSE."* THE BEST PLACE TO PRACTICE MEDICINE: CREATING AN ENVIRONMENT IN WHICH PHYSICIANS ENJOY POSITIVE, COLLABORATIVE RELATIONSHIPS WITH NURSES AND OTHER CAREGIVERS, EXPERIENCE UNSURPASSED SERVICE AS VALUED CUSTOMERS, HAVE ACCESS TO STATE-OF-THE-ART EQUIPMENT AND CUTTING-EDGE TECHNOLOGY, AND ENJOY THE CAMARADERIE OF THE HIGHEST-CALIBER MEDICAL STAFF AT SAN DIEGO'S HEALTH CARE LEADER.* THE BEST PLACE TO RECEIVE CARE: PROVIDING A NEW STANDARD OF SERVICE IN THE HEALTH CARE INDUSTRY, MUCH LIKE THAT OF A FIVE-STAR HOTEL, EMPLOYING SERVICE-ORIENTED INDIVIDUALS WHO SEE IT AS THEIR PRIVILEGE TO EXCEED THE EXPECTATIONS OF EVERY PATIENT - TREATING THEM WITH THE UTMOST CARE, COMPASSION AND RESPECT, AND CREATING HEALING ENVIRONMENTS THAT ARE PLEASANT, SOOTHING, SAFE, IMMACULATE, AND EASY TO ACCESS AND NAVIGATE. THROUGH ALL OF THIS TRANSFORMATION, SHARP WILL CONTINUE TO LIVE ITS MISSION TO CARE FOR ALL PEOPLE, WITH SPECIAL CONCERN FOR THE UNDERSERVED AND SAN DIEGO'S DIVERSE POPULATION. THIS IS SOMETHING SHARP HAS BEEN DOING FOR MORE THAN HALF A CENTURY. <p>PILLARS OF EXCELLENCE IN SUPPORT OF SHARP'S ORGANIZATIONAL COMMITMENT TO TRANSFORM THE HEALTH CARE EXPERIENCE, THE SIX PILLARS OF EXCELLENCE SERVE AS A GUIDE FOR TEAM MEMBERS, PROVIDING A FRAMEWORK AND ALIGNMENT FOR EVERYTHING SHARP DOES. THE SIX PILLARS LISTED BELOW ARE A VISIBLE TESTAMENT TO SHARP'S COMMITMENT TO BECOME THE BEST HEALTH CARE SYSTEM IN THE UNIVERSE BY ACHIEVING EXCELLENCE IN THESE AREAS:</p> <ul style="list-style-type: none">* QUALITY - DEMONSTRATE AND IMPROVE CLINICAL EXCELLENCE AND PATIENT SAFETY TO SET COMMUNITY STANDARDS AND EXCEED PATIENT EXPECTATIONS.* SERVICE - CREATE EXCEPTIONAL EXPERIENCES AT EVERY TOUCH POINT FOR CUSTOMERS, PHYSICIANS AND PARTNERS BY DEMONSTRATING SERVICE EXCELLENCE.* PEOPLE - CREATE A WORKFORCE CULTURE THAT ATTRACTS, RETAINS AND PROMOTES THE BEST AND BRIGHTEST PEOPLE, WHO ARE COMMITTED TO SHARP'S MISSION, VISION AND VALUES.* FINANCE - ACHIEVE FINANCIAL RESULTS TO ENSURE SHARP'S ABILITY TO PROVIDE QUALITY HEALTH CARE SERVICES, NEW TECHNOLOGY AND INVESTMENT IN THE ORGANIZATION.* GROWTH - ACHIEVE CONSISTENT NET REVENUE GROWTH TO ENHANCE MARKET DOMINANCE, SUSTAIN INFRASTRUCTURE IMPROVEMENTS AND SUPPORT INNOVATIVE DEVELOPMENT.* COMMUNITY - BE AN EXEMPLARY COMMUNITY CITIZEN BY MAKING A DIFFERENCE IN OUR COMMUNITY AND SUPPORTING THE STEWARDSHIP OF OUR ENVIRONMENT. <p>AWARDS: SHARP RECENTLY RECEIVED THE FOLLOWING RECOGNITION: SHARP IS A RECIPIENT OF THE 2007 MALCOLM BALDRIGE NATIONAL QUALITY AWARD, THE NATION'S HIGHEST PRESIDENTIAL HONOR FOR QUALITY AND ORGANIZATIONAL PERFORMANCE EXCELLENCE. SHARP IS THE FIRST HEALTH CARE SYSTEM IN CALIFORNIA AND EIGHTH IN THE NATION TO RECEIVE THIS RECOGNITION. SHARP WAS NAMED THE NO. 1 "BEST INTEGRATED HEALTH-CARE NETWORK" IN CALIFORNIA AND NO. 12 NATIONALLY BY MODERN HEALTHCARE MAGAZINE IN 2012. THE RANKINGS ARE PART OF THE "TOP 100 MOST HIGHLY INTEGRATED HEALTHCARE NETWORKS (IHN)," AN ANNUAL SURVEY CONDUCTED BY HEALTH CARE DATA ANALYSTS. THIS IS THE 14TH YEAR RUNNING THAT SHARP HAS PLACED AMONG THE TOP IN THE STATE IN THE SURVEY.</p>

Identifier	Return Reference	Explanation
		<p>SHARP REES-STEALY MEDICAL GROUP, PRACTICING AS THE SHARP REES-STEALY MEDICAL CENTERS, WAS NAMED "BEST MEDICAL GROUP" BY U-T SAN DIEGO READERS PARTICIPATING IN THE PAPER'S 2012 "BEST OF SAN DIEGO" READERS POLL. SMH AND SGH WERE RANKED SECOND AND THIRD "BEST HOSPITALS" WHILE SCVMC, SCHHC AND SMBHWN WERE HONORED AS FINALISTS. SGH AND SMH HAVE BOTH RECEIVED MAGNET DESIGNATION FOR NURSING EXCELLENCE BY THE AMERICAN NURSES CREDENTIALING CENTER (ANCC). THE MAGNET RECOGNITION PROGRAM IS THE HIGHEST LEVEL OF HONOR BESTOWED BY THE ANCC AND IS ACCEPTED NATIONALLY AS THE GOLD STANDARD IN NURSING EXCELLENCE. SHARP WAS NAMED ONE OF THE NATION'S "MOST WIRED" HEALTH CARE SYSTEMS IN 2012 BY HOSPITALS & HEALTH NETWORKS MAGAZINE IN THE ANNUAL MOST WIRED SURVEY AND BENCHMARK STUDY. "MOST WIRED" HOSPITALS ARE COMMITTED TO USING TECHNOLOGY TO ENHANCE QUALITY OF CARE FOR BOTH PATIENTS AND STAFF. IN JULY 2010, SMH WAS NAMED THE "MOST BEAUTIFUL HOSPITAL IN AMERICA" BY SOLIANT HEALTH, ONE OF THE LARGEST MEDICAL STAFFING COMPANIES IN THE COUNTRY. WITH OVER 10,000 VOTES FROM VISITORS TO THE SOLIANT HEALTH WEBSITE, SMH WAS VOTED TO THE TOP OF THE SECOND ANNUAL "20 MOST BEAUTIFUL HOSPITALS IN AMERICA" LIST. IN 2012 SMH WAS DESIGNATED AS A PLANETREE PATIENT-CENTERED HOSPITAL, JOINING SCHHC AS THE SECOND HOSPITAL IN THE STATE TO EARN THE HONOR. SMH IS THE LARGEST AND MOST COMPLEX HOSPITAL IN THE WORLD TO RECEIVE DESIGNATION. SCHHC WAS ORIGINALLY DESIGNATED IN 2007 AND IS THE ONLY HOSPITAL IN THE STATE TO BE RE-DESIGNATED, OCCURRING IN 2010. PLANETREE IS A COALITION OF MORE THAN 100 HOSPITALS WORLDWIDE THAT IS COMMITTED TO IMPROVING MEDICAL CARE FROM THE PATIENT'S PERSPECTIVE. IN 2010, SHARP RECEIVED THE MOREHEAD APEX WORKPLACE OF EXCELLENCE AWARD. MOREHEAD AWARDS THE HEALTH CARE INDUSTRY'S TOP ACHIEVER BY OBJECTIVELY IDENTIFYING THE HIGHEST PERFORMER AND ACKNOWLEDGING THEIR CONTRIBUTIONS TO HEALTH CARE. WITH THIS SINGULAR AWARD, MOREHEAD ANNUALLY RECOGNIZES A CLIENT WHO HAS REACHED AND SUSTAINED THE 90TH PERCENTILE ON THEIR EMPLOYEE ENGAGEMENT SURVEYS. SHARP REACHED THE 98TH PERCENTILE IN 2010 AND THE 99TH PERCENTILE IN 2011. IN FY 2012, SCHHC RECEIVED ENERGY STAR DESIGNATION FROM THE U.S. ENVIRONMENTAL PROTECTION AGENCY (EPA) FOR OUTSTANDING ENERGY EFFICIENCY. BUILDINGS THAT ARE AWARDED THE DESIGNATION USE AN AVERAGE OF 40 PERCENT LESS ENERGY THAN OTHER BUILDINGS AND RELEASE 35 PERCENT LESS CARBON DIOXIDE INTO THE ATMOSPHERE. SCVMC IS ELIGIBLE TO RECEIVE THIS DESIGNATION FOR 2012, AND BOTH SCHHC AND SCVMC RECEIVED THE DESIGNATION FOR THE PREVIOUS THREE YEARS. SHARP HEALTHCARE WAS NAMED THE CRYSTAL WINNER OF THE 2011 WORKPLACE EXCELLENCE AWARDS FROM THE SAN DIEGO SOCIETY FOR HUMAN RESOURCE MANAGEMENT. THIS DESIGNATION RECOGNIZES SHARP'S HUMAN RESOURCES DEPARTMENT AS AN INNOVATIVE AND VALUABLE ASSET TO OVERALL COMPANY PERFORMANCE. PATIENT ACCESS TO CARE PROGRAMS UNINSURED PATIENTS WITH NO ABILITY TO PAY, AND INSURED PATIENTS WITH INADEQUATE COVERAGE RECEIVE FINANCIAL ASSISTANCE FOR MEDICALLY NECESSARY SERVICES THROUGH SHARP'S FINANCIAL ASSISTANCE PROGRAM. SHARP DOES NOT REFUSE ANY PATIENT REQUIRING EMERGENCY MEDICAL CARE. SHARP PROVIDES SERVICES TO HELP EVERY UNFUNDED PATIENT RECEIVED IN THE EMERGENCY DEPARTMENT FIND COVERAGE OPTIONS. PATIENTS USE A QUICK, SIMPLE ONLINE QUESTIONNAIRE THROUGH THE FOUNDATION FOR HEALTH COVERAGE EDUCATION TO GENERATE PERSONALIZED COVERAGE OPTIONS THAT ARE FILED IN THEIR ACCOUNT FOR FUTURE REFERENCE AND ACCESSIBILITY. THE RESULTS OF THE QUESTIONNAIRE ALLOW SHC STAFF TO HAVE AN INFORMED DISCUSSION ABOUT COVERAGE OPTIONS WITH THE PATIENT, SO THAT THE PATIENT BECOMES PART OF THE SOLUTION. THROUGH THIS PROGRAM, BY JUNE 2012 SHARP PROVIDED APPROXIMATELY 32,000 SELF-PAY PATIENTS WITH GUIDANCE THROUGH THE MAZE OF GOVERNMENT HEALTH COVERAGE PROGRAMS WHILE MAINTAINING THE PATIENT'S DIGNITY. THE PATIENT ASSISTANCE TEAM WORKS HARD TO HELP PATIENTS IN NEED OF ASSISTANCE GAIN ACCESS TO FREE OR LOW-COST MEDICATIONS. PATIENTS ARE IDENTIFIED THROUGH USAGE REPORTS, OR REFERRED THROUGH CASE MANAGEMENT, NURSING, PHYSICIANS OR EVEN OTHER PATIENTS. IF ELIGIBLE, UNINSURED PATIENTS ARE OFFERED ASSISTANCE, WHICH CAN HELP DECREASE READMISSIONS DUE TO LACK OF MEDICATION ACCESS. THE TEAM MEMBERS RESEARCH ALL OPTIONS AVAILABLE INCLUDING PROGRAMS OFFERED BY DRUG MANUFACTURERS, GRANT-BASED PROGRAMS OFFERED BY FOUNDATIONS, COPAY ASSISTANCE, LOW-COST ALTERNATIVES, OR RESEARCH WHERE THE PATIENT MIGHT FIND THEIR MEDICATION AT A LOWER COST. SHARP ALSO CONTINUES TO OFFER CLEARBALANCE - A SPECIALIZED LOAN PROGRAM FOR PATIENTS FACING HIGH MEDICAL BILLS. THROUGH THIS COLLABORATION WITH SAN DIEGO-BASED CSI FINANCIAL SERVICES, BOTH INSURED AND UNINSURED PATIENTS HAVE THE OPPORTUNITY TO SECURE SMALL BANK LOANS IN ORDER TO PAY OFF THEIR MEDICAL BILLS IN LOW MONTHLY PAYMENTS - AS LOW AS \$25 PER MONTH - AND THUS PREVENT UNPAID ACCOUNTS FROM GOING TO COLLECTIONS. THROUGH THIS PROGRAM, SHARP PROVIDES A MORE AFFORDABLE ALTERNATIVE FOR PATIENTS THAT STRUGGLE.</p>

Identifier	Return Reference	Explanation
		WITH THE ABILITY TO RESOLVE THEIR HOSPITAL BILLS IN ADDITION, SHARP PROVIDES POST-ACUTE CARE FACILITATION FOR HIGH-RISK PATIENTS, INCLUDING THE HOMELESS AND PATIENTS LACKING A SAFE HOME ENVIRONMENT PATIENTS RECEIVE ASSISTANCE WITH TRANSPORTATION AND PLACEMENT, CONNECTIONS TO COMMUNITY RESOURCES, AND FINANCIAL SUPPORT FOR MEDICAL EQUIPMENT, MEDICATIONS, AND EVEN OUTPATIENT DIALYSIS AND NURSING HOME STAYS THROUGH COLLABORATION WITH THE SAN DIEGO RESCUE MISSION, SCHHC, SGH AND SMH DISCHARGE THEIR CHRONICALLY HOMELESS PATIENTS TO THE RESCUE MISSION'S RECUPERATIVE CARE UNIT, WHERE PATIENTS NOT ONLY RECEIVE FOLLOW-UP MEDICAL CARE THROUGH SHARP IN A SAFE ENVIRONMENT, BUT THROUGH THE ORGANIZATION'S PROGRAMS THEY ALSO RECEIVE PSYCHIATRIC CARE, SUBSTANCE ABUSE COUNSELING AND GUIDANCE TO HELP GET THEM OFF THE STREET

Identifier	Return Reference	Explanation
		<p>SINCE 2011, SHARP'S ACUTE CARE HOSPITALS HAVE PARTNERED WITH FATHER JOE'S VILLAGES TO SUPPORT PROJECT HOPE (FORMERLY PROJECT SOAR) - A PROGRAM DESIGNED TO ASSIST WITH AND EXPEDITE SOCIAL SECURITY AND DISABILITY APPLICATIONS FOR HOMELESS INDIVIDUALS WITH URGENT HEALTH CARE NEEDS THROUGH THIS PROGRAM, SHARP PROVIDES COMMUNITY AGENCIES WITH THE MEDICAL INFORMATION NECESSARY TO TREAT AND ASSIST THESE HIGH-RISK INDIVIDUALS. SHARP PROVIDES THIS INFORMATION AT NO COST TO THE AGENCY. AS ELIGIBLE HOMELESS PATIENTS ARE DISCHARGED FROM THE HOSPITAL, HOSPITAL CASE MANAGERS FACILITATE THEIR TRANSITION TO PROJECT HOPE WORKERS WHO THEN CONTINUE THE APPLICATION PROCESS ON THROUGH TO COMPLETION. THE PROGRAM HELPS ENSURE ELIGIBLE AT-RISK INDIVIDUALS ARE ABLE TO OBTAIN TIMELY ACCESS TO THE INCOME AND MEDICAL CARE BENEFITS THAT THEY MAY NOT OTHERWISE RECEIVE AS A RESULT OF THEIR HOMELESS STATUS. SHARP ALSO CONTINUED TO COLLABORATE WITH THE UNITED WAY'S PROJECT 25 PROGRAM TO PROVIDE FINANCIAL INFORMATION THAT WILL HELP THE PROGRAM GAUGE THE EFFECTIVENESS OF ITS INTERVENTIONS TO REDUCE USE OF EMERGENT AND OTHER FRONT LINE PUBLIC RESOURCES. PROJECT 25 IS A PARTNERSHIP BETWEEN UNITED WAY OF SAN DIEGO COUNTY AND THE CITY AND COUNTY OF SAN DIEGO WITH A GOAL TO PROVIDE PERMANENT HOUSING (VIA THE SAN DIEGO HOUSING COMMISSION) AND SUPPORTIVE SERVICES (VIA THE COUNTY OF SAN DIEGO) TO AT LEAST 25 OF SAN DIEGO COUNTY'S CHRONICALLY HOMELESS, WHO ARE OFTEN THE MOST FREQUENT USERS OF PUBLIC RESOURCES. IN ADDITION, IN FY 2012 SCVMC CONTINUED TO PROVIDE TIMELY ACCESS TO PRIMARY CARE HEALTH SERVICES BY ESTABLISHING MEDICAL HOMES FOR LOW-INCOME, MEDICALLY UNINSURED AND UNDERSERVED PATIENTS IN THE SOUTH BAY THAT PRESENT IN THE SCVMC ED. THE PROGRAM SEEKS TO SUPPORT SAFETY NET PATIENTS SUFFERING FROM CHRONIC CONDITIONS TO BETTER MANAGE THEIR PAIN, DISEASES AND OVERALL HEALTH CARE WITH THE ESTABLISHMENT OF A MEDICAL HOME AT A COMMUNITY CLINIC, INFORM SAFETY NET PATIENTS ABOUT OBTAINING AFFORDABLE MEDICATIONS THROUGH GENERIC PRESCRIPTION ACCESS EDUCATION, INCREASE PATIENT ACCESS AND TIMELY REFERRALS TO PRIMARY CARE AND BEHAVIORAL HEALTH SERVICES, INCREASE PATIENT ACCESS TO FOLLOW-UP PRIMARY CARE SERVICES AND ESTABLISH A MEDICAL HOME AT EITHER CHULA VISTA FAMILY HEALTH CLINIC OR OTHER COMMUNITY CLINICS, AND OFFER ENHANCED ACCESS TO TRANSPORTATION RESOURCES TO THE CHULA VISTA FAMILY HEALTH CLINIC. IT IS THIS ABILITY TO SCHEDULE TIMELY FOLLOW-UP APPOINTMENTS FOR SAFETY NET PATIENTS THAT HAS CONTRIBUTED GREATLY TO THE SUCCESS OF THIS PROGRAM, AND SINCE THE PROGRAM'S INCEPTION APPROXIMATELY 20 PERCENT OF SCVMC'S ED PATIENTS WERE REFERRED TO THE CHULA VISTA FAMILY HEALTH CLINIC. HEALTH PROFESSIONS TRAINING INTERNSHIPS STUDENTS AND RECENT HEALTH CARE GRADUATES ARE A VALUABLE ASSET TO THE COMMUNITY, AND SHARP DEMONSTRATES A DEEP INVESTMENT IN THESE POTENTIAL AND NEWEST MEMBERS OF THE HEALTH CARE WORKFORCE THROUGH INTERNSHIPS, FINANCIAL AID AND CAREER PIPELINE PROGRAMS. IN FY 2012, THERE WERE MORE THAN 4,000 STUDENT INTERNS WITHIN THE SHARP SYSTEM, PROVIDING MORE THAN 517,000 HOURS IN DISCIPLINES THAT INCLUDED NURSING, ALLIED HEALTH AND PROFESSIONAL EDUCATIONAL PROGRAMS. SHARP PROVIDES EDUCATION AND TRAINING PROGRAMS FOR STUDENTS ACROSS THE CONTINUUM OF NURSING (E.G., CRITICAL CARE, MEDICAL/SURGICAL, BEHAVIORAL HEALTH, WOMEN'S SERVICES AND WOUND CARE) AND ALLIED HEALTH PROFESSIONS SUCH AS REHABILITATION THERAPIES (SPEECH, PHYSICAL, OCCUPATIONAL AND RECREATIONAL THERAPY), PHARMACY, RESPIRATORY THERAPY, DIETETICS, LAB, RADIOLOGY, SOCIAL WORK, PSYCHOLOGY, BUSINESS, HEALTH INFORMATION MANAGEMENT, AND PUBLIC HEALTH. STUDENTS FROM LOCAL COMMUNITY COLLEGES SUCH AS GROSSMONT COLLEGE (GC), SAN DIEGO MESA COLLEGE (MC), AND SOUTHWESTERN COLLEGE (SWC), LOCAL AND NATIONAL UNIVERSITY CAMPUSES SUCH AS SAN DIEGO STATE UNIVERSITY (SDSU), UNIVERSITY OF CALIFORNIA, SAN DIEGO (UCSD), UNIVERSITY OF SAN DIEGO (USD), AND POINT LOMA NAZARENE UNIVERSITY (PLNU), AND VOCATIONAL SCHOOLS SUCH AS KAPLAN COLLEGE (KC) PARTICIPATE IN SHARP'S HEALTH PROFESSIONS TRAINING. TABLE 1 PRESENTS THE STUDENTS AND STUDENT HOURS AT EACH OF THE SHARP ENTITIES IN FY 2012. TABLE 1: SHARP HEALTHCARE INTERNSHIPS - FY 2012. SHARP CHULA VISTA MEDICAL CENTER NURSING STUDENTS - 850 NURSING GROUP HOURS - 62,474 NURSING PRECEPTED HOURS - 20,273 ANCILLARY STUDENTS - 120 ANCILLARY HOURS - 24,863 TOTAL STUDENTS - 970 TOTAL HOURS - 107,610. SHARP CORONADO HOSPITAL AND HEALTHCARE CENTER NURSING STUDENTS - 346 NURSING GROUP HOURS - 58,011 NURSING PRECEPTED HOURS - 3,516 ANCILLARY STUDENTS - 138 ANCILLARY HOURS - 28,360 TOTAL STUDENTS - 484 TOTAL HOURS - 89,887. SHARP GROSSMONT HOSPITAL NURSING STUDENTS - 693 NURSING GROUP HOURS - 45,648 NURSING PRECEPTED HOURS - 16,105 ANCILLARY STUDENTS - 206 ANCILLARY HOURS - 40,829 TOTAL STUDENTS - 899 TOTAL HOURS - 102,582. SHARP MARY BIRCH HOSPITAL FOR WOMEN & NEWBORNS NURSING STUDENTS - 173 NURSING GROUP HOURS - 12,195 NURSING PRECEPTED HOURS - 3,300 ANCILLARY STUDENTS - 48 ANCILLARY HOURS.</p>

Identifier	Return Reference	Explanation
		RY HOURS - 5,289 TOTAL STUDENTS - 221 TOTAL HOURS - 20,784 SHARP MEMORIAL HOSPITAL NURSING STUDENTS - 511 NURSING GROUP HOURS - 35,934 NURSING PRECEPTED HOURS - 20,509 ANCILLARY ST UDENTS - 314 ANCILLARY HOURS - 58,683 TOTAL STUDENTS - 825 TOTAL HOURS - 115,126 SHARP MES A VISTA HOSPITAL NURSING STUDENTS - 381 NURSING GROUP HOURS - 25,772 NURSING PRECEPTED HOU RS - 3,856 ANCILLARY STUDENTS - 19 ANCILLARY HOURS - 6,945 TOTAL STUDENTS - 400 TOTAL HOUR S - 36,573 SHARP HEALTHCARE NURSING STUDENTS - 168 NURSING GROUP HOURS - 158 NURSING PRECE PTED HOURS - 20,164 ANCILLARY STUDENTS - 91 ANCILLARY HOURS - 24,155 TOTAL STUDENTS - 259 TOTAL HOURS - 44,478 TOTAL NURSING STUDENTS - 3,122 NURSING GROUP HOURS - 240,192 NURSING PRECEPTED HOURS - 87,723 ANCILLARY STUDENTS - 936 ANCILLARY HOURS - 189,124 TOTAL STUDENTS - 4,058 TOTAL HOURS - 517,039

Identifier	Return Reference	Explanation
		<p>COLLEGE COLLABORATIONS IN FY 2012, SHARP DONATED \$500,000 TO SDSU'S COLLEGE OF HEALTH AND HUMAN SERVICES IN ORDER TO ESTABLISH THE SHARP HEALTHCARE PROFESSIONAL EDUCATION AND RESEARCH INSTITUTE. THE DONATION ALLOWED FOR THREE NEW SCHOLARSHIPS AT SDSU, INCLUDING SDSU'S NEW DOCTOR OF NURSING PRACTICE (DNP) PROGRAM, WHICH BEGAN IN FALL 2012. SCHOLARSHIPS WILL ALSO BE CREATED FOR NURSING STUDENTS IN THE BACHELOR'S AND MASTER'S PROGRAMS, AS WELL AS A GENERAL SCHOLARSHIP FOR STUDENTS IN SDSU'S COLLEGE OF HEALTH AND HUMAN SERVICES. THE DONATION WILL PROVIDE A TOTAL OF SIX STUDENTS WITH SCHOLARSHIPS EACH YEAR, RANGING FROM \$1,200 TO \$2,000. THE SCHOLARSHIPS ARE A COMPONENT OF THE SHARP HEALTHCARE PROFESSIONAL EDUCATION AND RESEARCH INSTITUTE, WHICH INCLUDES THE ALREADY ESTABLISHED SHARP HEALTHCARE HUMAN PATIENT SIMULATION CENTER AND THE NURSES NOW PROGRAM. THE NEW DONATION BRINGS SHARP'S TOTAL GIVING TO THE UNIVERSITY TO \$2.4 MILLION, MAKING SHARP ONE OF SDSU'S LARGEST CORPORATE CONTRIBUTORS. HEALTH SCIENCES HIGH AND MIDDLE COLLEGE SHARP HAS TEAMED UP AS AN INDUSTRY PARTNER WITH CHARTER SCHOOL HEALTH SCIENCES HIGH AND MIDDLE COLLEGE (HSHMC) TO PROVIDE STUDENTS BROAD EXPOSURE TO CAREERS AVAILABLE IN HEALTH CARE. DURING FY 2012, MORE THAN 330 HSHMC STUDENTS CONNECTED TO SHARP CAMPUSES FOR A TOTAL OF MORE THAN 52,800 STUDENT HOURS. THE COLLABORATION BETWEEN SHARP AND HSHMC PREPARES HIGH SCHOOL STUDENTS TO ENTER HEALTH SCIENCE AND MEDICAL TECHNOLOGY CAREERS IN THE FOLLOWING FIVE CAREER PATHWAYS: BIOTECHNOLOGY RESEARCH AND DEVELOPMENT, DIAGNOSTIC SERVICES, HEALTH INFORMATICS, SUPPORT SERVICES AND THERAPEUTIC SERVICES. DURING A 16-WEEK PERIOD, SUPERVISED STUDENTS ROTATE THROUGH INSTRUCTIONAL PODS IN VARIOUS DEPARTMENTS SUCH AS NURSING, OB-GYN, OCCUPATIONAL AND PHYSICAL THERAPY, BEHAVIORAL HEALTH, SURGICAL INTENSIVE CARE UNIT (SICU), MEDICAL INTENSIVE CARE UNIT (MICU), IMAGING, REHABILITATION, LABORATORY, PHARMACY, ENGINEERING, PULMONARY, CARDIAC SERVICES, AND OPERATIONS. HSHMC STUDENTS NOT ONLY HAD THE OPPORTUNITY TO OBSERVE PATIENT CARE, BUT ALSO RECEIVED GUIDANCE FROM SHARP STAFF ON CAREER LADDER DEVELOPMENT AND JOB/EDUCATION REQUIREMENTS. HSHMC STUDENTS EARN HIGH SCHOOL DIPLOMAS, COMPLETE COLLEGE ENTRANCE REQUIREMENTS AND HAVE OPPORTUNITIES TO EARN COMMUNITY COLLEGE CREDITS, DEGREES OR VOCATIONAL CERTIFICATES. WITH THE HSHMC PROGRAM, SHARP LINKS STUDENTS WITH HEALTH CARE PROFESSIONALS THROUGH JOB SHADOWING AND INTERNSHIPS TO EXPLORE REAL-WORLD APPLICATIONS OF THEIR SCHOOL-BASED KNOWLEDGE AND SKILLS. THE PROGRAM BEGAN IN 2007 WITH HSHMC STUDENTS ON THE CAMPUSES OF SGH AND SMH, AND EXPANDED TO INCLUDE SMV AND SMBHWN IN 2009, SCHC IN 2010, AND SCVMC IN 2011. HSHMC STUDENTS ALSO DEVOTE TIME TO VARIOUS SRS SITES IN SAN DIEGO. LECTURES AND CONTINUING EDUCATION SHARP CONTRIBUTES TO THE ACADEMIC ENVIRONMENT OF MANY COLLEGES AND UNIVERSITIES IN SAN DIEGO. IN FY 2012, SHARP STAFF COMMITTED MORE THAN 500 HOURS TO THE ACADEMIC COMMUNITY BY PROVIDING LECTURES, COURSES AND PRESENTATIONS ON NUMEROUS COLLEGE/UNIVERSITY CAMPUSES THROUGHOUT SAN DIEGO. THROUGH THE DELIVERY OF A VARIETY OF GUEST LECTURES, INCLUDING HEALTH INFORMATION TECHNOLOGY AT SAN DIEGO MESA COLLEGE, CARDIOVASCULAR TECHNOLOGY AT GROSSMONT COLLEGE, HEALTH INFORMATION LECTURES AT SAN DIEGO MESA COLLEGE, PHARMACY PRACTICE LECTURES AT UCSD, AND A VARIETY OF HEALTH ADMINISTRATION LECTURES TO PUBLIC HEALTH GRADUATE STUDENTS AT SDSU, SHARP STAFF REMAIN ACTIVE AND ENGAGED WITH SAN DIEGO'S ACADEMIC HEALTH CARE COMMUNITY. SHARP'S CONTINUING MEDICAL EDUCATION (CME) DEPARTMENT ASSESSES, DESIGNS, IMPLEMENTS AND EVALUATES EDUCATIONAL INITIATIVES FOR SHARP'S AFFILIATED PHYSICIANS, PHARMACISTS AND OTHER HEALTH CARE PROFESSIONALS TO BETTER SERVE THE HEALTH CARE NEEDS OF THE SAN DIEGO COMMUNITY. IN FY 2012 THE PROFESSIONALS AT SHARP HEALTHCARE CME INVESTED MORE THAN 2,100 HOURS IN NUMEROUS CME ACTIVITIES OPEN TO SAN DIEGO HEALTH CARE PROVIDERS, RANGING FROM CONFERENCES ON PATIENT SAFETY, CARDIOLOGY, ANTIMICROBIAL STEWARDSHIP, AND OBESITY, TO PRESENTATIONS ON THE HOSPITALIST'S EXPERIENCE AND HOSPITAL OVERCROWDING. RESEARCH INNOVATION IS CRITICAL TO THE FUTURE OF HEALTH CARE, AND SHARP HEALTHCARE SUPPORTS THIS INNOVATION THROUGH ITS COMMITMENT TO QUALITY RESEARCH INITIATIVES THAT ARE SAFE AND EFFECTIVE, PROVIDE VALUABLE KNOWLEDGE TO THE SAN DIEGO HEALTH CARE COMMUNITY, AND POSITIVE IMPACT TO PATIENTS AND COMMUNITY MEMBERS. SHARP HEALTHCARE INSTITUTIONAL REVIEW BOARD SHARP HEALTHCARE'S INSTITUTIONAL REVIEW BOARD (IRB) SEEKS TO PROMOTE A CULTURE OF SAFETY AND RESPECT FOR INDIVIDUALS WHO CHOOSE TO PARTICIPATE IN RESEARCH FOR THE GREATER GOOD OF THE COMMUNITY. ALL PROPOSED SHARP RESEARCH STUDIES WITH HUMAN PARTICIPANTS ARE REQUIRED TO BE REVIEWED BY THE SHARP HEALTHCARE IRB. THE PURPOSE OF THIS REVIEW IS TO PROTECT PARTICIPANT SAFETY AND MAINTAIN RESPONSIBLE RESEARCH CONDUCT. IN FY 2012, A DEDICATED IRB COMMITTEE OF 12 INDIVIDUALS - INCLUDING PHYSICIANS, PSYCHOLOGISTS, RESEARCH NURSES AND</p>

Identifier	Return Reference	Explanation
		STUDY COORDINATORS - DEVOTED HUNDREDS OF HOURS TO THE REVIEW AND ANALYSIS OF BOTH ONGOING AND NEW RESEARCH STUDIES THE SHARP HEALTHCARE IRB ALSO PROVIDES EDUCATION AND GUIDANCE FOR RESEARCHERS ACROSS SHARP AS WELL AS IN THE COMMUNITY NURSES, PHARMACY RESIDENTS AND OTHER MEMBERS OF THE HEALTH CARE COMMUNITY RECEIVE EDUCATION ON VARIOUS STUDY-SPECIFIC REQUIREMENTS REGARDING THE PROTECTION OF HUMAN SUBJECTS AND HIPAA COMPLIANCE ADDITIONALLY, SHARP HEALTHCARE'S RESEARCH DEPARTMENT WORKS WITH THE IRB TO PROVIDE QUARTERLY RESEARCH MEETINGS (QRM) THAT ARE OPEN TO PHYSICIANS, PSYCHOLOGISTS, RESEARCH NURSES AND STUDY COORDINATORS THROUGHOUT SAN DIEGO THESE MEETINGS PROVIDE EDUCATION AND SUPPORT TO THE RESEARCH COMMUNITY RECENT PRESENTATIONS HAVE COVERED TOPICS SUCH AS THE ADMINISTRATION OF CLINICAL TRIALS, THE USE OF STATISTICAL ANALYSIS IN ASSESSING TEST BIAS, THE IMPORTANCE OF OUTCOMES-BASED RESEARCH AND THE DEVELOPMENT OF EFFECTIVE RESEARCH QUESTIONS

Identifier	Return Reference	Explanation
		<p>OUTCOMES RESEARCH INSTITUTE THE OUTCOMES RESEARCH INSTITUTE (ORI) AT SHARP WAS FORMED TO MEASURE LONG-TERM RESULTS OF CARE AND TO PROMOTE AND DEVELOP BEST PRACTICES OF HEALTH CARE DELIVERY FOR MEMBERS OF THE PROFESSIONAL HEALTH CARE COMMUNITY WITH BOTH INPATIENT AND AMBULATORY LOCATIONS AND A DIVERSE PATIENT POPULATION, SHARP IS WELL-POSITIONED TO STUDY CARE PROCESSES AND OUTCOMES IN A REAL-WORLD SETTING, REFLECTING AN AUTHENTIC PICTURE OF THE HEALTH CARE ENVIRONMENT THE ORI COLLABORATES WITH ALL SHARP TEAM MEMBERS INTERESTED IN OPTIMIZING PATIENT CARE BY FACILITATING THE CREATION AND DESIGN OF PATIENT-CENTERED OUTCOMES RESEARCH PROJECTS, ASSISTING IN DATABASE DEVELOPMENT AS WELL AS DATA COLLECTION AND ANALYSIS, ASSISTING WITH GRANT WRITING AND EXPLORING FUNDING MECHANISMS FOR RESEARCH PROJECTS, AND FACILITATING IRB APPLICATION SUBMISSIONS AMONG ITS CURRENT AND FUTURE GOALS, THE ORI AIMS TO ENSURE PATIENT CARE PRODUCES OUTCOMES CONSISTENT WITH EVIDENCE-BASED MEDICAL LITERATURE, ANALYZE THE RELATIONSHIPS BETWEEN PROCESSES AND OUTCOMES FOR TREATMENTS, INTERVENTIONS AND QUALITY IMPROVEMENT INITIATIVES, ESTABLISH ASSOCIATIONS BETWEEN PRACTICE, COSTS AND OUTCOMES FOR PATIENT CARE, AND DEVELOP AND DISSEMINATE EFFECTIVE APPROACHES TO QUALITY CARE DELIVERY IN THE HEALTH CARE COMMUNITY THE ORI HAS COMPLETED A NUMBER OF PILOT STUDIES TO COLLECT DATA ON OPTIMAL SAMPLE SIZES AND VARIABLES FOR EXPANDED RESEARCH MEASURING LONG-TERM INFLUENCE OF QUALITY INTERVENTIONS ON HEART FAILURE READMISSION, OPTIMAL GLYCEMIC CONTROL IN THE HOSPITAL SETTING, AND INPATIENT COMPLICATION RATES AND LENGTH OF STAY AFTER BOWEL SURGERY CURRENTLY THE ORI HAS TEN ACTIVE STUDIES IN VARIOUS PHASES OF DEVELOPMENT AND ANALYSIS THE ORI IS COMMITTED TO EDUCATIONAL OUTREACH FOR SHARP HEALTHCARE'S CLINICIANS AND THE HEALTH CARE COMMUNITY AT LARGE, AND OFFERS NUMEROUS EDUCATIONAL PRESENTATIONS ABOUT OUTCOMES RESEARCH AND HEALTH CARE RESEARCH METHODS TO NURSES, PHYSICIANS AND THE BROADER COMMUNITY THROUGHOUT THE YEAR ORI STAFF HAVE ALSO BEEN INVITED TO PRESENT LECTURES ON OUTCOMES RESEARCH AND OUTCOMES RESEARCH DESIGNS TO THE BROADER HEALTH CARE COMMUNITY AND AT REGIONAL AND NATIONAL CONFERENCES ADDITIONALLY, THE ORI COLLABORATES WITH SAN DIEGO COUNTY EDUCATION AND RESEARCH COMMUNITIES TO DEVELOP AND STRENGTHEN THOSE CONNECTIONS THE ORI STUDENT RESEARCH INTERN PROGRAM OFFERS ADVANCED NURSING AND PUBLIC HEALTH STUDENTS AN OPPORTUNITY TO LEARN ABOUT AND BECOME INVOLVED IN OUTCOMES RESEARCH SINCE ITS INCEPTION IN 2011, THE PROGRAM HAS ENROLLED NINE STUDENTS (APPROXIMATELY TWO PER SEMESTER) THE INTERNS LEARN ABOUT OUTCOMES RESEARCH, AND PRODUCE PRESENTATIONS THAT DOCUMENT THEIR RESEARCH STUDY EXPERIENCE IN ADDITION, THE ORI HAS REACHED OUT TO THE ACADEMIC COMMUNITY TO FOSTER PARTNERSHIP FOR OUTCOMES RESEARCH AS A RESULT, THE ORI CURRENTLY IS IN DISCUSSION WITH RESEARCHERS AT NATIONAL UNIVERSITY (NU), SAN DIEGO STATE UNIVERSITY'S (SDSU'S) CANCER CENTER COMPREHENSIVE PARTNERSHIP, AND THE HEALTH RESEARCH AND EDUCATIONAL TRUST TO DEVELOP COMMON THEMES AS THE BASIS FOR FUTURE RESEARCH COLLABORATIONS EVIDENCE-BASED PRACTICE INSTITUTE SHARP PARTICIPATES IN THE EVIDENCE-BASED PRACTICE INSTITUTE (EBPI), WHICH PREPARES TEAMS OF STAFF (FELLOWS) AND ADVANCE PRACTICE NURSES (MENTORS) TO CHANGE AND IMPROVE NURSING PRACTICE AND PATIENT CARE THIS CHANGE OCCURS THROUGH IDENTIFYING A CARE PROBLEM, DEVELOPING A PLAN TO SOLVE IT, AND THEN INCORPORATING THE NEW KNOWLEDGE INTO PRACTICE THE EBPI IS PART OF THE CONSORTIUM OF NURSING EXCELLENCE, SAN DIEGO, WHICH PROMOTES EVIDENCE-BASED PRACTICE IN THE NURSING COMMUNITY THE CONSORTIUM IS A PARTNERSHIP BETWEEN SGH, SMH, SCVMC, SCRIPPS HEALTH, RADY CHILDREN'S HOSPITAL - SAN DIEGO, UCSD HEALTH, AND SAN DIEGO VA MEDICAL CENTER, AS WELL AS PLNU, SDSU AND USD IN FY 2012, THE EBPI CONSISTED OF A NINE-MONTH PROGRAM CULMINATING WITH A GRADUATION CEREMONY IN SEPTEMBER THE PROJECT RESULTS OF ALL EBPI FELLOWS ARE SHARED AT THE CEREMONY EBPI FELLOWS PARTNER WITH THEIR MENTORS AND PARTICIPATE IN A VARIETY OF LEARNING STRATEGIES MENTORS FACILITATE THE PROCESS OF CONDUCTING AN EVIDENCE-BASED PRACTICE CHANGE AND NAVIGATING THE HOSPITAL SYSTEM TO SUPPORT THE FELLOW THROUGH THE PROCESS OF EVIDENCE-BASED PRACTICE MENTORS ALSO ASSIST THE FELLOW IN WORKING COLLABORATIVELY WITH OTHER KEY HOSPITAL LEADERSHIP PERSONNEL THE SAN DIEGO EBPI INCLUDES SIX FULL-DAY CLASS SESSIONS THAT INCORPORATE GROUP ACTIVITIES, AS WELL AS SELF-DIRECTED LEARNING PROGRAMS OUTSIDE OF THE CLASSROOM, IN ADDITION TO THE STRUCTURED MENTORSHIP PROVIDED THROUGHOUT THE PROGRAM IN FY 2012, APPROXIMATELY 50 FELLOWS GRADUATED FROM THE EBPI PROGRAM, AND COMPLETED PROJECTS THAT ADDRESSED COMPELLING ISSUES IN THE HEALTH CARE COMMUNITY, SUCH AS END-OF-LIFE CARE AND IMPROVING PATIENT PAIN AND SYMPTOM MANAGEMENT, DECREASING HOSPITAL-ACQUIRED INFECTIONS THROUGH ENVIRONMENTAL CLEANING, AND THE IMPACT OF EDUCATION AND PALLIATIVE CARE CONSULTS ON THE MORAL DISTRESS AND COM</p>

Identifier	Return Reference	Explanation
		<p>PASSION FATIGUE OF INTENSIVE CARE UNIT (ICU) NURSES SHARP ACTIVELY PARTICIPATES IN THE EB PI THROUGH THE PROVISION OF INSTRUCTORS AND MENTORS, AS WELL AS ADMINISTRATIVE COORDINATION VOLUNTEER SERVICE SHARP LENDS A HAND IN FY 2012, SHARP CONTINUED ITS SYSTEMWIDE COMMUNITY SERVICE PROGRAM, SHARP LENDS A HAND (SLAH), TO FURTHER SUPPORT THE SAN DIEGO COMMUNITIES IT SERVES. IN OCTOBER, SHARP TEAM MEMBERS SUGGESTED PROJECT IDEAS THAT FOCUSED ON IMPROVING THE HEALTH AND WELL-BEING OF SAN DIEGO IN A BROAD, POSITIVE WAY, RELIED ON SHARP FOR VOLUNTEER LABOR ONLY, SUPPORTED NONPROFIT INITIATIVES, COMMUNITY ACTIVITIES OR OTHER PROGRAMS THAT SERVE THE RESIDENTS OF SAN DIEGO COUNTY, AND COULD BE COMPLETED BY SEPTEMBER 30, 2012. EIGHT PROJECTS WERE SELECTED: STAND DOWN FOR HOMELESS VETERANS, SAN DIEGO FOOD BANK, SAN DIEGO COASTAL CLEAN-UP, SPORTS FOR EXCEPTIONAL ATHLETES BASKETBALL AND FLOOR HOCKEY TOURNAMENTS, HELEN WOODWARD ANIMAL CENTER PUPPY LOVE 5K RUN/WALK, JEWISH FAMILY SERVICE OF SAN DIEGO HAND UP YOUTH FOOD PANTRY, MEMORIAL DAY HEADSTONE CLEANING AT FORT ROSECRANS NATIONAL CEMETERY, AND HOME OF GUIDING HANDS LANDSCAPE MAKEOVER. IN SUPPORT OF THESE PROJECTS, MORE THAN 1,600 SHARP EMPLOYEES, FAMILY MEMBERS AND FRIENDS VOLUNTEERED NEARLY 5,500 HOURS. DURING EIGHT DAYS IN JUNE AND JULY 2012, 522 SHARP EMPLOYEES, FAMILY MEMBERS AND FRIENDS VOLUNTEERED AT VETERANS VILLAGE OF SAN DIEGO, LIBERTY STATION AND SAN DIEGO HIGH SCHOOL. THE VOLUNTEERS SORTED AND ORGANIZED CLOTHING DONATIONS AND PROVIDED ON-SITE SUPPORT, MEDICAL SERVICES AND COMPANIONSHIP TO HUNDREDS OF HOMELESS VETERANS AT STAND DOWN FOR HOMELESS VETERANS, AN ANNUAL EVENT SPONSORED BY VETERANS VILLAGE OF SAN DIEGO. THE SAN DIEGO FOOD BANK FEEDS PEOPLE IN NEED THROUGHOUT SAN DIEGO COUNTY, AND ADVOCATES AND EDUCATES THE PUBLIC ABOUT HUNGER-RELATED ISSUES. DURING EIGHT DAYS IN FEBRUARY, APRIL, JUNE AND AUGUST, 708 SLAH VOLUNTEERS INSPECTED AND SORTED DONATED FOOD, ASSEMBLED BOXES AND CLEANED THE SAN DIEGO FOOD BANK WAREHOUSE. MORE THAN 35 SLAH VOLUNTEERS PROVIDED ASSISTANCE TO SAN DIEGO COUNTY'S SPORTS FOR EXCEPTIONAL ATHLETES, A COMMUNITY-WIDE NONPROFIT ORGANIZATION THAT PROVIDES SPORTS TRAINING AND ATHLETIC COMPETITION FOR INDIVIDUALS AGES 5 THROUGH ADULT WITH DEVELOPMENTAL DISABILITIES. DURING THE SPRING FLOOR HOCKEY AND BASKETBALL TOURNAMENTS, SHARP VOLUNTEERS ASSISTED WITH TIMEKEEPING, SCORE-KEEPING AND CHEERLEADING FOR THE ATHLETES. IN MAY, 60 SLAH VOLUNTEERS AND THEIR FAMILY MEMBERS HONORED VETERANS AT FORT ROSECRANS NATIONAL CEMETERY BY CLEANING HEADSTONES. IN SEPTEMBER, THE SLAH TEAM PARTNERED WITH I LOVE A CLEAN SAN DIEGO AND SAN DIEGO COASTKEEPER TO PUT THE SPARKLE BACK IN THE SAN DIEGO COMMUNITY THROUGH THE SAN DIEGO COASTAL CLEAN-UP. NEARLY 150 VOLUNTEERS OF ALL AGES HELPED KEEP SAN DIEGO'S COAST A BEAUTIFUL PLACE TO LIVE AND PLAY BY PICKING UP AND REMOVING TRASH AND DEBRIS FROM 16 SELECTED SITES IN THE COMMUNITY. IN JANUARY, 29 SLAH VOLUNTEERS PROVIDED A LANDSCAPE MAKEOVER AT HOME OF GUIDING HANDS BY INSTALLING BARK AND ROCK AT TWO DIFFERENT HOMES. HOME OF GUIDING HANDS PROVIDES SUPPORT AND SERVICES FOR MORE THAN 800 CHILDREN, ADOLESCENTS AND ADULTS WITH DEVELOPMENTAL DISABILITIES IN SAN DIEGO'S EAST COUNTY. DURING TWO DAYS IN FEBRUARY, 57 SLAH VOLUNTEERS PROVIDED SUPPORT FOR THE HELEN WOODWARD ANIMAL CENTER'S PUPPY LOVE 5K RUN/WALK ON HIGHWAY 101 IN SOLANA BEACH, INCLUDING SETTING UP EXHIBITS, ASSISTING WITH REGISTRATION AND WORKING AS ROUTE/ROAD MARSHALS. THE HELEN WOODWARD ANIMAL CENTER IS A SAN DIEGO-BASED NONPROFIT ORGANIZATION COMMITTED TO SAVING THE LIVES OF ANIMALS BY PROVIDING HUMANE CARE, ANIMAL ADOPTION AND OTHER PROGRAMS AND RESOURCES FOR INDIVIDUALS WHO CARE FOR ANIMALS.</p>

Identifier	Return Reference	Explanation
		<p>IN MAY, 40 SLAH VOLUNTEERS OFFERED THEIR ASSISTANCE TO THE JEWISH FAMILY SERVICE OF SAN DIEGO'S HAND UP YOUTH FOOD PANTRY, A PROGRAM DEDICATED TO ALLEVIATING HUNGER BY DELIVERING FOOD TO THOUSANDS OF COMMUNITY MEMBERS IN NEED. SLAH VOLUNTEERS HELPED SET UP FOOD SHOPPING AREAS, ASSISTED PARENTS WITH SHOPPING AND CARRYING THEIR GROCERIES, AND ENTERTAINED CHILDREN WITH ARTS AND CRAFTS. JEWISH FAMILY SERVICE IS ONE OF SAN DIEGO'S PREMIER HUMAN CARE SERVICE ORGANIZATIONS. EACH YEAR, THE ORGANIZATION SERVES MORE THAN 35,000 PEOPLE THROUGHOUT SDC AND THE COACHELLA VALLEY, PROVIDING MORE THAN 50 PROGRAMS AND SERVICES TO ADDRESS HUMAN AND FAMILY NEEDS. SHARP HUMANITARIAN SERVICE PROGRAM IN FY 2012, THE SHARP HUMANITARIAN SERVICE PROGRAM FUNDED 28 SHARP EMPLOYEES, ENABLING THEM TO PARTICIPATE IN SERVICE PROGRAMS THAT PROVIDE HEALTH CARE OR OTHER SUPPORTIVE SERVICES TO UNDERSERVED OR ADVERSELY AFFECTED POPULATIONS. SHARP EMPLOYEES DEVOTED THEIR TIME AND EXPERTISE TO A VARIETY OF HUMANITARIAN ORGANIZATIONS, INCLUDING FACING FUTURES, AN ORGANIZATION THAT PROVIDES FREE MEDICAL CARE TO CHILDREN SUFFERING FROM FACIAL ABNORMALITIES AS A RESULT OF BIRTH DEFECTS OR TRAUMA. OVER A PERIOD OF TWO WEEKS, A TEAM OF SHARP PHYSICIANS, NURSES AND SUPPORT STAFF PROVIDED FREE MAXILLOFACIAL SURGERIES FOR APPROXIMATELY 100 CHILDREN IN VIETNAM. IN ADDITION, SHARP STAFF PARTNERED WITH THE CHILDREN OF THE NATIONS (COTN) ORGANIZATION TO PROVIDE BASIC MEDICAL CARE TO MORE THAN 180 CHILDREN BETWEEN FOUR AND EIGHTEEN YEARS OF AGE, IN LIRA, UGANDA. A TEAM OF PHYSICIANS, STUDENTS AND THERAPISTS ALSO PROVIDED EDUCATION ON WOUND CARE, HYDRATION, NUTRITION AND SAFETY PROCEDURES, INCLUDING CPR AND THE HEIMLICH MANEUVER, TO BOTH STAFF AND CHILDREN IN THE VILLAGE. SHARP STAFF ALSO PARTICIPATED IN THE HELPING OLDER PEOPLE EQUALLY (HOPE) ORGANIZATION'S ELDERLY WEEK IN BELIZE, PROVIDING PHYSICAL THERAPY SCREENINGS AND ASSESSMENTS, AS WELL AS EDUCATION AND EXERCISE PROGRAMS TO APPROXIMATELY 100 ELDERLY COMMUNITY MEMBERS. ADDITIONALLY, IN FY 2012 SHARP STAFF HELPED ORGANIZE A WEEK-LONG MEDICAL MISSION TRIP TO THE NORTHWEST MOUNTAINS OF GUATEMALA. A TEAM OF 75 INDIVIDUALS INCLUDING SHARP-AFFILIATED PHYSICIANS, NURSES, TECHNICAL STAFF, THERAPISTS, CHAPLAINS AND MANY OTHERS PARTICIPATED IN THIS EFFORT IN PARTNERSHIP WITH THE IOAMAI MEDICAL MINISTRIES AND HELPS INTERNATIONAL. DURING A SPAN OF SEVEN DAYS, THE TEAM SET UP A TEMPORARY HOSPITAL AT A LOCAL MILITARY BASE AND TREATED MORE THAN 1,000 PATIENTS, PERFORMING APPROXIMATELY 140 SURGERIES, INCLUDING HERNIA, CLEFT-LIP, CLEFT PALATE, AND GYNECOLOGICAL PROCEDURES. IN SOME CASES, MEMBERS OF THE IMPOVERISHED MOUNTAIN COMMUNITY TRAVELED MANY HOURS TO RECEIVE CARE AT THE HOSPITAL. SHARP ALSO DONATED NUMEROUS SUPPLIES AND EQUIPMENT TO THIS LIFE-CHANGING EXPERIENCE FOR BOTH PATIENTS AND PARTICIPANTS. IN ADDITION, SHARP STAFF COLLABORATED WITH THE 2012 PACIFIC PARTNERSHIP MEDICAL MISSION THAT SERVES INDIVIDUALS IN INDONESIA, CAMBODIA, VIETNAM AND THE PHILIPPINES OVER A SPAN OF THREE MONTHS. SPECIFICALLY, SHARP STAFF PARTICIPATED IN THE PACIFIC PARTNERSHIP TWO-WEEK MEDICAL MISSION TRIP TO CAMBODIA ALONGSIDE THE SAN DIEGO-BASED U.S. NAVAL HOSPITAL SHIP, MERCY. MEDICAL PERSONNEL FROM ALL BRANCHES OF THE U.S. MILITARY PARTICIPATED, AS WELL AS PERSONNEL FROM OTHER COUNTRIES, SUCH AS AUSTRALIA, NEW ZEALAND AND THE NETHERLANDS. THE TEAM IMPLEMENTED FOUR MEDICAL SITES THROUGHOUT CAMBODIA, PROVIDING MEDICAL, DENTAL AND OPHTHALMIC CARE TO APPROXIMATELY 12,700 PATIENTS AND PERFORMING MORE THAN 200 SURGERIES. IN ADDITION, TEAM MEMBERS TAUGHT AND SHARED U.S. MEDICAL PRACTICES WITH CAMBODIAN MEDICAL STUDENTS. IN FY 2012, SHARP STAFF SPENT A WEEK SUPPORTING THE GOD'S CHILD PROJECT, WORKING WITH COLLEGE STUDENTS TO PROVIDE VARIOUS SERVICES TO IMPOVERISHED COMMUNITIES IN ANTIGUA, GUATEMALA, INCLUDING BUILDING A ONE-ROOM HOUSE WITH A CEMENT FOUNDATION FOR A FAMILY OF SEVEN, SERVING DINNER AT A HOMELESS SHELTER, CARING FOR MALNOURISHED CHILDREN, AND GATHERING AND DISTRIBUTING VEGETABLES TO COMMUNITY MEMBERS. SHARP STAFF ALSO PARTICIPATED IN THE WORK OF AMOR MINISTRIES IN TIJUANA, MEXICO, A NON-PROFIT ORGANIZATION THAT HAS SERVED THE PEOPLE OF MEXICO FOR MORE THAN 32 YEARS AND HAS HELPED BUILD MORE THAN 16,000 HOMES. OVER THE COURSE OF FOUR DAYS, THE TEAM CONSTRUCTED A HOME FOR ONE POVERTY-STRICKEN FAMILY. IN ADDITION, SHARP STAFF WORKED WITH FAMILY FRIENDS COMMUNITY CONNECTION (FFCC), A SAN DIEGO-BASED NONPROFIT ORGANIZATION, TO LEND VITAL ASSISTANCE TO VICTIMS OF THE EARTHQUAKES THAT DEVASTATED HAITI IN JANUARY 2010. A TEAM OF 17 INDIVIDUALS, INCLUDING SHARP STAFF, ASSISTED IN THE CONSTRUCTION OF AN ORPHANAGE DORMITORY, INSTALLED WATER FILTRATION SYSTEMS, DISTRIBUTED FOOD PACKAGES AND HELD A SOCCER TOURNAMENT FOR CHILDREN FROM FOUR LOCAL ORPHANAGES. COMMUNITY WALKS FOR THE PAST 17 YEARS, SHARP HAS PROUDLY SUPPORTED THE AMERICAN HEART ASSOCIATION (AHA) ANNUAL HEART WALK. IN SEPTEMBER 2012, MORE THAN 1,000 WALKERS REPRESENTED SHARP AT THE</p>

Identifier	Return Reference	Explanation
		<p>SAN DIEGO HEART WALK HELD IN BALBOA PARK SHARP WAS THE NO. 1 HEART WALK TEAM IN SAN DIEGO AND THE AHA WESTERN REGION AFFILIATES, RAISING NEARLY \$190,000 FOR THE AMERICAN HEART ASSOCIATION. SHARP VOLUNTEERS ARE A CRITICAL COMPONENT OF SHARP'S DEDICATION TO THE SAN DIEGO COMMUNITY. SHARP PROVIDES A MULTITUDE OF VOLUNTEER OPPORTUNITIES THROUGHOUT SAN DIEGO COUNTY FOR INDIVIDUALS TO SERVE THE COMMUNITY, MEET NEW PEOPLE AND ASSIST PROGRAMS RANGING FROM PEDIATRICS TO SENIOR RESOURCE CENTERS. VOLUNTEERS DEVOTE THEIR TIME AND COMPASSION TO PATIENTS AS WELL AS TO THE GENERAL PUBLIC, AND ARE AN ESSENTIAL ELEMENT TO MANY OF SHARP'S PROGRAMS, EVENTS AND INITIATIVES. SHARP VOLUNTEERS SPEND THEIR TIME WITHIN HOSPITALS, IN THE COMMUNITY, AND IN SUPPORT OF THE SHARP HEALTHCARE FOUNDATION, GROSSMONT HOSPITAL FOUNDATION, AND CORONADO HOSPITAL FOUNDATION. SHARP EMPLOYEES ALSO DONATE TIME TO SHARP AS VOLUNTEERS FOR THE SHARP ORGANIZATION. IN FY 2012, MORE THAN 3,600 INDIVIDUALS VOLUNTEERED FOR VARIOUS PROGRAMS ACROSS THE SHARP SYSTEM, CONTRIBUTING MORE THAN 242,000 HOURS OF THEIR TIME IN SERVICE TO SHARP AND ITS INITIATIVES. THIS INCLUDES MORE THAN 950 AUXILIARY MEMBERS AND THOUSANDS MORE INDIVIDUAL VOLUNTEERS FROM THE SAN DIEGO COMMUNITY. MORE THAN 9,000 OF THESE HOURS WERE PROVIDED EXTERNALLY TO THE COMMUNITY THROUGH ACTIVITIES SUCH AS DELIVERING MEALS TO HOMEBOUND SENIORS AND ASSISTING WITH HEALTH FAIRS AND EVENTS. TABLE 2 DETAILS THE NUMBER OF INDIVIDUAL VOLUNTEERS AND THE HOURS PROVIDED IN SERVICE TO EACH OF SHARP'S ENTITIES, SPECIFICALLY FOR PATIENT AND COMMUNITY SUPPORT. VOLUNTEERS ALSO SPENT ADDITIONAL HOURS SUPPORTING SHARP'S THREE FOUNDATIONS FOR EVENTS SUCH AS GROSSMONT HOSPITAL FOUNDATION'S ANNUAL GOLF TOURNAMENT, GALAS HELD FOR SCHHC AND SGH, AND OTHER EVENTS IN SUPPORT OF SHARP ENTITIES AND SERVICES.</p>

Identifier	Return Reference	Explanation
		<p>TABLE 2 SHARP INDIVIDUAL VOLUNTEERS AND VOLUNTEER HOURS - FY 2012 SHARP CHULA VISTA MEDICAL CENTER NUMBER OF INDIVIDUAL VOLUNTEERS - 325 VOLUNTEER OF HOURS - 5,396 SHARP CORONADO HOSPITAL AND HEALTHCARE CENTER NUMBER OF INDIVIDUAL VOLUNTEERS - 134 VOLUNTEER OF HOURS - 6,234 SHARP GROSSMONT HOSPITAL NUMBER OF INDIVIDUAL VOLUNTEERS - 945 VOLUNTEER OF HOURS - 128,415 SHARP METROPOLITAN MEDICAL CAMPUS NUMBER OF INDIVIDUAL VOLUNTEERS - 2,091 VOLUNTEER OF HOURS - 95,659 TOTAL NUMBER OF INDIVIDUAL VOLUNTEERS - 3,495 VOLUNTEER OF HOURS - 235,704 SHARP EMPLOYEES ALSO VOLUNTEER THEIR TIME FOR THE CABRILLO CREDIT UNION SHARP DIVISION BOARD, THE SHARP AND CHILDREN'S MRI BOARD, THE UCSD MEDICAL CENTER/SHARP BONE MARROW TRANSPLANT PROGRAM BOARD, GROSSMONT IMAGING LLC BOARD, AND THE SCVMC - SDI IMAGING CENTER. IN ADDITION, VOLUNTEERS ON SHARP'S AUXILIARY BOARDS AND THE VARIOUS SHARP ENTITY BOARDS VOLUNTEER THEIR TIME TO PROVIDE PROGRAM OVERSIGHT, ADMINISTRATION AND DECISION-MAKING REGARDING FINANCIAL RESOURCES. IN FY 2012, 128 COMMUNITY MEMBERS CONTRIBUTED THEIR TIME TO SHARP'S BOARDS. OTHER SHARP VOLUNTEER EFFORTS IN FY 2012, SHARP STAFF VOLUNTEERED THEIR TIME AND PASSION TO A NUMBER OF UNIQUE INITIATIVES, UNDERSCORING SHARP'S COMMITMENT TO THE HEALTH AND WELFARE OF SAN DIEGANS. BELOW ARE JUST A FEW EXAMPLES OF HOW SHARP EMPLOYEES GAVE OF THEMSELVES TO THE SAN DIEGO COMMUNITY.</p> <p>SGH'S ENGINEERING DEPARTMENT PARTICIPATED IN A NUMBER OF INITIATIVES IN FY 2012, INCLUDING THE CONTINUATION OF THEIR "THIS BUD'S FOR YOU" PROGRAM. THE PROGRAM BROUGHT COMFORT TO UNSUSPECTING PATIENTS AND THEIR LOVED ONES WITH THE DELIVERY OF HAND-PICKED FLOWERS FROM THE MEDICAL CAMPUS'S ABUNDANT GARDENS. THE SGH LANDSCAPE TEAM GREW, CUT, BUNDLED AND DELIVERED COLORFUL BOUQUETS EACH WEEK, BRINGING AN ELEMENT OF NATURAL BEAUTY TO PATIENTS AND VISITORS OF BOTH THE HOSPITAL AND THE SGH HOSPICE HOUSES. THE TEAM ALSO REGULARLY OFFERED SINGLE-STEM ROSES IN A SMALL BUD VASE TO PASSERS-BY. IN ITS SECOND YEAR, THE "THIS BUD'S FOR YOU" PROGRAM HAS BECOME A NATURAL PART OF THE LANDSCAPE TEAM'S DAY, AN ACT THAT IS SIMPLY PART OF WHAT THEY DO TO ENHANCE THE EXPERIENCE OF VISITORS TO THE HOSPITAL. SGH ALSO CONTINUED TO PROVIDE THE "SHIRT OFF OUR BACKS" PROGRAM DURING THE 2011 HOLIDAY SEASON, AND BROUGHT CLOTHING, SHOES, BLANKETS AND HOUSEHOLD ITEMS DIRECTLY TO SAN DIEGO'S HOMELESS POPULATION. THE SGH LANDSCAPE TEAM AND ENGINEERING DEPARTMENT, THE SGH AUXILIARY AND LOCAL BUSINESSES COLLABORATED TO IMPLEMENT THE PROGRAM, AND SGH'S WASTE MANAGEMENT TEAM PROVIDED ANCILLARY SUPPORT WITH LOANER RECYCLE BINS TO USE FOR COLLECTION. HUNDREDS OF POUNDS OF CLOTHING, SHOES, TOWELS, BLANKETS, TOILETRIES AND OTHER ITEMS THAT COULD BE PUT TO USE IMMEDIATELY WERE COLLECTED, WASHED, FOLDED, BOXED/BAGGED AND PREPARED BEFORE DELIVERY TO THE SAN DIEGO POPULATION IN NEED, AND THIS YEAR THREE PICKUP TRUCKS WERE REQUIRED TO DELIVER THE COLLECTED ITEMS. THE EFFORTS PROVIDED FOOD AND COMFORT TO ALL WHO EXPRESSED NEED - RANGING FROM SMALL CHILDREN TO ADULTS OF ALL SIZES.</p> <p>NEW IN FY 2012, THE SGH ENGINEERING DEPARTMENT BEGAN THE "FEED THE CUBS - OUR FUTURE ENGINEERS" PROGRAM, AND PROVIDED STUDENTS ENROLLED IN THE HOSPITAL'S HIGH SCHOOL MENTORSHIP PROGRAM WITH LUNCH, SNACKS AND FROZEN MEALS THROUGH A DEPARTMENT-WIDE FUNDRAISING EFFORT. THROUGH THE PROGRAM, THE DEPARTMENT ENSURED THAT THE STUDENTS ATE BOTH BREAKFAST AND LUNCH DURING THEIR TIME AT THE HOSPITAL.</p> <p>AT SMMC, THE ARTS FOR HEALING PROGRAM WAS ESTABLISHED TO IMPROVE THE SPIRITUAL AND EMOTIONAL HEALTH OF PATIENTS THAT FACE SIGNIFICANT MEDICAL CHALLENGES. THE PROGRAM PROVIDES SERVICES AT SMH, SMH OUTPATIENT PAVILION (OPP), SMBHWN, SMV AND SMC. SINCE THE INCEPTION OF THE PROGRAM IN 2007, MORE THAN 18,000 PATIENTS AND THEIR FAMILIES, GUESTS AND STAFF HAVE BENEFITTED FROM THE TIME AND TALENT PROVIDED BY ARTS FOR HEALING STAFF AND VOLUNTEERS. TRAINED VOLUNTEERS ARE THE PRIMARY PROVIDERS OF THE PROGRAM, WHICH IS COORDINATED BY A CHAPLAIN OF THE SPIRITUAL CARE PROGRAM. THE ARTS FOR HEALING PROGRAM UTILIZES THE POWER OF ART AND MUSIC TO ENHANCE THE HEALING PROCESS FOR PATIENTS CHALLENGED BY SIGNIFICANT ILLNESS, CHRONIC PAIN AND LONG-TERM HOSPITALIZATION. AT SMH, OFTENTIMES THESE ARE STROKE PATIENTS, CANCER PATIENTS OR PATIENTS FACING LIFE WITH NEWLY ACQUIRED DISABILITIES FOLLOWING CATASTROPHIC EVENTS. THROUGHOUT FY 2012, ARTS FOR HEALING ALSO PROVIDED ART THERAPY FOR PATIENTS AND COMMUNITY MEMBERS AT THE PAVILION CANCER SUPPORT GROUP ON SATURDAY MORNINGS. AT SMBHWN, THE PROGRAM IS PROVIDED TO HIGH-RISK MOTHERS WHO ARE IN THE HOSPITAL FROM ONE TO FOUR MONTHS, AWAITING CHILDBIRTH AND EXPERIENCING STRESS AND LONELINESS OVER THE SEPARATION FROM THEIR FAMILIES. PARTICIPANTS PAINT AND CREATE CARDS AND SEASONAL CRAFT PROJECTS. IN ADDITION, ARTS FOR HEALING PROVIDED ART ACTIVITIES FOR CHILDREN AT SATURDAY WITH SANTA, A COMMUNITY EVENT HOSTED BY THE SMH AUXILIARY FOR CHILDREN TO HAVE THEIR PICTURE TAKEN WITH SANTA. THIS AND OTHER ARTS FOR HEALING EVEN</p>

Identifier	Return Reference	Explanation
		<p>TS HAVE BENEFITED HUNDREDS OF COMMUNITY MEMBERS THROUGH THE HEALING POWER OF ART. IN ADDITION, SHARP SPONSORED THE TEDXSANDIEGO AND TEDXYOUTH EVENTS HELD IN NOVEMBER 2011, PROVIDING SUPPORT IN ADVANCE OF THE EVENT, INCLUDING SHOW DIRECTION, TECHNICAL DIRECTION, EXPERIENCE DESIGN AND REGISTRATION. TEDXSANDIEGO AND TEDXYOUTH ARE EVENTS FOR MEMBERS OF THE SAN DIEGO COMMUNITY AND BEYOND, AND ARE DESIGNED TO BRING TOGETHER INNOVATORS, EXPLORERS, TEACHERS AND LEARNERS IN AN ENVIRONMENT THAT ENCOURAGES COLLABORATION, CONVERSATION AND INTERACTION. TED IS A NONPROFIT ORGANIZATION DEVOTED TO "IDEAS WORTH SPREADING," AND HAS GROWN OVER THE PAST 25 YEARS TO SUPPORT AN ARRAY OF WORLD-CHANGING IDEAS WITH MULTIPLE INITIATIVES. TEDXSANDIEGO AND TEDXYOUTH ARE NOT-FOR-PROFIT EVENTS ORGANIZED ENTIRELY BY LOCAL, UNPAID VOLUNTEERS. SHARP TEAM MEMBERS VOLUNTEERED THEIR TIME ON-SITE AT EACH EVENT, DELIVERING THE SHARP EXPERIENCE AS WAY FINDERS, USHERS, STAGE MANAGERS, SPEAKER SHADOWS AND IN OTHER ROLES. ALL WAYS GREEN INITIATIVE AS SAN DIEGO'S LARGEST PRIVATE EMPLOYER, SHARP RECOGNIZES THAT THE HEALTH OF ITS PATIENTS, EMPLOYEES AND THE COMMUNITY IS DIRECTLY TIED TO THE HEALTH OF THEIR ENVIRONMENT. SHARP PROMOTES A CULTURE OF ENVIRONMENTAL RESPONSIBILITY BY PROVIDING EDUCATION AND OUTREACH TO EMPLOYEES TO IMPROVE THEIR HEALTH AND THE HEALTH OF THOSE THEY SERVE. SHARP'S SYSTEMWIDE ALL WAYS GREEN(TM) COMMITTEE IS CHARGED WITH EVALUATING OPPORTUNITIES AND RECOGNIZING BEST PRACTICES TO (1) INCREASE ENERGY EFFICIENCY, (2) IMPROVE WATER CONSERVATION, (3) MINIMIZE WASTE, (4) INVESTIGATE AND PROMOTE CLEANER MEANS OF TRANSPORTATION, AND (5) REDUCE THE AMOUNT OF HARMFUL CHEMICALS RELEASED TO THE ENVIRONMENT, AS WELL AS THE PROMOTION OF OTHER INITIATIVES TO LOWER SHARP'S CARBON FOOTPRINT AND BE A POSITIVE ENVIRONMENTAL INFLUENCE. SHARP'S ENVIRONMENTAL POLICY SERVES TO AFFIRM ITS COMMITMENT TO IMPROVING THE HEALTH OF THE ENVIRONMENT AND THEREFORE THE COMMUNITIES IT SERVES. SHARP CREATED ITS ALL WAYS GREEN(TM) LOGO TO BRAND ITS ENVIRONMENTAL ACTIVITIES AND COMMUNICATE SUSTAINABLE ACTIVITIES THROUGHOUT SHARP AND THE SDC COMMUNITY. ESTABLISHED GREEN TEAMS AT EACH ENTITY ARE CHARGED WITH DEVELOPING NEW PROGRAMS THAT EDUCATE SHARP EMPLOYEES TO CONSERVE NATURAL RESOURCES AND REDUCE, REUSE AND RECYCLE. SHARP HAS PARTNERED WITH ORGANIZATIONS IN THE COMMUNITY AND ITS VENDORS TO DEVELOP NEW PROGRAMS AND INITIATIVES TO HELP ACHIEVE ITS ENVIRONMENTAL GOALS. ACCORDING TO THE EPA, INPATIENT HOSPITAL FACILITIES ARE THE SECOND-MOST ENERGY-INTENSIVE INDUSTRY AFTER FOOD SERVICE AND SALES, WITH ENERGY UTILIZATION RATES 2.7 TIMES GREATER THAN THAT OF OFFICE BUILDINGS ON A SQUARE-FOOT BASIS. UNLIKE OTHER INDUSTRIES, HOSPITALS MUST OPERATE 24 HOURS A DAY, SEVEN DAYS A WEEK, AND MUST PROVIDE SERVICE DURING POWER OUTAGES, NATURAL DISASTERS AND OTHER EMERGENCIES. GIVEN THIS REALITY, SHARP HAS EMBARKED ON SEVERAL GREEN INITIATIVES TO ENHANCE ENERGY EFFICIENCY INCLUDING RETRO-COMMISSIONING OF HEATING, VENTILATION AND AIR CONDITIONING (HVAC) SYSTEMS, OCCUPANCY SENSOR INSTALLATION, ENERGY AUDITS, ENERGY-EFFICIENT MOTOR AND PUMP REPLACEMENTS, EQUIPMENT MODERNIZATION, AND DEVELOPMENT OF A SHARP HEALTHCARE ENERGY GUIDELINE TO HELP MANAGE ENERGY UTILIZATION PRACTICES THROUGHOUT THE SYSTEM. OTHER PROJECTS COMPLETED IN 2012 INCLUDE LIGHTING RETROFITS, PIPE INSULATIONS AND INFRASTRUCTURE CONTROL INITIATIVES, WHICH ARE EXPECTED TO GENERATE ANNUAL ENERGY SAVINGS IN EXCESS OF \$200,000.</p>

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		<p>ALL SHARP ENTITIES PARTICIPATE IN THE EPA'S ENERGY STAR (ES) DATABASE AND MONITOR THEIR ES SCORES ON A MONTHLY BASIS. ES IS AN INTERNATIONAL STANDARD FOR ENERGY EFFICIENCY CREATED BY THE EPA. BUILDINGS THAT ARE DESIGNATED BY ES MUST EARN A 75 OR HIGHER ON THE EPA'S ENERGY PERFORMANCE SCALE, INDICATING THAT THE BUILDING PERFORMS BETTER THAN AT LEAST 75 PERCENT OF SIMILAR BUILDINGS NATIONWIDE. ACCORDING TO THE EPA, BUILDINGS THAT QUALIFY FOR THE ES TYPICALLY USE 35 PERCENT OR LESS ENERGY THAN BUILDINGS OF SIMILAR SIZE AND FUNCTION. IN 2007, SCHHC FIRST EARNED EPA'S ES CERTIFICATION AND ALSO EARNED THE ES DESIGNATION FOR 2010, 2011 AND 2012. SCVMC IS ELIGIBLE TO RECEIVE THE EPA ES DESIGNATION AGAIN IN 2012, AND EARNED THIS RECOGNITION FOR THE THREE PREVIOUS YEARS. THE ES DESIGNATION IS THE RESULT OF SHARP'S COMMITMENT TO SUPERIOR ENERGY PERFORMANCE AND RESPONSIBLE USE OF NATURAL RESOURCES. IN ADDITION, SHARP'S NEW SRS DOWNTOWN MEDICAL OFFICE BUILDING IS THE FIRST LEADERSHIP IN ENERGY AND ENVIRONMENTAL DESIGN (LEED) GOLD-CERTIFIED MEDICAL OFFICE BUILDING IN SAN DIEGO. IN AN EFFORT TO CONSERVE WATER, SHARP HAS RESEARCHED AND IMPLEMENTED INFRASTRUCTURE CHANGES TO ENSURE SHARP'S FACILITIES ARE OPTIMALLY OPERATED WHILE MONITORING AND MEASURING WATER CONSUMPTION. SUCH CHANGES INCLUDE INSTALLATION OF MOTION-SENSING FAUCETS, DRIP IRRIGATION SYSTEMS, MIST ELIMINATORS, WATER-SAVING DEVICES AND EQUIPMENT, WATER MONITORING AND CONTROL SYSTEMS, WATER PRACTICE AND UTILIZATION EVALUATIONS, REDUCED LANDSCAPE WATERING TIMES, HARDSCAPING AND REDESIGNING AREAS WITH DROUGHT-RESISTANT PLANTS. THE EPA AND HOSPITALS FOR A HEALTHY ENVIRONMENT REPORT THAT EACH PATIENT GENERATES APPROXIMATELY 15 POUNDS OF WASTE EACH DAY, WHILE U.S. MEDICAL CENTERS GENERATE APPROXIMATELY 2 MILLION TONS OF WASTE EACH YEAR. SHARP HAS IMPLEMENTED A SYSTEMWIDE SINGLE-STREAM RECYCLING PROGRAM TO DIVERT WASTE FROM THE LANDFILLS. OTHER WASTE REDUCTION EFFORTS INCLUDE REPROCESSING OF SURGICAL INSTRUMENTS, USE OF REUSABLE SHARPS AND PHARMACEUTICAL WASTE CONTAINERS, STERILE PROCESSING EQUIPMENT TO ELIMINATE BLUE-WRAPPED INSTRUMENT TRAYS, USE OF RECYCLABLE PAPER FOR PRINTING BROCHURES, NEWSLETTERS AND OTHER MARKETING MATERIALS, ELECTRONIC PATIENT BILLS AND PAPERLESS PAYROLL, RECYCLING OF EXAM TABLE PAPER, ENCOURAGEMENT OF REDUCED PAPER USE AT MEETINGS THROUGH ELECTRONIC CORRESPONDENCE, AND USE OF ONE-AT-A-TIME PAPER NAPKIN AND PLASTIC CUTLERY DISPENSERS. OFFICE DEPOT, SHARP'S PRIMARY OFFICE SUPPLY VENDOR, HAS INITIATED A NEW PROGRAM CALLED GREENEROFFICE(TM) DELIVERY SERVICE AIMED AT MAKING CLIENT DELIVERIES MORE ENVIRONMENTALLY FRIENDLY. SHARP WAS AN EARLY ADOPTER OF THIS PROGRAM WHEREBY OFFICE DEPOT REPLACED ITS SMALL AND MID-SIZED CARDBOARD BOXES WITH PAPER BAGS THAT ARE COMPOSED OF 40 PERCENT POST-CONSUMER RECYCLED MATERIAL. THE PAPER BAGS ARE PROTECTED DURING SHIPPING BY REUSABLE PLASTIC TOTES, WHICH ARE RETURNED TO OFFICE DEPOT FOR REUSE. NATIONALLY, GREENEROFFICE DELIVERY SERVICE WILL RESULT IN 3,130 TONS LESS WOOD (EQUIVALENT TO 21,691 FEWER TREES) AND A REDUCTION IN ENERGY USE, CO2 EMISSIONS, WASTEWATER AND SOLID WASTE. FURTHERING CARBON FOOTPRINT REDUCTION EFFORTS, OFFICE DEPOT AND SHARP HAVE ARRANGED FOR 30 PERCENT RECYCLED COPY PAPER TO BE USED AT ALL SHARP ENTITIES. ADDITIONALLY, IN JULY 2012 SCHHC AND SGH BEGAN A ONE-YEAR INTEGRATED WASTE MANAGEMENT PROGRAM PILOT WITH AN OUTSIDE VENDOR, WHICH AIMS TO INCREASE SHARP'S WASTE DIVERSION RATE THROUGH EMPLOYEE EDUCATION OF APPROPRIATE WASTE STREAM DISPOSAL AND INCREASED RECYCLING ACTIVITIES. IN SUPPORT OF ELECTRONIC WASTE RECYCLING, SHARP HOSTED TWO COMMUNITY ELECTRONIC RECYCLING EVENTS AT THEIR CORPORATE OFFICE LOCATION IN APRIL AND SEPTEMBER 2012. DURING THESE EVENTS, SHARP PARTNERED WITH THE DRUG ENFORCEMENT AGENCY'S (DEA) NATIONAL PRESCRIPTION DRUG TAKE BACK DAY TO PROVIDE A SAFE, CONVENIENT AND RESPONSIBLE MEANS OF DRUG DISPOSAL WHILE EDUCATING THE GENERAL PUBLIC ABOUT THE POTENTIAL FOR ABUSE OF THEIR MEDICATIONS. THE FOUR-HOUR LONG COMMUNITY WASTE COLLECTION EVENTS WELCOMED EMPLOYEES AND COMMUNITY MEMBERS, AND COLLECTED NEARLY 500 POUNDS OF PHARMACEUTICALS AND 12 BINS (APPROXIMATELY 6,600 POUNDS) OF ELECTRONIC WASTE. IN ADDITION, SHARP EMPLOYEES WERE ENCOURAGED TO RECYCLE PERSONAL EYEGLASSES AND SUNGLASSES THROUGH THE LION'S CLUB RECYCLE SIGHT PROGRAM, WHICH DISTRIBUTES RECYCLED GLASSES TO PEOPLE IN NEED BOTH LOCALLY AND GLOBALLY. ON AVERAGE, SHARP EMPLOYEES DONATE MORE THAN 400 PAIRS OF GLASSES THROUGH THE PROGRAM EACH YEAR. IN APRIL 2012, SHARP HELD ITS THIRD-ANNUAL SYSTEMWIDE EARTH WEEK EVENT, INCLUDING GREEN FAIRS AT EACH OF THE SHARP ENTITIES. DURING THE FAIRS, EMPLOYEES LEARNED HOW THEY CAN CONTRIBUTE TO RECYCLING, WASTE MINIMIZATION, HEALTHY EATING PRACTICES AND OTHER SUSTAINABILITY EFFORTS. MANY OF SHARP'S KEY VENDOR PARTNERS PARTICIPATED IN THE GREEN FAIRS TO HELP RAISE AWARENESS AND EDUCATION REGARDING GREEN INITIATIVES AND HOW THEY INVOLVE SHARP HEALTHCARE. IN ADDITION, ON NOVEMBER 15, 201</p>

Identifier	Return Reference	Explanation
		<p>1, SHARP RECOGNIZED AMERICA RECYCLES DAY THROUGH A SYSTEMWIDE ELECTRONIC ANNOUNCEMENT THAT HIGHLIGHTED SHARP'S RECYCLING EFFORTS AND ACCOMPLISHMENTS, AND PROVIDED STAFF WITH TIPS AND REMINDERS FOR PROPER RECYCLING AT WORK. THE IMPACT OF SHARP'S WASTE REDUCTION PROGRAMS HAS BEEN SIGNIFICANT. IN FY 2012, SHARP FACILITIES DIVERTED OVER 7.4 MILLION POUNDS OF PAPER, CARDBOARD, GLASS, ALUMINUM, METALS, POLYSTYRENE, BATTERIES AND ELECTRONIC WASTE FROM LOCAL LANDFILLS. SCHHC AND SMMC DIVERTED 36,729 POUNDS OF WASTE THROUGH UTILIZATION OF REUSABLE SHARPS AND PHARMACEUTICAL WASTE CONTAINERS. IN FY 2012, SHARP RECYCLED/RECLAIMED 186,910 POUNDS OF HAZARDOUS AND UNIVERSAL WASTE (E.G., BATTERIES, SOLVENTS AND FLUORESCENT LIGHT BULBS) AND DIVERTED 33,317 POUNDS OF WASTE THROUGH SURGICAL DEVICE REPROCESSING. TABLE 3 PRESENTS THE QUANTITY OF WASTE DIVERSION AT SHARP SHOWN AS POUNDS (LBS) DIVERTED. TABLE 3 SHARP HEALTHCARE WASTE DIVERSION - FY 2012</p> <p>SHARP CHULA VISTA MEDICAL CENTER RECYCLED WASTE PER YEAR (LBS) - 578,191 TOTAL WASTE PER YEAR (LBS) - 2,445,809 PERCENT RECYCLED - 23.6% SHARP CORONADO HOSPITAL AND HEALTHCARE CENTER RECYCLED WASTE PER YEAR (LBS) - 228,541 TOTAL WASTE PER YEAR (LBS) - 1,310,172 PERCENT RECYCLED - 17.4% SHARP GROSSMONT HOSPITAL RECYCLED WASTE PER YEAR (LBS) - 1,759,342 TOTAL WASTE PER YEAR (LBS) - 4,982,960 PERCENT RECYCLED - 35.3% SHARP METROPOLITAN MEDICAL CAMPUS RECYCLED WASTE PER YEAR (LBS) - 2,237,629 TOTAL WASTE PER YEAR (LBS) - 6,789,857 PERCENT RECYCLED - 32.9% TOTAL SHARP HEALTHCARE RECYCLED WASTE PER YEAR (LBS) - 7,481,158 TOTAL WASTE PER YEAR (LBS) - 20,295,500 PERCENT RECYCLED - 37%</p> <p>SHARP IMPLEMENTS SUSTAINABLE FOOD PRACTICES THROUGHOUT THE SYSTEM INCLUDING REMOVAL OF STYROFOAM FROM CAFETERIAS, USE OF GREEN-LABEL KITCHEN SOAPS AND CLEANSERS, ELECTRONIC CAFE MENUS, RECYCLING OF ALL CARDBOARD, CANS AND GREASE FROM CAFES, AND PARTNERING WITH VENDORS WHO ARE COMMITTED TO REDUCING PRODUCT PACKAGING. OTHER SUSTAINABLE FOOD PRACTICES INCLUDE ORGANIC MARKETS AT EACH OF SHARP'S HOSPITALS AND CORPORATE OFFICE, PURCHASING OF HORMONE-FREE MILK, AND INCREASED PURCHASING OF LOCALLY GROWN FRUITS AND VEGETABLES, APPROACHING 65 PERCENT AT SOME ENTITIES. BOTH SMH AND SCHHC HAVE ALSO CREATED THE FIRST COUNTY-APPROVED ORGANIC GARDENS WITH PRODUCE TO BE USED AT EMPLOYEE CAFES. IN FY 2012, SMH AND SMBHWN PARTNERED WITH THE CITY OF SAN DIEGO TO PLAN AND IMPLEMENT A FOOD WASTE COMPOSTING PROGRAM, MAKING SHARP THE FIRST SAN DIEGO HEALTHCARE ORGANIZATION TO JOIN THE CITY'S INITIATIVE. THROUGH THIS PROGRAM, FOOD WASTE IS PICKED UP WEEKLY BY EDCO, A SOLID WASTE VENDOR, FOR TRANSPORT TO THE MIRAMAR GREENERY, A 74-ACRE FACILITY LOCATED AT THE MIRAMAR LANDFILL IN KEARNY MESA. THE COMPOSTED RICH SOIL IS SOLD TO COMMERCIAL LANDSCAPERS AND NON-CITY RESIDENTS, AND PROVIDED AT NO CHARGE TO CITY RESIDENTS AT VOLUMES OF UP TO TWO CUBIC YARDS. FROM APRIL TO SEPTEMBER 2012, APPROXIMATELY 76 TONS WERE DIVERTED FROM THE LANDFILL AND COMPOSTED AT THE MIRAMAR GREENERY. SMH AND SMBHWN HOSTED A FREE COMMUNITY COMPOSTING WORKSHOP TO SHARE THEIR FOOD WASTE COMPOSTING EXPERIENCES AND ENCOURAGE OTHER ORGANIZATIONS TO BEGIN COMPOSTING. SHARP PLANS TO CONTINUE ITS PARTNERSHIP WITH THE CITY OF SAN DIEGO TO EXPAND THE FOOD WASTE COMPOSTING PROGRAM TO OTHER SHARP ENTITIES.</p>

Identifier	Return Reference	Explanation
		<p>RIDE SHARING, PUBLIC TRANSIT PROGRAMS AND OTHER TRANSPORTATION EFFORTS CONTRIBUTE TO THE REDUCTION OF SHARP'S TRANSPORTATION EMISSIONS. SHARP'S COMMUTER SOLUTION SUB-COMMITTEE IS RESPONSIBLE FOR DEVELOPING NEW PROGRAMS AND EDUCATION CAMPAIGNS AIMED AT REDUCING THE NUMBER OF CARS ON THE ROAD. SHARP ENSURES CARPOOL PARKING SPACES AND DESIGNATED BIKE RACKS AND MOTORCYCLE SPACES ARE AVAILABLE AT EACH EMPLOYEE PARKING LOT. IN ADDITION, SHARP OFFERS DISCOUNTED MONTHLY BUS PASSES FOR PURCHASE BY EMPLOYEES. IN PARTNERSHIP WITH THE SAN DIEGO ASSOCIATION OF GOVERNMENTS (SANDAG), A VANPOOL AND CARPOOL MATCH-UP PROGRAM HAS BEEN CREATED TO HELP EMPLOYEES FIND CONVENIENT RIDE SHARE PARTNERS. IN FY 2012, SHARP WAS SELECTED AS A PARTICIPANT IN SANDAG'S ICOMMUTE CARPOOL INCENTIVE PILOT PROGRAM TO INCENTIVIZE EMPLOYEES TO CARPOOL. EMPLOYEES WHO COMMITTED TO CARPOOLING A MINIMUM OF 13 TRIPS PER MONTH WERE OFFERED A \$50 GAS CARD FOR A MAXIMUM OF THREE MONTHS. MORE THAN 150 EMPLOYEES PARTICIPATED IN THIS PILOT PROGRAM. SHARP MONITORS RIDE SHARING BY ITS EMPLOYEE POPULATION AND THE REDUCTION OF ITS CARBON FOOTPRINT THROUGH SANDAG'S ICOMMUTE WEBSITE. EDUCATION AND MARKETING CAMPAIGNS ARE HELD THROUGHOUT THE YEAR TO EDUCATE EMPLOYEES ON THE BENEFITS OF RIDE SHARING. IN FY 2012, SHARP EMPLOYEES SAVED MORE THAN 1,383,000 MILES AND REDUCED MORE THAN 791,000 POUNDS OF CARBON DIOXIDE BY CARPOOLING, VANPOOLING, TELECOMMUTING AND THE USE OF PUBLIC TRANSPORTATION. IN FY 2012, THE SHARP SYSTEM PARTICIPATED IN THE SANDAG ICOMMUTE CORPORATE CHALLENGE, ACHIEVING SECOND PLACE IN THE MEGA EMPLOYEE CATEGORY. IN ADDITION, SHARP USES CENTRALIZED PATIENT SCHEDULING TO IMPROVE PATIENT VANPOOLS, AND HAS REPLACED HIGHER FUEL-CONSUMING CARGO VANS WITH ECONOMY FORD TRANSIT VEHICLES, SAVING APPROXIMATELY FIVE MILES PER GALLON. AS PART OF THE NATIONWIDE ELECTRIC VEHICLE PROJECT, SHARP HAS INSTALLED ELECTRIC VEHICLE CHARGERS (EVC) AT ITS CORPORATE OFFICE LOCATION AND METROPOLITAN CAMPUS, AND IS IN THE PROCESS OF EXPANDING EVC INSTALLATION ACROSS THE SYSTEM. SHARP IS THE FIRST HEALTH CARE SYSTEM IN SAN DIEGO TO OFFER THE EVCS, SUPPORTING THE CREATION OF A NATIONAL INFRASTRUCTURE REQUIRED FOR THE PROMOTION OF EVCS TO REDUCE CARBON EMISSIONS AND DEPENDENCE ON FOREIGN OIL. IN FY 2012, SHARP PRESENTED TO PROFESSIONALS AT THE CALIFORNIA HIGHER EDUCATION SUSTAINABILITY CONFERENCE (CHESC) AT UNIVERSITY OF CALIFORNIA, DAVIS, HIGHLIGHTING ITS WASTE MINIMIZATION EFFORTS, INCLUDING ITS FOOD WASTE COMPOSTING PROGRAM. SHARP'S WASTE MINIMIZATION INITIATIVES HAVE ALSO BEEN RECOGNIZED BY SEVERAL PUBLICATIONS INCLUDING SAN DIEGO BUSINESS JOURNAL, NORTH COUNTY TIMES AND BIOCYCLE, A NATIONAL MAGAZINE ABOUT COMPOSTING, RENEWABLE ENERGY AND SUSTAINABILITY. TABLE 4 HIGHLIGHTS THE ALL WAYS GREEN(TM) EFFORTS AT SHARP ENTITIES. GOING FORWARD, SHARP REMAINS COMMITTED TO THE ALL WAYS GREEN(TM) INITIATIVE AND WILL CONTINUE TO INVESTIGATE OPPORTUNITIES TO REDUCE ITS CARBON FOOTPRINT. GREEN PURCHASING METHODS WILL BE EXPLORED TO REDUCE WASTE VOLUME AND TOXICITY WITH LESS PACKAGING, FEWER TOXIC MATERIALS AND MORE RECYCLABLE PACKAGING PRIOR TO ENTERING THE SHARP SYSTEM. SHARP'S ALL WAYS GREEN(TM) COMMITTEE CONTINUES TO WORK WITH SYSTEM EMPLOYEES, PHYSICIANS AND CORPORATE PARTNERS TO DEVELOP NEW AND CREATIVE WAYS TO REDUCE SHARP'S IMPACT ON THE ENVIRONMENT AND MEET THEIR GOAL OF BEING AN OUTSTANDING COMMUNITY CITIZEN THROUGH ENVIRONMENTAL RESPONSIBILITY. TABLE 4 ALL WAYS GREEN INITIATIVES BY SHARP ENTITY - FY 2012 SMH/SMBHVN *ENERGY EFFICIENCY - ELECTRIC VEHICLE CHARGERS - ENERGY AUDITS - ENERGY-EFFICIENT CHILLERS/MOTORS - ENERGY STAR PARTICIPATION - HVAC PROJECTS - LIGHTING RETROFITS - OCCUPANCY SENSORS - PIPE INSULATIONS *WATER CONSERVATION - DRIP IRRIGATION - DROUGHT-TOLERANT PLANTS AND BARK-COVERED GROUND - ELECTRONIC FAUCETS - EVALUATION OF WATER UTILIZATION PRACTICES - HARDSCAPING - LANDSCAPE WATER REDUCTION SYSTEMS - MIST ELIMINATORS *WASTE MINIMIZATION - ELECTRONIC CAFE MENUS - FOOD WASTE COMPOSTING - SINGLE-SERVE PAPER NAPKIN AND PLASTIC CUTLERY DISPENSERS - REUSABLE SHARP WASTE CONTAINERS - SINGLE-STREAM RECYCLING - SURGICAL INSTRUMENT REPROCESSING *EDUCATION AND OUTREACH - DROUGHT TOLERANT ROOFTOP GARDEN - EARTH WEEK ACTIVITIES - ENVIRONMENTAL POLICY - GREEN TEAM - NO SMOKING POLICY - ORGANIC FARMER'S MARKET - ORGANIC GARDENS - RECYCLING EDUCATION - RIDE SHARE PROMOTION SMV/SMC *ENERGY EFFICIENCY - ENERGY AUDITS - ENERGY STAR PARTICIPATION - HVAC PROJECTS - LIGHTING RETROFITS - MOTOR AND PUMP REPLACEMENTS *WATER CONSERVATION - DRIP IRRIGATION - DROUGHT-TOLERANT PLANTS AND BARK-COVERED GROUND - ELECTRONIC FAUCETS - EVALUATION OF WATER UTILIZATION PRACTICES - HARDSCAPING - LANDSCAPE WATER REDUCTION SYSTEMS - MIST ELIMINATORS *WASTE MINIMIZATION - SINGLE-SERVE PAPER NAPKIN AND PLASTIC CUTLERY DISPENSERS - SINGLE-STREAM RECYCLING - STYROFOAM ELIMINATION - SURGICAL INSTRUMENT REPROCESSING *EDUCATION AND OUTREACH - EARTH WEEK ACTIVITIES - ENVIRONMENTAL POLICY - GREEN TEAM - NO SMOKING</p>

Identifier	Return Reference	Explanation
		<p>G POLICY - ORGANIC FARMER'S MARKET - RECYCLING EDUCATION - RIDE SHARE PROMOTION SGH *ENERGY EFFICIENCY - ENERGY AUDITS - ENERGY STAR PARTICIPATION - HVAC PROJECTS - LIGHTING RETROFITS - RETRO-COMMISSIONING *WATER CONSERVATION - DRIP IRRIGATION - DROUGHT-TOLERANT PLANTS AND BARK-COVERED GROUND - ELECTRONIC FAUCETS - EVALUATION OF WATER UTILIZATION PRACTICES - HARDSCAPING - LANDSCAPE WATER REDUCTION SYSTEMS - MIST ELIMINATORS *WASTE MINIMIZATION - ELECTRONIC CAFE MENUS - SINGLE-SERVE PAPER NAPKIN AND PLASTIC CUTLERY DISPENSERS - SINGLE-STREAM RECYCLING - SURGICAL INSTRUMENT REPROCESSING *EDUCATION AND OUTREACH - EARTH WEEK ACTIVITIES - ENVIRONMENTAL POLICY - GREEN TEAM - NO SMOKING POLICY - ORGANIC FARMER'S MARKET - RECYCLING EDUCATION - RIDE SHARE PROMOTION SCVMC *ENERGY EFFICIENCY - ENERGY AUDITS - ENERGY-EFFICIENT CHILLERS/MOTORS - ENERGY STAR PARTICIPATION AND AWARD ELIGIBLE - HVAC PROJECTS - LIGHTING RETROFITS *WATER CONSERVATION - DRIP IRRIGATION - DROUGHT-TOLERANT PLANTS AND BARK-COVERED GROUND - ELECTRONIC FAUCETS - EVALUATION OF WATER UTILIZATION PRACTICES - HARDSCAPING - LANDSCAPE WATER REDUCTION SYSTEMS - MIST ELIMINATORS *WASTE MINIMIZATION - COMPACTOR RENOVATION - ELECTRONIC CAFE MENUS - SINGLE-STREAM RECYCLING - SURGICAL INSTRUMENT REPROCESSING *EDUCATION AND OUTREACH - EARTH WEEK ACTIVITIES - ENVIRONMENTAL POLICY - GREEN TEAM - NO SMOKING POLICY - ORGANIC FARMER'S MARKET - RECYCLING EDUCATION - RIDE SHARE PROMOTION SCHHC *ENERGY EFFICIENCY - ELEVATOR/CHILLER MODERNIZATIONS - ENERGY AUDITS - ENERGY-EFFICIENT CHILLERS/MOTORS - ENERGY STAR AWARD HVAC PROJECTS - LIGHTING RETROFITS *WATER CONSERVATION - DRIP IRRIGATION - DROUGHT-TOLERANT PLANTS AND BARK-COVERED GROUND - ELECTRONIC FAUCETS - EVALUATION OF WATER UTILIZATION PRACTICES - HARDSCAPING - LANDSCAPE WATER REDUCTION SYSTEMS - MIST ELIMINATORS *WASTE MINIMIZATION - SINGLE-SERVE PAPER NAPKIN AND PLASTIC CUTLERY DISPENSERS - REUSABLE SHARP CONTAINERS - SINGLE-STREAM RECYCLING - SURGICAL INSTRUMENT REPROCESSING *EDUCATION AND OUTREACH - EARTH WEEK ACTIVITIES - ENVIRONMENTAL POLICY - GREEN TEAM - NO SMOKING POLICY - ORGANIC FARMER'S MARKET - ORGANIC GARDENS - RECYCLING EDUCATION - RIDE SHARE PROMOTION SRS *ENERGY EFFICIENCY - ENERGY AUDITS - ENERGY STAR PARTICIPATION - LIGHTING RETROFITS *WATER CONSERVATION - DRIP IRRIGATION - DROUGHT-TOLERANT PLANTS AND BARK-COVERED GROUND - ELECTRONIC FAUCETS - EVALUATION OF WATER UTILIZATION PRACTICES - HARDSCAPING - LANDSCAPE WATER REDUCTION SYSTEMS - LOW-FLOW SYSTEMS - MIST ELIMINATORS *WASTE MINIMIZATION - SINGLE-SERVE PAPER NAPKIN AND PLASTIC CUTLERY DISPENSERS - RECYCLING OF EXAM PAPER - SINGLE-STREAM RECYCLING - STYROFOAM ELIMINATION *EDUCATION AND OUTREACH - CONTRACTOR EDUCATION - EARTH WEEK ACTIVITIES - ENVIRONMENTAL POLICY - GREEN TEAM - NO SMOKING POLICY - RECYCLING EDUCATION - RIDE SHARE PROMOTION SHP *ENERGY EFFICIENCY - ENERGY AUDITS - HVAC PROJECTS - LIGHTING RETROFITS - OCCUPANCY SENSORS *WATER CONSERVATION - DRIP IRRIGATION - DROUGHT-TOLERANT PLANTS AND BARK-COVERED GROUND - ELECTRONIC FAUCETS - EVALUATION OF WATER UTILIZATION PRACTICES - HARDSCAPING - LANDSCAPE WATER REDUCTION SYSTEMS - MIST ELIMINATORS *WASTE MINIMIZATION - SINGLE-SERVE PAPER NAPKIN AND PLASTIC CUTLERY DISPENSERS - SINGLE-STREAM RECYCLING - SPRING CLEANING EVENTS *EDUCATION AND OUTREACH - EARTH WEEK ACTIVITIES - ENVIRONMENTAL POLICY - GREEN TEAM - NO SMOKING POLICY - RECYCLING EDUCATION - RIDE SHARE PROMOTION</p>

Identifier	Return Reference	Explanation
		<p>SHARP SYSTEM SERVICES *ENERGY EFFICIENCY - ELECTRIC VEHICLE CHARGERS - ENERGY AUDITS - ENERGY EFFICIENT CHILLERS/MOTORS - ENERGY STAR PARTICIPATION - HVAC PROJECTS - LIGHTING RETRO FITS - OCCUPANCY SENSORS - THERMOSTAT CONTROL SOFTWARE *WATER CONSERVATION - DRIP IRRIGATION - DROUGHT-TOLERANT PLANTS AND BARK-COVERED GROUND - ELECTRONIC FAUCETS - EVALUATION OF WATER UTILIZATION PRACTICES - LANDSCAPING - LANDSCAPE WATER REDUCTION SYSTEMS - MIST ELIMINATORS *WASTE MINIMIZATION - ELECTRONIC PATIENT BILLS AND PAPERLESS PAYROLL - ELECTRONIC AND PHARMACEUTICAL WASTE RECYCLING EVENTS - GREEN GROCER'S MARKET - SINGLE-SERVE PAPER NAPKIN AND PLASTIC CUTLERY DISPENSERS - SINGLE-STREAM RECYCLING *EDUCATION AND OUTREACH - EARTH WEEK ACTIVITIES - ENVIRONMENTAL POLICY - GREEN TEAM - NO SMOKING POLICY - RECYCLING EDUCATION - RIDE SHARE PROMOTION EMERGENCY AND DISASTER PREPAREDNESS SHARP CONTRIBUTES TO THE HEALTH AND SAFETY OF THE SAN DIEGO COMMUNITY THROUGH ESSENTIAL EMERGENCY AND DISASTER PLANNING ACTIVITIES AND SERVICES THROUGHOUT FY 2012, SHARP PROVIDED EDUCATION TO COMMUNITY MEMBERS, STAFF AND OTHER HEALTH CARE PROFESSIONALS ON EMERGENCY AND DISASTER PREPAREDNESS. IN JUNE, SHARP PROVIDED A LECTURE ENTITLED, LESSONS LEARNED FROM THE SAN DIEGO COUNTY POWER OUTAGE, TO 125 COMMUNITY HEALTH CARE AND EMERGENCY PREPAREDNESS PROFESSIONALS AT THE LOS ANGELES COUNTY STATEWIDE MEDICAL EXERCISE PLANNING CONFERENCE. IN ADDITION, SHARP'S DISASTER PREPAREDNESS TEAM OFFERED SEVERAL DISASTER EDUCATION COURSES TO FIRST RESPONDERS, HEALTH CARE PROVIDERS AND COMMUNITY MEMBERS ACROSS SDC. THE HOSPITAL-BASED FIRST RECEIVER AWARENESS COURSE AND FIRST RECEIVER OPERATIONS COURSE WERE OFFERED AS A TWO-PART SERIES TO EDUCATE AND PREPARE HOSPITAL STAFF FOR A DECONTAMINATION EVENT. COURSE TOPICS INCLUDED DECONTAMINATION PRINCIPLES AND BEST PRACTICES, BASIC HAZARDS, UTILIZATION OF APPROPRIATE PERSONAL PROTECTIVE EQUIPMENT (PPE), RESPONSE CONCEPTS, CONTAINMENT, DECONTAMINATION AND RECOVERY. A STANDARDIZED FEDERAL EMERGENCY MANAGEMENT TRAINING FOR HOSPITAL MANAGEMENT ENTITLED, NIMS (NATIONAL INCIDENT MANAGEMENT SYSTEM)/ ICS (INCIDENT COMMAND SYSTEM)/ HICS (HOSPITAL INCIDENT COMMAND SYSTEM), WAS ALSO OFFERED BY SHARP'S DISASTER TEAM, AS WELL AS A START (SIMPLE TRIAGE AND RAPID TREATMENT) TRIAGE/ JUMP START TRIAGE CLASS TO TRAIN EMERGENCY RESPONDERS AT ALL LEVELS TO TRIAGE A LARGE VOLUME OF TRAUMA VICTIMS WITHIN A SHORT PERIOD OF TIME. IN FY 2013, SHARP'S DISASTER TEAM WILL LEAD A PEDIATRIC/BURN SURGE COURSE FOR HOSPITAL STAFF, HEALTH CARE PROVIDERS AND OTHER EMERGENCY RESPONDERS, AND WILL PROVIDE TRAINING TO EFFECTIVELY MANAGE SPECIFIC PATIENT POPULATIONS DURING A SURGE OR ABNORMAL EVENT. IN FY 2012, SHARP'S DISASTER LEADERSHIP DONATED THEIR TIME TO STATE AND LOCAL ORGANIZATIONS AND COMMITTEES INCLUDING THE SOUTHERN CALIFORNIA EARTHQUAKE ALLIANCE, THE COUNTY OF SAN DIEGO EMERGENCY MEDICAL CARE COMMITTEE AND THE COUNTY OF SAN DIEGO HEALTHCARE DISASTER COUNCIL, A GROUP OF REPRESENTATIVES FROM SDC HOSPITALS, OTHER HEALTH CARE DELIVERY AGENCIES, COUNTY OFFICIALS, FIRE AGENCIES, LAW ENFORCEMENT, AMERICAN RED CROSS AND OTHERS WHO MEET MONTHLY TO SHARE BEST PRACTICES FOR EMERGENCY PREPAREDNESS. IN ADDITION, SHARP'S DISASTER LEADERSHIP SERVED ON THE STATEWIDE MEDICAL HEALTH EXERCISE WORK GROUP THAT DESIGNED TRAINING MATERIALS, INCLUDING AN EXERCISE GUIDEBOOK AND OTHER RESOURCES, FOR THE 2012 CALIFORNIA STATEWIDE MEDICAL HEALTH TRAINING AND EXERCISE PROGRAM THROUGH THE CALIFORNIA DEPARTMENT OF PUBLIC HEALTH (CDPH) AND THE EMERGENCY MEDICAL SERVICES AUTHORITY (EMSA). THE PROGRAM IS DESIGNED TO GUIDE LOCAL EMERGENCY PLANNERS IN DEVELOPING, PLANNING AND CONDUCTING EMERGENCY RESPONSES. SHARP SUPPORTS SAFETY EFFORTS OF THE STATE AND THE CITY OF SAN DIEGO THROUGH MAINTENANCE AND STORAGE OF A COUNTY DECONTAMINATION TRAILER AT SHARP GROSSMONT HOSPITAL, TO BE USED IN RESPONSE TO A MASS DECONTAMINATION EVENT. SHARP HAS ALSO ARRANGED FOR THE PROSPECTIVE STORAGE OF 24 STATE HOSPITAL VENTILATORS AT THREE SHARP HOSPITALS. IN ADDITION, SHARP IS EXPLORING OPPORTUNITIES TO JOIN EMSA MOBILE FIELD HOSPITAL (MFH) PROGRAM TO PROVIDE MAINTENANCE AND STORAGE FOR A STATE MFH. THE MFH IS DESIGNED TO INCREASE DISASTER PREPAREDNESS BY RAPIDLY RESPONDING TO EMERGENCIES SUCH AS EARTHQUAKES, FIRES AND FLOODS THAT IMPACT HOSPITAL SURGE NEEDS. WITHIN 72 HOURS OF AN EMERGENCY, THE MFH CAN PROVIDE UP TO 600 ACUTE CARE HOSPITAL BEDS FOR PATIENT TREATMENT AND TRANSPORT ANYWHERE IN THE STATE. ADDITIONALLY, ALL SHARP HOSPITALS ARE PREPARED FOR AN EMERGENCY WITH BACKUP WATER SUPPLIES THAT LAST UP TO 96 HOURS. IN THE EVENT THE SYSTEM'S NORMAL WATER SUPPLY IS INTERRUPTED. AS PART OF ITS PARTICIPATION IN THE U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES PUBLIC HEALTH EMERGENCY HOSPITAL PREPAREDNESS PROGRAM (HPP) GRANT, SHARP CREATED THE SHARP HEALTHCARE HPP DISASTER PREPAREDNESS PARTNERSHIP (THE PARTNERSHIP). THE PARTNERSHIP INCLUDES SCVMC, SCHHC, SGH, SMH, SRS URGENT CARE CENTERS AND CLINICS, SAN DIEGO'S R</p>

Identifier	Return Reference	Explanation
		<p>ONALD MCDONALD HOUSE, RADY CHILDREN'S HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS CHULA VIST A MEDICAL CENTER, KAISER HOSPITAL, ALVARADO HOSPITAL, PARADISE VALLEY HOSPITAL, THE COUNCIL OF COMMUNITY CLINICS, NAVAL AIR STATION NORTH ISLAND/NAVAL MEDICAL SERVICES, SAN DIEGO C OUNTY SHERIFFS, MCAS MIRAMAR FIRE DEPARTMENT AND FRESENIUS MEDICAL CENTERS THE PARTNERSHIP SEEKS TO CONTINUALLY IDENTIFY AND DEVELOP RELATIONSHIPS WITH HEALTH CARE ENTITIES, NONPR OFIT ORGANIZATIONS, LAW ENFORCEMENT, MILITARY INSTALLATIONS AND OTHER ORGANIZATIONS THAT S ERVE SDC AND ARE LOCATED NEAR PARTNER HEALTH CARE FACILITIES THROUGH NETWORKING, PLANNING , AND THE SHARING OF RESOURCES, TRAININGS AND INFORMATION, THE PARTNERS WILL BE BETTER PRE PARED FOR A COLLABORATIVE RESPONSE TO AN EMERGENCY OR DISASTER AFFECTING SDC IN FY 2013, SHARP WILL EDUCATE THE SAN DIEGO COMMUNITY ON EFFECTIVE DISASTER PREPAREDNESS AND RESPONSE WITH ITS HOUSEHOLD DISASTER PREPAREDNESS EXPO AT THE EXPO, LOCAL DISASTER VENDORS AND EM ERGENCY PERSONNEL WILL PROVIDE COMMUNITY MEMBERS WITH DISASTER PREPAREDNESS EDUCATION AND EMERGENCY DEMONSTRATIONS IN ADDITION, SHARP PLANS TO COLLABORATE WITH OTHER SDC HOSPITALS TO CREATE REGIONAL DECONTAMINATION TEAMS OF HEALTH CARE PERSONNEL TRAINED TO RESPOND TO A COMMUNITY DECONTAMINATION EVENT INTERNALLY , SHARP PLANS TO DEVELOP EMPLOYEE DISASTER TEA MS WHO WILL BE TRAINED TO PROVIDE LEADERSHIP, ORDER AND SAFETY DURING AN EMERGENCY OR DISA STER</p>

Identifier	Return Reference	Explanation
		<p>EXECUTIVE SUMMARY THIS EXECUTIVE SUMMARY PROVIDES AN OVERVIEW OF COMMUNITY BENEFITS PLANNING AT SHARP, A LISTING OF COMMUNITY NEEDS ADDRESSED IN THIS COMMUNITY BENEFITS REPORT, AND A SUMMARY OF COMMUNITY BENEFITS PROGRAMS AND SERVICES PROVIDED BY SHARP IN FISCAL YEAR (FY) 2012 (OCTOBER 1, 2011, THROUGH SEPTEMBER 30, 2012) IN ADDITION, THE SUMMARY REPORTS THE ECONOMIC VALUE OF COMMUNITY BENEFITS PROVIDED BY SHARP, ACCORDING TO THE FRAMEWORK SPECIFICALLY IDENTIFIED IN SB 697, FOR THE FOLLOWING</p> <ul style="list-style-type: none">* SHARP CHULA VISTA MEDICAL CENTER* SHARP CORONADO HOSPITAL AND HEALTHCARE CENTER* SHARP GROSSMONT HOSPITAL* SHARP MARY BIRCH HOSPITAL FOR WOMEN & NEWBORNS* SHARP MEMORIAL HOSPITAL* SHARP MESA VISTA HOSPITAL AND SHARP MCDONALD CENTER* SHARP HEALTH PLAN COMMUNITY BENEFITS PLANNING AT SHARP HEALTHCARE <p>SHARP BASES ITS COMMUNITY BENEFITS PLANNING ON THE TRIENNIAL COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA) CONDUCTED BY SAN DIEGO COMMUNITY HEALTH IMPROVEMENT PARTNERS (CHIP) COMBINED WITH THE EXPERTISE IN PROGRAMS AND SERVICES OF EACH SHARP HOSPITAL</p> <p>LISTING OF COMMUNITY NEEDS ADDRESSED IN THIS COMMUNITY BENEFITS REPORT THE FOLLOWING COMMUNITY NEEDS ARE ADDRESSED BY ONE OR MORE SHARP HOSPITALS IN THIS COMMUNITY BENEFITS REPORT</p> <ul style="list-style-type: none">* ACCESS TO CARE FOR INDIVIDUALS WITHOUT A MEDICAL PROVIDER, AND SUPPORT FOR HIGH-RISK, UNDERSERVED AND UNDERFUNDED PATIENTS* FOCUSED EDUCATION AND SCREENING PROGRAMS ON HEALTH CONDITIONS SUCH AS HEART AND VASCULAR DISEASE, STROKE, CANCER, DIABETES, PRETERM DELIVERY, UNINTENTIONAL INJURIES AND BEHAVIORAL HEALTH* HEALTH EDUCATION AND SCREENING ACTIVITIES FOR SENIORS* OUTREACH FOR FLU VACCINATIONS* SPECIAL SUPPORT SERVICES FOR HOSPICE PATIENTS AND THEIR LOVED ONES, AND FOR THE COMMUNITY* SUPPORT OF COMMUNITY NONPROFIT HEALTH ORGANIZATIONS* EDUCATION AND TRAINING OF HEALTH CARE PROFESSIONALS* COLLABORATION WITH LOCAL SCHOOLS TO PROMOTE INTEREST IN HEALTH CARE CAREERS* WELFARE OF SENIORS AND DISABLED PEOPLE* CANCER EDUCATION, PATIENT NAVIGATOR SERVICES, AND PARTICIPATION IN CLINICAL TRIALS* WOMEN'S AND PRENATAL HEALTH SERVICES AND EDUCATION* MEETING THE NEEDS OF NEW MOTHERS AND THEIR LOVED ONES* MENTAL HEALTH AND SUBSTANCE ABUSE EDUCATION FOR THE COMMUNITY <p>HIGHLIGHTS OF COMMUNITY BENEFITS PROVIDED BY SHARP IN FY 2012 THE FOLLOWING ARE EXAMPLES OF COMMUNITY BENEFITS PROGRAMS AND SERVICES PROVIDED BY SHARP HOSPITALS AND ENTITIES IN FY 2012</p> <ul style="list-style-type: none">* UNREIMBURSED MEDICAL CARE SERVICES INCLUDED UNCOMPENSATED CARE FOR PATIENTS WHO ARE UNABLE TO PAY FOR SERVICES, AND THE UNREIMBURSED COSTS OF PUBLIC PROGRAMS SUCH AS MEDICAL, MEDICARE, SAN DIEGO COUNTY INDIGENT MEDICAL SERVICES, CIVILIAN HEALTH AND MEDICAL PROGRAM OF THE DEPARTMENT OF VETERANS AFFAIRS (CHAMPVA), AND TRICARE - THE REGIONALLY MANAGED HEALTH CARE PROGRAM FOR ACTIVE-DUTY AND RETIRED MEMBERS OF THE UNIFORMED SERVICES, THEIR LOVED ONES AND SURVIVORS, AND UNREIMBURSED COSTS OF WORKERS' COMPENSATION PROGRAMS <p>THIS ALSO INCLUDED FINANCIAL SUPPORT FOR ON-SITE WORKERS TO PROCESS MEDICAL ELIGIBILITY FORMS</p> <ul style="list-style-type: none">* OTHER BENEFITS FOR VULNERABLE POPULATIONS INCLUDED VAN TRANSPORTATION FOR PATIENTS TO AND FROM MEDICAL APPOINTMENTS, FINANCIAL AND OTHER SUPPORT TO COMMUNITY CLINICS TO ASSIST IN PROVIDING HEALTH SERVICES, AND IMPROVING ACCESS TO HEALTH SERVICES, PROJECT HELP, PROJECT CARE, CONTRIBUTION OF TIME TO STAND DOWN FOR HOMELESS VETERANS AND THE SAN DIEGO FOOD BANK, FINANCIAL AND OTHER SUPPORT TO THE SHARP HUMANITARIAN SERVICE PROGRAM, AND OTHER ASSISTANCE FOR THE NEEDY* OTHER BENEFITS FOR THE BROADER COMMUNITY INCLUDED HEALTH EDUCATION AND INFORMATION, AND PARTICIPATION IN COMMUNITY HEALTH FAIRS AND EVENTS ADDRESSING THE UNIQUE NEEDS OF THE COMMUNITY, PLUS PROVIDING FLU VACCINATIONS AND HEALTH SCREENINGS <p>SHARP COLLABORATED WITH LOCAL SCHOOLS TO PROMOTE INTEREST IN HEALTH CARE CAREERS, MADE SHARP FACILITIES AVAILABLE FOR USE BY COMMUNITY GROUPS AT NO CHARGE, AND EXECUTIVE LEADERSHIP AND STAFF ACTIVELY PARTICIPATED IN NUMEROUS COMMUNITY ORGANIZATIONS, COMMITTEES AND COALITIONS TO IMPROVE THE HEALTH OF THE COMMUNITY</p> <p>SEE APPENDIX A FOR A LISTING OF SHARP'S INVOLVEMENT IN COMMUNITY ORGANIZATIONS</p> <p>IN ADDITION, THE CATEGORY INCLUDED COSTS ASSOCIATED WITH PLANNING AND OPERATING COMMUNITY BENEFIT PROGRAMS, SUCH AS COMMUNITY HEALTH NEEDS ASSESSMENTS AND ADMINISTRATION</p> <ul style="list-style-type: none">* HEALTH RESEARCH, EDUCATION AND TRAINING PROGRAMS INCLUDED EDUCATION AND TRAINING PROGRAMS FOR MEDICAL, NURSING AND OTHER HEALTH CARE PROFESSIONALS, AS WELL AS STUDENT/INTERN SUPERVISION, TIME DEVOTED TO GENERALIZABLE, HEALTH-RELATED RESEARCH PROJECTS THAT WERE MADE AVAILABLE TO THE BROADER HEALTH CARE COMMUNITY, AND FINANCIAL SUPPORT OF THE SHARP HEALTHCARE PROFESSIONAL EDUCATION AND RESEARCH INSTITUTE AT SAN DIEGO STATE UNIVERSITY (SDSU) <p>ECONOMIC VALUE OF COMMUNITY BENEFITS PROVIDED IN FY 2012 IN FY 2012, SHARP PROVIDED A TOTAL OF \$305,335,556 IN COMMUNITY BENEFITS PROGRAMS AND SERVICES THAT WERE UNREIMBURSED</p> <p>TABLE 1 DISPLAYS A SUMMARY OF UNREIMBURSED COSTS BASED ON THE CATEGORIES SPEC</p>

Identifier	Return Reference	Explanation
		<p>IFICALLY IDENTIFIED IN SB 697 IN FY 2012, THE STATE OF CALIFORNIA AND THE CENTERS FOR MED ICARE AND MEDICAID SERVICES APPROVED A MEDI-CAL HOSPITAL FEE PROGRAM FOR THE TIME PERIOD O F JANUARY 2011 THROUGH DECEMBER 2013 THIS RESULTED IN AN INCREASED REIMBURSEMENT OF \$153.4 MILLION AND AN ASSESSMENT OF A QUALITY ASSURANCE FEE TOTALING \$101.1 MILLION IN FY 2012. THE NET IMPACT OF THE PROGRAM TOTALING \$52.3 MILLION REDUCED THE A MOUNT OF UNREIMBURSED M EDICAL CARE SERVICE FOR THE MEDI-CAL POPULATION. THIS REIMBURSEMENT HELPED OFFSET PRIOR YE ARS' UNREIMBURSED MEDICAL CARE SERVICES, HOWEVER THE ADDITIONAL FUNDS RECORDED IN FY 2012 UNDERSTATE THE TRUE UNREIMBURSED MEDICAL CARE SERVICES PERFORMED FOR THE PAST FISCAL YEAR. TABLE 1. TOTAL ECONOMIC VALUE OF COMMUNITY BENEFITS PROVIDED SHARP HEALTHCARE OVERALL - F Y 2012. SENATE BILL 697 CATEGORY PROGRAMS AND SERVICES INCLUDED IN SENATE BILL 697 CATEGORY. ESTIMATED FY 2012 UNREIMBURSED COSTS *MEDICAL CARE SERVICES SHORTFALL IN MEDI-CAL \$59,465,473 SHORTFALL IN MEDICARE \$132,907,288 SHORTFALL IN SAN DIEGO COUNTY INDIGENT MEDICAL SER VICES \$33,285,408 SHORTFALL IN CHAMPVA/TRICARE \$3,460,691 SHORTFALL IN WORKERS' COMPENSATI ON \$31,286 CHARITY CARE AND BAD DEBT \$65,682,992 *OTHER BENEFITS FOR VULNERABLE POPULATION S PATIENT TRANSPORTATION AND OTHER ASSISTANCE FOR THE NEEDY \$2,490,485 *OTHER BENEFITS FOR THE BROADER COMMUNITY. HEALTH EDUCATION AND INFORMATION, SUPPORT GROUPS, HEALTH FAIRS, MEE TING ROOM SPACE, DONATIONS OF TIME TO COMMUNITY ORGANIZATIONS AND COST OF FUNDRAISING FOR COMMUNITY EVENTS \$2,143,857 *HEALTH RESEARCH, EDUCATION AND TRAINING PROGRAMS EDUCATION AN D TRAINING PROGRAMS FOR STUDENTS, INTERNS AND HEALTH CARE PROFESSIONALS \$5,868,076 TOTAL \$ 305,335,556. TABLE 2 SHOWS A LISTING OF THESE UNREIMBURSED COSTS PROVIDED BY EACH SHARP ENT ITY. TABLE 2. TOTAL ECONOMIC VALUE OF COMMUNITY BENEFITS PROVIDED SHARP HEALTHCARE ENTITIE S - FY 2012. ESTIMATED FY 2012 UNREIMBURSED COSTS *SHARP CHULA VISTA MEDICAL CENTER \$50,452,708 *SHARP CORONADO HOSPITAL AND HEALTHCARE CENTER \$10,281,860 *SHARP GROSSMONT HOSPITAL \$108,907,011 *SHARP MARY BIRCH HOSPITAL FOR WOMEN & NEWBORNS \$6,074,797 *SHARP MEMORIAL HO SPITAL \$119,435,933 *SHARP MESA VISTA HOSPITAL AND SHARP MCDONALD CENTER \$10,041,903 *SHAR P HEALTH PLAN \$141,344 *ALL ENTITIES \$305,335,556. TABLE 3 INCLUDES A SUMMARY OF UNREIMBURS ED COSTS FOR EACH SHARP ENTITY BASED ON THE CATEGORIES SPECIFICALLY IDENTIFIED IN SB 697. SHARP LEADS THE COMMUNITY IN UNREIMBURSED MEDICAL CARE SERVICES AMONG SAN DIEGO COUNTY'S S B 697 HOSPITALS AND HEALTH CARE SYSTEMS. TABLE 3. FY 2012 DETAILED ECONOMIC VALUE OF COMMU NITY BENEFITS AT SHARP HEALTHCARE ENTITIES BASED ON SENATE BILL 697 CATEGORIES. SHARP CHULA VISTA MEDICAL CENTER *MEDICAL CARE SERVICES - \$48,647,016 *OTHER BENEFITS FOR VULNERABLE POPULATIONS - \$467,891 *OTHER BENEFITS FOR THE BROADER COMMUNITY - \$319,937 *HEALTH RESEAR CH, EDUCATION AND TRAINING PROGRAMS - \$1,017,864 *ESTIMATED FY 2012 UNREIMBURSED COSTS - \$ 50,452,708. SHARP CORONADO HOSPITAL AND HEALTHCARE CENTER *MEDICAL CARE SERVICES - \$9,934,485 *OTHER BENEFITS FOR VULNERABLE POPULATIONS - \$27,932 *OTHER BENEFITS FOR THE BROADER CO MMUNITY - \$140,309 *HEALTH RESEARCH, EDUCATION AND TRAINING PROGRAMS - \$179,134 *ESTIMATED FY 2012 UNREIMBURSED COSTS - \$10,281,860. SHARP GROSSMONT HOSPITAL *MEDICAL CARE SERVICES - \$106,253,232 *OTHER BENEFITS FOR VULNERABLE POPULATIONS - \$729,968 *OTHER BENEFITS FOR T HE BROADER COMMUNITY - \$682,222 *HEALTH RESEARCH, EDUCATION AND TRAINING PROGRAMS - \$1,241,589 *ESTIMATED FY 2012 UNREIMBURSED COSTS - \$108,907,011.</p>

Identifier	Return Reference	Explanation
		<p>SHARP MARY BIRCH HOSPITAL FOR WOMEN & NEWBORNS *MEDICAL CARE SERVICES - \$5,468,616 *OTHER BENEFITS FOR VULNERABLE POPULATIONS - \$48,031 *OTHER BENEFITS FOR THE BROADER COMMUNITY - \$133,424 *HEALTH RESEARCH, EDUCATION AND TRAINING PROGRAMS - \$424,726 *ESTIMATED FY 2012 UNREIMBURSED COSTS - \$6,074,797 SHARP MEMORIAL HOSPITAL *MEDICAL CARE SERVICES - \$116,592,880 *OTHER BENEFITS FOR VULNERABLE POPULATIONS - \$742,724 *OTHER BENEFITS FOR THE BROADER COMMUNITY - \$562,766 *HEALTH RESEARCH, EDUCATION AND TRAINING PROGRAMS - \$1,537,563 *ESTIMATED FY 2012 UNREIMBURSED COSTS - \$119,435,933 SHARP MESA VISTA HOSPITAL AND SHARP MCDONALD CENTER *MEDICAL CARE SERVICES - \$7,936,909 *OTHER BENEFITS FOR VULNERABLE POPULATIONS - \$464,187 *OTHER BENEFITS FOR THE BROADER COMMUNITY - \$174,013 *HEALTH RESEARCH, EDUCATION AND TRAINING PROGRAMS - \$1,466,794 *ESTIMATED FY 2012 UNREIMBURSED COSTS - \$10,041,903 SHARP HEALTH PLAN *OTHER BENEFITS FOR VULNERABLE POPULATIONS - \$9,752 *OTHER BENEFITS FOR THE BROADER COMMUNITY - \$131,186 *HEALTH RESEARCH, EDUCATION AND TRAINING PROGRAMS - \$406 *ESTIMATED FY 2012 UNREIMBURSED COSTS - \$141,344 ALL ENTITIES *MEDICAL CARE SERVICES - \$294,833,138 *OTHER BENEFITS FOR VULNERABLE POPULATIONS - \$2,490,485 *OTHER BENEFITS FOR THE BROADER COMMUNITY - \$2,143,857 *HEALTH RESEARCH, EDUCATION AND TRAINING PROGRAMS - \$5,868,076 *ESTIMATED FY 2012 UNREIMBURSED COSTS - \$305,335,556</p> <p>SECTION 3 COMMUNITY BENEFITS PLANNING PROCESS FOR THE PAST 16 YEARS, SHARP HAS BASED ITS COMMUNITY BENEFITS PLANNING ON FINDINGS FROM THE TRIENNIAL COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA) CONDUCTED BY SAN DIEGO COMMUNITY HEALTH IMPROVEMENT PARTNERS (CHIP), AS WELL AS THE COMBINATION OF EXPERTISE IN PROGRAMS AND SERVICES OF EACH SHARP HOSPITAL AND KNOWLEDGE OF THE POPULATIONS AND COMMUNITIES SERVED BY THOSE HOSPITALS. METHODOLOGY TO CONDUCT THE 2010 COMMUNITY HEALTH NEEDS ASSESSMENT SINCE 1995, SHARP HAS PARTICIPATED IN A COUNTYWIDE COLLABORATIVE - INCLUDING A BROAD RANGE OF HOSPITALS, HEALTH CARE ORGANIZATIONS, AND COMMUNITY AGENCIES - TO CONDUCT A TRIENNIAL CHNA. THE 2010 CHNA IS PUBLICLY AVAILABLE AT HTTP://WWW.SDCHIP.ORG/INITIATIVES/CHARTING-THE-COURSE-VIA.SPX. IN 2010, THE CHIP NEEDS ASSESSMENT ADVISORY COUNCIL, UNDER THE DIRECTION OF THE CHIP STEERING COMMITTEE, DETERMINED A METHODOLOGY AND APPROACH TO THE SIXTH EDITION OF THE TRIENNIAL NEEDS ASSESSMENT, WHICH INCLUDED A COMMUNITY PRIORITY-SETTING PROCESS COMPOSED OF THE FOLLOWING STEPS:</p> <ul style="list-style-type: none">* REVIEW OF THE 38 HEALTHY PEOPLE 2020 FOCUS AREAS BY THE NEEDS ASSESSMENT ADVISORY COUNCIL, COMPRISED OF MORE THAN 30 COMMUNITY STAKEHOLDERS. SEVENTEEN HEALTH ISSUES EMERGED AS A RESULT OF THE COMBINING AND STREAMLINING OF THESE AREAS BY THE COUNCIL.* DIVISION OF THE 17 HEALTH ISSUES INTO THE FOLLOWING THREE CATEGORIES: OVERARCHING ISSUES, HEALTH-RELATED BEHAVIORS AND HEALTH OUTCOMES. HEALTH ISSUE BRIEFS WERE DEVELOPED TO PROVIDE DETAILED INFORMATION ON EACH OF THE 17 IDENTIFIED HEALTH ISSUES.* INVITATION TO COMMUNITY LEADERS THROUGHOUT SAN DIEGO COUNTY (72 OUT OF 379 INVITEES PARTICIPATED) TO PRIORITIZE EACH HEALTH ISSUE WITH INFORMATION FROM THE HEALTH ISSUE BRIEFS AND BASED ON THE FOLLOWING CRITERIA:<ul style="list-style-type: none">- SIZE OF THE HEALTH ISSUES- SERIOUSNESS OF THE HEALTH ISSUE- COMMUNITY RESOURCES AVAILABLE TO ADDRESS THE HEALTH ISSUE- AVAILABILITY OF DATA/INFORMATION TO EVALUATE THE HEALTH ISSUE'S OUTCOMES- EACH OF THE HEALTH ISSUES WERE SCORED SEPARATELY WITHIN THE THREE CATEGORIES NOTED ABOVE (OVERARCHING ISSUES, HEALTH-RELATED BEHAVIORS AND HEALTH OUTCOMES).* UTILIZATION OF THE SPECTRUM OF PREVENTION FRAMEWORK TO DETERMINE WHICH ISSUES PRIORITIZED BY THE COMMUNITY WERE MOST IMPACTED BY PREVENTION ACTIVITIES (AS OPPOSED TO TREATMENT).- HEALTH ACCESS AND DELIVERY- SOCIAL DETERMINANTS OF HEALTH - A COMBINATION OF NUTRITION, WEIGHT STATUS, PHYSICAL ACTIVITY AND FITNESS- INJURY AND VIOLENCE - MENTAL HEALTH AND MENTAL DISORDERS <p>* DISCUSSION OF THE ABOVE IDENTIFIED ISSUES IN COMMUNITY FORUMS HELD IN THE SIX REGIONS OF SAN DIEGO COUNTY IN ORDER TO:</p> <ul style="list-style-type: none">- ALLOW COMMUNITY STAKEHOLDERS TO IDENTIFY ROOT CAUSES RELATED TO EACH HEALTH ISSUE- BEGIN THE PROCESS OF UNDERSTANDING EACH ISSUE FROM A REGIONAL PERSPECTIVE- FOSTER COMMUNITY RELATIONSHIPS AND PROMOTE THE VOICE(S) OF SAN DIEGO'S VARIOUS REGIONAL AND SUBREGIONAL COMMUNITIES IN THE NEEDS ASSESSMENT PROCESS* IN-DEPTH ANALYSIS OF EACH OF THE FIVE HEALTH ISSUES SELECTED FOR THE 2010 CHNA, IDENTIFIED AS:<ul style="list-style-type: none">- HEALTH ACCESS AND DELIVERY- SOCIAL DETERMINANTS OF HEALTH- COMBINATION OF NUTRITION, WEIGHT STATUS, PHYSICAL ACTIVITY AND FITNESS- INJURY AND VIOLENCE- MENTAL HEALTH AND MENTAL DISORDERS <p>DEPENDING ON THE LEVEL OF AVAILABLE DATA, THESE ANALYSES INCLUDED AN OVERVIEW OF THE HEALTH ISSUE AND ITS IMPORTANCE, SERIOUSNESS OF THE HEALTH ISSUE IN TERMS OF ECONOMIC COSTS, USE OF RESOURCES AND/OR LOSS OF FUNCTIONAL STATUS, INCIDENCE DATA AS WELL AS PREVALENCE OF MORBIDITY AND MORTALITY ON THE POPULATIONS MOST IMPACTED BY THE HEALTH ISSUE, AND THE LOCAL IMPACT OF</p>

Identifier	Return Reference	Explanation
		<p>F THE HEALTH ISSUE. IN ADDITION TO A REVIEW OF THE RESULTS FROM THE PRIORITY-SETTING PROCE SS, THE 2010 CHNA UTILIZED INFORMATION FROM THE FOLLOWING * ANALYSIS OF HEALTH-RELATED ST A TISTICS GATHERED AND ANALYZED BY THE COUNTY OF SAN DIEGO HEALTH AND HUMAN SERVICES AGENCY (HHSA), SUPPLEMENTED BY DATA FROM THE CALIFORNIA HEALTH INTERVIEW SURVEY (CHIS), CALIFORN IA OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT (OSHPD), THE CENTERS FOR DISEASE CO NTROL AND PREVENTION'S (CDC) YOUTH RISK BEHAVIOR SURVEILLANCE SYSTEM AND CENSUS DATA FROM THE SAN DIEGO ASSOCIATION OF GOVERNMENTS (SANDAG) * REVIEW OF HEALTH-RELATED SCIENTIFIC L ITERATURE * REVIEW OF THE RESULTS FROM FACILITATED DISCUSSIONS OF SIX COMMUNITY REGIONAL F ORUMS HELD WITH A CROSS-SECTION OF STAKEHOLDERS FROM THE SAN DIEGO COUNTY COMMUNITY DETERM INATION OF PRIORITY COMMUNITY NEEDS SHARP HEALTHCARE EACH SHARP HOSPITAL REVIEWED THE 201 0 CHNA AND USED IT TO DETERMINE PRIORITY NEEDS FOR THEIR HOSPITAL'S COMMUNITIES. IN IDENTI FYING THESE PRIORITIES, EACH ENTITY CONSIDERED THE EXPERTISE AND MISSION OF THE HOSPITAL I N PROVIDING PROGRAMS AND SERVICES, IN ADDITION TO THE NEEDS OF THE UNIQUE, EVER-CHANGING D EMOGRAPHICS AND/OR HEALTH TOPICS THAT COMPRISE THE ENTITY'S SERVICE AREA AND REGION. FOR E XAMPLE, THE SPECIALTY HOSPITALS - SMBHWN, SMV, AND SMC - REVIEWED THE NEEDS ASSESSMENT PRI ORITIES, SPECIFICALLY FOCUSING ON ISSUES RELEVANT TO WOMEN AND INFANTS, BEHAVIORAL HEALTH, AND SUBSTANCE ABUSE, RESPECTIVELY. SHARP'S GENERAL ACUTE-CARE HOSPITALS REVIEWED THE NEED S ASSESSMENT WITH A FOCUS ON THE REGION AND/OR SUBREGIONAL AREAS, WITH THE GOAL OF MATCHIN G COMMUNITY BENEFIT PROGRAMS AND SERVICES TO THE UNIQUE NEEDS OF THE REGION. STEPS COMPLET ED TO PREPARE AN ANNUAL COMMUNITY BENEFITS REPORT ON AN ANNUAL BASIS, EACH SHARP HOSPITAL PERFORMS THE FOLLOWING STEPS IN PREPARATION OF ITS COMMUNITY BENEFITS REPORT * ESTABLISHE S AND/OR REVIEWS HOSPITAL-SPECIFIC MEASURABLE OBJECTIVES * VERIFIES THE NEED FOR AN ONGOIN G FOCUS ON IDENTIFIED COMMUNITY NEEDS AND/OR ADDS NEW IDENTIFIED COMMUNITY NEEDS * REPORTS ON ACTIVITIES CONDUCTED IN THE PRIOR FISCAL YEAR - FY 2012 REPORT OF ACTIVITIES * DEVELOP S A PLAN FOR THE UPCOMING FISCAL YEAR, INCLUDING SPECIFIC STEPS TO BE UNDERTAKEN - FY 2013 PLAN * REPORTS AND CATEGORIZES THE ECONOMIC VALUE OF COMMUNITY BENEFITS PROVIDED IN FY 20 12, ACCORDING TO THE FRAMEWORK SPECIFICALLY IDENTIFIED IN SB 697 * REVIEWS AND APPROVES A COMMUNITY BENEFITS PLAN * DISTRIBUTES THE COMMUNITY BENEFITS PLAN AND REPORT TO MEMBERS OF THE SHARP BOARD OF DIRECTORS AND SHARP HOSPITAL BOARDS OF DIRECTORS, HIGHLIGHTING ACTIVIT IES PROVIDED IN THE PRIOR FISCAL YEAR AS WELL AS SPECIFIC ACTION STEPS TO BE UNDERTAKEN IN THE UPCOMING FISCAL YEAR ONGOING COMMITMENT TO COLLABORATION IN SUPPORT OF ITS ONGOING CO MMITMENT TO WORKING WITH OTHERS ON ADDRESSING COMMUNITY HEALTH PRIORITIES TO IMPROVE THE H EALTH STATUS OF SAN DIEGO COUNTY RESIDENTS, SHARP EXECUTIVE LEADERSHIP, OPERATIONAL EXPERT S AND OTHER STAFF ARE ACTIVELY ENGAGED IN THE NATIONAL AMERICAN HOSPITAL ASSOCIATION, STAT EWIDE CALIFORNIA HOSPITAL ASSOCIATION, HOSPITAL ASSOCIATION OF SAN DIEGO AND IMPERIAL COUN TIES, AND OTHER LOCAL COLLABORATIVES SUCH AS THE CHIP ACCESS TO HEALTH LITERACY INITIATIVE AND THE CHIP BEHAVIORAL HEALTH WORK TEAM</p>

Identifier	Return Reference	Explanation
		<p>SHARP HEALTHCARE INVOLVEMENT IN COMMUNITY ORGANIZATIONS THE LIST BELOW SHOWS THE INVOLVEMENT OF SHARP EXECUTIVE LEADERSHIP AND OTHER STAFF IN COMMUNITY ORGANIZATIONS AND COALITIONS IN FISCAL YEAR 2012 COMMUNITY ORGANIZATIONS ARE LISTED ALPHABETICALLY * 2-1-1 SAN DIEGO BOARD * ACCESS TO INDEPENDENCE * ADULT PROTECTIVE SERVICES * AGING AND INDEPENDENCE SERVICES (AIS) * ALZHEIMER'S ASSOCIATION * AMERICAN ASSOCIATION OF CRITICAL CARE NURSES, SAN DIEGO CHAPTER * AMERICAN CANCER SOCIETY (ACS) * AMERICAN COLLEGE OF CARDIOLOGY * AMERICAN COLLEGE OF HEALTHCARE EXECUTIVES (ACHE) * AMERICAN DIABETES ASSOCIATION (ADA) * AMERICAN HEALTH INFORMATION MANAGEMENT ASSOCIATION * AMERICAN HEART ASSOCIATION * AMERICAN HOSPITAL ASSOCIATION * AMERICAN LUNG ASSOCIATION (ALA) * AMERICAN LIVER FOUNDATION * AMERICAN PARKINSON DISEASE ASSOCIATION, INC * AMERICAN PSYCHIATRIC NURSES ASSOCIATION * AMERICAN RED CROSS OF SAN DIEGO * ARTHRITIS FOUNDATION (AF) * ASSOCIATION FOR AMBULATORY BEHAVIORAL HEALTH CARE (NATIONAL) * ASSOCIATION FOR AMBULATORY BEHAVIORAL HEALTH CARE OF SOUTHERN CALIFORNIA * ASSOCIATION FOR CLINICAL PASTORAL EDUCATION * ASSOCIATION OF CALIFORNIA NURSE LEADERS (ACNL) * ASSOCIATION OF PRACTICAL AND PROFESSIONAL ETHICS (APPE) * ASSOCIATION OF REHABILITATION NURSES * ASSOCIATION OF WOMEN'S HEALTH AND OBSTETRIC NEONATAL NURSES (AWHONN) * AZUSA PACIFIC UNIVERSITY * BANKERS HILL PARK WEST COMMUNITY DEVELOPMENT CORPORATION * BAYSIDE COMMUNITY CENTER * BOYS AND GIRLS CLUB OF SAN DIEGO * BONITA BUSINESS AND PROFESSIONAL ORGANIZATION * CALIFORNIA ASSOCIATION OF HEALTH PLANS * CALIFORNIA ASSOCIATION OF HOSPITALS AND HEALTH SYSTEMS * CALIFORNIA ASSOCIATION OF PHYSICIAN GROUPS * CALIFORNIA BEHAVIORAL HEALTH BOARD * CALIFORNIA COLLEGE, SAN DIEGO * CALIFORNIA COUNCIL FOR EXCELLENCE * CALIFORNIA DEPARTMENT FOR PUBLIC HEALTH * CALIFORNIA DIETETIC ASSOCIATION, EXECUTIVE BOARD * CALIFORNIA HEALTHCARE FOUNDATION * CALIFORNIA HEALTH INFORMATION ASSOCIATION * CALIFORNIA HOSPICE AND PALLIATIVE CARE ASSOCIATION * CALIFORNIA LIBRARY ASSOCIATION * CALIFORNIA NURSING STUDENT ASSOCIATION * CALIFORNIA STATE BAR, HEALTH SUBCOMMITTEE * CALIFORNIA STATE UNIVERSITY - SAN MARCOS * CALIFORNIA TERATOGEN INFORMATION SERVICE * CALIFORNIA WOMEN LEAD * CARING HEARTS MEDICAL CLINIC * CHELSEA'S LIGHT FOUNDATION * COMMUNITY HEALTH IMPROVEMENT PARTNERS (CHIP) BEHAVIORAL HEALTH WORK TEAM * CHIP BOARD * CHIP HEALTH LITERACY TASK FORCE * CHIP SUICIDE PREVENTION WORK TEAM * CHIP INDEPENDENT LIVING FACILITIES (ILF) WORK TEAM * CHULA VISTA CHAMBER OF COMMERCE * CHULA VISTA COMMUNITY COLLABORATIVE * CHULA VISTA FAMILY HEALTH CENTER * CHULA VISTA ROTARY * CITY OF CHULA VISTA WELLNESS PROGRAM * COMMUNITY EMERGENCY RESPONSE TEAM (CERT) * CONSORTIUM FOR NURSING EXCELLENCE, SAN DIEGO * CORONADO CHAPTER OF ROTARY INTERNATIONAL * CORONADO CHRISTMAS PARADE * CORONADO FIRE DEPARTMENT * CREATIVE ARTS CONSORTIUM * COUNCIL OF WOMEN'S AND INFANTS' SPECIALTY HOSPITALS (COWISH) * CYCLE EAST LAKE * DIABETES BEHAVIORAL INSTITUTE * DISABLED SERVICES ADVISORY BOARD * DOWNTOWN SAN DIEGO PARTNERSHIP * EAST COUNTY SENIOR SERVICE PROVIDERS * EL CAJON COMMUNITY COLLABORATIVE COUNCIL * EL CAJON FIRE DEPARTMENT * EL CAJON ROTARY * EMERGENCY NURSES ASSOCIATION, SAN DIEGO CHAPTER * EMPLOYEE ASSISTANCE PROFESSIONALS ASSOCIATION * EMSTA COLLEGE * FACING FUTURES * FAMILY HEALTH CENTERS OF SAN DIEGO (FHCS) * GARDNER GROUP * GEORGE STEVENS SENIOR CENTER * GIRL SCOUTS SAN DIEGO IMPERIAL COUNCIL, INC * GROSSMONT COLLEGE * GROSSMONT HEALTHCARE DISTRICT * GROSSMONT UNION HIGH SCHOOL DISTRICT * HEALTH CARE COMMUNICATORS BOARD * HELEN WOODWARD ANIMAL CENTER * HELIX CHARTER HIGH SCHOOL * HELPING OLDER PEOPLE EQUALLY (HOPE) * HOME OF GUIDING HANDS * HOSPITAL ASSOCIATION OF SAN DIEGO AND IMPERIAL COUNTIES (HASDIC) * HASDIC COMMUNITY HEALTH NEEDS ASSESSMENT ADVISORY GROUP * HEALTH SCIENCES HIGH AND MIDDLE COLLEGE (HSHMC) BOARD * I LOVE A CLEAN SAN DIEGO * INTERNATIONAL ASSOCIATION OF EATING DISORDERS PROFESSIONALS (IAEDP) * INTERNATIONAL LACTATION CONSULTANTS ASSOCIATION (ILCA) * JEWISH FAMILY SERVICES OF SAN DIEGO * JOHN BROCKINGTON FOUNDATION * KAPLAN COLLEGE ADVISORY BOARD * KWANIS CLUB OF CHULA VISTA * KOMEN LATINA ADVISORY COUNCIL * KOMEN RACE FOR THE CURE COMMITTEE * LA MAESTRA FAMILY CLINICS * LA MESA LION'S CLUB * LA MESA PARK AND RECREATION FOUNDATION BOARD * LAS HERMANAS * LEAD, SAN DIEGO, INC * LEUKEMIA & LYMPHOMA SOCIETY * LIBERTY CHARTER HIGH SCHOOL * MAMA'S KITCHEN * MARCH OF DIMES * MEALS-ON-WHEELS GREATER SAN DIEGO * MEDICAL LIBRARY GROUP OF SOUTHERN CALIFORNIA AND ARIZONA * MENDELEDI * MENTAL HEALTH AMERICA BOARD * MENTAL HEALTH COALITION * MIRACLE BABIES * MOUNTAIN HEALTH AND COMMUNITY SERVICES, INC ADVISORY BOARD * MRI JOINT VENTURE BOARD * NATIONAL ALLIANCE ON MENTAL ILLNESS (NAMI) * NATIONAL ASSOCIATION OF NEONATAL NURSES (NANN) * NATIONAL ASSOCIATION OF HISPANIC NURSES (NAHN), SAN DIEGO CHAPTER * NATIONAL ASSOCIATION OF PSYCHIATRIC HEALTHCARE SYSTEMS * NATIONAL COUNCIL ON ALCOHOLISM</p>

Identifier	Return Reference	Explanation
		<p>SM AND DRUG DEPENDENCE (NCADD) * NATIONAL HOSPICE AND PALLIATIVE CARE ASSOCIATION * NATIONAL INITIATIVE FOR CHILDREN'S HEALTHCARE QUALITY * NATIONAL KIDNEY FOUNDATION * NATIONAL PERINATAL INFORMATION CENTER * NATIONAL UNIVERSITY * NEIGHBORHOOD HEALTHCARE COMMUNITY CLINIC BOARD OF DIRECTORS * NURSEWEEK * ORCHARD APARTMENTS * PACIFIC ARTS MOVEMENT (PAC-ARTS, FORMERLY THE SAN DIEGO ASIAN FILM FOUNDATION) * PARENTS FOR ADDICTION, TREATMENT AND HEALING (PATH) * PARTNERSHIP FOR PHILANTHROPIC PLANNING OF SAN DIEGO (FORMERLY SAN DIEGO PLANNED GIVING ROUNDTABLE) * PARTNERSHIP FOR SMOKE-FREE FAMILIES * PENINSULA SHEPHERD SENIOR CENTER * PERINATAL SAFETY COLLABORATIVE * PERINATAL SOCIAL WORK CLUSTER * PLANETREE BOARD OF DIRECTORS * PROFESSIONAL ONCOLOGY NETWORK * PROJECT CARE COUNCIL * PUBLIC HEALTH NURSE ADVISORY BOARD * RECOVERY INNOVATIONS OF CALIFORNIA (RICA) * REGIONAL HOME CARE COUNCIL * REGIONAL PERINATAL SYSTEM * RESIDENTIAL CARE COUNCIL * SAFETY NET CONNECT * SAN DIEGO COMMUNITY ACTION NETWORK (SANDICAN) * SAN DIEGANS FOR HEALTHCARE COVERAGE * SAN DIEGO HEALTHCARE DISASTER COUNCIL * SAN DIEGO ASSOCIATION FOR DIABETES EDUCATORS * SAN DIEGO ASSOCIATION OF DIRECTORS OF VOLUNTEER SERVICES * SAN DIEGO ASSOCIATION FOR HEALTHCARE RECRUITMENT * SAN DIEGO BLACK NURSES ASSOCIATION * SAN DIEGO BLOOD BANK * SAN DIEGO BRAIN INJURY FOUNDATION * SAN DIEGO CAREGIVER COALITION * SAN DIEGO CITY COLLEGE * SAN DIEGO CITY PARKS AND RECREATION * SAN DIEGO COMMITTEE ON EMPLOYMENT OF PEOPLE WITH DISABILITIES * SAN DIEGO COUNCIL ON SUICIDE PREVENTION * SAN DIEGO COUNTY PERINATAL CARE NETWORK * SAN DIEGO COUNTY TAXPAYER'S ASSOCIATION * SAN DIEGO DIABETES COALITION * SAN DIEGO DIETETIC ASSOCIATION BOARD * SAN DIEGO EAST COUNTY CHAMBER OF COMMERCE BOARD * SAN DIEGO EMERGENCY MEDICAL CARE COMMITTEE * SAN DIEGO EYE BANK NURSES ADVISORY BOARD * SAN DIEGO FOOD BANK * SAN DIEGO FOUNDATION * SAN DIEGO HEALTH INFORMATION ASSOCIATION * SAN DIEGO HEALTHCARE DISASTER COUNCIL * SAN DIEGO IMPERIAL COUNCIL OF HOSPITAL VOLUNTEERS * SAN DIEGO INTERRELIGIOUS COMMITTEE * SAN DIEGO LESBIAN, GAY, BISEXUAL, AND TRANSGENDER COMMUNITY CENTER, INC. (THE CENTER) * SAN DIEGO MENTAL HEALTH COALITION * SAN DIEGO MESA COLLEGE * SAN DIEGO NORTH CHAMBER OF COMMERCE * SAN DIEGO NUTRITION COUNCIL * SAN DIEGO ORGANIZATION OF HEALTHCARE LEADERS (SOHL), A LOCAL ACHIE CHAPTER * SAN DIEGO PATIENT SAFETY CONSORTIUM * SAN DIEGO REGIONAL ENERGY OFFICE * SAN DIEGO REGIONAL HOMECARE COUNCIL * SAN DIEGO RESCUE MISSION * SAN DIEGO RESTORATIVE JUSTICE MEDIATION PROGRAM * SAN DIEGO STROKE CONSORTIUM * SAN DIEGO URBAN LEAGUE * SAN DIEGO REGIONAL CHAMBER OF COMMERCE * SAN DIEGO SCIENCE ALLIANCE * SAN YSIDRO HIGH SCHOOL * SAN YSIDRO MIDDLE SCHOOL * SANTEE CHAMBER OF COMMERCE * SCHIZOPHRENICS IN TRANSITION * SAN DIEGO STATE UNIVERSITY (SDSU) * SENIOR COMMUNITY CENTERS OF SAN DIEGO * SIGMA THETA TAU INTERNATIONAL HONOR SOCIETY OF NURSING * SOCIETY OF TRAUMA NURSES * SOUTH BAY COMMUNITY SERVICES * SOUTH COUNTY ECONOMIC DEVELOPMENT COUNCIL * SOUTHERN CALIFORNIA ASSOCIATION OF NEONATAL NURSES * ST VINCENT DE PAUL VILLAGE * SUSAN G. KOMEN BREAST CANCER FOUNDATION * SUSTAINABLE SAN DIEGO * SWEETWATER UNION HIGH SCHOOL DISTRICT (SUHSD) * THE MEETING PLACE * THIRD AVENUE CHARITABLE ORGANIZATION (TACO) * TRAUMA CENTER ASSOCIATION OF AMERICA * UNITED WAY OF SAN DIEGO COUNTY * UNIVERSITY OF CALIFORNIA, SAN DIEGO (UCSD) * UNIVERSITY OF SAN DIEGO (USD) * VA SAN DIEGO HEALTHCARE SYSTEM * VETERANS HOME OF CHULA VISTA * VETERANS VILLAGE OF SAN DIEGO * VISTA HILL PARENTCARE * WOMEN, INFANTS AND CHILDREN (WIC) * YMCA * YWCA BECKY'S HOUSE * YWCA BOARD OF DIRECTORS * YWCA EXECUTIVE COMMITTEE * YWCA IN THE COMPANY OF WOMEN EVENT</p>

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
SHARP HEALTHCARE FOUNDATION

Employer identification number
95-3492461

Part I

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization	
						Yes	No
See Additional Data Table							

Part III

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

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

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) CONTINUOUS QUALITY INSURANCE SPC PO BOX 1092 GRAND CAYMAN CJ	CAPTIVE INSURANCE COMPANY	CJ	SHARP HEALTHCARE	C			
(2) CHARITABLE REMAINDER TRUST (23)	PROGRAM SUPPORT	CA		T			

Part V

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

Note. Complete line 1 if any entity is listed in Parts II, III or IV

1

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a

Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

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)

e

Loans or loan guarantees by related organization(s)

f

Sale of assets to related organization(s)

g

Purchase of assets from related organization(s)

h

Exchange of assets with related organization(s)

i

Lease of facilities, equipment, or other assets to related organization(s)

j

Lease of facilities, equipment, or other assets from related organization(s)

k

Performance of services or membership or fundraising solicitations for related organization(s)

l

Performance of services or membership or fundraising solicitations by 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)

o

Reimbursement paid to related organization(s) for expenses

p

Reimbursement paid by related organization(s) for expenses

q

Other transfer of cash or property to related organization(s)

r

Other transfer of cash or property from related organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

No

No

No

No

No

No

No

No

Yes

No

Yes

Yes

Yes

No

Yes

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) SHARP MEMORIAL HOSPITAL	B	7,622,812	ACCRUAL BASIS
(2) SHARP CHULA VISTA MEDICAL CENTER	B	1,192,748	ACCRUAL BASIS
(3)			
(4)			
(5)			
(6)			

Schedule R (Form 990) 2011

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.

[illegible]

Part VII

Supplemental Information

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

Identifier	Return Reference	Explanation	
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Software ID:

Software Version:

EIN: 95-3492461

Name: SHARP HEALTHCARE FOUNDATION

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

(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	
SHARP HEALTHCARE 8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489 95-6077327	HEALTHCARE ORGANIZATION	CA	501(C) (3)	LINE 3	SHARPCARE		No
SHARP MEMORIAL HOSPITAL 8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489 95-3782169	HOSPITAL	CA	501(C) (3)	LINE 3	SHARP HEALTHCARE	Yes	
GROSSMONT HOSPITAL CORPORATION 8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489 33-0449527	HOSPITAL	CA	501(C) (3)	LINE 3	SHARP HEALTHCARE	Yes	
SHARP CHULA VISTA MEDICAL CENTER 8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489 95-2367304	HOSPITAL	CA	501(C) (3)	LINE 3	SHARP HEALTHCARE	Yes	
SHARP CORONADO HOSPITAL AND HEALTHCARE CENTER 8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489 95-0651579	HOSPITAL	CA	501(C) (3)	LINE 3	SHARP HEALTHCARE	Yes	
SHARP HEALTH PLAN 8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489 33-0519730	HEALTH INSURANCE COMPANY	CA	501(C) (4)	N/A	SHARP HEALTHCARE	Yes	
SHARPCARE 8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489 61-1637133	DISSOLVED HEALTHCARE ORGANIZATION	CA	501(C) (3)	LINE 3	SHARPCARE		No
GROSSMONT HOSPITAL FOUNDATION 8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489 33-0124488	HOSPITAL FOUNDATION	CA	501(C) (3)	LINE 7	GROSSMONT HOSPITAL CORPORATION	Yes	

Additional Data

Software ID:
Software Version:
EIN: 95-3492461
Name: SHARP HEALTHCARE FOUNDATION

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
STEVE AUSTIN DIRECTOR	50	X						0	0	0
JOHN BELANICH DIRECTOR	2 00	X						0	0	0
JOANNE BOYLE DIRECTOR	2 00	X						0	0	0
JOY CHARNEY DIRECTOR	2 00	X						0	0	0
BETTY COOPER DIRECTOR	1 00	X						0	38,474	4,561
STEVE FINDEN DIRECTOR	1 50	X						0	0	0
JUDI FREEMAN DIRECTOR	1 00	X						0	0	0
JC KYRILLOS DIRECTOR	2 00	X						0	0	0
MIKE LABELLE TREASURER	2 00	X		X				0	0	0
ERIC LINEBARGER MD DIRECTOR	2 00	X						0	0	0
WILLIAM LITTLEJOHN SR VP/CEO FOUNDATION	50 00	X		X				0	380,384	29,240
ELIZABETH GILDRED MACVEAN SECRETARY	2 00	X		X				0	0	0
ROBERT MAXWELL DIRECTOR	20 00	X						0	0	0
KATHRYN MCCOY-O'NEILL DIRECTOR	2 00	X						0	0	0
BRIDGET MCDONALD DIRECTOR	2 00	X						0	0	0
COLLEEN MCNALLY MD DIRECTOR	2 00	X						0	157,213	0
MICHAEL MURPHY PRESIDENT	4 00	X		X				0	1,322,158	90,854
STEVE NORTON DIRECTOR	2 00	X						0	0	0
JIM REOPELLE DIRECTOR	2 00	X						0	666	0
HOWARD ROBIN MD DIRECTOR	1 00	X						0	48,074	0
KENNETH ROTH MD VICE CHAIR	2 00	X		X				0	49,800	0
RICHARD SANTORE MD DIRECTOR	2 00	X						0	8,000	0
TED SCHROEDER DIRECTOR	1 00	X						0	0	0
CHARLES SCHUETZ MD DIRECTOR	2 00	X						0	0	0
REGINA SMITH DIRECTOR	10 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOSEPH STRAZZERI CHAIR	2 00	X		X				0	0	0
TODD STICHLER DIRECTOR	50	X						0	0	0
LIZA STROM DIRECTOR	2 00	X						0	0	0
MARK TAMSEN MD DIRECTOR	2 00	X						0	34,992	0
REBECCA TUGGLE DIRECTOR	2 00	X						0	0	0
JANET VOHARIWATT DIRECTOR	1 50	X						0	0	0
ROBERT WOLFORD DIRECTOR	1 00	X						0	0	0
LINDA WOOD DIRECTOR	2 00	X						0	0	0
ANNETTE ASHER CHAIR	2 00	X		X				0	0	0
HANK KILLMAR DIRECTOR	1 00	X						0	0	0
MARSHA LUBICK VP PHILANTHROPY	40 00					X		0	220,684	23,345
KATHRYN DUFF VP PHILANTHROPY	40 00					X		0	212,147	15,615
PAMELA BARNETT MGR DONOR RELATIONS	40 00					X		0	132,350	17,952
JAMES SARDINA MGR DEVELOPMENT	40 00					X		0	113,373	20,527