

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 private foundations)
▶ Do not enter social security numbers on this form as it may be made public
▶ Information about Form 990 and its instructions is at www.irs.gov/form990

OMB No 1545-0047
2017
Open to Public Inspection

A For the 2017 calendar year, or tax year beginning 10-01-2017, and ending 09-30-2018

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization: Sharp Healthcare
 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 province, country, and ZIP or foreign postal code: San Diego, CA 921231489

D Employer identification number: 95-6077327
E Telephone number: (858) 499-5150
G Gross receipts \$ 1,718,662,628

F Name and address of principal officer: CHRIS HOWARD, 8695 Spectrum Center Blvd, San Diego, CA 921231489

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates 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: 1946 **M** State of legal domicile: CA

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
 The organization's primary exempt purpose is to provide administrative support to its tax-exempt subsidiaries. In addition, outpatient services are provided to patients within the greater San Diego area through multispecialty medical group practices. Community members are offered a number of benefit services to assist them in obtaining treatment, and information is provided on topics ranging from disease prevention to improvement of health status.

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)	25
4 Number of independent voting members of the governing body (Part VI, line 1b)	21
5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)	13,573
6 Total number of volunteers (estimate if necessary)	0
7a Total unrelated business revenue from Part VIII, column (C), line 12	744,533
7b Net unrelated business taxable income from Form 990-T, line 34	321,545

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	1,880,602	1,239,733
9 Program service revenue (Part VIII, line 2g)	1,367,959,885	1,459,813,886
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	176,728,617	69,445,741
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	48,452,975	58,499,328
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,595,022,079	1,588,998,688
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	250,719	260,260
14 Benefits paid to or for members (Part IX, column (A), line 4)		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	454,164,849	485,641,582
16a Professional fundraising fees (Part IX, column (A), line 11e)		0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 4,375,220		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,090,309,784	1,113,157,970
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	1,544,725,352	1,599,059,812
19 Revenue less expenses Subtract line 18 from line 12	50,296,727	-10,061,124
	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	3,121,907,133	3,699,480,680
21 Total liabilities (Part X, line 26)	3,068,359,549	3,592,195,577
22 Net assets or fund balances Subtract line 21 from line 20	53,547,584	107,285,103

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: STACI DICKERSON SVP AND CFO
 Date: 2019-08-08

Paid Preparer Use Only

Print/Type preparer's name: _____ Preparer's signature: _____ Date: _____
 Check if self-employed PTIN: P00634378
 Firm's name ▶ ERNST & YOUNG US LLP Firm's EIN ▶ 34-6565596
 Firm's address ▶ 4365 Executive Drive Suite 1600 Phone no (858) 535-7200
 SAN DIEGO, CA 921212101

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission
 To promote health care through supporting and/or operating, directly or through wholly-owned subsidiaries and other appropriate management arrangements, hospitals and other medically-related facilities and activities in the State of California. The specific and primary purposes for which this corporation is formed are to support and be responsive to the needs of its publicly supported, tax-exempt subsidiaries

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 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 \$ 577,035,509 including grants of \$ 0) (Revenue \$ 643,141,544)
 See Additional Data

4b (Code) (Expenses \$ 574,226,857 including grants of \$ 260,260) (Revenue \$ 816,672,342)
 See Additional Data

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)
 See Additional Data

4d Other program services (Describe in Schedule O)
 (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 1,151,262,366

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>	Yes	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	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>		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>	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>		
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>		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>		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>		No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, 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>		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>	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>	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>		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>		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>	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>	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>	Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		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 and XII is optional</i>	Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		No
14a Did the organization maintain an office, employees, or agents outside of the United States?	Yes	
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, Parts I and IV</i>	Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		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> (see instructions)		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>		No
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>		No

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	Yes	
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		No
23 Did the organization answer "Yes" to Part VII, Section A, line 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>	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 lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	Yes	
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		No
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?		No
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		No
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) 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>		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>		No
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		No
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		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>		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>		No
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		No
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>		No
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		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>		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>	Yes	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	Yes	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	Yes	
b If "Yes" to line 35a, 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>	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>	Yes	
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>		No
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

Table with columns for question ID, question text, and Yes/No response boxes. Includes sections for backup withholding, employee reporting, foreign accounts, prohibited transactions, solicitations, and charitable trusts.

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 or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (25), 1b (21), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

Table with 3 columns: Question, Yes, No. Rows include: 17 (CA), 18 (Own website, Another's website, Upon request, Other), 19, 20 (JENNIFER GARDYNE 8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 92123 (858) 499-5152).

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns . . .	1a					
	b Membership dues . . .	1b					
	c Fundraising events . . .	1c					
	d Related organizations	1d	1,239,733				
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f					
	g Noncash contributions included in lines 1a-1f \$ _____						
	h Total. Add lines 1a-1f		1,239,733				
Program Service Revenue		Business Code					
	2a Outpatient care	621110	612,639,011	612,553,661	85,350		
	b Capitation revenue	900099	574,191,594	574,191,594			
	c Revenue from affiliated entities	900099	233,538,860	233,538,860			
	d Medicare/Medicaid payments	621110	29,200,504	29,200,504			
	e Rental income	531120	6,932,099	6,932,099			
	f All other program service revenue		3,311,818	2,652,635	659,183	0	
g Total. Add lines 2a-2f		1,459,813,886					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		46,224,117			46,224,117	
	4 Income from investment of tax-exempt bond proceeds		12,363			12,363	
	5 Royalties						
	6a Gross rents	(i) Real	(ii) Personal				
		b Less rental expenses					
		c Rental income or (loss)	0	0			
		d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less cost or other basis and sales expenses					
		c Gain or (loss)	14,035,564	9,173,697			
		d Net gain or (loss)		23,209,261			23,209,261
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a					
		b Less direct expenses	b				
		c Net income or (loss) from fundraising events					
	9a Gross income from gaming activities See Part IV, line 19	a					
b Less direct expenses		b					
c Net income or (loss) from gaming activities							
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 SCMG Management Fee		561000	49,971,189			49,971,189	
b Gain on extinguishment of debt		900099	8,026,476			8,026,476	
c Medical Records Copying		900099	318,708			318,708	
d All other revenue			182,955	0	0	182,955	
e Total. Add lines 11a-11d			58,499,328				
12 Total revenue. See Instructions			1,588,998,688	1,459,069,353	744,533	127,945,069	

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).

Check if Schedule O contains a response or note to any line in this Part IX

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	260,260	260,260		
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	7,753,274		7,753,274	
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	376,052,296	155,636,561	220,415,735	
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	13,631,892	4,954,259	8,677,633	
9 Other employee benefits	60,462,431	26,388,910	34,073,521	
10 Payroll taxes	27,741,689	11,680,038	16,061,651	
11 Fees for services (non-employees)				
a Management				
b Legal	918,798	14,680	904,118	
c Accounting	5,366,699		5,366,699	
d Lobbying	16,000		16,000	
e Professional fundraising services See Part IV, line 17				
f Investment management fees	1,425,177		1,425,177	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	486,365,216	461,041,071	25,324,145	0
12 Advertising and promotion	3,777,396	184,331	3,593,065	
13 Office expenses	26,907,470	15,625,656	11,281,814	
14 Information technology	70,503,206	1,332,427	69,170,779	
15 Royalties				
16 Occupancy	35,148,434	25,529,349	9,619,085	
17 Travel	742,652	157,468	585,184	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	48,515		48,515	
20 Interest	3,155,715	391,575	2,764,140	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	36,097,513	13,974,918	22,122,595	
23 Insurance	6,123,604	5,595,350	528,254	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Purchased Medical Services from Affiliates	382,235,302	382,235,302		
b Medical Supplies	40,537,169	40,519,610	17,559	
c Equipment Maintenance/Repair	4,417,655	3,182,900	1,234,755	
d Fundraising	4,375,220			4,375,220
e All other expenses	4,996,229	2,557,701	2,438,528	0
25 Total functional expenses. Add lines 1 through 24e	1,599,059,812	1,151,262,366	443,422,226	4,375,220
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part IX

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	445,069	1	530,896
	2 Savings and temporary cash investments	226,416,811	2	346,881,889
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	34,420,101	4	31,680,163
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	0	6	0
	7 Notes and loans receivable, net	14,414,465	7	4,353,234
	8 Inventories for sale or use	7,316,912	8	7,930,907
	9 Prepaid expenses and deferred charges	51,955,598	9	42,691,491
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	750,003,392		
	b Less accumulated depreciation	365,688,196		
		349,241,021	10c	384,315,196
	11 Investments—publicly traded securities	1,797,203,475	11	2,037,437,165
	12 Investments—other securities See Part IV, line 11	8,011,042	12	11,627,684
	13 Investments—program-related See Part IV, line 11	64,327,482	13	77,148,088
	14 Intangible assets	0	14	0
15 Other assets See Part IV, line 11	568,155,157	15	754,883,967	
16 Total assets. Add lines 1 through 15 (must equal line 34)	3,121,907,133	16	3,699,480,680	
Liabilities	17 Accounts payable and accrued expenses	190,333,956	17	256,051,312
	18 Grants payable	0	18	0
	19 Deferred revenue	6,738,874	19	2,187,870
	20 Tax-exempt bond liabilities	558,734,706	20	741,542,505
	21 Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	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	2,312,552,013	25	2,592,413,890
	26 Total liabilities. Add lines 17 through 25	3,068,359,549	26	3,592,195,577
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	2,498,749	27	43,392,861
	28 Temporarily restricted net assets	45,469,880	28	56,017,823
	29 Permanently restricted net assets	5,578,955	29	7,874,419
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds	0	30	0
	31 Paid-in or capital surplus, or land, building or equipment fund	0	31	0
	32 Retained earnings, endowment, accumulated income, or other funds	0	32	0
33 Total net assets or fund balances	53,547,584	33	107,285,103	
34 Total liabilities and net assets/fund balances	3,121,907,133	34	3,699,480,680	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,588,998,688
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,599,059,812
3	Revenue less expenses Subtract line 2 from line 1	3	-10,061,124
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	53,547,584
5	Net unrealized gains (losses) on investments	5	39,821,576
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	23,977,067
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	107,285,103

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line 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? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a		No
b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited 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 separate basis	2b	Yes	
c If "Yes," to line 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	2c	Yes	
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?	3a		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	3b		

Additional Data

Software ID: 17005876

Software Version: 2017v2.2

EIN: 95-6077327

Name: Sharp Healthcare

Form 990 (2017)

Form 990, Part III, Line 4a:

Sharp HealthCare operates a number of outpatient clinics throughout San Diego County which provide outpatient and urgent care services to the community. Total patient visits were 1,944,208 for the twelve months ended 9/30/2018.

Form 990, Part III, Line 4b:

Sharp HealthCare provides administrative support to its subsidiaries. Its general purpose is to promote healthcare through supporting and/or operating its subsidiaries.

Form 990, Part III, Line 4c:

See Community Benefit Report on Schedule O

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 (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
Michael W Murphy PRESIDENT & CEO SHC	30 0	X		X				1,970,609	0	112,282
Marilyn Brown VICE CHAIR	6 0	X		X				0	0	0
Lori Moore RN CHAIR	2 0	X		X				0	0	0
Julie Meier Wright SECRETARY	6 0	X		X				0	0	0
Derek Quackenbush TREASURER	2 0	X		X				0	0	0
Geoffrey Stiles MD DIRECTOR	15 0	X						361,000	0	16,424
David Grundstrom DIRECTOR	35 0	X						0	0	0
John Stanly Videen MD DIRECTOR	2 0	X						0	5,664	0
Walter Olsen MD DIRECTOR	8 0	X						0	29,400	0
Lou Smith DIRECTOR	40 0	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 (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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	Instructional Trustee	Officer	Key employee	Highest compensated employee	Former			
Dan Gensler DIRECTOR	10 0	X						0	0	0
Richard Freeman DIRECTOR	60 0	X						0	0	0
Deirdre Alpert DIRECTOR	50 0	X						0	0	0
Hugo Barrera MD DIRECTOR	20 100	X						0	14,910	0
Alan Bier MD DIRECTOR	50 0	X						0	0	0
Gary Cady DIRECTOR	20 0	X						0	0	0
Carol Gallagher DIRECTOR	10 0	X						0	0	0
William Geppert DIRECTOR	20 0	X						0	0	0
Tom Karlo DIRECTOR	40 0	X						0	0	0
Eugene Mitchell DIRECTOR	08 0	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 (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
Regina Petty DIRECTOR	4 0 0	X						0	0	0
Kenneth Roth MD DIRECTOR	4 0 0 0	X						0	12,000	0
Faye Wilson DIRECTOR	3 0 0	X						0	0	0
Robert Kelly DIRECTOR	5 0 0	X						0	0	0
Scott McMillin DIRECTOR	0 5 0	X						0	0	0
Michael Morton TREASURER	1 0 0	X						0	0	0
Gil Cabrera DIRECTOR	1 5 0	X						0	0	0
Mark Holmlund DIRECTOR	1 0 0	X						0	0	0
Craig Saffer MD DIRECTOR	2 0 0	X						650	0	0
James Smith III DIRECTOR	2 0 0	X						0	0	0

SCHEDULE A
(Form 990 or 990-EZ)

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
Sharp Healthcare

Employer identification number

95-6077327

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 12, check only one box)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ))
- 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 agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university _____
- 10 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)
- 11 An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
- 12 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
 - f Enter the number of supported organizations _____
 - g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170(b)(1)(A)(ix)

(Complete only if you checked the box on line 5, 7, 8, or 9 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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶		(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc (see instructions)					12	

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14	Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14	
15	Public support percentage for 2016 Schedule A, Part II, line 14	15	

- 16a 33 1/3% support test—2017.** 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
- b 33 1/3% support test—2016.** If the organization did not check a 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
- 17a 10%-facts-and-circumstances test—2017.** 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 VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization
- b 10%-facts-and-circumstances test—2016.** 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 VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization
- 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

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(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 VI.)						
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 section 501(c)(3) organization, check this box and **stop here** ►

Section C. Computation of Public Support Percentage

15	Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2016 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2016 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2017. 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—2016. 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 Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.		
	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.		
	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		
	10b		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test Answer (a) and (b) below.	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2017 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013.			
c From 2014.			
d From 2015.			
e From 2016.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2017 from Section D, line 7			
\$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2018. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2013.			
b Excess from 2014.			
c Excess from 2015.			
d Excess from 2016.			
e Excess from 2017.			

Additional Data

Software ID: 17005876

Software Version: 2017v2.2

EIN: 95-6077327

Name: Sharp Healthcare

Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

Facts And Circumstances Test

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.
▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017
Open to Public Inspection

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

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

Name of the organization Sharp Healthcare	Employer identification number 95-6077327
--	--

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 in Part IV (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) ▶ \$ _____
- 3 Volunteer hours for political campaign activities (see instructions) _____

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? Yes No
- 4a Was a correction made? Yes 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 function 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? Yes 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-
1				
2				
3				
4				
5				
6				

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)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

	(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)?	Yes		
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?	Yes		16,000
g Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		25,231
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	Yes		227,081
i Other activities?		No	
j Total Add lines 1c through 1i			268,312
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 carry over 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) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible 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

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference	Explanation
Schedule C, Part II-B, Line 1 DETAILED DESCRIPTION OF THE LOBBYING ACTIVITY	LOBBYING ACTIVITIES SHARP HEALTHCARE ATTEMPTS TO INFLUENCE LOCAL, STATE, AND NATIONAL LEGISLATION RELATED TO REIMBURSEMENT, REGULATORY REQUIREMENTS, AND ANY OTHER ISSUES THAT COULD POTENTIALLY AFFECT THE QUALITY AND/OR ABILITY TO EFFECTIVELY PROVIDE HEALTHCARE TO THE SAN DIEGO COMMUNITY
Schedule C, Part II-B, Line 1 DETAILED DESCRIPTION OF THE LOBBYING ACTIVITY	LOBBYING ACTIVITIES SHARP HEALTHCARE ATTEMPTS TO INFLUENCE LOCAL, STATE, AND NATIONAL LEGISLATION RELATED TO REIMBURSEMENT, REGULATORY REQUIREMENTS, AND ANY OTHER ISSUES THAT COULD POTENTIALLY AFFECT THE QUALITY AND/OR ABILITY TO EFFECTIVELY PROVIDE HEALTHCARE TO THE SAN DIEGO COMMUNITY

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements
▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047
2017
Open to Public Inspection

Name of the organization
Sharp Healthcare

Employer identification number
95-6077327

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of 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?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can 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?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Part II Conservation Easements. Complete if the organization answered "Yes" on 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 education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 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	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, 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 section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, 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" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), 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) Revenue included on 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 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 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" on 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 XIII and complete the following table
- | | Amount |
|--|--------|
| c Beginning balance | |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b** If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on 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	9,770,340	9,164,189	7,170,232	7,120,085	5,884,004
b Contributions	900,884	228,329	1,061,713	278,671	842,260
c Net investment earnings, gains, and losses	688,695	897,349	973,347	-207,524	470,902
d Grants or scholarships	12,285	13,500	11,103	21,000	77,081
e Other expenditures for facilities and programs		506,027	30,000		
f Administrative expenses					
g End of year balance	11,347,634	9,770,340	9,164,189	7,170,232	7,120,085

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶ 31 %
 - b** Permanent endowment ▶ 69 %
 - c** Temporarily restricted endowment ▶ 0 %
- The percentages on lines 2a, 2b, and 2c should equal 100%
- 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 | | No |
| (ii) related organizations | Yes | |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | Yes | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. 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		63,987,718		63,987,718
b Buildings		261,862,628	72,646,716	189,215,912
c Leasehold improvements		74,908,084	53,458,433	21,449,651
d Equipment		283,184,788	239,583,047	43,601,741
e Other		66,060,174	0	66,060,174
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				384,315,196

Part VII Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		

Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		

Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1) Rec fm Related Org for Alloc Tax Exempt Bond Balance	710,078,239
(2) CQI Premium Receivable	18,768,307
(3) Long-Term Assets	13,761,642
(4) Basis Swap	3,319,594
(5) Miscellaneous Receivables	2,239,814
(6) Synthetic Fixed Rate Swap	6,716,371
(7) Yield Curve Swap	0
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	754,883,967

Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	0
See Additional Data Table	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	2,592,413,890

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	1,632,760,644
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	39,821,576
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	0
e	Add lines 2a through 2d	2e	39,821,576
3	Subtract line 2e from line 1	3	1,592,939,068
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	1,425,177
b	Other (Describe in Part XIII)	4b	-5,365,557
c	Add lines 4a and 4b	4c	-3,940,380
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	1,588,998,688

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	1,597,634,635
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	0
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	1,597,634,635
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	1,425,177
b	Other (Describe in Part XIII)	4b	0
c	Add lines 4a and 4b	4c	1,425,177
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	1,599,059,812

Part XIII Supplemental Information

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, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
See Additional Data Table	

Additional Data

Software ID: 17005876
Software Version: 2017v2.2
EIN: 95-6077327
Name: Sharp Healthcare

Form 990, Schedule D, Part X, - Other Liabilities

1 (a) Description of Liability	(b) Book Value
Intercompany Payables	2,449,113,068
Capital Leases	47,432,658
Long-Term Workers Compensation	41,537,332
New Market Tax Credit Debt	0
CQI Retrospective Premium Payable	28,524,151
Deferred Rent Expense	18,032,785
Long-Term Pension Liability	1,794,220
Reserve for Malpractice	3,700,000
Mark to Market Swaps	1,476,653
Yield Curve Swap	793,570

Form 990, Schedule D, Part X, - Other Liabilities

1 (a) Description of Liability	(b) Book Value
Other Long-Term Liabilities	9,453

Supplemental Information

Return Reference	Explanation
Schedule D, Part V, Line 4 Intended uses of endowment funds	SHARP HEALTHCARE FOUNDATION HOLDS 13 BOARD DESIGNATED AND PERMANENT ENDOWMENTS FOR SHARP HEALTHCARE THAT ARE RESTRICTED FOR A VARIETY OF PURPOSES, SUCH AS REHABILITATION, NURSING EDUCATION AND SCHOLARSHIPS, CLINICAL EQUIPMENT AND TECHNOLOGY, AND MORE

Supplemental Information

Return Reference	Explanation
Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote	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 or 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, 2018 and 2017, no such assets or liabilities were recorded.

Supplemental Information

Return Reference	Explanation
Schedule D, Part XI, Line 4(b) Other revenues in form 990 not in audited financial statements	BOOK/TAX DIFFERENCE ON PARTNERSHIP - MRI - -87234 BOOK/TAX DIFFERENCE ON PARTNERSHIP - SHA RP/UCSD TRANSPLANT PROGRAM - -588444 BOOK/TAX DIFFERENCE ON PARTNERSHIP - SHARP NEXTGEN AC O LLC - -4836025 Capital Contributions - 146146

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
Sharp Healthcare

Employer identification number
95-6077327

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States
- Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	0	1			26,195,579
b Total from continuation sheets to Part I					0
c Totals (add lines 3a and 3b)	0	1			26,195,579

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ _____

3 Enter total number of other organizations or entities ▶ _____

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)* Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)* Yes No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation
Schedule F, Part I, Line 2 Procedures for monitoring use of grant funds	THE MANAGEMENT TEAM EVALUATES REQUESTS FOR CONTRIBUTIONS FROM OUTSIDE ORGANIZATIONS TAKING INTO ACCOUNT HOW THEY ALIGN WITH THE ORGANIZATION'S MISSION NO MONITORING IS DONE AFTER GRANTS ARE MADE

Return Reference	Explanation
Schedule F, Part I, Line 3(e) Schedule F, Part 1, Line 3(e)(1)	Payments for management of insurance captive services and insurance premium payments to captive Sharp HealthCare employees volunteered for humanitarian missions

Return Reference	Explanation
Schedule F, Part I, Line 3(e) Schedule F, Part 1, Line 3(e)(2)	Investments required to be held by offshore insurance captive

Return Reference	Explanation
Schedule F, Part I, Line 3(e) Schedule F, Part 1, Line 3(e)(3)	Participate in international Travel & health insurance conference Sharp HealthCare employees volunteered for humanitarian missions

Return Reference	Explanation
Schedule F, Part 1, Line 3(e) Schedule F, Part 1, Line 3(e)(4)	Provide community outreach programs promoting Sharp HealthCare's program for emergency evacuations Sharp HealthCare employees volunteered for humanitarian missions

Additional Data

Software ID: 17005876

Software Version: 2017v2.2

EIN: 95-6077327

Name: Sharp Healthcare

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean	0	1	Program Services	Part V	13,192,108
Central America and the Caribbean	0	0	Investments	Part V	12,940,397

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)	0	0	Program Services	See Part V	14,970
North America (Canada & Mexico only)	0	0	Program Services	See Part V	15,237

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
East Asia and the Pacific	0	0	Program Services	See Part V	9,774
Middle East and North Africa	0	0	Program Services	SHARP HEALTHCARE EMPLOYEES VOLUNTEER FOR HUMANITARIAN MISSIONS	3,119

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South America	0	0	Program Services	SHARP HEALTHCARE EMPLOYEES VOLUNTEER FOR HUMANITARIAN MISSIONS	8,608
Sub-Saharan Africa	0	0	Program Services	SHARP HEALTHCARE EMPLOYEES VOLUNTEER FOR HUMANITARIAN MISSIONS	11,366

**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," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
Sharp Healthcare

Employer identification number
95-6077327

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 Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC 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 noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

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

3 Enter total number of other organizations listed in the line 1 table ▶ _____ 4

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22
Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
Schedule I, Part I, Line 2 Procedures for monitoring use of grant funds	THE MANAGEMENT TEAM EVALUATES REQUESTS FROM OUTSIDE ORGANIZATIONS TAKING INTO ACCOUNT HOW THEY ALIGN WITH THE ORGANIZATION'S MISSION NO OUTSIDE MONITORING IS DONE AFTER GRANTS ARE MADE

Additional Data

Software ID: 17005876
Software Version: 2017v2.2
EIN: 95-6077327
Name: Sharp Healthcare

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC 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
SAN DIEGO REGIONAL CHAMBER OF COMMERCE 402 WEST BROADWAY SUITE 1000 SAN DIEGO, CA 92101	95-1184680	501(C)(6)	50,000				SPONSORSHIP
YWCA OF SAN DIEGO 1012 C STREET San Diego, CA 921015544	95-1661119	501(C)(3)	20,000				IN THE COMPANY OF WOMEN - 20TH ANNIVERSARY SPONSOR

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC 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
DOWNTOWN SAN DIEGO PARTNERSHIP 401 B STREET SUITE 100 San Diego, CA 92101	95-1729734	501(C)(6)	15,000				FAMILY REUNIFICATION PROGRAM SPONSOR
SAN DIEGO REGIONAL ECONOMIC DEVELOPMENT CORP 530 B STREET SUITE 700 San Diego, CA 92101	95-2406199	501(C)(6)	15,000				ANNUAL SPONSORSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC 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
CAHHSCHA 1215 K STREET SUITE 800 VOLUNTEER SERVICES DEPARTMENT SACRAMENTO, CA 95814	94-1205908	501(C)(6)	10,000				CALIFORNIA HOSPITAL VOLUNTEER CONFERENCE SPONSORSHIP
FEEDING AMERICA SAN DIEGO 9455 WAPLES STREET SUITE 135 San Diego, CA 92121	26-0457477	501(C)(3)	10,000				MONTH OF A MILLION MEALS CAMPAIGN SPONSOR

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC 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
AMERICAN HEART ASSOCIATION 9404 GENESEE AVENUE SUITE 240 LA JOLLA, CA 92037	13-5613797	501(C)(3)	10,000				2018 SAN DIEGO HEART BALL SPONSOR

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
Sharp Healthcare

Employer identification number
95-6077327

Part I Questions Regarding Compensation

	Yes	No								
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input checked="" type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input checked="" type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input checked="" type="checkbox"/> Tax indemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input checked="" type="checkbox"/> Tax indemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
<p>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 of the expenses described above? If "No," complete Part III to explain</p>	1b Yes									
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?</p>	2 Yes									
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> Compensation committee</td> <td><input checked="" type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input checked="" type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract	<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input checked="" type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract									
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<p>4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization</p> <p>a Receive a severance payment or change-of-control payment?</p> <p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III</p>	4a	No								
	4b	Yes								
	4c	No								
<p>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p> <p>5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III</p>	5a	No								
	5b	No								
<p>6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III</p>	6a	No								
	6b	No								
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III</p>	7	No								
<p>8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III</p>	8	No								
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9									

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
Schedule J, Part I, Line 1a Tax indemnification and gross-up payments	Non-management staff were paid superior performance awards which were grossed up so the net payment would be a specified amount based on each staff member's productive hours worked during the year. The net payments per staff member ranged from \$100 to \$350.
Schedule J, Part I, Line 1a Health or social club dues or initiation fees	MONTHLY DUES PAID TO THE UNIVERSITY CLUB FOR MICHAEL MURPHY, PRESIDENT/CEO AND DANIEL GROSS, EVP HOSPITAL OPERATIONS. THE UNIVERSITY CLUB MEMBERSHIPS ARE USED FOR BUSINESS PURPOSES.
Schedule J, Part I, Line 4b Supplemental nonqualified retirement plan	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.

Additional Data

Software ID: 17005876
Software Version: 2017v2.2
EIN: 95-6077327
Name: Sharp Healthcare

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

(A) Name and Title		(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 in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 Michael W Murphy	(i)	1,467,379	420,659	82,571	91,114	21,168	2,082,891	0
PRESIDENT & CEO SHC	(ii)	0	0	0	0	0	0	0
1 Geoffrey Stiles MD	(i)	281,764	43,960	35,276	14,829	1,595	377,424	0
DIRECTOR	(ii)	0	0	0	0	0	0	0
2 Ann Pumpian	(i)	425,789	182,916	12,286	7,614	6,167	634,772	0
FORMER SVP & CFO SHC	(ii)	0	0	0	0	0	0	0
3 Staci L Dickerson	(i)	519,980	67,252	33,375	13,222	14,421	648,250	0
SVP & CFO SHC	(ii)	0	0	0	0	0	0	0
4 Carlisle C Lewis III	(i)	742,218	167,169	32,878	43,302	16,005	1,001,572	0
SVP LEGAL/HR	(ii)	0	0	0	0	0	0	0
5 Daniel L Gross	(i)	1,094,009	308,939	69,525	56,727	16,033	1,545,233	0
EVP HOSPITAL OPS SHC	(ii)	0	0	0	0	0	0	0
6 Timothy B Smith	(i)	707,740	149,229	31,631	0	20,165	908,765	0
CEO SMH	(ii)	0	0	0	0	0	0	0
7 Patricia Khaleghi	(i)	490,268	102,358	36,991	8,818	20,448	658,883	0
CEO SHC SPECIALTY HOSP	(ii)	0	0	0	0	0	0	0
8 Susan Stone	(i)	418,090	95,820	11,605	8,301	14,651	548,467	0
CEO SCHHC	(ii)	0	0	0	0	0	0	0
9 William S Evans	(i)	680,753	112,285	20,981	0	20,946	834,965	0
CEO GHC	(ii)	0	0	0	0	0	0	0
10 Pablo Velez-Carrillo	(i)	560,989	106,098	43,137	5,397	9,402	725,023	0
CEO SCVMC	(ii)	0	0	0	0	0	0	0
11 Kenneth Lawonn	(i)	548,257	117,014	28,586	0	15,461	709,318	0
SVP INFO SYSTEMS	(ii)	0	0	0	0	0	0	0
12 Anastasia Bani	(i)	537,113	121,971	29,217	11,573	20,568	720,442	0
CEO SRS	(ii)	0	0	0	0	0	0	0
13 William Littlejohn	(i)	384,374	87,151	42,994	17,373	20,296	552,188	0
SVP CEO FOUNDATIONS	(ii)	0	0	0	0	0	0	0
14 Alison Fleury	(i)	446,080	100,832	38,243	26,154	20,470	631,779	0
SVP BUSINESS DEV SHC	(ii)	0	0	0	0	0	0	0
15 Lynne Milgram	(i)	419,057	92,694	48,725	24,257	9,346	594,079	0
CMO SCMG	(ii)	0	0	0	0	0	0	0
16 Paul Durr	(i)	459,417	107,442	21,105	9,786	20,451	618,201	0
CEO-SCMG	(ii)	0	0	0	0	0	0	0
17 Diane Lofgren	(i)	401,139	89,330	24,007	0	12,821	527,297	0
CHIEF MARKETING OFFICER	(ii)	0	0	0	0	0	0	0
18 Amy Adome	(i)	377,997	79,818	19,097	0	8,928	485,840	0
SVP CLINICAL EFFECTIVENESS	(ii)	0	0	0	0	0	0	0

Schedule K (Form 990)

Supplemental Information on Tax-Exempt Bonds

OMB No 1545-0047

2017

Open to Public Inspection

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.**
 ▶ **Attach to Form 990.**
 ▶ **Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.**

Department of the Treasury
 Internal Revenue Service
 Name of the organization
 Sharp Healthcare

Employer identification number
 95-6077327

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
							Yes	No	Yes	No	Yes	No
A	ABAG FINANCE AUTHORITY FOR NONPROFIT CORPORATIONS	94-3130123	00037CNR7	02-12-2009	60,000,000	SEE PART VI		X		X		X
B	California Public Finance Authority	47-4447476	13057EBE3	12-28-2017	306,856,245	SEE PART VI		X		X		X
C	ABAG FINANCE AUTHORITY FOR NONPROFIT CORPORATIONS	94-3130123	00037CPN4	09-02-2009	99,880,000	SEE PART VI		X		X		X
D	ABAG FINANCE AUTHORITY FOR NONPROFIT CORPORATIONS	94-3130123	000000000	12-16-2010	30,000,000	SEE PART VI		X		X		X

Part II Proceeds

		A		B		C		D	
1	Amount of bonds retired	34,280,000						6,830,000	
2	Amount of bonds legally defeased								
3	Total proceeds of issue	60,000,000		308,168,424		99,880,000		30,305,092	
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrows			94,860,214					
7	Issuance costs from proceeds								
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds			136,665,118				30,305,092	
11	Other spent proceeds	60,000,000				99,880,000			
12	Other unspent proceeds			76,643,093					
13	Year of substantial completion								
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?	X			X	X			X
15	Were the bonds issued as part of an advance refunding issue?		X	X			X		X
16	Has the final allocation of proceeds been made?	X			X	X		X	
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X	

Part III Private Business Use

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X		X		X
2	Are there any lease arrangements that may result in private business use of bond-financed property?	X		X		X		X	

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?	X		X		X			X
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X		X		X			
c Are there any research agreements that may result in private business use of bond-financed property?	X		X		X		X	
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?	X		X		X		X	
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶		0 %				2 31 %		0 9 %
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶		0 %				0 %		0 %
6 Total of lines 4 and 5		0 %		0 %		2 31 %		0 9 %
7 Does the bond issue meet the private security or payment test?		X		X	X			X
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X		X		X
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?	X		X		X		X	

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X		X		X
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X	X			X		X
b Exception to rebate?		X		X		X		X
c No rebate due?	X				X		X	
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?	X		X		X		X	
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X	X			X
b Name of provider					CITIBANK NA			
c Term of hedge						2120 %		
d Was the hedge superintegrated?						X		
e Was the hedge terminated?						X		

Part IV Arbitrage (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		X		X
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?		X						
6 Were any gross proceeds invested beyond an available temporary period?		X		X		X		X
7 Has the organization established written procedures to monitor the requirements of section 148?	X		X		X		X	

Part V Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X		X		X		X	

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

Return Reference	Explanation
Schedule K, Part I PART I, ENTITY 1, LINE A	The purpose of this bond issuance is to refund the Series 2003A&B Auction Rate Securities

Return Reference	Explanation
Schedule K, Part I PART I, ENTITY 1, LINE B	The purpose of this bond issuance is to provide funds for capital improvements, capacity expansion, and building renovations at four hospital entities, to purchase major equipment, and to advance refund outstanding 2009B bonds

Return Reference	Explanation
Schedule K, Part I PART I, ENTITY 1, LINE C	The purpose of this bond issuance is to refund the Series 2007A&B Statewide Easy Equipment Program (SWEET) bonds

Return Reference	Explanation
Schedule K, Part I PART I, ENTITY 1, LINE D	The purpose of this bond issuance is to finance the acquisition, construction, equipping and improvement of facilities at four hospital entities

Return Reference	Explanation
Schedule K, Part I PART I, ENTITY 2, LINE A	The purpose of this bond issuance is to refund the Series 2001A Revenue bonds and to partially refund the 1998 County of San Diego Certificates of Participation bonds

Return Reference	Explanation
Schedule K, Part I PART I, ENTITY 2, LINE B	The purpose of the bond issuance is to refund the 1998 County of San Diego Certificates of Participation bonds

Return Reference	Explanation
Schedule K, Part I PART I, ENTITY 2, LINE C	The purpose of this bond issuance is to (i) finance the acquisition, renovation, construction, improvements, furnishing and equipping of facilities at four hospital entities and (ii) refund all of the Authority's outstanding Revenue Bonds (San Diego Hospital Association), Series 2003C

Return Reference	Explanation
Schedule K, Part II, Line 3 Tax Exempt Bond Issue 2010A, 2014A, & 2017 A,B,C	Total proceeds are different than issue price due to investment earnings

Return Reference	Explanation
Schedule K, Part II, Line 13 Tax Exempt Bond Issue 2010A	Sharp Memorial Central and South Tower Retrofit - project still ongoing Sharp Mary Birch Expansion and Remodel - 2012 Chiller piping at Grossmont Hospital - 2011 Sharp Chula Vista Emergency Department Expansion - 2012 Sharp Chula Vista Cancer Center - 2012

Return Reference	Explanation
Schedule K, Part III, Line 4 Tax Exempt Bond Issue 2014A	Project not substantially complete as of 9/30/2018

Return Reference	Explanation
Schedule K, Part IV, Line 2c COLUMN A	Issuer name ABAG FINANCE AUTHORITY FOR NONPROFIT CORPORATIONS The calculation for computing no rebate due was performed on 06/13/2014

Return Reference	Explanation
Schedule K, Part IV, Line 2c COLUMN C	Issuer name ABAG FINANCE AUTHORITY FOR NONPROFIT CORPORATIONS The calculation for computing no rebate due was performed on 06/13/2014

Return Reference	Explanation
Schedule K, Part IV, Line 2c COLUMN D	Issuer name ABAG FINANCE AUTHORITY FOR NONPROFIT CORPORATIONS The calculation for computing no rebate due was performed on 12/16/2015

Return Reference	Explanation
Schedule K, Part IV, Line 2c COLUMN A	Issuer name ABAG FINANCE AUTHORITY FOR NONPROFIT CORPORATIONS The calculation for computing no rebate due was performed on 06/13/2014

Return Reference	Explanation
Schedule K, Part IV, Line 2c COLUMN B	Issuer name ABAG FINANCE AUTHORITY FOR NONPROFIT CORPORATIONS The calculation for computing no rebate due was performed on 06/13/2014

**Schedule K
(Form 990)**

Supplemental Information on Tax-Exempt Bonds

OMB No 1545-0047

2017

**Open to Public
Inspection**

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.**
 ▶ **Attach to Form 990.**
 ▶ **Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.**

Department of the Treasury
Internal Revenue Service
Name of the organization
Sharp Healthcare

Employer identification number
95-6077327

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
							Yes	No	Yes	No	Yes	No
A	ABAG FINANCE AUTHORITY FOR NONPROFIT CORPORATIONS	94-3130123	00037CRG7	02-10-2011	78,140,374	SEE PART VI		X		X		X
B	ABAG FINANCE AUTHORITY FOR NONPROFIT CORPORATIONS	94-3130123	00037GSJO	01-24-2012	51,889,934	SEE PART VI		X		X		X
C	ABAG FINANCE AUTHORITY FOR NONPROFIT CORPORATIONS	94-3130123	00037GVN7	02-12-2014	166,110,472	SEE PART VI		X		X		X

Part II Proceeds

		A		B		C		D	
1	Amount of bonds retired	22,815,000		3,730,000		5,300,000			
2	Amount of bonds legally defeased								
3	Total proceeds of issue	78,140,374		51,889,934		168,004,536			
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrows								
7	Issuance costs from proceeds		3,642						
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds					113,943,588			
11	Other spent proceeds	78,136,732		51,889,934		22,445,769			
12	Other unspent proceeds					31,615,179			
13	Year of substantial completion								
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?	X		X		X			
15	Were the bonds issued as part of an advance refunding issue?		X		X		X		
16	Has the final allocation of proceeds been made?	X		X			X		
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X			

Part III Private Business Use

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X		X		
2	Are there any lease arrangements that may result in private business use of bond-financed property?	X		X		X			

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?	X		X		X			
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X		X		X			
c Are there any research agreements that may result in private business use of bond-financed property?	X		X		X			
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?	X		X		X			
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶		0 %		0 %		0 %		
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶		0 %		0 %		0 %		
6 Total of lines 4 and 5		0 %		0 %		0 %		
7 Does the bond issue meet the private security or payment test?		X		X		X		
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X		X		
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X		X		X			

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X		X		
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X		X		X		
b Exception to rebate?		X		X		X		
c No rebate due?	X		X		X			
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?		X		X		X		
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								

Part IV Arbitrage (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		X		
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X		X		X		
7 Has the organization established written procedures to monitor the requirements of section 148?	X		X		X			

Part V Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X		X		X			

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization
Sharp Healthcare

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Employer identification number

95-6077327

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part III, Line 4c Community Benefit Report	<p>Sharp HealthCare Community Benefit Plan and Report Fiscal Year 2018 Section 1 An Overview of Sharp HealthCare For more than 60 years, Sharp HealthCare has made a difference in the lives of San Diegans As a not-for-profit organization, Sharp places great value on the health and wellness of our expanding community In everything we do, we are committed to making health care better for those we serve - Michael Murphy, President and Chief Executive Officer, Sharp HealthCare Sharp HealthCare (Sharp) is an integrated, regional health care delivery system based in San Diego, California The Sharp system includes four acute care hospitals, three specialty hospitals, three affiliated medical groups, 29 medical centers , six urgent care centers, 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 also offers individual and group Health Maintenance Organization coverage through Sharp Health Plan (SHP) Serving a population of approximately 3.3 million in San Diego County (SDC), as of September 30, 2018, Sharp is licensed to operate 2,084 beds and has more than 2,700 Sharp-affiliated physicians and 18,000 employees</p> <p>FOUR ACUTE CARE HOSPITALS Sharp Chula Vista Medical Center (343 licensed beds) The largest provider of health care services in SDC's fast-growing 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 SCVMC is home to the region's most comprehensive heart program, services for orthopedic care, cancer treatment, women's and infant's services, and the only bloodless medicine and surgery center in SDC Sharp Coronado Hospital and Healthcare Center (181 licensed beds) Sharp Coronado Hospital and Healthcare Center (SCHHC) provides services that include acute, subacute and long-term care, liver care, rehabilitation therapies, orthopedics, and hospice and emergency services Sharp Grossmont Hospital (524 licensed 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 SDC SGH is known for outstanding programs in heart care, oncology, orthopedics, rehabilitation, stroke care and women's health Sharp Memorial Hospital (656 licensed beds) A regional tertiary care leader, Sharp Memorial Hospital (SMH) provides specialized care in cancer treatment, orthopedics, organ transplantation, bariatric surgery, heart care and rehabilitation SMH also houses the county's largest emergency and trauma center</p> <p>THREE SPECIALTY CARE HOSPITALS Sharp Mary Birch Hospital for Women & Newborns (206 licensed beds) A freestanding women's hospital specializing in labor and delivery services, high-risk pregnancy, obstetrics, gynecology, gynecologic oncology and</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
<p>Form 990, Part III, Line 4c Community Benefit Report</p>	<p>neonatal intensive care, Sharp Mary Birch Hospital for Women & Newborns (SMBHWN) delivers more babies than any other hospital in California Sharp Mesa Vista Hospital (158 licensed beds) As the most comprehensive mental health hospital in San Diego, Sharp Mesa Vista Hospital (SMV) provides behavioral health services to treat anxiety, depression, substance abuse, eating disorders, bipolar disorder and more for patients of all ages Sharp McDonald Center (16 licensed beds) Sharp McDonald Center (SMC) is the only medically supervised substance abuse recovery center in SDC Offering the most comprehensive hospital-based treatment program in San Diego, SMC provides services such as addiction treatment, medically supervised detoxification and rehabilitation, day treatment, outpatient and inpatient programs, and aftercare Collectively, the operations of SMH, SMBHWN, SMV and SMC are reported under the not-for-profit public benefit corporation of SMH and are referred to herein as the Sharp Metropolitan Medical Campus (SMMC) The operations of Sharp Rees-Stealy Medical Centers (SRSMC) are included under the not-for-profit public benefit corporation of Sharp, the parent organization The operations of SGH are reported under the not-for-profit public benefit corporation of Grossmont Hospital Corporation The operations of Sharp HospiceCare are reported under SGH 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 patients' 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, safety, service, innovation and excellence Sharp will be recognized by employees, physicians, patients and families, 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 of those it serves Values * Integrity - Trustworthy, Respectful, Sincere, Authentic, Committed to Organizational Mission and Values * Caring - Compassionate, Communicative, Service-Oriented, Dedicated to Teamwork and Collaboration, Serves Others Above Self, Celebrates Wins, Embraces Diversity * Safety - Reliable, Competent, Inquiring, Unwavering, Resilient, Transparent, Sound Decision Maker * Innovation - Creative, Drives for Continuous Improvement, Initiates Breakthroughs, Develops Self, Willing to Accept New Ideas and Change * Excellence - Quality-Focused, Compelled by Operational and Service Excellence, Cost Effective, Accountable Culture The Sharp Experience For more than 19 years, Sharp has</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part III, Line 4c Community Benefit Report	<p>s 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 purposeful, worthwhile work and creating the kind of health care people 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 Supported by its extraordinary culture, 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 <p>Through this transformation, Sharp continues 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 60 years Pillars of Excellence In support of Sharp's organizational commitment to transform the health care experience, Sharp's Pillars of Excellence serve as a guide for its team members, providing framework and alignment for everything Sharp does In 2014, Sharp made an important decision regarding these pillars as part of its continued journey toward excellence</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part III, Line 4c Community Benefit Report	<p>Each year, Sharp incorporates cycles of learning into its strategic planning process. In 2014, Sharp's Executive Steering and Board of Directors enhanced Sharp's safety focus, further driving the organization's emphasis on its culture of safety and incorporating the commitment to become a High Reliability Organization (HRO) in all aspects of the organization. At the core of HROs are five key concepts: * Sensitivity to operations * A reluctance to simplify * Preoccupation with failure * Deference to expertise * Resilience. Applying high-reliability concepts in an organization begins when leaders at all levels start thinking about how the care they provide could improve. It begins with a culture of safety. With this learning, Sharp is a seven-pillar organization - Quality, Safety, Service, People, Finance, Growth and Community. The foundational elements of Sharp's strategic plan have been enhanced to emphasize Sharp's desire to do no harm. This strategic plan continues Sharp's transformation of the health care experience, focusing on safe, high-quality and efficient care provided in a caring, convenient, cost-effective and accessible manner. The seven 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 exceed customer expectations. Safety: Keep patients, employees and physicians safe and free from harm. Service: Create exceptional experiences at every touch point for patients and families, enrollees, physicians, partners and team members. People: Create a values-driven culture that attracts, retains and promotes the best people who are committed to Sharp's mission and vision. Finance: Achieve financial results to ensure Sharp's ability to deliver on its mission and vision. Growth: Achieve net revenue growth to enhance market position, sustain infrastructure improvements and support innovative development. Community: Be an exemplary public citizen by improving the health of our community and environment. <p>Awards: Below please find a selection of recognitions Sharp has received in recent years. In 2013, 2014, 2016 and 2017, Sharp was recognized as one of the "World's Most Ethical (WME) Companies" by the Ethisphere Institute, the leading business ethics think tank. WME companies are those that truly embrace ethical business practices and demonstrate industry leadership, forcing peers to follow suit or fall behind. Sharp was ranked No. 45 out of 500 large employers on Forbes' 2017 America's Best Employers listing. In 2016, Sharp ranked No. 16 and received the No. 2 spot on the newcomer's list. In 2018, Forbes ranked Sharp No. 25 on its first-ever list of Best Employers for Women and No. 52 on its list of Best Employers for Diversity. Becker's Hospital Review recognized Sharp as one of "150 Top Places to Work in Healthcare" in 2017 and 2018. The list recognizes hospitals, health systems and/or</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
<p>Form 990, Part III, Line 4c Community Benefit Report</p>	<p>ganizations committed to fulfilling missions, creating outstanding cultures and offering c ompetitive benefits to their employees From 2013 to 2018, Sharp ranked in the top 10 of t he large employers category as one of the "Best Places to Work" for information technology professionals by the International Data Group's Computerworld survey The list is compile d by evaluating a company's benefits, training, retention, career development, average sal ary increases, employee surveys, workplace morale and more In 2015, 2017 and 2018, Sharp ranked first for "San Diego's Best Hospital Group" in the annual San Diego Union-Tribune R eaders Poll In 2017, SMH was ranked "San Diego's Best Hospital" and, in 2018, Sharp's Wei ght Management Programs ranked first for "Best Weight Loss Clinic/Counseling " Sharp Commu nity Medical Group (SCMG) was ranked "San Diego's Best Medical Group" from 2015 to 2018 S harp Rees-Stealy Medical Group (SRSMG) was ranked "Best Hearing Aid Store" in 2018 for the second year in a row, as well as first for "Best Audiologist," second for "Best Laser Eye Center" and third for "Best Pharmacy " In 2016 and 2017, SMBHWN was named to The Leapfrog Group's Top Hospitals list, which recognizes facilities that meet the highest standards o f patient safety, care quality and efficiency In 2016, SMH was also recognized as a Top H ospital SGH, SMH and SMBHWN received MAGNET recognition by the American Nurses Credential ing Center (ANCC) The MAGNET Recognition Program is the highest level of honor bestowed b y the ANCC and is recognized nationally as the gold standard in nursing excellence SGH fi rst received the designation in 2006, and was most recently re-designated in 2017 SMBHWN received its current designation in 2015 SMH was first designated in 2008, and received i ts most recent re-designation in 2018 Sharp was named one of the nation's "Most Wired" he alth care systems from 2012 to 2018 by Hospitals & Health Networks magazine's 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 Planetree is a coalition of more than 80 hospitals worldwide that are committed to improving medical care from the patient' s perspective SCHHC became a Designated Planetree Person-Centered Hospital in 2007, and w as re-designated in 2017 for the fourth consecutive time Additionally, in 2014, SCHHC ach ieved Planetree Designation with Distinction for its leadership and innovation in patient- centered care SMH became a Planetree Person-Centered Hospital in 2012 and achieved Planet ree Designation with Distinction in 2014 In 2015, SMH was re-designated as a Planetree Pe rson-Centered Hospital SCVMC joined SCHHC and SMH as a Designated Planetree Person-Center ed Hospital in 2014, and was re-designated in 2018 In addition, Planetree awarded SGH the Gold Certification for Excellence in Person-Centered Care in 2018 SCHHC and SCVMC receiv ed Energy Star (ES) designatio</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
<p>Form 990, Part III, Line 4c Community Benefit Report</p>	<p>n from the U S Environmental Protection Agency (EPA) for outstanding energy efficiency B uildings that receive ES certification use an average of 40 percent less energy than other buildings and release 35 percent less carbon dioxide into the atmosphere SCHHC first ear ned ES certification in 2007, and SCVMC was first certified in 2009 Both entities were mo st recently re-certified in 2018 San Diego Gas & Electric (SDG&E) named Sharp the 2017 Gr and Energy Champion at its annual Energy Showcase Awards Sharp was recognized for making tremendous strides in reducing its consumption of electricity and natural gas, and in prom oting energy-saving techniques to the community Sharp received the Environmental Stewards hip Award in the large business category from the Better Business Bureau (BBB), serving Sa n Diego, Orange and Imperial counties, as part of BBB's 2017 Torch Awards The award recog nizes businesses that increase efforts toward a more sustainable footprint and green initi atives Sharp was named the 2017 Outstanding Recycling Program by California Resource Reco very Association (CRRRA) - California's statewide recycling association - for its innovativ e waste-minimization initiatives As the oldest and one of the largest nonprofit recycling organizations in the country, CRRRA is dedicated to achieving environmental sustainability in and beyond California through zero waste strategies, including product stewardship, wa ste prevention, reuse, recycling and composting Sharp was one of nine awardees in San Die go to receive a 2018 EMIES UnWasted Food Award by the San Diego Food System Alliance for i ts collaboration as an innovator and early adopter with upstream "unusual but usable" proc urement, soup stock program, organic gardens, animal feed and composting Sharp was also r ecognized in 2016, for developing best practices in waste prevention, composting, recyclin g, food donation and source reduction efforts in partnership with the Sodexo Food and Nutr ition team In 2016, Sharp ranked third on San Diego Business Journal's list of Healthiest Companies The Healthiest Companies list honors those organizations that have created a s upportive environment for their employees and fostered a work/life balance for their famil ies In 2016, Sharp Best Health received the American Heart Association (AHA) Fit-Friendly Worksites Honor Roll award (Gold Category) for the fourth consecutive year, which recogni zes employers that promote a culture of health and physical activity in the workplace or c ommunity SRSMG was recognized by the Centers for Disease Control and Prevention (CDC) as a 2017 Million Hearts Hypertension Control Champion for achieving blood pressure control f or at least 70 percent of its adult patients with hypertension</p>

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Return Reference	Explanation
<p>Form 990, Part III, Line 4c Community Benefits Report</p>	<p>From 2013 to 2018, the Press Ganey organization recognized multiple Sharp entities with Guardian of Excellence Awards. Based on one year of data, this designation recognizes recipients that reach the 95th percentile for patient satisfaction, employee engagement, physician engagement surveys or clinical quality. Awarded Sharp entities in the employee engagement category included SCVMC, SCHHC, SGH, SMBHWN, SMH, SMH Outpatient Pavilion (OPP), SMV, Sharp HospiceCare, SRSMG, SCMG and Sharp Home Health, while SMH, SMH OPP and SMBHWN have been awarded for Patient Experience and SCHHC, SMBHWN and SMV have received awards for Physician Engagement. Press Ganey also recognized multiple Sharp entities with the Pinnacle of Excellence Award (formerly named the Beacon of Excellence Award). This award recognizes the top three performing health care organizations that have maintained consistently high levels of excellence over three years in the categories of Patient Experience, Employee Engagement, Physician Engagement and Clinical Quality Performance. In 2013 as well as 2015 through 2017, Press Ganey recognized SMH for patient experience. From 2013 to 2015, Sharp was recognized for Employee Engagement. In 2013, SCHHC and SMV were recognized for Physician Engagement. SHP has maintained a National Committee for Quality Assurance's (NCQA) Private Health Insurance Plan Rating of 4.5 out of 5 each year since 2016, making it one of the highest-rated health plans in the nation. SHP has also maintained the NCQA's highest level "Excellent" Accreditation status for service and clinical quality each year from 2013 to 2018. The NCQA awards accreditation status based on compliance with rigorous requirements and performance on Healthcare Effectiveness Data and Information Set and Consumer Assessment of Healthcare Providers and Systems measures. Covered California is California's official health insurance marketplace, offering individuals and small businesses the ability to purchase health coverage at federally subsidized rates. SHP earned a five-star rating - the highest possible - in Covered California's 2018 Coverage Year Quality Ratings in the categories of "Summary Quality Rating," "Getting the Right Care" and "Plan Services for Members." America's Physician Groups (APG) is a professional association, representing over 300 medical groups, independent practice associations, and integrated health care systems across the nation. APG has awarded its highest level of distinction - "Elite Status" - to SCMG and SRSMG each year from 2010 to 2018. The Women's Choice Award is a symbol of excellence in customer experience awarded by the collective voice of women. In 2018, SGH received the Women's Choice Award as one of America's Best Breast Centers, Best Stroke Centers and Best Hospitals for Heart Care. The Women's Choice Award also recognized SMH and SMBHWN in 2018 among America's Best Hospitals for Bariatric Surgery, Cancer Care, Obstetrics and Patient Experience, as well as among</p>

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<p>Form 990, Part III, Line 4c Community Benefits Report</p>	<p>Research Sharp Center for Research Innovation is critical to the future of health care. The Sharp Center for Research supports innovation through its commitment to protecting research participants and promoting high quality research initiatives that provide valuable knowledge to the San Diego health care community and positively impact patients and community members. The Sharp Center for Research includes the Human Research Protection Program (HRPP), which includes the Institutional Review Board (IRB) and the Outcomes Research Institute (ORI) Human Research Protection Program and Institutional Review Board. The Sharp Center for Research is accredited by the Association for the Accreditation of Human Research Protection Programs (AAHRPP). This accreditation acts as a public affirmation of the HRPP's commitment to following rigorous standards for ethics, quality and protection for human research. To date, Sharp is the only health system in SDC to receive accreditation from the AAHRPP. The Center for Research's HRPP is responsible for the ethical and regulatory compliant oversight of research conducted at Sharp and includes three components: the Sharp organization, the researchers and the IRB. As one of the key components of the HRPP, the IRB seeks to promote a culture of safety and respect for those participating in research for the greater good of the community. All proposed entity research studies with human participants must be reviewed by the IRB in order to protect participant safety and maintain responsible research conduct. In FY 2018, a dedicated IRB committee of 18 - including physicians, nurses, pharmacists and non-scientists - devoted hundreds of hours to the review and analysis of both new and ongoing research studies. Research at Sharp is conducted on all clinical phases of drug and device development, and the populations studied span the life cycle - from newborns to older adults. These clinical trials increase scientific knowledge and enable health care providers to assess the safety and effectiveness of new treatments. At any given time, Sharp participates in approximately 250 clinical trials covering many therapeutic areas, including behavioral health, emergency care, infectious disease, neonatal, heart and vascular, kidney, liver, neurology, orthopedics and oncology - the latter of which comprises the largest share of Sharp's clinical trials. The HRPP educates and supports researchers across Sharp as well as the broader San Diego health and research communities regarding the protection of human research participants. As part of its mission, the Center for Research hosts quarterly meetings on relevant educational topics for community physicians, psychologists, research nurses, study coordinators and students throughout San Diego. The FY 2018 quarterly meetings included the following presentations: Research Community Outreach, Completing Subject Enrollment Logs and Attestation Reports, Reporting Deviations in Research Protocol, Clin</p>

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Form 990, Part III, Line 4c Community Benefits Report	<p>pounds of medical surplus out of local landfills At six events in November and January, 35 SLAH volunteers joined the Greening for Good project to evaluate, sort, label and prepare medical materials for shipment The Special Olympics Southern California - San Diego County program offers free, year-round sports training and competition for children and adults with intellectual disabilities In October 2017, 18 SLAH volunteers supported the program's Regional Fall Games at the Rancho Bernardo Recreation Center Volunteers offered encouragement to participants by serving as "high-fivers" and assisted with the awards ceremony Also in October, 17 SLAH volunteers assisted with scorekeeping, announcing awards and placing medals on the athletes at the Special Olympics 2017 Regional Bowling Tournament held at Parkway Bowl in El Cajon In May, five SLAH volunteers supported the 2018 Annual Spring Games at Carlsbad High School Volunteers served as timers and scorekeepers during the bocce competition, cheered on the athletes and participated in the awards ceremonies In addition to building homes in partnership with local people in need, San Diego Habitat for Humanity operates three ReStore retail centers with a wide variety of new or gently used building materials and home furnishings for public purchase The ReStore centers provide affordable merchandise to customers while helping fund the construction of Habitat for Humanity homes throughout SDC On five days in November, February, April, August and September, 40 volunteers organized donated items and took inventory of stock for the Kearny Mesa and National City ReStore retail centers SLAH participated in Stand Down for Homeless Veterans , an event sponsored by the Veterans Village of San Diego, to provide community-based social services to veterans without a permanent residence Over 10 days in May, June and July, approximately 90 volunteers sorted and organized clothing donations as well as set up and worked in the event's clothing tent In addition, approximately 30 clinical volunteers - including Sharp-affiliated physicians and Sharp nurses, podiatry technicians, pharmacists and licensed pharmacy technicians - provided medical and pharmaceutical services More than 700 veterans were served through the 2018 Stand Down for Homeless Veterans events The Life Rolls On Foundation is dedicated to improving the quality of life for young people affected by SCI Through the organization's award-winning program, They Will Surf Again, paraplegic and quadriplegic community members can experience mobility through surfing with support from adaptive equipment and volunteers In September, 80 SLAH volunteers assisted They Will Surf Again with event set-up and breakdown, registration, equipment distribution, lunch service and helping surfers on land and in shallow water</p>

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<p>Form 990, Part III, Line 4c Community Benefits Report</p>	<p>In October 2017, 10 SLAH volunteers joined I Love a Clean San Diego and the City of Chula Vista for the 15th annual Beautify Chula Vista Day. Volunteers met at Rice Canyon in Discovery Park and assisted with watering and care of recent plantings, litter removal and additional projects to make the canyon shine. SLAH also partnered with I Love a Clean San Diego for the 16th annual Creek to Bay Cleanup in April, in celebration of Earth Day. Approximately 20 SLAH volunteers participated in this countywide effort to beautify San Diego's beaches, bays, trails, canyons and parks. In August, seven volunteers participated in I Love a Clean San Diego's Clean Cities Initiative Cleanup by sweeping streets along sidewalks in an Imperial Beach neighborhood. In September, 12 volunteers supported I Love a Clean San Diego's California Coastal Cleanup Day to ensure a clean, safe and healthy community by removing litter from open spaces throughout SDC, including Ocean Beach Dog Beach, Chula Vista Marina View Park, Mission Trails Regional Park, Mission Bay, Lake Miramar, Cardiff Seaside Beach, Coronado City Beach and Scripps Pier in La Jolla. Founded in 2001, the San Diego River Park Foundation is a grassroots nonprofit organization that works to protect the greenbelt from the mountains to the ocean along the 52-mile San Diego River. Approximately 30 SLAH volunteers joined the San Diego River Park Foundation to care for California native plants and trees at the Point Loma Native Plant Garden in October, November, June and August, as well as at the San Diego River Garden in Mission Valley in December, July and September. Activities included trail maintenance, watering, pruning and other light gardening projects. In May, eight SLAH volunteers joined the San Diego River Park Foundation's Coastal Habitat Restoration event in Ocean Beach. The team worked to save and restore one of the last remaining coastal dune and wetland habitats in San Diego by removing invasive plants and litter, watering and caring for recent plantings and native plants, and providing trail maintenance. In March, I Love a Clean San Diego and the San Diego River Park Foundation partnered to provide the fourth annual River Kids Discovery Days. Five SLAH volunteers participated in the free event, which provides river education and service events to teach more than 600 children and families about protecting the Earth's natural resources. In addition to these projects, Sharp expanded the SLAH program to include the coordination and promotion of a year-round blood donation effort to provide needed blood to local organizations serving the community. In FY 2018, Sharp committed to collecting at least 1,000 units of blood from Sharp employees, family and friends. Throughout the year, Sharp hosted 42 blood drives at 11 locations systemwide to benefit the San Diego Blood Bank. In addition, SLAH encouraged Sharp employees to donate blood at local Red Cross locations. Through these efforts, SLAH helped Sharp col</p>

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<p>Form 990, Part III, Line 4c Community Benefits Report</p>	<p>lect 1,288 units of blood, surpassing its goal by nearly 300 units Sharp Humanitarian Service Program The Sharp Humanitarian Service Program provides paid leave time for Sharp employees to volunteer for programs that provide health care or other supportive services to underserved or adversely affected populations In FY 2018, the program funded nearly 50 employees on humanitarian trips to Mexico, Fiji, the Philippines, Tanzania, Kenya and other locations throughout the world Poured Out is a nonprofit organization that connects people and resources to those in need following a natural disaster through its U S Disaster Response team World Hope International works with vulnerable and exploited communities to alleviate poverty, suffering, and injustice In October, two Sharp team members joined these organizations to help respond to more than 100 people devastated by Hurricane Harvey in Port Arthur, Texas Working as quickly as possible, the team helped restore damaged homes by mucking out wreckage, knocking down mold-damaged drywall, tearing out countertops, scraping tile and flooring, cleaning up debris, disposing of garbage, repairing roofs and distributing basic goods Mercy Outreach Surgical Team is a San Diego Rotary program that works with local Mexican Rotary clubs to bring opportunities for a normal life to impoverished children and adults in Mexico through the gift of plastic, general and ophthalmologic surgery For one week in October, a Sharp employee was among 50 Mercy Outreach Surgical Team volunteers - including physicians, nurses, technicians, a pharmacist and numerous others - who provided 350 free surgeries to patients, including but not limited to the correction of cleft lips and palates, scars and burns, strabismus (crossed eyes), hernias, and the removal of extra toes or fingers Since 1934, Liga International - The Flying Doctors of Mexico has provided free health care and education to the people of the Mexican state of Sinaloa In November and April, a Sharp nurse traveled to the city of El Fuerte, Sinaloa, to assist with admitting, sedating, operating, and medical service recovery in the areas of surgery, dentistry, ophthalmology, pediatrics and more for approximately 35 patient surgeries InterFACE is a volunteer group of plastic and other reconstructive surgeons, anesthesiologists, nurses, pediatricians, psychosocial workers and other volunteers who devote their time and expertise to offer reconstructive surgery to underprivileged children in Mexico In February, May and October, a Sharp team member joined the InterFACE team in Mexicali where they provided 144 surgical procedures, including cleft lip and palate repair, burn reconstruction, and correction of the hand, ear, and other congenital or acquired deformities Since 2009, Experience Camps has provided one-week camps for youth throughout the U S who have experienced the death of a parent, sibling or primary caregiver The program helps build confidence, encourages</p>

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Form 990, Part III, Line 4c Community Benefits Report	<p>laughter, provides emotional support and allows youth to navigate their grief through friendship, teamwork, athletics and the common bond of loss. In FY 2018, a Sharp team member served Experience Camps as a nurse along with other nurses, volunteers and licensed social workers. The team worked to inspire hope, and provide support and mentorship to youth in order to strengthen their resiliency. The Jacinto-Gaudiosa Alegado Foundation, Inc. (Alegado Foundation) is a San Diego-based medical mission organization determined to help children, the sick and the aged through the provision of medical services, as well as donations of medical supplies, children's books, toys and sports equipment. In April, two Sharp team members joined the Alegado Foundation on a medical mission to the remote area of Sapa-Sapa in Tawi-Tawi, Philippines. Over a couple of days and alongside sixteen local agencies, including Philippine military personnel, the team provided 715 medical consultations, 209 dental treatments, 14 cataract surgeries, 75 Operation Tuli (circumcision) procedures, 518 ophthalmology and eye consultations, several cleft lip surgeries, and medications to those in need at no cost. The team also provided games, music, dancing, activities, school bags, sandals and food for the school children. For 10 days in May and June, a Sharp employee traveled to Fiji through MED 4 OUR WORLD, an organization committed to leaving a lasting impact on the communities it serves through health care, renovation and education. The 2018 MED 4 OUR WORLD team consisted of 17 volunteers, including a trauma surgeon, an anesthesiologist, Fijian anesthesiology residents, obstetrician-gynecologists (OB-GYN), a Fijian OB-GYN attending physician, medical students, registered nurses, and other health professionals. Together, the team evaluated over 100 patients and provided more than 30 procedures, including surgery for cervical, uterine and bladder cancer as well as hysterectomies and other gynecological procedures. In addition, the team assisted with the resuscitation and stabilization of premature twins post-delivery. Our One Community/Olmati Clinic is a nonprofit organization dedicated to providing comprehensive medical care and education to the indigenous Maasai community located in a remote region of northern Tanzania. For three weeks in June, two Sharp team members and a physician treated approximately 300 men, women and children for infected bug bites, broken bones, fire-related falls, and other injuries or illnesses. The team also supported teachers at the organization's primary school, which serves 240 Maasai tribal children. In addition, Sharp and Ssubi is Hope donated more than \$150,000 worth of equipment and supplies to support the work of the Olmati Clinic.</p>

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Form 990, Part III, Line 4c Community Benefits Report	<p>For three weeks in July and August, a Sharp team member helped lead a team of six PLNU students on a mission trip to Azores, Portugal, with LoveWorks, a short-term mission program committed to sending well-trained, culturally sensitive and flexible teams of student missionaries to serve in challenging and remote areas of the world. The team provided numerous services to the Azorean community, including renovating a local church's thrift store that provides free clothing and supplies to those in need, assisting at health fairs, performing blood pressure checks, answering health-related questions, and referring individuals to local health clinics. Living Room Ministries International is a nonprofit organization dedicated to offering hope and help to rural villages in Kenya through physical, psychological and spiritual care. The organization provides hospice and community-based palliative care services to people with terminal illness, supports families with dying loved ones, and cares for those who lack love and support at the end of life. In September, a Sharp physical therapist traveled with Living Room Ministries International to provide patient care, physical therapy services, staff training and student supervision to approximately 100 Kenyans. Community Walks Heart disease is the leading cause of death in the U.S. Sharp proudly supports the AHA's annual San Diego Heart & Stroke Walk, which promotes physical activity to build healthier lives, free of cardiovascular diseases and stroke. In FY 2018, more than 120 teams from entities across the Sharp system raised funds for the walk through activities such as auctions, prize drawings and a karaoke competition. In September, nearly 1,000 employees, family members and friends represented Sharp during the walk at Balboa Park. For the past 22 years, Sharp has maintained its position as the No. 1 team in San Diego. In 2018, Sharp was the No. 3 team in the AHA Western States Affiliate, raising more than \$200,000. To date, Sharp's fundraising efforts have raised more than \$3 million in support of the San Diego Heart & Stroke Walk. Sharp Volunteers Volunteers are a critical component of Sharp's dedication to the San Diego community and help make a difference in the lives of others. Sharp provides many volunteer opportunities for individuals of all ages and skill levels to assist with a wide variety of programs, events and initiatives across the Sharp system. This includes devoting time and compassion to patients within Sharp's hospitals, assisting with community events for the general public, and support for annual golf tournaments, galas and other events to benefit Sharp's various foundations, including the Sharp HealthCare Foundation, Grossmont Hospital Foundation and Coronado Hospital Foundation. On average, more than 1,700 individuals actively volunteered at Sharp each month in FY 2018. This included more than 1,800 auxiliary members, thousands of individual volunteers from the San Diego community, and</p>

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<p>Form 990, Part III, Line 4c Community Benefits Report</p>	<p>Sharp HospiceCare continued to provide the 11th Hour program to ensure that no patient die d alone Through the program, volunteers accompanied patients who were in their final mome nts of life but did not have family members present This included holding the patient's h and, reading softly to them and simply remaining by their side Families who were present with their dying loved one could also receive comfort from a volunteer while their loved o ne passed away Twelve volunteers were trained through the 11th Hour program in FY 2018 In FY 2018, Sharp HospiceCare trained six volunteers in integrative therapies to promote re laxation and restful sleep and enhance the quality of life for Sharp HospiceCare patients and their caregivers Integrative therapies included Healing Touch, a gentle energy therap y that uses the hands to help manage physical, emotional or spiritual pain, Reiki, a Japan ese energy healing therapy in which practitioners use their hands on or above the patient' s body to facilitate the healing process, aromatherapy, and hand massage Volunteers also support Sharp HospiceCare's partnership with We Honor Veterans (WHV) WHV is a national pr ogram developed by the National Hospice and Palliative Care Organization in collaboration with the VA to empower hospice professionals to meet the unique end-of-life needs of veter ans and their families As a WHV partner, Sharp HospiceCare is equipped to provide educati on and training that qualifies their volunteers to identify and support veteran patients a nd their caregivers This includes the Vet-to-Vet Volunteer program, which pairs volunteer s who have military experience with veteran patients The program also honors veteran pati ents through special pinning ceremonies during which volunteers present them with a WHV pi n and a certificate of appreciation for their service In FY 2018, Sharp HospiceCare held pinning ceremonies for more than 90 Sharp HospiceCare veteran patients as well as pinned n early 80 veteran community members during community events Sharp HospiceCare continued to offer the Memory Bear program to support community members who have lost a loved one Vol unteers created teddy bears out of the garments of those who have passed on, which served as special keepsakes and permanent reminders of the grieving individual's loved one In FY 2018, volunteers dedicated approximately 3,400 hours to sewing more than 850 bears for ov er 240 families Sharp HospiceCare recognizes the valuable impact that volunteers have on the experience of its patients, family and caregivers In light of this recognition, Sharp HospiceCare offered a monthly continuing education support group to enhance volunteers' s kills In addition, Sharp HospiceCare honored its volunteers during National Volunteer Wee k in April and National Hospice and Palliative Care Month in November Sharp Metropolitan Medical Campus (SMH, SMBHWN, SMV, SMC) Volunteer Programs Through the Community Care Partn er (CCP) program at SMH, hospi</p>

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Form 990, Part III, Line 4c Community Benefits Report	<p>tal volunteers are hand-selected and trained to serve and comfort patients without family or friends present during their hospital stay. Activities may include reading, writing letters, taking walks, playing games, or simply comforting patients through conversation. In addition, CCP volunteers help keep patients safe by notifying medical staff when needs arise - a task that is usually performed by a family member or friend but often overlooked for patients who lack a companion. In FY 2018, 14 CCP volunteers devoted nearly 430 hours to approximately 440 patient visits. The Cushman Wellness Center Community Health Library and SMH Volunteer Department continued to offer the Health Information Ambassador program in FY 2018. Serving SMH, the SMH Rehabilitation Center and SMBHWN's perinatal special care unit, the program brings the library's services directly to patients and family members and empowers them to become involved in their own health care. Through the program, hospital volunteers receive specialized training to become Health Information Ambassadors, who offer to bring patients and family members additional resources on their diagnosis during their hospital stay. Information requests are brought to the consumer health librarian who then prints consumer-oriented information from high-quality websites, and returns the information back to the patients and families through the Health Information Ambassadors. Patients and family members are also given access to an online database of reliable health information as well as the opportunity to keep in touch with the library to ensure they continue to receive quality health information at home. Throughout the year, the Health Information Ambassadors visited more than 2,300 patient rooms and filled over 580 information requests. In response to the vast number of Americans demonstrating basic or below health literacy, in FY 2018 the consumer health librarian created a pamphlet titled Health Literacy 101 to support the Health Information Ambassadors as they communicate with patients about their diagnosis. The pamphlet emphasizes the importance of verbally explaining a patient's diagnosis to them and describes a protocol to help patients better understand medical information. Established in 2007, the Arts for Healing program at SMMC uses art and music to reduce feelings of fear, stress, pain and isolation among patients facing significant medical challenges as well as their loved ones. The program brings a variety of activities to patients at their bedside - including painting, beading, creative writing, card-making, seasonal crafts, scrapbooking, quilting, music and drumming - to improve emotional and spiritual health, and promote a faster recovery. The program also engages visitors and members of the community during hospital and community events. Funded completely by donations, Arts for Healing is led by Sharp's Spiritual Care Department and is implemented with help from licensed music and art therapists.</p>

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Form 990, Part III, Line 4c Community Benefits Report	<p>ts as well as a team of trained volunteers. At SMH, Arts for Healing typically serves patients who are receiving cancer treatment, recovering from surgery or stroke, awaiting organ transplantation, receiving palliative care, or facing life with newly acquired disabilities following catastrophic events. At SMBHWN, Arts for Healing supports mothers with high-risk pregnancies who are susceptible to stress and loneliness during extended hospital stays prior to childbirth. Music therapy is also provided in the NICU to promote development in premature babies. At SMV and SMC, Arts for Healing offers several art and music therapy groups, including groups for patients recovering from drug addiction, adolescents and adults receiving treatment for mood and anxiety disorders, and older adults receiving treatment for dementia or depression. In collaboration with SMMC's social workers and palliative care nurses, in FY 2018 Arts for Healing facilitated the donation of more than 350 handcrafted blankets and quilts for patients receiving end-of-life care at SMH and patients of the Sharp Senior Health Center Downtown. Throughout the year, Arts for Healing led art and music activities for hundreds of patients and community members in recognition of various holidays and Sharp events, including Saturday with Santa, a public event hosted each December by the SMH Auxiliary, Valentine's Day, National Hospital Week in May, Cancer Awareness activities in October and June, two Sharp blood drives, and Sharp's annual Disaster Preparedness Expo. Arts for Healing celebrated its 10th anniversary in FY 2018. Throughout the year, more than 50 volunteers and four staff members facilitated art and music activities for approximately 35,000 patients, guests and staff. Since its inception, more than 140,000 patients and their families have benefited from the time and talent provided by the program's dedicated volunteers, licensed therapists and staff.</p> <p>Other Sharp Community Efforts In FY 2018, Sharp engaged in a variety of community service projects to improve the well-being of community members throughout San Diego. Below are just a few examples of these efforts.</p>

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<p>Form 990, Part III, Line 4c Community Benefits Report</p>	<p>According to the January 2018 WeAllCount Annual Report, there are nearly 8,600 individuals experiencing homelessness in SDC, nearly 5,000 of whom are unsheltered. This represents a decrease of six percent region-wide from 2017. Since 2011, Sharp has sponsored the Downtown San Diego Partnership's Family Reunification Program, which serves to reduce the number of homeless individuals on the streets of downtown San Diego. Through the program, homeless outreach coordinators from the Downtown San Diego Partnership's Clean & Safe Program identify homeless individuals who will be best served by traveling back home to loved ones. Family and friends are contacted to ensure that the individuals have a place to stay and the support they need to get back on their feet. Once confirmed, the outreach team provides the transportation needed to reconnect with their support system. With Sharp's help, the Family Reunification Program has reunited nearly 2,200 homeless individuals in Downtown San Diego with friends and family across the nation. The University of California, Los Angeles Center for Health Policy and Research's Elder Index states that two in five (41 percent) San Diego seniors will have to choose between buying food and paying rent. Through the Giving Tree program at the Downtown Sharp Senior Health Center, community members and staff donate gift cards to make the holidays brighter for seniors in need. In December 2017, each patient who visited the Downtown Sharp Senior Health Center left with a gift bag and a gift card to a local drug store, grocery store or restaurant. The SGH Engineering Department led a variety of volunteer initiatives in FY 2018. The team continued This Bud's for You, a special program that delivers hand-picked flowers from the campus' abundant gardens to unsuspecting visitors, patients and staff. Through the program, the SGH landscape team grows, cuts, bundles and delivers colorful bouquets to patient rooms as well as offers single-stem roses in a small bud vase to passers-by. In FY 2018, the team delivered two to four vases of flowers with an inspirational quote each week, with as many as six vases or more during peak flower season and upon additional requests. In addition, nearly 40 vases of flowers were delivered to new mothers staying in the hospital on Mother's Day. This Bud's for You also supports the SGH Senior Resource Center and Meals on Wheels partnership by providing floral centerpieces for fundraising events benefitting East County seniors, as well as offers roses for SGH's annual patient remembrance service. Now in its eighth year, the 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 hospital visitors and community members. The SGH Engineering Department further extends the spirit of caring through the creation of Cheers Bouquets for patients or visitors who appear to need encouragement, cheer or get well wishes, as well as to reco</p>

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Form 990, Part III, Line 4c Community Benefits Report	<p>ndraisers During the 2017 holiday season, Santa's Korner served more than 120 individuals from 36 families For the past four years, SCVMC has supported Operation Gobble, an event started by Assemblywoman Lorena Gonzalez Fletcher that provides a turkey and fresh produce to those in need during the Thanksgiving holiday In 2017, Operation Gobble served 40 patients from the Barnhart Cancer Center's Medical and Radiation Oncology departments In addition, in December, SCVMC partnered with a Chula Vista chapter of Optimist International for a holiday bike giveaway Optimist International is a worldwide volunteer organization that helps children develop to their fullest potential In FY 2018, the holiday bike giveaway provided bicycles as holiday gifts to ten children of SCVMC cancer patients Lastly, for the past two years, Sharp employees have supported students in need from elementary schools within the San Diego Unified School District During their school supply drive in August, employees donated approximately 170 pounds' worth of new backpacks, binders, pens, pencils, crayons and other school supplies - more than doubling last year's efforts - to students from low-income households All Ways Green Initiative Sharp is dedicated to minimizing adverse environmental impacts by creating healthy green practices for employees, physicians and patients Sharp promotes a culture of environmental responsibility through education, outreach, and collaboration with San Diego's earth-friendly businesses to help identify best practices, reduce the costs of green practices, and facilitate the implementation of sustainable initiatives Sharp's Environmental Policy serves to guide the organization in identifying and implementing green practices within the health care system Through the All Ways Green initiative, Sharp maintains an environmentally conscious footprint and communicates sustainability throughout the organization and the San Diego community Sharp's systemwide All Ways Green Committee is responsible for spearheading the organization's sustainability efforts Sharp's environmental initiatives are concentrated in five domains (1) energy efficiency, (2) water conservation, (3) waste minimization, (4) sustainable food practices, and (5) commuter solutions Specialized committees are responsible for each of these domains (see Table 3), while established Green Teams at each Sharp entity are responsible for developing new programs at the local level to educate and motivate Sharp employees to conserve natural resources and reduce, reuse and recycle Table 3 All Ways Green Committees/Subcommittees and Domains Natural Resource Subcommittee Energy efficiency and water conservation Waste Minimization Committee Waste minimization Food and Nutrition Best Health Committee Sustainable food practices</p>

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<p>Form 990, Part III, Line 4c Community Benefits Report</p>	<p>Commuter Solutions Subcommittee Commuter solutions To monitor progress and measure tangible results, All Ways Green utilizes a Sharp-developed report card, which trends each domain's annual performance against a baseline. The report card shows where the desired results have been achieved as well as identifies opportunities for improvement. These opportunities for improvement are used to strategically plan initiatives that engage Sharp's workforce in reducing the organization's carbon footprint. Sharp continues to invest in technology and programs that reduce carbon emissions and minimize waste. Through these efforts, in FY 2018, Sharp hospitals prevented nearly 210,000 pounds of cardboard and plastic from entering landfills, and reduced carbon dioxide emissions by more than 115,000 pounds. Sharp's goals and accomplishments within each All Ways Green committee/subcommittee and domain are described below.</p> <p>Natural Resource Conservation According to the EPA, health care ranks as the country's second most energy intensive industry, emitting roughly eight percent of the nation's greenhouse gas emissions. In the U.S., hospital water use constitutes seven percent of the total water used in commercial and institutional buildings. Sharp's goal is to optimize the use of electricity, gas and water across its facilities, identify and evaluate opportunities for improvement, implement initiatives in the most cost-effective manner, and track progress. A World Health Organization report published in 2017 encouraged hospitals to proactively address the environmental footprint of the health care sector by reducing power consumption, utilizing alternative energy generation, recycling and conserving resources. Sharp's Natural Resource Subcommittee is addressing this call by implementing numerous energy and water conservation initiatives, including infrastructure changes and adopting best practices to ensure its facilities are optimally operated while monitoring and measuring energy and water consumption. The Natural Resource Subcommittee is responsible for communications to employees about the energy-conscious behaviors that can be practiced in the workplace and at home to promote continuous energy and water savings. Sharp was one of the first health care organizations in the county to commit to environmental best practices in information technology. In 2013, Sharp became the first health care system in San Diego to implement a computer management program that places computers and monitors into a low-power sleep mode after a one-hour period of inactivity. Since its implementation, the program has been installed on all computers at the organization and has resulted in annual energy savings in excess of 1.6 million kilowatt-hours (kWh). The initiative earned Sharp a Certificate of Recognition from the EPA, which recognizes organizations' achievements in energy conservation and efficiency. Since April 2016, the SGH campus has been essentially off the electrical grid due</p>

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Form 990, Part III, Line 4c Community Benefits Report	<p>to the completion of a new state-of-the-art Central Energy Plant (CEP), named the Brady Family Cogen. The CEP includes a 52-ton, 44-megawatt combustion turbine generator that generates enough electricity to meet up to 95 percent of the hospital's needs while reducing greenhouse gases by up to 90 percent. In addition to providing electrical power, the CEP converts heat to steam to operate medical equipment, space heating and air conditioning as well as provides hot and cold water to the hospital. The new CEP fully complies with state and local standards for air emissions. In 2017, new software was installed on ten data center air conditioner units, resulting in more efficient cooling of the data center and a 1.6 percent decrease in power usage for these devices. New virtual environments replaced more than 150 devices in the data center, further reducing power and cooling needs for the building. In addition, after implementing TSO Logic software in 2015, Sharp can conservatively reduce hardware electrical consumption by more than five percent each year through identification of the inefficient, energy-consuming or underutilized hardware. During California's recent five-year drought, Sharp adopted a focused water conservation program at all sites. Although the drought restrictions were officially lifted in 2017, Sharp remains dedicated to using water wisely. In alignment with this commitment, Sharp partners with Emerald Textiles for its laundry and linen services. The company operates a state-of-the-art plant that is efficiently designed to reduce utility consumption and preserve natural resources. Each year, Emerald Textiles saves an estimated 40 million gallons of water (50 percent of total usage) through its water filtration system, more than 71,000 kWh of electricity through the use of energy-efficient lighting, and over 700,000 therms of gas due to the use of energy-efficient laundry equipment. In May 2018, Sharp opened the new Copley building, which houses administrative space for SRSMG along with the high-complexity, consolidated Sharp HealthCare Laboratory that services the entire Sharp system. Sharp is in the process of implementing a fuel-cell energy project at Copley, the first in the Sharp system. A fuel cell uses the chemical energy of hydrogen or another fuel to produce electricity cleanly and efficiently. Using these fuel cells could lead to a reduction of more than 90 percent in the plants' carbon dioxide emissions, while also producing large amounts of useful hydrogen. The Copley building will also be the first in the Sharp system to implement the Arcuity system, which continuously monitors environmental parameters and adjusts air supply and exhaust delivery based upon indoor contaminant levels and thermal load. This automated system samples and analyzes packets of air remotely, which are routed to a centralized suite of sensors. The system provides input to the building ventilation systems to optimize indoor environmental quality.</p>

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Form 990, Part III, Line 4c Community Benefits Report	<p>and energy efficiency All Sharp hospitals engage in the EPA's ES database and monitor their ES scores on a monthly basis, thus following an international standard for energy efficiency created by the EPA Buildings that are certified 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 without sacrifices in comfort or quality According to the EPA, buildings that qualify for the ES typically use 35 percent or less energy than buildings of similar size and function As a result of Sharp's commitment to superior energy performance and responsible use of natural resources, SCHHC and SCVMC received the ES certification in 2018 (SCHHC first earned the ES certification in 2007, and then again each year from 2010 through 2013, and again in 2017, while SCVMC received ES certification from 2009 to 2011, 2013, 2015, and 2017) Sharp partners with the Center for Sustainable Energy (CSE) to promote and strengthen its work with the ES From July to August 2017, a CSE benchmarking coach worked with Sharp facility managers to identify and correct data quality issues in the measurement of Sharp's energy and water consumption As the result of this endeavor, in December 2017, the CSE featured Sharp in a case study highlighting the organization's dedication to improving the welfare of the environment and the communities it serves In addition, Sharp's SRSMG Downtown medical office building meets Leadership in Energy and Environmental Design (LEED) silver certification specifications, one of the first medical office buildings of its kind in San Diego In 2017, Sharp received the Environmental Stewardship Award in the large business category from the BBB, serving San Diego, Orange and Imperial counties The award recognizes businesses that increase efforts to ward a more sustainable footprint and green initiatives In May 2017, Sharp was named San Diego's Grand Energy Champion by SDG&E in recognition of its continuous commitment to implementing energy efficiency measures The award specifically noted the particular challenges faced by health care organizations trying to conserve energy, given the need to maintain comfortable, clean and safe environments for patients, visitors and staff, 24 hours a day, seven days a week Table 4 outlines Sharp's numerous natural resource conservation initiatives Table 4 Natural Resource Projects by Sharp HealthCare Entity Establish Energy and Water Use Baseline SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Energy Star Participation SCHHC, SCVMC, SGH, SMH/SMBHWN, SMV/SMC Air Handler Projects SCHHC, SMH/SMBHWN Cogeneration Plant SGH Drip Irrigation/Landscape Water Reduction Systems SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Drought-Tolerant Landscaping SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG</p>

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<p>Form 990, Part III, Line 4c Community Benefits Report</p>	<p>Electric Vehicle Charging Stations SCVMC, System Offices, SMH/SMBHWN, SRSMG Electronic/Low-flow Faucets SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Energy-efficient Kitchen/Cafe Appliances SCHHC, SCVMC, SGH, SMH/SMBHWN Energy-efficient Chillers/ Motors SCHHC, SCVMC, SGH, SMH/SMBHWN Faucets and Toilet Retrofits SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG HVAC projects SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Lighting Retrofits to LEDs SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Occupancy Sensors SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Mist Eliminators SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Moisture-sensitive Sprinkler Controls SCHHC, SGH, SMH/SMBHWN Plumbing Projects to Address Water Leaks SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Thermostat Control Software & Temperature Setback Projects SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Filtered Water Dispensers to Replace Water Bottles SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Water-efficient Dishwashing/ Equipment Washing/ Chemical Dispensing System SCHHC, SCVMC, SGH, SMH/SMBHWN Waste Minimization U S hospitals generate an average of 26 pounds of waste per staffed bed each day, approximately 15 percent of which is considered hazardous material Sharp is committed to significantly reducing waste at each entity and extending the lifespan of local landfills Sharp's Waste Minimization Committee provides oversight of systemwide waste minimization initiatives, including proper waste segregation and enhanced recycling efforts Sharp made the following achievements in waste minimization in FY 2018 * Sharp proactively recycled more than 1,700 tons of construction debris from its major building project at SCVMC * Sharp's single-waste stream recycling program diverted more than 2.5 million pounds of trash from the landfill, including nonconfidential paper, cardboard, exam table paper, plastic, aluminum cans and glass containers * Sharp collected, reprocessed and sterilized 136,000 pounds of surgical instruments for further use * Sharp donated over 64,000 pounds of computer equipment in place of utilizing e-waste disposal * Sharp diverted nearly 120,000 pounds of plastic and cardboard from the landfill through the use of reusable sharps containers Sharp was named the 2017 Outstanding Recycling Program by the CRRRA for its innovative waste minimization initiatives In addition, the City of San Diego's Environmental Services Department named Sharp as one of the Recyclers of the Year in its 2016 Waste Reduction and Recycling Awards Program Sharp was an early adopter in its commitment to waste diversion and consistently diverts over 37 percent of waste through recycling, donating, composting, reprocessing and reusing programs Sharp's waste minimization efforts have</p>

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<p>Form 990, Part III, Line 4c Community Benefits Report</p>	<p>resulted in more than 4,500 tons of waste diverted from the landfill See Table 5 for waste diversion rates and Table 6 for specific waste minimization efforts at Sharp in FY 2018 Table 5 Sharp HealthCare Waste Diversion - FY 2018 Sharp Chula Vista Medical Center Recycled Waste Per Year (pounds)- 4,264,722 Total Waste Per Year (pounds)- 7,174,063 Percent Recycled - 59% Sharp Coronado Hospital and Healthcare Center Recycled Waste Per Year (pounds)- 551,442 Total Waste Per Year (pounds)- 2,062,355 Percent Recycled - 27% Sharp Grossmont Hospital Recycled Waste Per Year (pounds)- 1,558,396 Total Waste Per Year (pounds)- 4,940,651 Percent Recycled - 32% Sharp Memorial Hospital and Sharp Mary Birch Hospital for Women & Newborns Recycled Waste Per Year (pounds)- 1,592,405 Recycled Waste Per Year (pounds)- 6,408,972 Percent Recycled - 25% Sharp Mesa Vista Hospital Recycled Waste Per Year (pounds)- 196,420 Total Waste Per Year (pounds)- 494,786 Percent Recycled - 40% Sharp Rees-Stealy Medical Group Recycled Waste Per Year (pounds)- 400,598 Recycled Waste Per Year (pounds)- 2,070,810 Percent Recycled - 19% System Offices Recycled Waste Per Year (pounds)- 594,826 Total Waste Per Year (pounds)- 1,481,007 Percent Recycled - 40% Total Sharp HealthCare Recycled Waste Per Year (pounds)- 9,158,808 Total Waste Per Year (pounds)- 24,632,644 Percent Recycled - 37% Table 6 Waste Minimization Efforts by Sharp HealthCare Entry SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Establish Waste Diversion Baseline SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Single-stream Recycling SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Recycled Paper SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Blue Wrap Recycling SCHHC, SCVMC, SGH, SMH/SMBHWN Composting SCHHC, SCVMC, SGH, SMH/SMBHWN, SMV/SMC Construction Debris Recycling SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Electronic Cafe Menus SCHHC, SCVMC, SGH, System Offices, SMH/SMBHWN, SMV/SMC Electronic Patient Bills and Paperless Payroll SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Electronic and Pharmaceutical Waste Recycling Events SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Organic Waste Recycling (Green Waste) SCVMC, SGH Recycle Bins Distribution SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Repurposing of Unused Medical Supplies and Equipment SCHHC, SCVMC, SGH, System Offices, SMH/SMBHWN, SRSMG Reusable Sharps Containers SCHHC, SCVMC, SGH, SMH/SMBHWN Single Serve Paper Napkins and Plastic Cutlery Dispensers SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Surgical Instrument Reprocessing SCHHC, SCVMC, SGH, SMH/SMBHWN, SMV/SMC Replacement of Bottled Water with Spa Water SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Sustainable Food Practices Sharp offers healthy, nutritious and</p>

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Form 990, Part III, Line 4c Community Benefits Report	<p>delicious food options to support the health of patients, employees and the community Sharp's commitment to healthy food and nutrition sustainability practices began over seven years ago with a strategy to increase the selection of organic and sustainable food options to improve engagement In collaboration with its food service partner Sodexo, Sharp continues to be an innovator and early adopter of a variety of sustainable, healthy practices to help educate and motivate consumers and reduce its carbon footprint The goal of Sharp's Food and Nutrition Best Health Committee is to promote food sustainability efforts throughout the health care system and within the greater San Diego community This includes a focus on Sharp's sustainable Mindful Food program to provide education and healthy food options designed to improve the health of Sharp's patients, staff, community and environment Sharp's Mindful Food program includes the promotion of Meatless Mondays to reduce meat consumption, increased purchases of beef and poultry raised without the routine use of antibiotics, menus that highlight wellness options, participation in Community Supported Agriculture (CSA), a community of individuals who pledge support to a farm operation in order for it to become, either legally or spiritually, the community's farm, increased use of locally sourced fresh, organic and sustainable food, food composting, increased recycling activities, the promotion of sugarless beverages, and the use of post-consumer recycled packaging solutions Up to 40 percent of food in the U S is never eaten and instead goes to waste In FY 2018, Sodexo teams at SCVMC and SMH were invited by the San Diego Food System Alliance and Smart Kitchens San Diego to participate in LeanPath - a pilot program funded by a City of San Diego grant to combat food waste and facilitate compliance with new composting and recycling laws LeanPath provides an advanced food waste tracking software system to help kitchen teams measure food prior to discarding or donating in order to prevent pre-consumer food waste (waste generated in the kitchen) as well as post-consumer food waste (food the consumer throws away) from entering the landfill</p>

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Form 990, Part III, Line 4c Community Benefits Report	<p>Since August 2016, SMH, SMV, and SGH have collaborated with the SDRM and the Food Bank in an innovative food recovery program that donates food items that can no longer be used in Sharp's kitchens but are perfectly healthy and nutritious to more than 45 hunger-relief organizations in SDC. In addition, SCVMC's partnership with FSD and SCHHC's partnership with the Food Bank makes Sharp the first health care system in the county to donate food to San Diego's needy at such a wide-scale level. Food recovery efforts benefit the local community by ensuring access to nutritious meals for the food insecure, while also enabling Sharp to save on waste disposal costs and keep food out of landfills. In 2018, Sharp donated almost nine tons of food to these safety-net organizations. Also in 2018, Sharp's imperfect produce program purchased more than 6,500 pounds of less-than-perfect fruits and vegetables per month that are nutrient-rich and full of flavor but would have been thrown away by Sharp's food vendors. Four Sharp hospitals are now participating in composting efforts. SM MC was the first hospital in SDC to participate in the City of San Diego's food scraps composting program in 2012. In 2017, the program expanded to SCVMC in partnership with the City of Chula Vista. Also in 2017, SGH collaborated with Resource Management Group recycling center to begin a composting program, which was expanded to SCHHC in September 2018. Through these programs, food waste at these Sharp sites is processed into a rich compost product and is provided to residents at no charge for volumes of up to two cubic yards. The compost offers several benefits including improving the health and fertility of soil, reducing the need to purchase commercial fertilizers, increasing the soil's ability to retain water and helping the environment by recycling valuable organic materials. In FY 2018, Sharp's composting programs diverted approximately 480,000 pounds of waste from landfills. Sharp's waste-minded operations, including self-audit checklists, continue to help kitchen teams reduce their carbon footprint between food preparation and cleanup. Sharp is also in the process of eliminating oil fryers in its kitchens. SCHHC and SMMC have already switched to healthier methods of food preparation. SGH and SCVMC are participating in the cooking oil recycling program, which, in 2018, collected more than 8,000 pounds of oil, which is converted into safe biodiesel oil. Further, SCHHC, SMH and SMV continued to operate the first county-approved hospital-based organic gardens. Produce from the gardens is used in meals served at the hospital cafes. Sharp is an active member of San Diego's Nutrition in Healthcare Leadership Team, a subcommittee of the San Diego County Childhood Obesity Initiative's health care domain. Sharp is also a participant in Practice Greenhealth's Healthier Food Challenge. As a participant, Sharp commits to reducing its purchase of meats, increasing its purchase of locally-grown</p>

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<p>Form 990, Part III, Line 4c Community Benefits Report</p>	<p>n food, and increasing its percentage of sustainable animal proteins In FY 2018, Sharp reduced animal protein purchases by more than 550,000 pounds This represents a 31 percent reduction in animal protein purchases since FY 2014 In FY 2018, approximately 329,000 pounds of locally sourced produce were used in Sharp's kitchens, representing an increase of 57,000 pounds (more than 20 percent) of locally sourced produce since FY 2014 This is an area of great focus at Sharp and is expected to significantly increase in the next five years as more farmers are identified and certified to provide this safe, reliable source of naturally healthy produce In FY 2018, Sharp purchased more than 13,000 pounds of sustainable animal protein, representing a 50 percent increase from FY 2014 Sustainable animal protein includes beef and cage-free chicken that is grass-fed and antibiotic- and hormone-free Sharp was a recipient of the 2018 EMIES UnWasted Food award from the San Diego Food System Alliance for its collaboration as an innovator and early adopter with upstream "unusual but usable" procurement, soup stock program, organic gardens, animal feed and composting Named after the Federal Bill Emerson Good Samaritan Food Donation Act, which provides protection to good-faith donors, this award was created to encourage food donation to nonprofit organizations Sharp previously earned this award in 2016 Sharp and Sodexo remain committed to increasing healthy food offerings in an effort to improve sustainability and ultimately change the eating habits of patients, staff and community members for the better Sharp's sustainable food initiatives are outlined in Table 7 Table 7 Sustainable Food Projects by Sharp HealthCare Entity Report Card and Indicators Tracking SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Food Recovery SCHHC, SGH, SMH/SMBHWN, SMV/SMC Imperfect Produce SCVMC, SMV/SMC Composting SCVMC, SGH, SMH/SMBHWN, SMV/SMC Oil Recycling SCVMC, SGH Fryers Eliminated SCHHC, SMH/SMBHWN, SMV/SMC Commuter Solutions Sharp supports ride sharing, public transit programs and other transportation efforts to reduce carbon emissions generated by its facilities and employees Sharp's Commuter Solutions Subcommittee works to develop innovative and accessible programs and marketing campaigns to educate employees about the benefits of ride sharing and other alternative modes of transportation Sharp's ongoing efforts to promote alternative commuter choices in the workplace have led to recognition as a SANDAG iCommute Diamond Award recipient consistently between 2001 and 2010, and again from 2013 through 2018 Sharp replaced higher fuel-consuming cargo vans with economy Ford transit vehicles, which save approximately five miles per gallon In addition, Sharp's employee parking lots offer carpool and motorcycle parking spaces Sharp was the first health care system in San Diego to offer electric vehicle chargers (EVCs), supporting the creati</p>

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<p>Form 990, Part III, Line 4c Community Benefits Report</p>	<p>on of a national infrastructure required for the promotion of EVCs to reduce carbon emissions and dependence on petroleum. As part of the nationwide Electric Vehicle Project, Sharp installed EVCs at its corporate office location, SCVMC, SMMC and some SRSMG sites. Twenty-five EVCs were added at the new Copley building in 2018. Sharp will continue efforts to expand EVCs at its other entities. Sharp offers bike racks as well as a Bicycle Commuter Benefit, which gives employees who bike to work up to \$20 per month to use toward qualified costs associated with bicycle purchase, improvement, repair and storage. Furthermore, Sharp participates in SANDAG's annual Bike to Work Day event each May. In 2018, Sharp employees were once again among almost 10,000 San Diegans who opted to ride their bike to work. Sharp hosted several pit stops, providing food and beverages, at various sites throughout SD C. Sharp also encourages employees to participate in alternate commuting, including SANDAG's iCommute program that can match commuters in an area based on their work schedule, departure location and destination. Employees can monitor their cost and carbon savings resulting from their alternate commuting methods - such as using public transit, carpooling, van pooling, biking, walking, or telecommuting - and log their miles in an internal tracking tool on Sharp's intranet site, which has replaced SANDAG's discontinued TripTracker. In addition, Sharp is enrolled in SANDAG's Guaranteed Ride Home program which provides commuters who carpool, vanpool, take an express bus, ride the Coaster, or bike to work three or more times a week with a taxi or a rental car in case of an emergency or being stranded at work. Further, Sharp employees can also purchase discounted monthly bus passes. In recognition of Rideshare Month every October, Sharp participates in SANDAG's iCommute Rideshare Corporate Challenge, where employees earn points for replacing their solo drive with a greener commute choice, such as biking, walking, carpooling, vanpooling, and public transit. The annual challenge is instrumental in helping reduce traffic congestion and greenhouse gas emissions throughout the region. Furthering the commitment to better commuting solutions for its employees, Sharp supplies and supports the hardware and software for almost 700 employees who are able to efficiently and effectively telecommute to work. These employees work in areas that do not require an on-site presence, such as information technology support, transcription and human resources. Sharp also provides compressed work schedule options to eligible full-time employees, which enables them to complete the basic eighty-hour biweekly work requirement in less than 10 workdays and thus reduces commute costs, lowers parking demand and helps the environment.</p>

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<p>Form 990, Part III, Line 4c Community Benefits Report</p>	<p>Community Education and Outreach Sharp actively educates the community about its sustainability programs. In FY 2018, Sharp participated in the following outreach activities: * Sharp published e-newsletters for employees highlighting its recycling efforts and accomplishments, as well as reminders for proper workplace recycling, carpooling and energy and water conservation. * Sharp held its sixth annual systemwide All Ways Green Earth Week celebration, including Earth Fairs at each Sharp hospital and system office. During the fairs, employees learned how to decrease water, energy and resource consumption, divert waste through recycling, and reduce their carbon footprint by using alternative transportation at work and home. Many of Sharp's key vendors participated in these fairs to help raise awareness of green initiatives and how Sharp is involved in those programs. * Sharp held a community recycling event that included free e-waste recycling and confidential document destruction. The event also included the U.S. Drug Enforcement Agency's Drug Take Back Program, which provides a safe, convenient, and responsible method of drug disposal and educates the general public about the potential for prescription medication abuse. * Sharp participates in San Diego County's Hazmat Stakeholder meetings to discuss best practices for medical waste management with other hospital leaders in SDC. Additional community environmental education and outreach initiatives at Sharp are highlighted in Table 8. Table 8 Environmental Community Education and Outreach America Recycles Day SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Bike to Work Day SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Earth Week Activities SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Environmental Policy SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Green Team SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG No Smoking Policy SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Organic Farmer's Market SCHHC, SCVMC, SGH, System Offices, SMH/SMBHWN, SMV/SMC Organic Gardens SCHHC, SMH/SMBHWN Recycling Education SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG Ride Share Promotion SCHHC, SCVMC, SGH, System Offices, SHP, SMH/SMBHWN, SMV/SMC, SRSMG 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. In FY 2018, Sharp provided disaster preparedness education to staff, community members and community health professionals, as well as collaborated with numerous state and local organizations to prepare the community for a potential emergency or disaster. Sharp's disaster preparedness team offered several education courses to first responders and community health care providers throughout SDC. This included a standardized, on-scene</p>

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<p>Form 990, Part III, Line 4c Community Benefits Report</p>	<p>federal emergency management training for hospital management titled National Incident Management System/Incident Command System/Hospital Incident Command System (HICS) as well as a training focused specifically on HICS, an incident management system that can be used by hospitals to manage threats, planned events or emergencies. In addition, a course was offered to train participants to use the WebEOC crisis information management system, which provides real-time information sharing between health care systems and outside agencies during a disaster. In September, Sharp hosted its seventh annual Disaster Preparedness Expo to educate San Diego community members about effective disaster preparedness and response in the event of an earthquake, fire, power outage or other emergency. Held at Balboa Park, the free event provided more than 800 community members with a variety of disaster exhibitors, demonstrations and displays, as well as education on personal and family disaster planning. In addition, in FY 2018, the team provided education on personal disaster preparedness to the Rotary Club of Chula Vista as well as during the County of San Diego's Aging Summit 2018 Age Well in Action. In FY 2018, Sharp's disaster leadership donated their time to state and local organizations and committees, including County of San Diego Emergency Medical Care Committee, California Hospital Association Emergency Management Advisory Committee, California Department of Public Health Joint Advisory Committee, Ronald McDonald House Operations Committee and San Diego County Civilian/Military Liaison Work Group. In addition, Sharp's disaster leadership participates in the County of San Diego Healthcare Disaster Coalition. Healthcare disaster coalitions are multi-agency groups of representatives who play a critical role in public safety during emergencies and disasters by assisting counties in improving mitigation, preparedness, response and recovery activities. As part of this coalition, in FY 2018, Sharp's disaster leadership led a subcommittee to review hospital evacuation planning and identify tools and best practices for dissemination to community health care professionals. Sharp's disaster leadership also continued to participate in the Statewide Medical Health Exercise Program. This work group of representatives from local, regional and State agencies - including health departments, emergency medical services, environmental health departments, hospitals, law enforcement, fire services and more - is designed to guide local emergency planners in developing, planning and conducting emergency responses. Through 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 includes Sharp and other SDC hospitals, health clinics and other health care services providers. The partnership seeks to continually identify a</p>

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<p>Form 990, Part III, Line 4c Community Benefits Report</p>	<p>nd develop relationships with health care entities, nonprofit organizations, law enforcement, military installations and other organizations that serve SDC and are located near partner health care facilities Through networking, planning and sharing resources, trainings and information, the partners will be better prepared for a collaborative response to an emergency or disaster affecting SDC In FY 2018, the partnership assisted with training and education of non-hospital health care entities to better prepare them to develop emergency operations plans and responses Sharp supports safety efforts of the State and the City of San Diego through maintenance and storage of a county decontamination trailer at SGH to be used in response to an event requiring mass decontamination Additionally, all Sharp hospitals are prepared for an emergency with backup water supplies that last up to 96 hours in the event of an interruption to the system's normal water supply In recent years, global endemic events potentially impacted public health in the San Diego community Sharp continues to collaborate with community agencies, County of San Diego Public Health Services and first responders to develop protocols, provide joint trainings, and establish safe treatment methods and locations This allows for the delivery of uninterrupted care to the community in the face of public health threats Employee Wellness Sharp Best Health Sharp recognizes that improving the health of its team members benefits the health of the broader community Since 2010, the Sharp Best Health employee wellness program has created initiatives to improve the overall health, safety, happiness and productivity of Sharp's workforce Each Sharp hospital, SRSMC and corporate location has a dedicated Best Health committee that works to motivate team members to incorporate healthy habits into their lifestyles and support them on their journey to attain their personal health goals Team members are encouraged to participate in a variety of workplace health initiatives ranging from fitness challenges and weight management programs to health education and events Sharp Best Health also offers an interactive, web-based health portal, where employees can create a wellness plan and track their progress</p>

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<p>Form 990, Part III, Line 4c Community Benefits Report</p>	<p>Since 2013, Sharp Best Health has offered annual employee health screenings to raise individual awareness of important biometric health measures, educate team members on reducing the risk of related health issues, and encourage employees to track changes in their metrics over time. In FY 2018, nearly 10,000 employees received health screenings for blood pressure, cholesterol, body mass index, blood sugar and tobacco use. Post-screening resources and tools are available for Sharp employees and their family members, including free access to a health coach as well as classes on a variety of health topics, including smoking cessation, healthy food choices, physical activity, stress management and managing the challenges of living with a chronic condition, such as diabetes, high blood pressure, asthma or arthritis. The AHA recommends walking 10,000 steps a day to promote overall health. To align with this goal, Sharp Best Health encourages team members to use Fitbit wireless activity monitors to track their steps, distance, calories burned, sleep patterns and more. By syncing statistics to computers or smartphones, these devices inspire team members to achieve their personal fitness goals one step at a time. Throughout the year, Sharp Best Health held both entity-specific and systemwide Fitbit Step Challenges to encourage team members to set personal goals and compete for prizes. During FY 2018, more than 1,500 participants across the Sharp system walked an average of 8,700 steps per day. Since the Fitbit program's inception in 2014, participating employees have increased their average total steps by 24 percent. In addition, Sharp's acceptable footwear policy permits employees to wear walking shoes each day of the week at Sharp corporate offices to promote safety along with increased physical activity. Sharp Best Health hosted a variety of wellness programs and events for employees and their family and friends. This included systemwide walking and hiking clubs through which more than 90 participants completed six hikes during FY 2018. Sharp Best Health participated in community health events throughout the year, including the American Cancer Society Great American Smoke Out, American Heart Month, National Nutrition Month, National Health and Fitness Month, National Fresh Fruits & Vegetables Month, Stress Management Month and National Walking Month. Sharp Best Health also supported the San Diego Heart & Stroke Walk by hosting donation-based indoor cycling classes at Toby Wells YMCA. In addition, Sharp Best Health partnered with the AHA to promote walking meetings as a heart-healthy alternative to standard meetings. At Sharp System Offices, Sharp Best Health partnered with the Humane Society to provide free "Animal-Based Stress Relief" events where employees were given the opportunity to relieve stress and get some exercise while providing highly valuable human interaction for sheltered dogs and puppies. Sharp Best Health provided on-site health and fit</p>

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<p>Form 990, Part III, Line 4c Community Benefits Report</p>	<p>ness classes and workshops for employees throughout FY 2018. This included workshops led by registered dietitians (RDs) on topics such as engaging in and sustaining healthy eating habits, strategies for managing cravings, intuitive eating, the truth about counting calories, and the impact of sleep, stress and aging on health. Classes were also offered on stress management techniques and the importance of taking micro-breaks. Fitness offerings included yoga, Zumba, weight training and aquatics classes. Sharp Best Health also offered recipe demonstrations to encourage healthy meal preparation at home. Sharp Best Health offered employees a new wellness initiative in FY 2018 called the Better Balance Project, which is intended to help attendees achieve a better sense of balance and well-being. Instead of making radical, time-consuming changes, participants were encouraged to make small but powerful health adjustments that are frequently overlooked. Each week throughout the four-week program, participants were provided tools and tasks to address a specific self-care subject, such as mindfulness, prioritizing sleep, organization and gratitude. Sharp Best Health also debuted a new podcast called "Coffee Break with Sharp Best Health," which features group discussions and interviews with health and wellness experts on a variety of topics to help listeners live in good health. In FY 2018, Sharp Best Health continued to go beyond nutrition and physical fitness to support the overall health and happiness of employees by offering a digital mindfulness and yoga training platform from the vendor Whil. Whil's program is designed to help employees manage stress and improve their well-being by offering more than 1,200 mindfulness and yoga sessions. Whil's sessions are of various lengths and skill levels, providing employees the flexibility to move at their own pace and set their own goals. Whil has also been used throughout the system as a tool during staff meetings, department huddles and shift changes. Since Whil's launch, more than 2,400 employees have become active users. Another mindfulness initiative involved a collaboration between Sharp Best Health and certified mindfulness facilitators to provide on-site mindfulness programming at six Sharp locations, including both series and drop-in classes. Throughout FY 2018, Sharp Best Health continued to provide Wellness on Wheels, a monthly educational event offered to Sharp employees to address the challenge of accessing health resources and programs during work hours. Wellness on Wheels involves "rounding" in staff lounges, hospital units, and nursing stations to promote a new and relevant subject each month. Each session includes an educational component, an interactive activity and a call to action. Wellness on Wheels brings wellness education to employees where they work, accommodating their unique schedules and dedication to patient care. Keeping the experience relevant and quick improves access to wellness.</p>

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Form 990, Part III, Line 4c Community Benefits Report	<p>resources for busy staff with complex schedules. During FY 2018, Wellness on Wheels topics included holiday food myths, essential oils, mindful eating, yoga poses for relaxation, heart health and common safety hazards. Since 2015, Sharp has provided a systemwide Mindful healthy food initiative in partnership with Sodexo. As part of the Mindful program, Sharp's cafeteria menus were redesigned to include sustainable, nutritious and enticing food options that foster a healthy lifestyle among patients, visitors and staff. In 2018, Sharp continued its partnership with Farm Fresh to You to make customizable boxes of organic, locally-grown produce available for purchase by employees. This CSA service offers a convenient method for employees and their families to incorporate more fruits and vegetables into their diet while supporting local farmers. Weight Watchers offers weight-loss services and products founded on a scientifically-based approach to weight management that encourages healthy eating, increased physical activity and other healthy lifestyle behaviors. Sharp Best Health continued its partnership with Weight Watchers to offer employees a subsidized membership rate to any Weight Watchers program. With program availability at work, in the community and online, this partnership has offered Sharp team members a variety of healthy eating and physical activity options that can be tailored to different lifestyles and schedules. At any given time during FY 2018, approximately 530 Sharp employees were actively using Weight Watchers. Since the program's inception in 2016, participating employees have lost an estimated 4,000 pounds. In addition to providing Weight Watchers at work, during FY 2018, Sharp Best Health partnered with the Sharp Rees-Stealy Center for Health Management to offer free in-person and online nutrition classes to Sharp employees through the New Weigh program. New Weigh is an eight-week weight loss program that emphasizes nutrition education and healthy lifestyle development. Program participants create a semi-structured food plan, and have access to a skilled health coach or RD to ensure continued support and accountability. During FY 2018, 240 Sharp employees completed the New Weigh program.</p>

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Form 990, Part III, Line 4c Community Benefits Report	<p>In FY 2018, the State of California and the Centers for Medicare and Medicaid Services approved a Medi-Cal Hospital Fee Program for the time period of January 1, 2017, through June 30, 2019. This resulted in recognition of supplemental revenues totaling \$248.5 million and quality assurance fees and pledges totaling \$161.1 million in FY 2018. The net FY 2018 impact of the program totaling \$87.4 million reduced the amount of unreimbursed medical care service for the Medi-Cal population. This reimbursement helped offset prior years' unreimbursed medical care services, however, the additional funds recorded in FY 2018 underestimate the true unreimbursed medical care services performed for the past fiscal year. Table 10 illustrates the impact of the Medi-Cal Hospital Fee Program on Sharp's unreimbursed medical care services in FY 2018. Table 10 Sharp HealthCare Unreimbursed Medical Care Services - Medi-Cal Hospital Fee Program Impact - FY 2018 Medicare & Medicare HMO - \$125,364,745 Medicare Capitated - \$123,297,615 Medi-Cal, Medi-Cal HMO & CMS Before Provider Fee - \$187,303,059 Provider Fee - \$(48,792,687) Medi-Cal, Medi-Cal HMO & CMS After Provider Fee - \$138,510,372 CHAMPVA & Workers' Comp - \$7,642,323 Bad Debt - \$6,511,004 Charity Care - \$24,969,673 Total Before Provider Fee - \$475,088,419 Provider Fee - \$(48,792,687) Total Before Provider Fee - \$426,295,732 Table 11 lists community benefit costs provided by each Sharp entity. Table 11 Total Economic Value of Community Benefit Provided By Sharp HealthCare Entities - Estimated FY 2018 Unreimbursed Costs Sharp Chula Vista Medical Center - \$90,298,683 Sharp Coronado Hospital and Healthcare Center - \$21,258,431 Sharp Grossmont Hospital - \$128,924,916 Sharp Mary Birch Hospital for Women & Newborn - \$9,761,499 Sharp Memorial Hospital - \$167,314,062 Sharp Mesa Vista Hospital and Sharp McDonald Center - \$19,779,122 Sharp Health Plan - \$69,903 TOTAL FOR ALL ENTITIES - \$437,406,616 Table 12 includes a summary of unreimbursed costs for each Sharp hospital entity based on the categories specifically identified in SB 697. For a detailed summary of unreimbursed costs of community benefit provided by each Sharp entity in FY 2018, see tables presented in individual entity sections. Table 12 Detailed Economic Value of SB 697 Categories - Estimated FY 2018 Unreimbursed Costs Sharp Chula Vista Medical Center Medical Care Services - \$87,878,861 Other Benefits for Vulnerable Populations - \$571,854 Other Benefits for the Broader Community - \$364,393 Health Research, Education and Training Programs - \$1,483,575 Total - \$90,298,683 Sharp Coronado Hospital and Healthcare Center Medical Care Services - \$20,564,090 Other Benefits for Vulnerable Populations - \$84,351 Other Benefits for the Broader Community - \$89,574 Health Research, Education and Training Programs - \$520,416 Total - 21,258,431 Sharp Grossmont Hospital Medical Care Services - \$125,643,033 Other Benefits for Vulnerable Populations - \$1,157,648 Other Benefit</p>

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Form 990, Part III, Line 4c Community Benefits Report	<p>s for the Broader Community - \$559,470 Health Research, Education and Training Programs - \$1,564,765 Total - \$128,924,916 Sharp Mary Birch Hospital for Women & Newborns Medical Care Services - \$9,316,725 Other Benefits for Vulnerable Populations - \$87,059 Other Benefits for the Broader Community - \$119,237 Health Research, Education and Training Programs - \$238,478 Total - \$9,761,499 Sharp Memorial Hospital Medical Care Services - \$163,867,752 Other Benefits for Vulnerable Populations - \$1,323,591 Other Benefits for the Broader Community - \$561,771 Health Research, Education and Training Programs - \$1,560,948 Total - \$167,314,062 Sharp Mesa Vista Hospital and Sharp McDonald Center Medical Care Services - \$19,025,271 Other Benefits for Vulnerable Populations - \$448,871 Other Benefits for the Broader Community - \$127,420 Health Research, Education and Training Programs - \$177,560 Total - \$19,779,122 Sharp Health Plan Medical Care Services - \$0 Other Benefits for Vulnerable Populations - \$11,767 Other Benefits for the Broader Community - \$47,970 Health Research, Education and Training Programs - \$10,166 Total - \$69,903 ALL ENTITIES Medical Care Services - \$426,295,732 Other Benefits for Vulnerable Populations - \$3,685,141 Other Benefits for the Broader Community - \$1,869,835 Health Research, Education and Training Programs - \$5,555,908 Total - \$437,406,616</p> <p>Section 3 Community Benefit Planning Process Navigating the maze of health care can be daunting to say the least, and Sharp is committed to assisting community members in this process. Because it involves a loved one, the appreciation expressed is extremely meaningful - Sara Steinhoffer, Vice President of Government Relations, Sharp HealthCare For more than 20 years, Sharp HealthCare (Sharp) has based its community benefit planning on findings from its triennial Community Health Needs Assessment (CHNA) process. CHNA findings are used in combination with the expertise in programs and services of each Sharp hospital, as well as knowledge of the populations and communities served by those hospitals, to provide a foundation for community benefit program planning and implementation. Methodology to Conduct the 2016 Sharp HealthCare Community Health Needs Assessment Sharp has been a longtime partner in the process of identifying and responding to the health needs of the San Diego community. Since 1995, Sharp has participated in a countywide collaborative that includes a broad range of hospitals, health care organizations and community agencies to conduct a triennial CHNA that identifies and prioritizes health needs for San Diego County (SDC). In addition, to address the requirements for not-for-profit hospitals under the Patient Protection and Affordable Care Act, Sharp has developed CHNAs for each of its individually licensed hospitals since 2013. This process gathers both salient hospital data and the perspectives of health leaders and residents in order to identify and prioritize health needs.</p>

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<p>Form 990, Part III, Line 4c Community Benefits Report</p>	<p>or community members across the county, with a special focus on vulnerable populations. Further, the process seeks to highlight health needs that hospitals could impact through programs, services and collaboration. For the 2016 CHNA process, Sharp actively participated in a collaborative CHNA effort led by the Hospital Association of San Diego and Imperial Counties (HASD&IC) and in contract with the Institute for Public Health (IPH) at San Diego State University. The process and findings of the collaborative HASD&IC 2016 CHNA significantly informed the process and findings of Sharp's individual hospital CHNAs. The complete HASD&IC 2016 CHNA is available for public viewing and download at http://www.hasdic.org. To develop its individual hospital CHNAs, Sharp analyzed hospital-specific data and contracted separately with IPH to conduct community engagement activities expressly for the patients and community members it serves. In accordance with federal regulations, the Sharp Memorial Hospital (SMH) 2016 CHNA also includes needs identified for communities served by Sharp Mary Birch Hospital for Women & Newborns, as the two hospitals share a license, and report all utilization and financial data as a single entity to California's Office of Statewide Health Planning and Development (OSHPD). As such, the SMH 2016 CHNA summarizes the processes and findings for communities served by both hospital entities. The 2016 CHNAs for each Sharp hospital help inform current and future community benefit programs and services, especially for community members facing inequities. This section describes the general methodology employed for Sharp HealthCare's 2016 CHNAs.</p> <p>CHNA Committee: The HASD&IC Board of Directors convened a CHNA Committee to plan and implement the collaborative 2016 CHNA process. The CHNA Committee includes representatives from all seven participating hospitals and health care systems:</p> <ul style="list-style-type: none"> * Kaiser Foundation Hospitals - San Diego * Palomar Health * Rady Children's Hospital - San Diego * Scripps Health (Chair) * Sharp HealthCare (Vice Chair) * Tri-City Medical Center * University of California (UC), San Diego <p>Health CHNA Objectives: In response to community feedback on the 2013 CHNA process and findings, and in recognition of the challenges that health providers, community organizations and residents face in their efforts to prevent, diagnose and manage chronic conditions, the HASD&IC 2016 CHNA process focused on gaining deeper insight into the top health needs identified for SDC through the 2013 CHNA process.</p>

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Form 990, Part III, Line 4c Community Benefits Report	<p>Top 15 Health Needs Based on 2013 Initial Quantitative Analysis were as follows Acute Respiratory Infections Asthma Back Pain Breast Cancer Cardiovascular Disease Colorectal Cancer Dementia and Alzheimer's Diabetes (Type 2) High Risk Pregnancy Lung Cancer Mental Health / Mental Illness Obesity Prostate Cancer Skin Cancer Unintentional Injuries Sharp's 2013 CHNA process and findings were significantly informed by the collaborative HASD&IC CHNA model. Consequently, Sharp's 2016 CHNA process sought to gain further insight into the needs identified across its different hospitals in 2013, including (in alphabetical order) behavioral health, cancer, cardiovascular disease, Type 2 diabetes, high-risk pregnancy, obesity and senior health. Specific objectives of Sharp's 2016 CHNA process included:</p> <ul style="list-style-type: none"> * Gather in-depth feedback to aid in the understanding of the most significant health needs impacting community members in SDC, particularly Sharp patients * Connect the identified health needs with associated social determinants of health (SDOH) to further understand the challenges that community members and Sharp patients - particularly those in communities of high need - face in their attempts to access health care and maintain health and well-being * Identify currently available community resources that support identified health conditions and health challenges * Provide a foundation of information to begin discussions of opportunities for programs, services and collaborations that could further address the identified health needs and challenges for the community <p>Study Area Defined For the purposes of the collaborative HASD&IC 2016 CHNA, the study area is the entire County of San Diego due to a broad representation of hospitals in the area. With more than three million residents, SDC is socially and ethnically diverse. Information on key demographics, socioeconomic factors, access to care, health behaviors, and the physical environment can be found in the full HASD&IC 2016 CHNA report at http://hasdic.org. As the study area for both the collaborative HASD&IC 2016 and Sharp 2016 CHNAs cover SDC, the HASD&IC 2016 CHNA process and findings significantly informed Sharp's CHNA process/findings, and as such, are described as applicable throughout Sharp's CHNAs. For complete details on the HASD&IC 2016 CHNA process, please visit the HASD&IC website or contact Lindsey Wade, Vice President, Public Policy at HASD&IC at lwade@hasdic.org. For the collaborative HASD&IC 2016 CHNA process, the IPH employed a rigorous methodology using both community input and quantitative analysis to provide a deeper understanding of barriers to health improvement in SDC. The 2016 CHNA process began with a comprehensive scan of recent community health statistics in order to validate the regional significance of the top four health needs identified in the HASD&IC 2013 CHNA. Quantitative data for both the HASD&IC 2016 CHNA and Sharp 2016 CHNAs included 2013 OSHPD demographic data for hos</p>

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<p>Form 990, Part III, Line 4c Community Benefits Report</p>	<p>pital inpatient, emergency department (ED), and ambulatory care encounters to understand the hospital patient population. Clinic data was also gathered from OSHPD and incorporated in order to provide a more holistic view of health care utilization in SDC. Additional variables analyzed in the 2016 CHNA processes are included in Table 13, variables were analyzed at the ZIP code level wherever possible. Table 13 Data Variables in the HASD&IC and Sharp 2016 CHNAs * Hospital Utilization Inpatient discharges, ED and ambulatory care encounters * Community Clinic Visits * Demographic Data (socioeconomic indicators) * Mortality and Morbidity Data * Regional Program Data (childhood obesity trends and community resource referral patterns) * Social Determinants of Health and Health Behaviors (education, income, insurance, physical environment, physical activity, diet and substance abuse) Based on the results of the community health statistics scan and feedback from community partners received during the 2016 CHNA planning process, a number of community engagement activities were conducted across SDC, as well as specific to Sharp patients, in order to provide a more comprehensive understanding of identified health needs, including their associated SDOH and potential system and policy changes that may positively impact them. In addition, a detailed analysis of how the top health needs impact the health of San Diego residents was conducted. The types of community engagement activities conducted as part of the collaborative HASD&IC 2016 CHNA included key informant interviews, facilitated discussions with care coordinators (community partner discussions), and community resident input through a Health Access and Navigation Survey. In addition, Sharp contracted with IPH to collect additional community input through three primary methods: facilitated discussions, key informant interviews, and the Health Access and Navigation Survey with patients and community members. This input focused on behavioral health, cancer, cardiovascular health, diabetes, high-risk pregnancy, senior health and the needs of highly vulnerable patients and community members. In addition, Sharp conducted specific outreach to community promoters, and members of Sharp's Patient Family Advisory Councils - community members who are also current or former Sharp patients. More than 40 Sharp providers and nearly 150 Sharp patients or community members were reached through these engagement efforts. Findings The collaborative HASD & IC 2016 CHNA prioritized the top health needs for SDC through application of the following five criteria: 1 Magnitude or Prevalence 2 Severity 3 Health Disparities 4 Trends 5 Community Concern. Using these criteria, IPH created a summary matrix for review by the CHNA Committee. As a result, the CHNA Committee identified behavioral health as the number one health need in SDC. In addition, cardiovascular disease, Type 2 diabetes and obesity were identified as having equal</p>

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Form 990, Part III, Line 4c Community Benefits Report	<p>importance due to their interrelatedness. Health needs were further broken down into priority areas due to the overwhelming agreement among all data sources and in recognition of the complexities within each health need. As the HASD&IC 2016 CHNA process included robust representation from the communities served by Sharp, the findings of the prioritization process applied to the same four priority health needs identified for Sharp (behavioral health, cardiovascular, Type 2 diabetes and obesity). In addition, findings from Sharp's 2016 CHNAs continued to prioritize cancer, high-risk pregnancy and senior health among the top health needs for its community. In addition, analysis of feedback from the 2016 CHNA community engagement activities identified SDOH to be a key theme among community health needs. Ten SDOH were consistently referenced across the different community engagement activities conducted in both HASD&IC's and Sharp's CHNAs. The importance of these SDOH was also confirmed by quantitative data. Hospital programs and community collaborations have the potential to impact these SDOH, which are listed below in order of priority:</p> <ol style="list-style-type: none">2016 CHNA Social Determinants of Health 1 Food Insecurity & Access to Healthy Food2 Access to Care or Services3 Homeless/Housing Issues4 Physical Activity5 Education/Knowledge6 Cultural Competency7 Transportation8 Insurance Issues9 Stigma10 Poverty <p>The health needs and SDOH identified in the 2016 CHNA process will not be resolved with a quick fix. Rather, they will require time, persistence, collaboration and innovation. The entire Sharp system is committed to this journey, and remains steadfastly dedicated to the care and improvement of health and well-being for all San Diegans. Programs designed to address the needs identified in Sharp's 2016 CHNA are detailed in Sharp's fiscal year (FY) 2019-FY 2022 implementation strategies, which are publicly available online at http://www.sharp.com/about/community/health-needs-assessments cfm. Sharp's 2019 CHNAs and FY 2020-FY2023 implementation strategies will be completed and publicly available by September 30, 2019. The findings of Sharp's 2016 CHNAs help inform the programs and services provided to improve the health of its community members and are a critical component of Sharp's community benefit report process, outlined below.</p>

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Form 990, Part III, Line 4c Community Benefits Report	<p>Steps Completed to Prepare Sharp's Community Benefit Report On an annual basis, each Sharp hospital performs the following steps in the preparation of its Community Benefit Report * Establishes and/or reviews hospital-specific objectives taking into account results of the entity CHNA and evaluation of the entity's service area and expertise/services provided to the community * Verifies the necessity for an ongoing focus on identified community needs and/or adds newly identified community needs * Reports on activities conducted in the prior fiscal year - FY 2018 Report of Activities * Develops a plan for the upcoming fiscal year, including specific steps to be undertaken - FY 2019 Plan * Reports and categorizes the economic value of community benefit provided in FY 2018, according to the framework specifically identified in Senate Bill 697 * Reviews and approves a Community Benefit Plan * Distributes the Community Benefit Plan and Report to members of the Sharp Board of Directors and each of the Sharp hospital boards of directors, highlighting activities provided in the prior fiscal year as well as specific action steps to be undertaken in the upcoming fiscal year * Implement community benefit activities identified for the upcoming fiscal year</p> <p>Ongoing Commitment to Collaboration Underscoring Sharp's ongoing commitment to collaboration in order to address community health priorities and improve the health of San Diegoans, Sharp executive leadership, operational experts and other staff are actively engaged in the national American Hospital Association, Association for Community Health Improvement, statewide California Hospital Association, HASD&IC, and a variety of local collaborations including but not limited to the San Diego Hunger Coalition, the San Diego Regional Chamber of Commerce and 2-1-1 San Diego Appendix A 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 2018 Community organizations are listed alphabetically * 2-1-1 San Diego Board * A New PATH (Parents for Addiction, Treatment and Healing) * Adult Protective Services * Alliance for African Assistance * Altrusa International Club of San Diego * Alzheimer's Project Safety Workgroup * Alzheimer's San Diego * Alzheimer's San Diego Client Advisory Board * American Academy of Nursing * American Association of Colleges of Nursing * American Association of Critical-Care Nurses * American Cancer Society * American College of Healthcare Executives * American Congress of Obstetricians and Gynecologists * American Diabetes Association * American Foundation for Suicide Prevention * American Heart Association * American Hospital Association * American Hospital Association Regional Policy Board * American Lung Association * American Nurses Association * American Psychiatric Nurses Association * American Red Cross of San Diego * Angels Foster Family Network</p>

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<p>Form 990, Part III, Line 4c Community Benefits Report</p>	<p>k * The Arc of San Diego * Asian Business Association of San Diego * Association for Ambulatory Behavioral Healthcare * Association for Clinical Pastoral Education * Association for Community Health Improvement * Association for Contextual Behavioral Science - Aging Special Interest Group * Association of California Nurse Leaders * Association of Fundraising Professionals - San Diego Chapter * Association of Women's Health, Obstetric and Neonatal Nurses * Azusa Pacific University * Balboa Institute of Transplantation * BAME Renaissance, Inc (BAME CDC) * Bayside Community Center * Beacon Council's Patient Safety Collaborative * Behavioral Health Recognition Dinner Planning Team * Borrego Health * Boys and Girls Club of South County * Cabrillo Credit Union Sharp Division Board * Cabrillo Credit Union Supervisory Committee * California Academy of Nutrition and Dietetics - San Diego District * California Association of Health Plans * California Association of Hospitals and Health Systems Committee on Volunteer Services and Directors' Coordinating Council * California Association of Marriage and Family Therapists San Diego Chapter * California Association of Physician Groups * California Board of Behavioral Health Sciences * California College San Diego * California Department of Public Health (CDPH) * CDPH Healthcare Acquired Infections/Antimicrobial Stewardship Program subcommittee * CDPH Healthcare Associated Infection Advisory Committee * CDPH Joint Advisory Committee * California Dietetic Association * California Emergency Medical Services Authority * California Health Care Foundation * California Health Information Association * California Hospice and Palliative Care Association * California Hospital Association (CHA) * CHA Board of Trustees * CHA Center for Behavioral Health * CHA Emergency Management Advisory Committee * CHA Hospital Quality Institute Regional Quality Leaders Network * CHA San Diego Association of Directors of Volunteer Services * CHA Workforce Committee * California Immunization Coalition * California Library Association * California Maternal Quality Care Collaborative * California Perinatal Quality Care Collaborative * California Society for Clinical Social Work Professionals * California State University San Marcos * California Teratogen Information Service * Cameron Family YMCA * CHIP Behavioral Health Work Team * Chula Vista Chamber of Commerce * Chula Vista Community Collaborative * Chula Vista Police Foundation * City of Chula Vista * City of San Diego * City of San Diego Park & Recreation * Clairemont Lutheran Church * Community Center for the Blind and Visually Impaired * Consortium for Nursing Excellence, San Diego * Coronado Chamber of Commerce * Coronado Public Library * Coronado SAFE (Student and Family Enrichment) * Coronado Senior Center Planning Committee * Council of Women's and Infants' Specialty Hospitals * County Service Area - 69 Advisory Board * Doors of Change * Downtown San Diego Partnership * East Cou</p>

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Form 990, Part III, Line 4c Community Benefits Report	nty Action Network * East County Senior Service Providers * Emergency Nurses Association - San Diego Chapter * Employee Assistance Professionals Association * EMSTA College * Family Health Centers of San Diego * Father Joe's Villages * Feeding San Diego * Friends of Scott Foundation * Gary and Mary West Senior Wellness Center * George G. Glenner Alzheimer's Family Centers, Inc. * Girl Scouts San Diego * Grossmont College Occupational Therapy Assistant Advisory Board * Grossmont College Respiratory Advisory Committee * Grossmont Healthcare District Community Grants and Sponsorships Committee * Grossmont Healthcare District Independent Citizens' Bond Oversight Committee * Grossmont Imaging LLC Board * Grossmont Union High School District * Hands United for Children * Health and Science Pipeline Initiative * Health Care Communicators Board * Health Industry Collaboration Effort, Inc. * Health Insurance Counseling and Advocacy Program * Health Sciences High and Middle College (HS HMC) * Healthy Chula Vista Advisory Commission * Helix Charter High School * Hidden Heroes campaign * Home Start, Inc. * Hospice and Palliative Nurses Association - San Diego Chapter * Hospital Association of San Diego and Imperial Counties (HASD&IC) * HASD&IC Community Health Needs Assessment Advisory Group * HSHMC Board * Hunger Advocacy Network * I Love a Clean San Diego * Inner City Action Network * Institute for Public Health, San Diego State University (IPH) * Integrative Therapies Collaborative * International Association of Eating Disorders Professionals * The Jacobs & Cushman San Diego Food Bank * Jewish Family Service of San Diego (JFS) * JFS Behavioral Health Committee * JFS Public Affairs Committee * Kiwanis Club of Bonita * La Maestra Community Health Centers * La Mesa Lion's Club * La Mesa Parks and Recreation * Lantern Crest Senior Living Advisory Board * Las Damas de San Diego International Nonprofit Organization * Las Patronas * Las Primeras * Life Rolls On * Live Well San Diego Check Your Mood Committee * Live Well San Diego - South Region * Lightbridge Hospice * Mama's Kitchen * March of Dimes * Meals on Wheels San Diego County * Meals on Wheels Greater San Diego East County Advisory Board * Mental Health America * Miracle Babies * MRI Joint Venture Board * National Active and Retired Federal Employees Association * National Alliance on Mental Illness * National Association of Hispanic Nurses, San Diego Chapter * National Association of Perinatal Social Workers * National Association of Neonatal Nurses * National Association of Orthopedic Nurses * National Hospice and Palliative Care Organization * National Institute for Children's Health Quality * National University * Neighborhood Healthcare * Neighborhood House Association * North San Diego Business Chamber * Pacific Arts Movement * Palomar Community College * Paradise Village * Partnership for Smoke-Free Families * Partnerships with Industry * Peninsula Family YMCA

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Form 990, Part IV, Line 24a PART IV, LINE 24A	Tax Exempt Bonds are issued for the Sharp HealthCare Obligated Group. As a result, all tax exempt bond balances, including those allocated to other members of the Obligated Group, are reported on the Sharp HealthCare return (EIN 95-6077327). The Sharp HealthCare Obligated Group is comprised of Sharp HealthCare (EIN 95-6077327), Sharp Memorial Hospital (EIN 95-3782169), Grossmont Hospital Corporation (EIN 33-0449527), and Sharp Chula Vista Medical Center (EIN 95-2367304).

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Form 990, Part VI, Line 11b Review of form 990 by governing body	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, Tax & Accounting, Vice President of Finance and Senior Vice President and Chief Financial Officer. Additionally, the organization contracts with Ernst & Young, an independent accounting firm, for review of the Form 990.

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Form 990, Part VI, Line 12c Conflict of interest policy	<p>Sharp HealthCare has a written conflict of interest policy which has been reviewed and approved by the Sharp HealthCare governing board. Sharp HealthCare 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>

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Form 990, Part VI, Line 15a Process to establish compensation of top management official	<p>The Compensation 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 Compensation Committee of the Board of Directors by the independent consultant. The Compensation Committee is comprised of Board members who are not physicians and who are not compensated in any way by the organization. The Compensation Committee creates and approves the organization's Executive Compensation Philosophies and Strategies statement and as part of this approves the total compensation for the President/Chief Executive Officer and reviews and approves the total compensation recommendations for the remaining executive team. The Compensation Committee presents its decision to the Board of Directors. The Compensation 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. The compensation study was last conducted in November 2017.</p>

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Form 990, Part VI, Line 15b Process to establish compensation of other employees	<p>The Compensation 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 Compensation Committee of the Board of Directors by the independent consultant. The Compensation Committee is comprised of Board members who are not physicians and who are not compensated in any way by the organization. The Compensation Committee creates and approves the organization's Executive Compensation Philosophies and Strategies statement and as part of this approves the total compensation for the President/Chief Executive Officer and reviews and approves the total compensation recommendations for the remaining executive team. The Compensation Committee presents its decision to the Board of Directors. The Compensation 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. The compensation study was last conducted in November 2017.</p>

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Form 990, Part VI, Line 19 Required documents available to the public	<p>The organization does not make its governing documents available to the general public. 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 Sharp's obligated group are published on the dacbond.com website (www.dacbond.com).</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VIII, Line 2f Other Program Service Revenue	Case Management - Total Revenue 659183, Related or Exempt Function Revenue , Unrelated Business Revenue 659183, Revenue Excluded from Tax Under Sections 512, 513, or 514 , All other program service revenue - Total Revenue 2652635, Related or Exempt Function Revenue 2652635, Unrelated Business Revenue , Revenue Excluded from Tax Under Sections 512, 513, or 514 ,

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VIII, Line 11d Other Miscellaneous Revenue	All other revenue - Total Revenue 182955, Related or Exempt Function Revenue , Unrelated Business Revenue , Revenue Excluded from Tax Under Sections 512, 513, or 514 182955,

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part IX, Line 11g Other Fees	Med fees - Total Expense 311906029, Program Service Expense 311853834, Management and General Expenses 52195, Fundraising Expenses , Purchased Services - Total Expense 171506109, Program Service Expense 148751599, Management and General Expenses 22754510, Fundraising Expenses , Registry - Total Expense 2953078, Program Service Expense 435638, Management and General Expenses 2517440, Fundraising Expenses ,

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part XI, Line 9 Other changes in net assets or fund balances	CURRENT YEAR OTHER COMPREHENSIVE INCOME - 5644758, BENEFICIAL INTEREST IN SHARP HEALTHCARE FOUNDATION - 12820606, BOOK/TAX DIFFERENCES ON PARTNERSHIP INTEREST - MRI - 87234, BOOK/TAX DIFF ON PARTNERSHIP INTEREST - UCSD/SHARP TRANSPLANT PROGRAM - 588444, BOOK/TAX DIFF ON PARTNERSHIP INTEREST - SHC ACO, LLC - 4836025,

990 Schedule O, Supplemental Information

Return Reference	Explanation
Schedule F, Part I, Line 3 (e) Schedule F, Part 1, Line 3(e)(5)	Participate in International Travel & Health Insurance conference Sharp HealthCare employees volunteered for humanitarian missions

990 Schedule O, Supplemental Information

Return Reference	Explanation
Schedule F, Part I, Line 2 PROCEDURES FOR MONITORING USE OF GRANT FUNDS	THE MANAGEMENT TEAM EVALUATES REQUESTS FOR CONTRIBUTIONS FROM OUTSIDE ORGANIZATIONS TAKING INTO ACCOUNT HOW THEY ALIGN WITH THE ORGANIZATION'S MISSION NO MONITORING IS DONE AFTER GRANTS ARE MADE

990 Schedule O, Supplemental Information

Return Reference	Explanation
<p>Form 990, Part III, Line 4c Community Benefits Report</p>	<p>* Peninsula Shepherd Senior Center * Perinatal Safety Collaborative * Perinatal Social Work Cluster * Planetree Board of Directors * Point Loma/Hervey Library * Point Loma Nazarene University * Postpartum Health Alliance * Practice Greenhealth * Promises2Kids * Psychiatric Emergency Response Team * Public Health Emergency Hospital Preparedness Program * Regional Perinatal System * Residential Care Committee * Ronald McDonald House Operations Committee * Rotary Club of Chula Vista * Rotary Club of Coronado * San Diego Association of Diabetes Educators * San Diego Association of Governments * San Diego Blood Bank * San Diego Community Action Network * San Diego Community College District * San Diego County * San Diego County Aging and Independence Services * San Diego Dietetic Association * San Diego East County Chamber of Commerce * San Diego Eye Bank Nurses' Advisory Board * San Diego Fire-Rescue Department * San Diego Food System Alliance * San Diego Freedom Ranch * San Diego Habitat for Humanity * San Diego Health Information Association * San Diego Housing Commission * San Diego Human Dignity Foundation * San Diego Humane Society * San Diego Hunger Coalition * San Diego Imaging - Chula Vista * San Diego Immunization Coalition * San Diego -Imperial County Council of Hospital Volunteers * San Diego North Chamber of Commerce * San Diego Organization of Healthcare Leaders * San Diego Physician Orders for Life-Sustaining Treatment Coalition/San Diego Coalition for Compassionate Care * San Diego Psych-Law Society * San Diego Psychological Association Supervision Committee * San Diego Regional Chamber of Commerce * San Diego Regional Healthcare Sustainability Collaborative * San Diego Regional Home Care Council * San Diego Rescue Mission * San Diego River Park Foundation * San Diego Square * San Diego State University * San Diego Unified School District * San Diego Workforce Partnership (SDWP) * Santee-Lakeside Rotary Club * SAY San Diego * Serving Seniors * Sharp and Children's MRI Board * Sharp and UC San Diego Health's Joint Venture * Smart Kitchens San Diego * South Bay Community Services * South Bay Senior Providers * South County Action Network * South County Economic Development Council * Southern Caregiver Resource Center * Southwestern College * Special Needs Trust Foundation * Special Olympics * Ssubilis Hope * St Paul's PACE * St Paul's Retirement Home Foundation * Statewide Medical Health Exercise Program * SuperFood Drive * The Meeting Place * Transitional Age Youth Behavioral Health Services Council * Trauma Center Association of America * Union of Pan Asian Communities * University of California, San Diego * University of San Diego * University of Southern California * USS Midway Museum * VA San Diego Healthcare System * VA San Diego Mental Health Council * Veterans Village of San Diego * Vista Hill ParentCare * We Honor Veterans * Westminster Tower * Women, Infants and Children Program * Wreaths Across America - San Diego * YMCA * YW</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part III, Line 4c Community Benefits Report	CA Becky's House * YWCA Board of Directors * YWCA In the Company of Women Event

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2017

**Open to Public
Inspection**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
▶ **Attach to Form 990.**
▶ **Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.**

Department of the Treasury
Internal Revenue Service

Name of the organization
Sharp Healthcare

Employer identification number

95-6077327

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

(a) Name, address, and EIN (if applicable) 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
(1) SHARP OTAY MOB LLC 8695 SPECTRUM CENTER BLVD San Diego, CA 921231489 47-5374479	OPERATE MEDICAL OFFICE BUILDING	CA	0	0	SHARP HEALTHCARE

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 entity?	
						Yes	No
(1) SHARP MEMORIAL HOSPITAL (SMH) 8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489 95-3782169	HOSPITAL	CA	501(c)(3)	3	SHARP HEALTHCARE	Yes	
(2) GROSSMONT HOSPITAL CORPORATION (SGH) 8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489 33-0449527	HOSPITAL	CA	501(c)(3)	3	SHARP HEALTHCARE	Yes	
(3) SHARP CHULA VISTA MEDICAL CENTER (SCVMC) 8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489 95-2367304	HOSPITAL	CA	501(c)(3)	3	SHARP HEALTHCARE	Yes	
(4) SHARP CORONADO HOSPITAL AND HEALTHCARE CENTER (SCHHC) 8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489 95-0651579	HOSPITAL	CA	501(c)(3)	3	SHARP HEALTHCARE	Yes	
(5) SHARP HEALTH PLAN 8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489 33-0519730	HEALTH PLAN	CA	501(c)(4)		SHARP HEALTHCARE	Yes	
(6) SHARP HEALTHCARE FOUNDATION (SHF) 8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489 95-3492461	HEALTHCARE FOUNDATION	CA	501(c)(3)	7	SHARP HEALTHCARE	Yes	
(7) GROSSMONT HOSPITAL FOUNDATION 8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489 33-0124488	HEALTHCARE FOUNDATION	CA	501(c)(3)	7	GROSSMONT HOSPITAL CORPORATION	Yes	

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	
(1) SHARP AND CHILDREN'S MRI CENTER LLC 7901 FROST STREET SAN DIEGO, CA 92123 33-0520955	IMAGING	CA	NA	Related	-258,510	1,426,055		No		Yes		33 33 %
(2) SHARP HEALTHCARE ACO-II LLC 8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 92123 81-2645189	OFFICES OF PHYSICIANS	CA	NA	Related	-3,448,023	6,459,176	Yes				No	58 25 %

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	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(1) CONTINUOUS QUALITY INSURANCE SPC	CAPTIVE INSURANCE COMPANY	CJ	SHARP HEALTHCARE	C Corporation	2,542,508	24,754,303	100 %	Yes	

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

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

	Yes	No
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, or (iv) rent from a controlled entity	1a	No
b Gift, grant, or capital contribution to related organization(s)	1b	No
c Gift, grant, or capital contribution from related organization(s)	1c	Yes
d Loans or loan guarantees to or for related organization(s)	1d	Yes
e Loans or loan guarantees by related organization(s)	1e	No
f Dividends from related organization(s)	1f	No
g Sale of assets to related organization(s)	1g	No
h Purchase of assets from related organization(s)	1h	No
i Exchange of assets with related organization(s)	1i	No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	Yes
k Lease of facilities, equipment, or other assets from related organization(s)	1k	Yes
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	Yes
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	Yes
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes
o Sharing of paid employees with related organization(s)	1o	Yes
p Reimbursement paid to related organization(s) for expenses	1p	Yes
q Reimbursement paid by related organization(s) for expenses	1q	Yes
r Other transfer of cash or property to related organization(s)	1r	Yes
s Other transfer of cash or property from related organization(s)	1s	Yes

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

See Additional Data Table

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

Additional Data

Software ID: 17005876
Software Version: 2017v2.2
EIN: 95-6077327
Name: Sharp Healthcare

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 section 501(c) (3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled entity?	
						Yes	No
8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489 95-3782169	HOSPITAL	CA	501(c)(3)	3	SHARP HEALTHCARE	Yes	
8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489 33-0449527	HOSPITAL	CA	501(c)(3)	3	SHARP HEALTHCARE	Yes	
8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489 95-2367304	HOSPITAL	CA	501(c)(3)	3	SHARP HEALTHCARE	Yes	
8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489 95-0651579	HOSPITAL	CA	501(c)(3)	3	SHARP HEALTHCARE	Yes	
8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489 33-0519730	HEALTH PLAN	CA	501(c)(4)		SHARP HEALTHCARE	Yes	
8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489 95-3492461	HEALTHCARE FOUNDATION	CA	501(c)(3)	7	SHARP HEALTHCARE	Yes	
8695 SPECTRUM CENTER BLVD SAN DIEGO, CA 921231489 33-0124488	HEALTHCARE FOUNDATION	CA	501(c)(3)	7	GROSSMONT HOSPITAL CORPORATION	Yes	

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

(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
Sharp Memorial Hospital	J	1,761,016	Accrual Accounting
Sharp Memorial Hospital	K	313,647	Accrual Accounting
Sharp Memorial Hospital	L	3,043,362	Accrual Accounting
Sharp Memorial Hospital	M	7,187,987	Accrual Accounting
Sharp Memorial Hospital	P	199,820	Accrual Accounting
Sharp Memorial Hospital	Q	998,681,160	Accrual Accounting
Sharp Memorial Hospital	R	82,529,979	Accrual Accounting
Sharp Memorial Hospital	S	329,110,310	Accrual Accounting
Grossmont Hospital Corporation	K	3,088,630	Accrual Accounting
Grossmont Hospital Corporation	L	1,650,053	Accrual Accounting
Grossmont Hospital Corporation	M	14,119,564	Accrual Accounting
Grossmont Hospital Corporation	P	255,907	Accrual Accounting
Grossmont Hospital Corporation	Q	692,994,874	Accrual Accounting
Grossmont Hospital Corporation	R	64,479,346	Accrual Accounting
Grossmont Hospital Corporation	S	58,306,914	Accrual Accounting
Sharp Chula Vista Medical Center	K	60,765	Accrual Accounting
Sharp Chula Vista Medical Center	L	1,131,694	Accrual Accounting
Sharp Chula Vista Medical Center	M	707,455	Accrual Accounting
Sharp Chula Vista Medical Center	P	68,357	Accrual Accounting
Sharp Chula Vista Medical Center	Q	458,665,242	Accrual Accounting
Sharp Chula Vista Medical Center	R	66,226,214	Accrual Accounting
Sharp Chula Vista Medical Center	S	116,487,931	Accrual Accounting
Sharp Coronado and Healthcare Center	L	401,532	Accrual Accounting
Sharp Coronado and Healthcare Center	Q	100,810,972	Accrual Accounting
Sharp Coronado and Healthcare Center	R	5,315,615	Accrual Accounting

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

(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
Sharp Coronado and Healthcare Center	S	17,102,048	Accrual Accounting
Sharp HealthCare Foundation	C	1,239,733	Accrual Accounting
Sharp HealthCare Foundation	D	3,264,104	Accrual Accounting
Sharp HealthCare Foundation	M	4,375,220	Accrual Accounting
Sharp HealthCare Foundation	N	133,068	Accrual Accounting
CONTINUOUS QUALITY INSURANCE SPC	R	13,158,498	Accrual Accounting
Sharp Health Plan	J	909,522	Accrual Accounting
Sharp Health Plan	L	69,233	Accrual Accounting
Sharp Health Plan	M	181,962,511	Accrual Accounting
Sharp Health Plan	Q	14,418,923	Accrual Accounting
Sharp Health Plan	R	160,554	Accrual Accounting
Sharp Health Plan	S	1,122,306	Accrual Accounting