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Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation

Department of the Treasury
Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

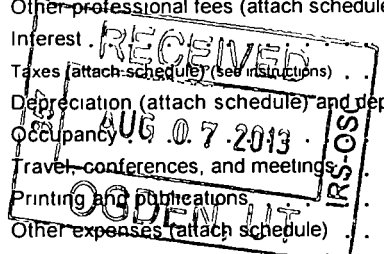
Open to Public Inspection

For calendar year 2012 or tax year beginning , **2012**, and ending , **20**

Name of foundation SELECT MEDICAL CHARITABLE FOUNDATION		A Employer identification number 05-0597781
Number and street (or P O box number if mail is not delivered to street address) 4714 GETTYSBURG RD City or town, state, and ZIP code MECHANICSBURG, PA 17055		B Telephone number (see instructions) 717-972-1100
G Check all that apply	<input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change	<input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		C If exemption application is pending, check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 38,500.00 J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____		D 1 Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received (attach schedule)	34,602.00	SEE STATEMENT	1	
2	Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
3	Interest on savings and temporary cash investments				
4	Dividends and interest from securities				
5a	Gross rents				
b	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10				
b	Gross sales price for all assets on line 6a				
7	Capital gain net income (from Part IV, line 2)				
8	Net short-term capital gain				
9	Income modifications				
10a	Gross sales less returns and allowances				
b	Less Cost of goods sold				
c	Gross profit or (loss) (attach schedule)				
11	Other income (attach schedule)				
12	Total. Add lines 1 through 11	34,602.00			
13	Compensation of officers, directors, trustees, etc.				
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
16a	Legal fees (attach schedule)				
b	Accounting fees (attach schedule)				
c	Other professional fees (attach schedule)				
17	Interest				
18	Taxes (attach schedule) (see instructions)				
19	Depreciation (attach schedule) and depletion				
20	Occupancy				
21	Travel, conferences, and meetings				
22	Printing and publications				
23	Other expenses (attach schedule)				
24	Total operating and administrative expenses. Add lines 13 through 23				
25	Contributions, gifts, grants paid				
26	Total expenses and disbursements. Add lines 24 and 25				
27	Subtract line 26 from line 12				
a	Excess of revenue over expenses and disbursements	34,602.00			
b	Net investment income (if negative, enter -0-)				
c	Adjusted net income (if negative, enter -0-)				

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1	Cash - non-interest-bearing	3,899.00	38,500.00	38,500.00	
	2	Savings and temporary cash investments				
	3	Accounts receivable ▶ Less allowance for doubtful accounts ▶				
	4	Pledges receivable ▶ Less allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶ Less allowance for doubtful accounts ▶				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10 a	Investments - U S and state government obligations (attach schedule)				
	b	Investments - corporate stock (attach schedule)				
	c	Investments - corporate bonds (attach schedule)				
	11	Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule) ▶				
	12	Investments - mortgage loans				
	13	Investments - other (attach schedule)				
	14	Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) ▶				
15	Other assets (describe ▶)					
16	Total assets (to be completed by all filers - see the instructions Also, see page 1, item I)	3,899.00	38,500.00	38,500.00		
Liabilities	17	Accounts payable and accrued expenses				
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe ▶)				
23	Total liabilities (add lines 17 through 22)					
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/>					
	and complete lines 24 through 26 and lines 30 and 31.					
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ▶ <input checked="" type="checkbox"/>					
	27	Capital stock, trust principal, or current funds				
28	Paid-in or capital surplus, or land, bldg, and equipment fund					
29	Retained earnings, accumulated income, endowment, or other funds	3,899.00	38,500.00			
30	Total net assets or fund balances (see instructions)	3,899.00	38,500.00			
31	Total liabilities and net assets/fund balances (see instructions)	3,899.00	38,500.00			

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	3,899.00
2	Enter amount from Part I, line 27a	2	34,602.00
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	38,501.00
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	38,501.00

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a					
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))		
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any			
a					
b					
c					
d					
e					
2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		2		
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		3		

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2011		3,841.00	
2010	12,000.00	4,461.00	2.6900
2009	7,000.00	2,132.00	3.2833
2008	58,100.00	5,206.00	11.1602
2007		257.00	
2 Total of line 1, column (d)			17.1335
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3.4267
4 Enter the net value of noncharitable-use assets for 2012 from Part X, line 5			8,123.29
5 Multiply line 4 by line 3			27,836.08
6 Enter 1% of net investment income (1% of Part I, line 27b)			
7 Add lines 5 and 6			27,836.08
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions			

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1 a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1	1	NONE
	Date of ruling or determination letter _____ (attach copy of letter if necessary - see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	
3	Add lines 1 and 2	3	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5	
6	Credits/Payments		
a	2012 estimated tax payments and 2011 overpayment credited to 2012	6a	
b	Exempt foreign organizations - tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments Add lines 6a through 6d	7	
8	Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
11	Enter the amount of line 10 to be Credited to 2013 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

Part VII-A Statements Regarding Activities

	Yes	No
1 a		X
b		X
c		X
2		X
3		X
4 a		X
4 b		X
5		X
6	X	
7	X	
8 a		
8 b	X	
9		X
10		X

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>N/A</u>	13	X	
14	The books are in care of ▶ <u>BRIDGET SHERICK</u> Telephone no ▶ <u>717-972-8593</u> Located at ▶ <u>4714 GETTYSBURG ROAD, MECHANICSBURG PA</u> ZIP+4 ▶ <u>17055</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here N/A ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year ▶ <u>15</u>			
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes," enter the name of the foreign country ▶	16	Yes	No X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here ▶ <input type="checkbox"/>	1b	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2012?	1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ _____		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions)	2b	X
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ _____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012)	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b	X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? Yes No

(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions) Yes No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? **5b**

Organizations relying on a current notice regarding disaster assistance check here

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes No

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No **6b** X

If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Yes No **7b**

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 2				

2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services ▶

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 N/A	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments. See instructions	
3 N/A	
Total. Add lines 1 through 3 ▶	

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	8,247.00
c	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	8,247.00
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	8,247.00
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	123.71
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	8,123.29
6	Minimum investment return. Enter 5% of line 5	6	406.16

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	406.16
2a	Tax on investment income for 2012 from Part VI, line 5	2a	
b	Income tax for 2012 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	406.16
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	406.16
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	406.16

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI, line 7				406.16
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2012				
a From 2007				
b From 2008	57,648.00			
c From 2009	6,893.00			
d From 2010	11,777.00			
e From 2011				
f Total of lines 3a through e	76,318.00			
4 Qualifying distributions for 2012 from Part XII, line 4 ▶ \$ _____				
a Applied to 2011, but not more than line 2a				
b Applied to undistributed income of prior years (Election required - see instructions)				
c Treated as distributions out of corpus (Election required - see instructions)				
d Applied to 2012 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	406.16			406.16
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	75,911.84			
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount - see instructions				
e Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount - see instructions				
f Undistributed income for 2012 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2013				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	75,911.84			
10 Analysis of line 9				
a Excess from 2008	57,242.00			
b Excess from 2009	6,893.00			
c Excess from 2010	11,777.00			
d Excess from 2011				
e Excess from 2012				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2012, enter the date of the ruling

--

b Check box to indicate whether the foundation is a private operating foundation described in section

	4942(j)(3) or	4942(j)(5)
--	---------------	------------

2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

Tax year	Prior 3 years			(e) Total
(a) 2012	(b) 2011	(c) 2010	(d) 2009	

b 85% of line 2a

c Qualifying distributions from Part XII line 4 for each year listed

d Amounts included in line 2c not used directly for active conduct of exempt activities

e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c

3 Complete 3a, b, or c for the alternative test relied upon

a "Assets" alternative test - enter

- (1) Value of all assets
- (2) Value of assets qualifying under section 4942(j)(3)(B)(i)

b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X line 6 for each year listed

c "Support" alternative test - enter

- (1) Total support other than gross investment income (interest dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)
- (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)
- (3) Largest amount of support from an exempt organization
- (4) Gross investment income

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

N/A

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

N/A

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail of the person to whom applications should be addressed

SEE STATEMENT 3

b The form in which applications should be submitted and information and materials they should include

SEE STATEMENT 4

c Any submission deadlines

THERE ARE DEADLINES

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

SEE STATEMENT 5

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<p><i>a Paid during the year</i></p>				
Total				▶ 3a
<p><i>b Approved for future payment</i></p>				
Total				▶ 3b

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

2012

Name of the organization

Employer identification number

SELECT MEDICAL CHARITABLE FOUNDATION

05-0597781

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization SELECT MEDICAL CHARITABLE FOUNDATION	Employer identification number 05-0597781
---	---

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	SELECT MEDICAL ----- 4714 GETTYSBURG ROAD ----- MECHANICSBURG, PA 17055 -----	\$ 34,602.00	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

STATEMENT 1

Select Medical Charitable Foundation

General Ledger

As of December 31, 2012

1/15/13

crual Basis

Type	Date	Num	Name	Memo	Split	Amount	Balance
44800 · Indirect Public Support							0 00
44820 · SM Employee Contributions							0 00
Sales Receipt	05/24/2012	8			12000 Unde	-325 00	-325 00
Sales Receipt	11/07/2012	9	Kibler, Pamela		12000 Unde	-10 00	-335 00
Sales Receipt	11/07/2012	10	Zettlemoyer, Dorothy		12000 Unde	-200 00	-535 00
Sales Receipt	11/07/2012	11	Ressler, Rebecca		12000 Unde	-20 00	-555 00
Sales Receipt	11/07/2012	12	White, Cheryl		12000 Unde	-100 00	-655 00
Sales Receipt	11/07/2012	13	Johnson, Casie		12000 Unde	-25 00	-680 00
Sales Receipt	11/07/2012	14	Ryan, Sharon E		12000 Unde	-50 00	-730 00
Sales Receipt	11/07/2012	15	Hoffner, Anne		12000 Unde	-100 00	-830 00
Sales Receipt	11/07/2012	16	Aleo, Carrie		12000 Unde	-25 00	-855 00
Sales Receipt	11/07/2012	17	Richardson, Ken		12000 Unde	-50 00	-905 00
Sales Receipt	11/07/2012	18	Tufts, Herbert		12000 Unde	-100 00	-1,005 00
Sales Receipt	11/07/2012	19	Stoneroad, Tracy		12000 Unde	-50 00	-1,055 00
Sales Receipt	11/07/2012	20	Grigonis, Tony		12000 Unde	-50 00	-1,105 00
Sales Receipt	11/07/2012	21	Main, Kathleen		12000 Unde	-25 00	-1,130 00
Sales Receipt	11/07/2012	22	Rosillo, Dirk		12000 Unde	-100 00	-1,230 00
Sales Receipt	11/07/2012	23	Amin, Rohit		12000 Unde	-51 00	-1,281 00
Sales Receipt	11/07/2012	24	Crawford, Joyce		12000 Unde	-20 00	-1,301 00
Sales Receipt	11/07/2012	25	Mosser, Darla		12000 Unde	-25 00	-1,326 00
Sales Receipt	11/07/2012	26	Lasam, Sandra		12000 Unde	-25 00	-1,351 00
Sales Receipt	11/07/2012	27	Sandage, Kim		12000 Unde	-25 00	-1,376 00
Sales Receipt	11/07/2012	28	Everist, Ryan		12000 Unde	-50 00	-1,426 00
Sales Receipt	11/07/2012	29	Pohopek, Christine		12000 Unde	-25 00	-1,451 00
Sales Receipt	11/07/2012	30	Antia, Gloria		12000 Unde	-25 00	-1,476 00
Sales Receipt	11/07/2012	31	Dicicco, Valerie		12000 Unde	-10 00	-1,486 00
Sales Receipt	11/07/2012	32	Pizzone, Gerlinda		12000 Unde	-25 00	-1,511 00
Sales Receipt	11/07/2012	33	Dellinger, Robert		12000 Unde	-25 00	-1,536 00
Sales Receipt	11/07/2012	34	Lee, Barbara A		12000 Unde	-50 00	-1,586 00
Sales Receipt	11/07/2012	35	Wetta, Deb		12000 Unde	-25 00	-1,611 00
Sales Receipt	11/07/2012	36	Ulrich, Adrienne		12000 Unde	-500 00	-2,111 00
Sales Receipt	11/07/2012	37	Shannon, Michael		12000 Unde	-100 00	-2,211 00
Sales Receipt	11/07/2012	38	Clerc, Karen		12000 Unde	-25 00	-2,236 00
Sales Receipt	11/07/2012	39	Hansen, Adele		12000 Unde	-20 00	-2,256 00
Sales Receipt	11/07/2012	40	Yehl, Andrew		12000 Unde	-20 00	-2,276 00
Sales Receipt	11/07/2012	41	Pomeranz, Bruce		12000 Unde	-100 00	-2,376 00
Sales Receipt	11/07/2012	42	Price, Lynn		12000 Unde	-50 00	-2,426 00
Sales Receipt	11/07/2012	43	Bachman, Beth		12000 Unde	-50 00	-2,476 00
Sales Receipt	11/07/2012	44	Driscoll, Philip		12000 Unde	-100 00	-2,576 00
Sales Receipt	11/07/2012	45	McDonagh, Lauren		12000 Unde	-50 00	-2,626 00
Sales Receipt	11/07/2012	46	Coffey, Suzan		12000 Unde	-20 00	-2,646 00
Sales Receipt	11/07/2012	47	Martin, Kelly		12000 Unde	-25 00	-2,671 00
Sales Receipt	11/07/2012	48	O'Connor, Dawn		12000 Unde	-100 00	-2,771 00
Sales Receipt	11/07/2012	49	Anderson, Sherry		12000 Unde	-100 00	-2,871 00
Sales Receipt	11/07/2012	50	Frank, David		12000 Unde	-200 00	-3,071 00
Sales Receipt	11/07/2012	51	Williams, Brian		12000 Unde	-100 00	-3,171 00
Sales Receipt	11/07/2012	52	Cruz, Karin		12000 Unde	-10 00	-3,181 00
Sales Receipt	11/07/2012	53	Brandt, Lori		12000 Unde	-25 00	-3,206 00
Sales Receipt	11/07/2012	54	Miller, David		12000 Unde	-50 00	-3,256 00
Sales Receipt	11/07/2012	55	Lugg, Paulette		12000 Unde	-20 00	-3,276 00
Sales Receipt	11/07/2012	56	Repece, Karen		12000 Unde	-50 00	-3,326 00
Sales Receipt	11/07/2012	57	Doll, Sharon		12000 Unde	-50 00	-3,376 00
Sales Receipt	11/07/2012	58	Becker, James		12000 Unde	-100 00	-3,476 00
Sales Receipt	11/07/2012	59	Gilbert, Linda		12000 Unde	-20 00	-3,496 00
Sales Receipt	11/07/2012	60	Reuther, Samantha		12000 Unde	-15 00	-3,511 00
Sales Receipt	11/07/2012	61	Slafka, Rachel		12000 Unde	-20 00	-3,531 00
Sales Receipt	11/07/2012	62	Pierce, Debra		12000 Unde	-20 00	-3,551 00
Sales Receipt	11/07/2012	63	Hughes, Roseann		12000 Unde	-20 00	-3,571 00
Sales Receipt	11/07/2012	64	Young, Andrea		12000 Unde	-20 00	-3,591 00
Sales Receipt	11/07/2012	65	Sligar, Sally		12000 Unde	-25 00	-3,616 00
Sales Receipt	11/07/2012	66	Mateicka, Kathleen		12000 Unde	-25 00	-3,641 00
Sales Receipt	11/07/2012	67	Sutherland, Jennifer		12000 Unde	-25 00	-3,666 00
Sales Receipt	11/07/2012	68	Christian, Kimberly		12000 Unde	-25 00	-3,691 00
Sales Receipt	11/07/2012	69	Clark, Amy		12000 Unde	-25 00	-3,716 00
Sales Receipt	11/07/2012	70	German, Debbie		12000 Unde	-25 00	-3,741 00
Sales Receipt	11/07/2012	71	James, Denise		12000 Unde	-25 00	-3,766 00
Sales Receipt	11/07/2012	72	Herman, Tom		12000 Unde	-25 00	-3,791 00
Sales Receipt	11/07/2012	73	Coleman, Rene		12000 Unde	-25 00	-3,816 00

Select Medical Charitable Foundation

General Ledger

As of December 31, 2012

1/15/13

crual Basis

Type	Date	Num	Name	Memo	Split	Amount	Balance
Sales Receipt	11/07/2012	74	Brooks, Hugh		12000 Unde	-25 00	-3,841 00
Sales Receipt	11/07/2012	75	Klimek, Michelle		12000 Unde	-25 00	-3,866 00
Sales Receipt	11/07/2012	76	McLeod, Annie		12000 Unde	-30 00	-3,896 00
Sales Receipt	11/07/2012	77	Cole, Jayneene		12000 Unde	-35 00	-3,931 00
Sales Receipt	11/07/2012	78	O'Connor, Joseph		12000 Unde	-40 00	-3,971 00
Sales Receipt	11/07/2012	79	Fox, Keary		12000 Unde	-50 00	-4,021 00
Sales Receipt	11/07/2012	80	Stocum, Lorraine		12000 Unde	-50 00	-4,071 00
Sales Receipt	11/07/2012	81	Schneider, Gloria		12000 Unde	-50 00	-4,121 00
Sales Receipt	11/07/2012	82	Alvarado, Marro		12000 Unde	-50 00	-4,171 00
Sales Receipt	11/07/2012	83	Selsor, Doug		12000 Unde	-50 00	-4,221 00
Sales Receipt	11/07/2012	84	Adams, Stephen		12000 Unde	-50 00	-4,271 00
Sales Receipt	11/07/2012	85	Cohee, Kristin		12000 Unde	-50 00	-4,321 00
Sales Receipt	11/07/2012	86	Elliott, LeeAnn		12000 Unde	-50 00	-4,371 00
Sales Receipt	11/07/2012	87	Bragg, Linda		12000 Unde	-50 00	-4,421 00
Sales Receipt	11/07/2012	88	Fitterer, Barry		12000 Unde	-75 00	-4,496 00
Sales Receipt	11/07/2012	89	Martino, Anthony		12000 Unde	-100 00	-4,596 00
Sales Receipt	11/07/2012	90	Donohue, Brett		12000 Unde	-100 00	-4,696 00
Sales Receipt	11/07/2012	91	Rogitz, Kris		12000 Unde	-100 00	-4,796 00
Sales Receipt	11/07/2012	92	Dent, Margaret		12000 Unde	-100 00	-4,896 00
Sales Receipt	11/07/2012	93	Knight, Deana		12000 Unde	-100 00	-4,996 00
Sales Receipt	11/07/2012	94	Paulosky, Jennifer		12000 Unde	-100 00	-5,096 00
Sales Receipt	11/07/2012	95	Bergman, Elizabeth		12000 Unde	-100 00	-5,196 00
Sales Receipt	11/07/2012	96	Gibson, Debra		12000 Unde	-100 00	-5,296 00
Sales Receipt	11/07/2012	97	Turner, Robert		12000 Unde	-200 00	-5,496 00
Sales Receipt	11/07/2012	98	Brehm, Robert		12000 Unde	-300 00	-5,796 00
Sales Receipt	11/14/2012	99	Romberger, Scott		12000 Unde	-500 00	-6,296 00
Sales Receipt	11/14/2012	100	Allison, Jennifer		12000 Unde	-100 00	-6,396 00
Sales Receipt	11/14/2012	101	Stricker, Sean		12000 Unde	-50 00	-6,446 00
Sales Receipt	11/14/2012	102	Davis, Michelle		12000 Unde	-25 00	-6,471 00
Sales Receipt	11/14/2012	103	Quadri, Joan		12000 Unde	-25 00	-6,496 00
Sales Receipt	11/14/2012	104	Opalka, Penny		12000 Unde	-100 00	-6,596 00
Sales Receipt	11/14/2012	105	Davis, Brian		12000 Unde	-100 00	-6,696 00
Sales Receipt	11/14/2012	106	Dehoff, James		12000 Unde	-500 00	-7,196 00
Sales Receipt	11/14/2012	107	Saich, John		12000 Unde	-1,000 00	-8,196 00
Sales Receipt	11/14/2012	108	Norris, Elizabeth		12000 Unde	-25 00	-8,221 00
Sales Receipt	11/16/2012	109	LaFollette, Lindsey		12000 Unde	-20 00	-8,241 00
Sales Receipt	11/16/2012	110	Breghner, Rob		12000 Unde	-250 00	-8,491 00
Sales Receipt	11/16/2012	111	Kolakowski, Kevin		12000 Unde	-10 00	-8,501 00
Sales Receipt	11/16/2012	112	Richardson, Tamarah		12000 Unde	-10 00	-8,511 00
Sales Receipt	11/16/2012	113	Kline, Nina		12000 Unde	-20 00	-8,531 00
Sales Receipt	11/16/2012	114	Kupferman, Lena		12000 Unde	-25 00	-8,556 00
Sales Receipt	11/16/2012	115	Hadley, Jane		12000 Unde	-25 00	-8,581 00
Sales Receipt	11/16/2012	116	Carapetyan, Jennifer		12000 Unde	-25 00	-8,606 00
Sales Receipt	11/16/2012	117	Houser, Danielle		12000 Unde	-25 00	-8,631 00
Sales Receipt	11/16/2012	118	Kerstetter, Linnie		12000 Unde	-25 00	-8,656 00
Sales Receipt	11/16/2012	119	Kranzel, Karen		12000 Unde	-50 00	-8,706 00
Sales Receipt	11/16/2012	120	Engelhardt, David		12000 Unde	-50 00	-8,756 00
Sales Receipt	11/16/2012	121	Waldron, Suanne		12000 Unde	-50 00	-8,806 00
Sales Receipt	11/16/2012	122	Young, Cynthia		12000 Unde	-50 00	-8,856 00
Sales Receipt	11/16/2012	123	Pitcarn, Suzanne		12000 Unde	-100 00	-8,956 00
Sales Receipt	11/16/2012	124	Von Lersner-Benso		12000 Unde	-150 00	-9,106 00
Sales Receipt	11/16/2012	125	Lazerus, Karen		12000 Unde	-200 00	-9,306 00
Sales Receipt	11/16/2012	126	Rice, Patricia		12000 Unde	-3,000 00	-12,306 00
Sales Receipt	11/19/2012	127	Baltz, Eileen		12000 Unde	-10 00	-12,316 00
Sales Receipt	11/19/2012	128	Watson, Barbara		12000 Unde	-20 00	-12,336 00
Sales Receipt	11/19/2012	129	Ortenzio, Rocco		12000 Unde...	-1,000 00	-13,336 00
Sales Receipt	11/19/2012	130	Ortenzio, Robert		12000 Unde	-1,000 00	-14,336 00
Sales Receipt	11/19/2012	131	Malatesta, Michael		12000 Unde	-100 00	-14,436 00
Sales Receipt	11/19/2012	132	Eisenbeis, Karen		12000 Unde...	-25 00	-14,461 00
Sales Receipt	11/19/2012	133	Finkbeiner, Paul		12000 Unde	-250 00	-14,711 00
Sales Receipt	11/19/2012	134	Olszyk, Rebecca		12000 Unde	-10 00	-14,721 00
Sales Receipt	11/19/2012	135	Tyson, Tijuana		12000 Unde	-10 00	-14,731 00
Sales Receipt	11/19/2012	136	Holtman, Amy		12000 Unde	-10 00	-14,741 00
Sales Receipt	11/19/2012	137	Hester, Judy		12000 Unde	-20 00	-14,761 00
Sales Receipt	11/19/2012	138	Hanna, Ingrid		12000 Unde	-20 00	-14,781 00
Sales Receipt	11/19/2012	139	Thomas, LaShell		12000 Unde	-20 00	-14,801 00
Sales Receipt	11/19/2012	140	Hutton, Lisa		12000 Unde	-20 00	-14,821 00
Sales Receipt	11/19/2012	141	Brown, Jesska		12000 Unde	-20 00	-14,841 00

Select Medical Charitable Foundation

General Ledger

As of December 31, 2012

Type	Date	Num	Name	Memo	Split	Amount	Balance
Sales Receipt	11/19/2012	142	Cook, Whitney		12000 Unde	-20 00	-14,861 00
Sales Receipt	11/19/2012	143	Yoon, Patty		12000 Unde	-20 00	-14,881 00
Sales Receipt	11/19/2012	144	Bolton, Frances		12000 Unde	-25 00	-14,906 00
Sales Receipt	11/19/2012	145	Miller, Ann		12000 Unde	-25 00	-14,931 00
Sales Receipt	11/19/2012	146	LaLonde, Carol		12000 Unde	-25 00	-14,956 00
Sales Receipt	11/19/2012	147	Ryan, Sharon		12000 Unde	-25 00	-14,981 00
Sales Receipt	11/19/2012	148	Kubillus, Alicia		12000 Unde	-25 00	-15,006 00
Sales Receipt	11/19/2012	149	Siegel, Aimee		12000 Unde	-25 00	-15,031 00
Sales Receipt	11/19/2012	150	Brandt, Lori		12000 Unde	-25 00	-15,056 00
Sales Receipt	11/19/2012	151	Melton, Erin		12000 Unde	-25 00	-15,081 00
Sales Receipt	11/19/2012	152	Vinaja, Patricia		12000 Unde	-25 00	-15,106 00
Sales Receipt	11/19/2012	153	Goodman, Scott		12000 Unde	-30 00	-15,136 00
Sales Receipt	11/19/2012	154	Wigger, Sarah		12000 Unde	-40 00	-15,176 00
Sales Receipt	11/19/2012	155	Maskell, Kathleen		12000 Unde	-50 00	-15,226 00
Sales Receipt	11/19/2012	156	Ticman, Leilani		12000 Unde	-50 00	-15,276 00
Sales Receipt	11/19/2012	157	Kalb, Amy		12000 Unde	-50 00	-15,326 00
Sales Receipt	11/19/2012	158	Freund, Sarah		12000 Unde	-50 00	-15,376 00
Sales Receipt	11/19/2012	159	Ellard, Tammy		12000 Unde	-50 00	-15,426 00
Sales Receipt	11/19/2012	160	Meo, Kathy		12000 Unde	-50 00	-15,476 00
Sales Receipt	11/19/2012	161	Satterlee, Lori		12000 Unde	-50 00	-15,526 00
Sales Receipt	11/19/2012	162	Kopp, Margaret		12000 Unde	-50 00	-15,576 00
Sales Receipt	11/19/2012	163	Lester, David		12000 Unde	-50 00	-15,626 00
Sales Receipt	11/19/2012	164	Jameson-Muster, T		12000 Unde	-50 00	-15,676 00
Sales Receipt	11/19/2012	165	Bunch, Jane		12000 Unde	-50 00	-15,726 00
Sales Receipt	11/19/2012	166	Stewart, Francesca		12000 Unde	-100.00	-15,826 00
Sales Receipt	11/19/2012	167	Hembree, Karyn		12000 Unde	-100 00	-15,926 00
Sales Receipt	11/19/2012	168	Sena, Amy		12000 Unde	-100 00	-16,026 00
Sales Receipt	11/19/2012	169	Pangle, Brian		12000 Unde	-100 00	-16,126 00
Sales Receipt	11/19/2012	170	Hawkins, Carrie		12000 Unde	-100 00	-16,226 00
Sales Receipt	11/19/2012	171	Sankarsingh, Dhan		12000 Unde	-100 00	-16,326 00
Sales Receipt	11/19/2012	172	Brigante, Mary Ann		12000 Unde	-200 00	-16,526 00
Sales Receipt	11/19/2012	173	Padalino, Robert		12000 Unde	-500 00	-17,026 00
Sales Receipt	11/19/2012	174	Nicholson, Jennifer		12000 Unde	-10 00	-17,036 00
Sales Receipt	11/19/2012	175	Lacey, Mary		12000 Unde	-25 00	-17,061 00
Sales Receipt	11/19/2012	176	Horst, Tara		12000 Unde	-25 00	-17,086 00
Sales Receipt	11/19/2012	177	Newell, Connie		12000 Unde	-50 00	-17,136 00
Sales Receipt	11/19/2012	178	Bekelja, Victoria		12000 Unde	-50 00	-17,186 00
Sales Receipt	11/19/2012	179	Kurmakov, Alex		12000 Unde	-100 00	-17,286 00
Sales Receipt	11/19/2012	180	Outpatient CBO		12000 Unde	-669 33	-17,955 33
Sales Receipt	11/19/2012	181	Williams, Elaine		12000 Unde	-55 67	-18,011 00
Sales Receipt	11/19/2012	182	Pierich, Marsha		12000 Unde	-25 00	-18,036 00
Sales Receipt	11/20/2012	261	O'Connor, Donna		12000 Unde	-100 00	-18,136 00
Sales Receipt	11/20/2012	262	Introcaso, Lou		12000 Unde	-50 00	-18,186 00
Sales Receipt	11/21/2012	183	Saven, Albert		12000 Unde	-25 00	-18,211 00
Sales Receipt	11/21/2012	184	SSH-Panama City		12000 Unde	-335 00	-18,546 00
Sales Receipt	11/21/2012	185	Kumar, Sulekha		12000 Unde	-25 00	-18,571 00
Sales Receipt	11/21/2012	186	Gallarno, Linda		12000 Unde	-5 00	-18,576 00
Sales Receipt	11/21/2012	187	Webb, Keisha		12000 Unde	-10 00	-18,586 00
Sales Receipt	11/21/2012	188	Swartz, Danielle		12000 Unde	-10 00	-18,596 00
Sales Receipt	11/21/2012	189	Bost, Tracy		12000 Unde	-10 00	-18,606 00
Sales Receipt	11/21/2012	190	Miduri, Michelle		12000 Unde	-15 00	-18,621 00
Sales Receipt	11/21/2012	191	Haines, Wendy		12000 Unde	-20 00	-18,641 00
Sales Receipt	11/21/2012	192	Cerrone, Lucy		12000 Unde	-20 00	-18,661 00
Sales Receipt	11/21/2012	193	Baxter, Andrew		12000 Unde	-20 00	-18,681 00
Sales Receipt	11/21/2012	194	Maloney, Margaret		12000 Unde	-25 00	-18,706 00
Sales Receipt	11/21/2012	195	Bachovchin, Andrea		12000 Unde	-25 00	-18,731 00
Sales Receipt	11/21/2012	196	Hitchcock, Penny		12000 Unde	-25 00	-18,756 00
Sales Receipt	11/21/2012	197	Brandow, Carl		12000 Unde	-25 00	-18,781 00
Sales Receipt	11/21/2012	198	DeWitt, Barbara		12000 Unde	-25 00	-18,806 00
Sales Receipt	11/21/2012	199	Iorio, Linda		12000 Unde	-25 00	-18,831 00
Sales Receipt	11/21/2012	200	Smith, Barbara		12000 Unde	-25 00	-18,856 00
Sales Receipt	11/21/2012	201	Vaughn, Deborah		12000 Unde	-25 00	-18,881 00
Sales Receipt	11/21/2012	202	Rooney, Megan		12000 Unde	-30 00	-18,911 00
Sales Receipt	11/21/2012	203	Man, Fanny		12000 Unde	-50 00	-18,961 00
Sales Receipt	11/21/2012	204	Peterson, Michele		12000 Unde	-50 00	-19,011 00
Sales Receipt	11/21/2012	205	Kirkpatrick, Jayne		12000 Unde	-50 00	-19,061 00
Sales Receipt	11/21/2012	206	Kowalewski, Scarlett		12000 Unde	-50 00	-19,111 00
Sales Receipt	11/21/2012	207	Snyder, Carol		12000 Unde	-50 00	-19,161 00

Select Medical Charitable Foundation
General Ledger
As of December 31, 2012

Type	Date	Num	Name	Memo	Split	Amount	Balance
Sales Receipt	11/21/2012	208	Nelson, Leslie		12000 Unde	-50 00	-19,211 00
Sales Receipt	11/21/2012	209	Rusignuolo, Brian		12000 Unde	-50 00	-19,261 00
Sales Receipt	11/21/2012	210	Green, Julie		12000 Unde	-75 00	-19,336 00
Sales Receipt	11/21/2012	211	Carney, Mike		12000 Unde	-100 00	-19,436 00
Sales Receipt	11/21/2012	212	Marchi-Roberts, Elisa		12000 Unde	-100 00	-19,536 00
Sales Receipt	11/21/2012	213	Berkeland, Donn		12000 Unde	-100 00	-19,636 00
Sales Receipt	11/21/2012	214	Alverzo, Joan		12000 Unde	-100 00	-19,736 00
Sales Receipt	11/21/2012	215	Ray, Chrstel		12000 Unde	-100 00	-19,836 00
Sales Receipt	11/21/2012	216	Pasia, Eric		12000 Unde	-100 00	-19,936 00
Sales Receipt	11/21/2012	217	Van Leer, Diane		12000 Unde	-100 00	-20,036 00
Sales Receipt	11/21/2012	218	Obert, Michael		12000 Unde	-10 00	-20,046 00
Sales Receipt	11/21/2012	219	Krengiel, Elizabeth		12000 Unde	-10 00	-20,056 00
Sales Receipt	11/21/2012	220	Tate, Mark		12000 Unde	-20 00	-20,076 00
Sales Receipt	11/21/2012	221	Hernandez, Carmela		12000 Unde	-20 00	-20,096 00
Sales Receipt	11/21/2012	222	Emerson, Glenda		12000 Unde	-20 00	-20,116 00
Sales Receipt	11/21/2012	223	Horton, Elizabeth		12000 Unde	-20 00	-20,136 00
Sales Receipt	11/21/2012	224	Gordon, Gabrielle		12000 Unde	-20 00	-20,156 00
Sales Receipt	11/21/2012	225	Stern, Patricia		12000 Unde	-20 00	-20,176 00
Sales Receipt	11/21/2012	226	Lane, Kirstin		12000 Unde	-20 00	-20,196 00
Sales Receipt	11/21/2012	227	Bousquet, Michael		12000 Unde	-20 00	-20,216 00
Sales Receipt	11/21/2012	228	Morris, Patricia		12000 Unde	-20 00	-20,236 00
Sales Receipt	11/21/2012	229	Kutschbach, Mary		12000 Unde	-25 00	-20,261 00
Sales Receipt	11/21/2012	230	Weinberger, Judith		12000 Unde	-25 00	-20,286 00
Sales Receipt	11/21/2012	231	Modrich, Amy		12000 Unde	-25 00	-20,311 00
Sales Receipt	11/21/2012	232	Gauthier, Yvonne		12000 Unde	-25 00	-20,336 00
Sales Receipt	11/21/2012	233	Berg, Karen		12000 Unde	-25 00	-20,361 00
Sales Receipt	11/21/2012	234	Gunther, Andrea		12000 Unde	-50 00	-20,411 00
Sales Receipt	11/21/2012	235	D'Addio, Karen		12000 Unde	-50 00	-20,461 00
Sales Receipt	11/21/2012	236	Long, Larry		12000 Unde	-50 00	-20,511 00
Sales Receipt	11/21/2012	237	Mills, Celise		12000 Unde	-50 00	-20,561 00
Sales Receipt	11/21/2012	238	Tomandl, Catherine		12000 Unde	-50 00	-20,611 00
Sales Receipt	11/21/2012	239	Pilato, Margo		12000 Unde	-50 00	-20,661 00
Sales Receipt	11/21/2012	240	Clement, Sheri		12000 Unde	-50 00	-20,711 00
Sales Receipt	11/21/2012	241	Fogarty, Nathan		12000 Unde	-100 00	-20,811 00
Sales Receipt	11/21/2012	242	Sutch, Don		12000 Unde	-100 00	-20,911 00
Sales Receipt	11/21/2012	243	Alexander, Mary		12000 Unde	-100 00	-21,011 00
Sales Receipt	11/21/2012	244	Sarfaty, Beth		12000 Unde	-100 00	-21,111 00
Sales Receipt	11/21/2012	245	Berry, Patricia		12000 Unde	-100 00	-21,211 00
Sales Receipt	11/21/2012	246	Dyatlov, Nataliya		12000 Unde	-100 00	-21,311 00
Sales Receipt	11/21/2012	247	Key, Celeste		12000 Unde	-200 00	-21,511 00
Sales Receipt	11/21/2012	248	Curnane, Carolyn		12000 Unde	-150 00	-21,661 00
Sales Receipt	11/21/2012	249	Fisher, Diana		12000 Unde	-200 00	-21,861 00
Sales Receipt	11/21/2012	250	Coulter, Nicole		12000 Unde	-200 00	-22,061 00
Sales Receipt	11/21/2012	251	Cliffe, Peggy		12000 Unde	-250 00	-22,311 00
Sales Receipt	11/21/2012	252	Rubel, Jason		12000 Unde	-300 00	-22,611 00
Sales Receipt	11/21/2012	253	Tiemens, Linda		12000 Unde	-1,000 00	-23,611 00
Sales Receipt	11/21/2012	254	Baumchen, Sandra		12000 Unde	-1,000 00	-24,611 00
Sales Receipt	11/21/2012	255	Johnson, Erica		12000 Unde	-165 00	-24,776 00
Sales Receipt	11/21/2012	256	Adams, Helen		12000 Unde	-25 00	-24,801 00
Sales Receipt	11/21/2012	257	Knuth, Ann		12000 Unde	-10 00	-24,811 00
Sales Receipt	11/21/2012	258	Sherick, Bridget		12000 Unde	-100 00	-24,911 00
Sales Receipt	11/21/2012	259	Franklin, Anne		12000 Unde	-25 00	-24,936 00
Sales Receipt	11/21/2012	260	Stormin, Heather		12000 Unde	-25 00	-24,961 00
Sales Receipt	11/23/2012	263	Dunkley, Kandice		12000 Unde	-20 00	-24,981 00
Sales Receipt	11/23/2012	264	Shanahan, Maureen		12000 Unde	-150 00	-25,131 00
Sales Receipt	11/23/2012	265	Hoover, Beth		12000 Unde	-20 00	-25,151 00
Sales Receipt	11/23/2012	266	Scott, Jonathan		12000 Unde	-100 00	-25,251 00
Sales Receipt	11/23/2012	267	Gust, Mariann		12000 Unde	-100 00	-25,351 00
Sales Receipt	11/23/2012	268	Vanhook, Brandon		12000 Unde	-20 00	-25,371 00
Sales Receipt	11/23/2012	269	Wical, Joy		12000 Unde	-50 00	-25,421 00
Sales Receipt	11/23/2012	270	Lee, Barbara		12000 Unde	-15 00	-25,436 00
Sales Receipt	11/23/2012	271	Bartolomeo, Anna		12000 Unde	-20 00	-25,456 00
Sales Receipt	11/23/2012	272	Owens, Angela		12000 Unde	-50 00	-25,506 00
Sales Receipt	11/23/2012	273	Morehouse, Linda		12000 Unde	-25 00	-25,531 00
Sales Receipt	11/23/2012	274	Davis, Teresa		12000 Unde	-100 00	-25,631 00
Sales Receipt	11/23/2012	275	Karadsheh, Noreen		12000 Unde	-40 00	-25,671 00
Sales Receipt	11/23/2012	276	Walter, Chris		12000 Unde	-25 00	-25,696 00
Sales Receipt	11/23/2012	277	McCullum, Mae		12000 Unde	-25 00	-25,721 00

Select Medical Charitable Foundation

General Ledger

As of December 31, 2012

Type	Date	Num	Name	Memo	Split	Amount	Balance
Sales Receipt	11/23/2012	278	Ray, Dorothy		12000 Unde	-50 00	-25,771 00
Sales Receipt	11/23/2012	279	Rhodes, Chandelle		12000 Unde	-20 00	-25,791 00
Sales Receipt	11/23/2012	280	SSH-Pensacola,		12000 Unde	-203 60	-25,994 60
Sales Receipt	11/23/2012	281	Nadler, Amy		12000 Unde	-20 00	-26,014 60
Sales Receipt	11/23/2012	282	Leger, John		12000 Unde	-250 00	-26,264 60
Sales Receipt	11/23/2012	283	Jeffries, Kaelin		12000 Unde	-25 00	-26,289 60
Sales Receipt	11/23/2012	284	Swerdlow, Jeffrey		12000 Unde	-25 00	-26,314 60
Sales Receipt	11/23/2012	285	Bradley, Lynn		12000 Unde	-50 00	-26,364 60
Sales Receipt	11/23/2012	286	Macko, Veronica		12000 Unde	-100 00	-26,464 60
Sales Receipt	11/23/2012	287	Kader, Paula		12000 Unde	-50 00	-26,514 60
Sales Receipt	11/23/2012	288	Hudacsek, David		12000 Unde	-20 00	-26,534 60
Sales Receipt	11/23/2012	289	Samuel, Elizabeth		12000 Unde	-50 00	-26,584 60
Sales Receipt	11/23/2012	290	Sattan, Scott		12000 Unde	-50 00	-26,634 60
Sales Receipt	11/23/2012	291	Levy, Brahman		12000 Unde	-216 00	-26,850 60
Sales Receipt	11/23/2012	292	Cyran, Marina		12000 Unde	-50 00	-26,900 60
Sales Receipt	11/23/2012	293	Carter, Myrlene		12000 Unde	-25 00	-26,925 60
Sales Receipt	11/23/2012	294	Blake, Kelly		12000 Unde	-25 00	-26,950 60
Sales Receipt	11/23/2012	295	Ferguson, Judith		12000 Unde	-20 00	-26,970 60
Sales Receipt	11/23/2012	296	McGovern, Mike		12000 Unde	-100 00	-27,070 60
Sales Receipt	11/23/2012	297	Cadden, Tina		12000 Unde	-15 00	-27,085 60
Sales Receipt	11/23/2012	298	O'Connor, Kelly		12000 Unde	-20 00	-27,105 60
Sales Receipt	11/23/2012	299	Candando, Cathy		12000 Unde	-20 00	-27,125 60
Sales Receipt	11/23/2012	300	Dopp, Lisa		12000 Unde	-50 00	-27,175 60
Sales Receipt	11/23/2012	301	Dukery, Dona		12000 Unde	-160 00	-27,335 60
Sales Receipt	11/23/2012	302	Talalai, James		12000 Unde	-1,500 00	-28,835 60
Sales Receipt	11/26/2012	305	Troyer, Robin		12000 Unde	-10 00	-28,845 60
Sales Receipt	11/26/2012	306	Spears, Sharris		12000 Unde	-10 00	-28,855 60
Sales Receipt	11/26/2012	307	Degen, Ellen		12000 Unde	-10 00	-28,865 60
Sales Receipt	11/26/2012	308	Selner, Tracie		12000 Unde	-25 00	-28,890 60
Sales Receipt	11/26/2012	309	Sanders, Tara		12000 Unde	-85 00	-28,975 60
Sales Receipt	11/26/2012	310	Foster, Donald		12000 Unde	-100 00	-29,075 60
Sales Receipt	11/26/2012	311	Entwistle, Carol Jo		12000 Unde	-50 00	-29,125 60
Sales Receipt	11/26/2012	312	Lasam, Sandy		12000 Unde	-10 00	-29,135 60
Sales Receipt	11/26/2012	313	Thomas, Yulan		12000 Unde	-15 00	-29,150 60
Sales Receipt	11/26/2012	314	Garger, Lise		12000 Unde	-20 00	-29,170 60
Sales Receipt	11/26/2012	315	Lankford, Karen		12000 Unde	-20 00	-29,190 60
Sales Receipt	11/26/2012	316	Straeffler, Troy		12000 Unde	-20 00	-29,210 60
Sales Receipt	11/26/2012	317	McNace, Cheryl		12000 Unde	-20 00	-29,230 60
Sales Receipt	11/26/2012	318	Weiser, Angie		12000 Unde	-20 00	-29,250 60
Sales Receipt	11/26/2012	319	Whitehead, Angela		12000 Unde	-20 00	-29,270 60
Sales Receipt	11/26/2012	320	Corbins, Barbara		12000 Unde	-20 00	-29,290 60
Sales Receipt	11/26/2012	321	Waeckerle, Lisa		12000 Unde	-25 00	-29,315 60
Sales Receipt	11/26/2012	322	Wheeler, Kimberly		12000 Unde	-25 00	-29,340 60
Sales Receipt	11/26/2012	323	Morns, Maria Luisa		12000 Unde	-25 00	-29,365 60
Sales Receipt	11/26/2012	324	McCollum, MaryEllen		12000 Unde	-25 00	-29,390 60
Sales Receipt	11/26/2012	325	BelleFleur, Anne		12000 Unde	-25 00	-29,415 60
Sales Receipt	11/26/2012	326	Revak, Joan		12000 Unde	-30 00	-29,445 60
Sales Receipt	11/26/2012	327	SSM-KIRKWOOD .		12000 Unde	-35 00	-29,480 60
Sales Receipt	11/26/2012	328	Lancaster, Denise		12000 Unde	-40 00	-29,520 60
Sales Receipt	11/26/2012	329	Brandon clinic		12000 Unde	-40 00	-29,560 60
Sales Receipt	11/26/2012	330	Canupp, Christine		12000 Unde	-50 00	-29,610 60
Sales Receipt	11/26/2012	331	Spence, Joseph		12000 Unde	-50 00	-29,660 60
Sales Receipt	11/26/2012	332	Blocker, Brian		12000 Unde	-50 00	-29,710 60
Sales Receipt	11/26/2012	333	Frits, Sandra		12000 Unde	-50 00	-29,760 60
Sales Receipt	11/26/2012	334	Rosenberg, Jay		12000 Unde	-50 00	-29,810 60
Sales Receipt	11/26/2012	335	Bløebbaum, Darren		12000 Unde	-50 00	-29,860 60
Sales Receipt	11/26/2012	336	Lindsay, Donna		12000 Unde	-50 00	-29,910 60
Sales Receipt	11/26/2012	337	Walker, Janice		12000 Unde	-50 00	-29,960 60
Sales Receipt	11/26/2012	338	SSM-Homeward Bo		12000 Unde	-76 00	-30,036 60
Sales Receipt	11/26/2012	339	SSH-N Kentucky		12000 Unde	-75 00	-30,111 60
Sales Receipt	11/26/2012	340	SSM-Mt Carmel		12000 Unde	-85 00	-30,196 60
Sales Receipt	11/26/2012	341	Price, Denise		12000 Unde	-100 00	-30,296 60
Sales Receipt	11/26/2012	342	Erker, Gerard		12000 Unde	-100 00	-30,396 60
Sales Receipt	11/26/2012	343	Favata, Lucien		12000 Unde	-100 00	-30,496 60
Sales Receipt	11/26/2012	344	Kessel, Teri		12000 Unde	-100 00	-30,596 60
Sales Receipt	11/26/2012	345	Bowler, Lori		12000 Unde	-100 00	-30,696 60
Sales Receipt	11/26/2012	346	Anderson, Monica		12000 Unde	-500 00	-31,196 60
Sales Receipt	11/26/2012	347	Scott, Vanda		12000 Unde	-500 00	-31,696 60

Select Medical Charitable Foundation General Ledger As of December 31, 2012

Type	Date	Num	Name	Memo	Split	Amount	Balance
Sales Receipt	11/26/2012	348	Herbig, Rose		12000 Unde	-25 00	-31,721 60
Sales Receipt	11/26/2012	349	SSM-DePaul		12000 Unde	-670 00	-32,391 60
Sales Receipt	11/27/2012	350	Holland, Jennifer		12000 Unde	-20 00	-32,411 60
Sales Receipt	11/27/2012	351	Judd, Patricia		12000 Unde	-25 00	-32,436 60
Sales Receipt	11/27/2012	352	Jenkins, Gayland		12000 Unde	-25 00	-32,461 60
Sales Receipt	11/27/2012	353	Caldera, Ken		12000 Unde	-50 00	-32,511 60
Sales Receipt	11/27/2012	354	Schmidt, Mary		12000 Unde	-100 00	-32,611 60
Sales Receipt	11/27/2012	355	Gandy, Carolyn		12000 Unde	-200 00	-32,811 60
Sales Receipt	11/27/2012	356	Brinn, Mark		12000 Unde	-325 00	-33,136 60
Sales Receipt	11/27/2012	357	Schaumburg, Debbi		12000 Unde	-100 00	-33,236 60
Sales Receipt	11/29/2012	358	Hamdan, Sal		12000 Unde	-25 00	-33,261 60
Sales Receipt	11/29/2012	359	Kupferman, Conrad		12000 Unde	-200 00	-33,461 60
Sales Receipt	11/29/2012	360	Buchs, Josceylon		12000 Unde	-25 00	-33,486 60
Sales Receipt	11/30/2012	303	Godbold, RYANNE		12000 Unde	-5 00	-33,491 60
Sales Receipt	11/30/2012	304	Layton, Shannon		12000 Unde	-10 00	-33,501 60
Sales Receipt	11/30/2012	361	Dale, Deborah		12000 Unde	-25 00	-33,526 60
Sales Receipt	11/30/2012	362	Hanson, Memory		12000 Unde	-25 00	-33,551 60
Sales Receipt	11/30/2012	363	Kirshblum, Steven		12000 Unde	-100 00	-33,651 60
Sales Receipt	11/30/2012	364	Sharma, Chandram		12000 Unde	-100 00	-33,751 60
Sales Receipt	11/30/2012	365	Deemer, Miriam		12000 Unde	-200 00	-33,951 60
Sales Receipt	12/05/2012	366	Massullo, Pam		12000 Unde	-50 00	-34,001 60
Sales Receipt	12/13/2012	367	Kenton, Barbara		12000 Unde	-25 00	-34,026 60
Sales Receipt	12/18/2012	368	Novacare group do		12000 Unde	-110 00	-34,136 60
Sales Receipt	12/18/2012	369	Staino, Michael		12000 Unde	-40 00	-34,176 60
Sales Receipt	12/18/2012	370	Mazyk, Peter		12000 Unde	-50 00	-34,226 60
Sales Receipt	12/18/2012	371	Mendoza, Theresa		12000 Unde	-20 00	-34,246 60
Sales Receipt	12/18/2012	372	Heck, Kaley		12000 Unde	-20 00	-34,266 60
Sales Receipt	12/18/2012	373	Glover, Ronald		12000 Unde	-40 00	-34,306 60
Sales Receipt	12/18/2012	374	Foy, James		12000 Unde	-100 00	-34,406 60
Sales Receipt	12/18/2012	375	Gabel, Jaime		12000 Unde	-15 00	-34,421 60
Sales Receipt	12/18/2012	376	Douglas, Richard		12000 Unde	-100 00	-34,521 60
Sales Receipt	12/18/2012	377	Bull, David		12000 Unde	-20 00	-34,541 60
Sales Receipt	12/18/2012	378	Woods, Thomas		12000 Unde	-20 00	-34,561 60
Sales Receipt	12/18/2012	379	Alegre, Robert		12000 Unde	-40 00	-34,601 60
Total 44820 SM Employee Contributions						-34,601 60	-34,601 60
44800 Indirect Public Support - Other							0 00
Total 44800 Indirect Public Support - Other							0 00
Total 44800 Indirect Public Support						-34,601 60	-34,601 60
45000 Investments							0 00
45030 Interest-Savings, Short-term CD							0 00
Total 45030 Interest-Savings, Short-term CD							0 00
45000 Investments - Other							0 00
Total 45000 Investments - Other							0 00
Total 45000 Investments							0 00
46400 Other Types of Income							0 00
46430 Miscellaneous Revenue							0 00
Total 46430 Miscellaneous Revenue							0 00
46400 Other Types of Income - Other							0 00
Total 46400 Other Types of Income - Other							0 00
Total 46400 Other Types of Income							0 00
47200 Program Income							0 00
47230 Membership Dues							0 00
Total 47230 Membership Dues							0 00
47240 Program Service Fees							0 00
Total 47240 Program Service Fees							0 00

SELECT MEDICAL CHARITABLE FOUNDATION
FEIN: 05-0597781
STATEMENT 2

FORM 990PF, PART VIII, LINE 1 - LIST OF OFFICERS, DIRECTORS AND TRUSTEES

<u>NAME AND ADDRESS</u>	<u>TITLE AND TIME DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u>	<u>EXPENSE ACCT AND OTHER ALLOWANCES</u>
ROBERT A ORTENZIO	DIRECTOR, PRESIDENT	NONE	NONE	NONE
JOHN SAICH	DIRECTOR, VICE PRESIDENT	NONE	NONE	NONE
MICHAEL E TARVIN	DIRECTOR, VICE PRESIDENT, SECRETARY	NONE	NONE	NONE
PATRICIA A RICE	VICE PRESIDENT	NONE	NONE	NONE
SCOTT A ROMBERGER	TREASURER	NONE	NONE	NONE
		<u>NONE</u>	<u>NONE</u>	<u>NONE</u>

SELECT MEDICAL CHARITABLE FOUNDATION
FEIN: 05-0597781
STATEMENT 3

FORM 990PF, PART XV, LINE 2a - NAME, ADDRESS AND PHONE FOR APPLICATIONS

SELECT MEDICAL CHARITABLE FOUNDATION
ATTENTION HR DEPARTMENT, ALEX KURMAKOV
4714 GETTYSBURG ROAD
MECHANICSBURG, PA 17055
717-972-1100

**SELECT MEDICAL CHARITABLE FOUNDATION
FEIN: 05-0597781
STATEMENT 4**

FORM 990PF, PART XV, LINE 2b - FORM AND CONTENTS OF SUBMITTED APPLICATIONS

IN PAST YEARS, DIRECT CASH PAYMENTS WERE MADE TO DISASTER VICTIMS OF PRESIDENTIALLY DECLARED DISASTER AREAS. THERE WAS A SPECIAL FORM TO BE USED TO REQUEST THE FUNDS. THE FORM INCLUDED A NARRATIVE, NAME, DATE, SOCIAL SECURITY # OR EMPLOYER ID, WORK LOCATION, HOUSEHOLD INCOME, ESTIMATE OF LOSS NOT COVERED BY INSURANCE OF FEDERAL, STATE, AND LOCAL ASSISTANCE AND ANY OTHER INFORMATION THE APPLICANT FELT NECESSARY.

SELECT MEDICAL CHARITABLE FOUNDATION
FEIN: 05-0597781
STATEMENT 5

FORM 990PF, PART XV, LINE 2d - RESTRICTIONS OR LIMITATIONS ON AWARDS

THERE ARE GEOGRAPHICAL RESTRICTIONS - ONLY PRESIDENTIALLY DECLARED
DISASTER AREAS THERE WERE PARAMETERS ON AWARDS - BASED ON RENTAL OF
HOME OR OWNERSHIP OF HOME AND NEEDS AWARDS WERE LIMITED TO \$10,000

Application for Extension of Time To File an Exempt Organization Return

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box X
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions	Name of exempt organization or other filer, see instructions	Employer identification number (EIN) or
	SELECT MEDICAL CHARITABLE FOUNDATION	05-0597781
	Number, street, and room or suite no. If a P O box, see instructions	Social security number (SSN)
	4714 GETTYSBURG RD	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	MECHANICSBURG, PA 17055	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720- (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

• The books are in the care of ► Bridget Sherick

Telephone No ► 717-972-1100 FAX No ► 717-737-9611

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until August 15, 20 13, to file the exempt organization return for the organization named above. The extension is for the organization's return for

► calendar year 20 12 or

► tax year beginning _____, 20 _____, and ending _____, 20 _____

2 If the tax year entered in line 1 is for less than 12 months, check reason Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a \$	0.00
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b \$	0.00
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c \$	

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.