

**BRISTOL HOSPITAL**  
**ANNUAL REPORTING**  
**FISCAL YEAR 2009**  
**REPORT 20 - REPORT OF EACH JOINT VENTURE, PARTNERSHIP**  
**AND CORPORATION RELATED TO THE HOSPITAL**

(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
<b>A. AFFILIATE NAME</b>		
		<b>BRISTOL HOSPITAL &amp; HEALTH CARE GROUP, INC.</b>
1	Affiliate Description	BH&HCG IS THE PARENT CORPORATION.
2	Affiliate type of service	Parent Corporation
3	Tax Status	Not for Profit
4	Street Address	Brewster Road
5	Town	Bristol
6	State	Connecticut
7	Zip Code	06011 -
8	CEO Name	Kurt Barwis
9	CEO Title	President
10	CT Agent Name	Kurt Barwis
11	CT Agent Company	Bristol Hospital, Inc.
12	CT Agent Company Street Address	Brewster Rd
13	CT Agent Town	Bristol
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06010 -
<b>B. AFFILIATE NAME</b>		
		<b>BRISTOL HEALTH CARE INC.</b>
1	Affiliate Description	BRISTOL HEALTH CARE PROVIDES LONG TERM CARE AND ADULT DAY CARE SERVICES.
2	Affiliate type of service	Long Term Care
3	Tax Status	Not for Profit
4	Street Address	400 North Main Street
5	Town	Bristol
6	State	Connecticut
7	Zip Code	06010 -
8	CEO Name	Kurt Barwis
9	CEO Title	President
10	CT Agent Name	Kurt Barwis
11	CT Agent Company	Bristol Hospital, Inc.
12	CT Agent Company Street Address	Brewster Rd
13	CT Agent Town	Bristol
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06010 -
<b>C. AFFILIATE NAME</b>		
		<b>BRISTOL HEALTH SERVICES, INC.</b>
1	Affiliate Description	HOLDING COMPANY FOR EMS AND CCMM.
2	Affiliate type of service	Other HealthCare Svcs(Specify)
3	Tax Status	Not for Profit
4	Street Address	Brewster Road
5	Town	Bristol
6	State	Connecticut
7	Zip Code	06011 -
8	CEO Name	Kurt Bawis
9	CEO Title	President
10	CT Agent Name	Kurt Barwis
11	CT Agent Company	Bristol Hospital, Inc.
12	CT Agent Company Street Address	Brewster Road
13	CT Agent Town	Bristol
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06010 -
<b>D. AFFILIATE NAME</b>		
		<b>BRISTOL HOSPITAL DEVELOPMENT FOUNDATION, INC.</b>
1	Affiliate Description	BRISTOL HOSPITAL DEVELOPMENT FOUNDATION PROVIDES FUND RAISING AND MANAGEMENT SERVICES.
2	Affiliate type of service	Fund Raising/Management

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(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
3	Tax Status	Not for Profit
4	Street Address	Brewster Road
5	Town	Bristol
6	State	Connecticut
7	Zip Code	06011 -
8	CEO Name	Kurt Barwis
9	CEO Title	President
10	CT Agent Name	Kurt Barwis
11	CT Agent Company	Bristol Hospital, Inc.
12	CT Agent Company Street Address	Brewster Rd
13	CT Agent Town	Bristol
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06010 -
<b>E. AFFILIATE NAME</b>		
<b>AFFILIATE NAME</b>		<b>BRISTOL HOSPITAL EMS, LLC.</b>
1	Affiliate Description	EMS-AMBULANCE SERVICE
2	Affiliate type of service	Other HealthCare Svcs(Specify)
3	Tax Status	For Profit
4	Street Address	Brewster Road
5	Town	Bristol
6	State	Connecticut
7	Zip Code	06011 -
8	CEO Name	Kurt Barwis
9	CEO Title	President
10	CT Agent Name	Kurt Barwis
11	CT Agent Company	Bristol Hospital, Inc.
12	CT Agent Company Street Address	Brewster Road
13	CT Agent Town	Bristol
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06010 -
<b>F. AFFILIATE NAME</b>		
<b>AFFILIATE NAME</b>		<b>BRISTOL MSO, LLC</b>
1	Affiliate Description	PROVIDES RADIOLOGY SERVICE
2	Affiliate type of service	Imaging Services
3	Tax Status	For Profit
4	Street Address	Brewster Rd
5	Town	Bristol
6	State	Connecticut
7	Zip Code	06010 -
8	CEO Name	John Walker MD
9	CEO Title	President
10	CT Agent Name	Kurt Barwis
11	CT Agent Company	Radiologic Associates, PC
12	CT Agent Company Street Address	Brewtser Rd
13	CT Agent Town	Bristol
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06010 -
<b>G. AFFILIATE NAME</b>		
<b>AFFILIATE NAME</b>		<b>BRISTOL PSYCHIATRIC SERVICES, P.C.</b>
1	Affiliate Description	PROVIDES PSYCHIATRIC SERVICES
2	Affiliate type of service	Mental Health Services
3	Tax Status	For Profit
4	Street Address	200 Main Street
5	Town	Bristol
6	State	Connecticut
7	Zip Code	06010 -
8	CEO Name	Stephen J. Kaye, MD
9	CEO Title	President
10	CT Agent Name	Kurt Barwis

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(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
11	CT Agent Company	Bristol Hospital, Inc.
12	CT Agent Company Street Address	Brewster Road
13	CT Agent Town	Bristol
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06010 -
<b>H. AFFILIATE NAME</b>		
	<b>AFFILIATE NAME</b>	<b>CENTRAL CONNECTICUT ENDOSCOPY CENTER, LLC</b>
1	Affiliate Description	Provide Endoscopy Services
2	Affiliate type of service	Ambulatory Services
3	Tax Status	For Profit
4	Street Address	40 Hart Street
5	Town	New Britain
6	State	Connecticut
7	Zip Code	06052 -
8	CEO Name	Mark R. Versland, MD
9	CEO Title	Manager
10	CT Agent Name	Mark F. Korber
11	CT Agent Company	MCR&P Service Corporation
12	CT Agent Company Street Address	185 Asylum Street
13	CT Agent Town	Hartford
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06103 - 3469
<b>I. AFFILIATE NAME</b>		
	<b>AFFILIATE NAME</b>	<b>CENTRAL CONNECTICUT MEDICAL MANAGEMENT, INC</b>
1	Affiliate Description	CCMM PROVIDES PHYSICIAN MSO AND PHYSICIAN BILLING
2	Affiliate type of service	Managed Services Org. (MSO)
3	Tax Status	For Profit
4	Street Address	200 Main Street
5	Town	Bristol
6	State	Connecticut
7	Zip Code	06010 -
8	CEO Name	Kurt Barwis
9	CEO Title	President
10	CT Agent Name	Kurt Barwis
11	CT Agent Company	Bristol Hospital, Inc.
12	CT Agent Company Street Address	Brewster Rd
13	CT Agent Town	Bristol
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06010 -
<b>J. AFFILIATE NAME</b>		
	<b>AFFILIATE NAME</b>	<b>COLLABORATIVE LABORATORY SERVICES, LLC</b>
1	Affiliate Description	TO PROVIDE LABORATORY SERVICES
2	Affiliate type of service	Lab
3	Tax Status	For Profit
4	Street Address	1000 Asylum Avenue
5	Town	Hartford
6	State	Connecticut
7	Zip Code	06105 -
8	CEO Name	Ronald LaPensee
9	CEO Title	Chairman
10	CT Agent Name	David C. Stone
11	CT Agent Company	Collaborative Laboratory Services, LLC
12	CT Agent Company Street Address	114 Woodland Street
13	CT Agent Town	Hartford
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06105 -
<b>K. AFFILIATE NAME</b>		
	<b>AFFILIATE NAME</b>	<b>CONNECTICUT OCCUPATIONAL MEDICAL PARTNERS</b>

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(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
1	Affiliate Description	Manage and Market Occupational Health Services
2	Affiliate type of service	Occupational Health
3	Tax Status	For Profit
4	Street Address	1000 Asylum Avenue
5	Town	Hartford
6	State	Connecticut
7	Zip Code	06105 -
8	CEO Name	Hunter Giroux
9	CEO Title	President
10	CT Agent Name	Hunter Giroux
11	CT Agent Company	Connecticut Occupational Medical Partners
12	CT Agent Company Street Address	1000 Asylum Avenue
13	CT Agent Town	Hartford
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06105 -
<b>L.</b>	<b>AFFILIATE NAME</b>	<b>GREATER BRISTOL PRIMARY CARE GROUP, P.C.</b>
1	Affiliate Description	PROVIDES PHYSICIAN SERVICES
2	Affiliate type of service	Physicians Services
3	Tax Status	For Profit
4	Street Address	200 Main Street
5	Town	Bristol
6	State	Connecticut
7	Zip Code	06010 -
8	CEO Name	Stephen J. Kaye, MD
9	CEO Title	President
10	CT Agent Name	Kurt Barwis
11	CT Agent Company	Bristol Hospital, Inc.
12	CT Agent Company Street Address	Brewster Road
13	CT Agent Town	Bristol
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06010 -
<b>M.</b>	<b>AFFILIATE NAME</b>	<b>HEALTH CONNECTICUT</b>
1	Affiliate Description	Service Company
2	Affiliate type of service	Managed Care
3	Tax Status	For Profit
4	Street Address	110 Barnes Road, Box 1802
5	Town	Wallingford
6	State	Connecticut
7	Zip Code	06492 - 1802
8	CEO Name	Thomas D. Kennedy
9	CEO Title	CEO
10	CT Agent Name	Thomas D. Kennedy
11	CT Agent Company	Health Connecticut
12	CT Agent Company Street Address	110 Barnes Road, Box 1802
13	CT Agent Town	Wallingford
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06492 - 1802
<b>N.</b>	<b>AFFILIATE NAME</b>	<b>MED-HELP, INC.</b>
1	Affiliate Description	PROVIDES MEDICAL CLINIC/URGENT CARE SERVICES
2	Affiliate type of service	Physicians Services
3	Tax Status	For Profit
4	Street Address	200 Main Street
5	Town	Bristol
6	State	Connecticut
7	Zip Code	06010 -
8	CEO Name	Stephen J. Kaye, MD

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(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
9	CEO Title	President
10	CT Agent Name	Kurt Barwis
11	CT Agent Company	Bristol Hospital, Inc
12	CT Agent Company Street Address	Brewster Road
13	CT Agent Town	Bristol
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06010 -
<b>O.</b>	<b>AFFILIATE NAME</b>	<b>MEDCONN COLLECTION AGENCY, LLC</b>
1	Affiliate Description	COLLECTION AGENCY
2	Affiliate type of service	Collection Agency
3	Tax Status	For Profit
4	Street Address	2049 Silas Deane Highway, 3rd
5	Town	Rocky Hill
6	State	Connecticut
7	Zip Code	06067 -
8	CEO Name	Daniel Cass
9	CEO Title	Executive Director
10	CT Agent Name	Stephen J. Anderson
11	CT Agent Company	MedConn Collection Agency
12	CT Agent Company Street Address	136 West Main Street
13	CT Agent Town	New Britain
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06050 -
<b>P.</b>	<b>AFFILIATE NAME</b>	<b>MEDWORKS, LLC</b>
1	Affiliate Description	PROVIDES OCCUPATIONAL HEALTH SERVICES.
2	Affiliate type of service	Occupational Health
3	Tax Status	For Profit
4	Street Address	375 E. Cedar Street
5	Town	Newington
6	State	Connecticut
7	Zip Code	06111 -
8	CEO Name	Hunter Giroux
9	CEO Title	President & CEO
10	CT Agent Name	David C. Stone
11	CT Agent Company	Medworks, LLC
12	CT Agent Company Street Address	114 Woodland Street
13	CT Agent Town	Hartford
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06105 -
<b>Q.</b>	<b>AFFILIATE NAME</b>	<b>TOTAL LAUNDRY COLLABORATIVE, LLC</b>
1	Affiliate Description	Provide laundry services to Members, Members' Affiliates, and others.
2	Affiliate type of service	Affiliate Support Services
3	Tax Status	For Profit
4	Street Address	114 Woodland Street
5	Town	Hartford
6	State	Connecticut
7	Zip Code	06105 -
8	CEO Name	David Crowell
9	CEO Title	Cheif Operating Officer
10	CT Agent Name	Teresa M. Bolton
11	CT Agent Company	Total Laundry Collaborative, LLC
12	CT Agent Company Street Address	114 Woodland Street
13	CT Agent Town	Hartford
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06105 -

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(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION

\* P.O. BOX IS UNACCEPTABLE WITHOUT A STREET ADDRESS FOR EACH AGENT COMPANY

**BRISTOL HOSPITAL  
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REPORT 5 - HOSPITAL, AFFILIATE AND RELATED CORPORATION NET ASSETS**

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME	FUND DESCRIPTION / FUND PURPOSE	BALANCE AS OF 9/30/2009
<b>A. BRISTOL HOSPITAL</b>			
1		Unrestricted	(\$255,398)
2		Temporarily Restricted by Donor	\$939,739
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$6,554,919
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$7,239,260</b>
<b>B. BRISTOL HOSPITAL &amp; HEALTH CARE GROUP, INC.</b>			
1		Unrestricted	\$12,370,837
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	(\$17,665,052)
		<b>Total:</b>	<b>(\$5,294,215)</b>
<b>C. BRISTOL HEALTH CARE INC.</b>			
1		Unrestricted	(\$822,291)
2		Temporarily Restricted by Donor	\$63,069
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>(\$759,222)</b>
<b>D. BRISTOL HEALTH SERVICES, INC.</b>			
1		Unrestricted	\$1,245,932
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$1,245,932</b>
<b>E. BRISTOL HOSPITAL DEVELOPMENT FOUNDATION, INC.</b>			
1		Unrestricted	\$4,925,657
2		Temporarily Restricted by Donor	\$107,471
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$5,033,128</b>
<b>F. BRISTOL HOSPITAL EMS, LLC.</b>			
1		Unrestricted	\$818,727
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$818,727</b>
<b>G. BRISTOL MSO, LLC</b>			
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$0</b>

**BRISTOL HOSPITAL  
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REPORT 5 - HOSPITAL, AFFILIATE AND RELATED CORPORATION NET ASSETS**

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME	FUND DESCRIPTION / FUND PURPOSE	BALANCE AS OF 9/30/2009
	<b>H. BRISTOL PSYCHIATRIC SERVICES, P.C.</b>		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$0</b>
	<b>I. CENTRAL CONNECTICUT ENDOSCOPY CENTER, LLC</b>		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$0</b>
	<b>J. CENTRAL CONNECTICUT MEDICAL MANAGEMENT, INC</b>		
1		Unrestricted	\$427,205
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$427,205</b>
	<b>K. COLLABORATIVE LABORATORY SERVICES, LLC</b>		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$0</b>
	<b>L. CONNECTICUT OCCUPATIONAL MEDICAL PARTNERS</b>		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$0</b>
	<b>M. GREATER BRISTOL PRIMARY CARE GROUP, P.C.</b>		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$0</b>
	<b>N. HEALTH CONNECTICUT</b>		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$0</b>



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REPORT 5 - HOSPITAL, AFFILIATE AND RELATED CORPORATION NET ASSETS**

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME	FUND DESCRIPTION / FUND PURPOSE	BALANCE AS OF 9/30/2009
<b>O. MED-HELP, INC.</b>			
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$0</b>
<b>P. MEDCONN COLLECTION AGENCY, LLC</b>			
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$0</b>
<b>Q. MEDWORKS, LLC</b>			
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$0</b>
<b>R. TOTAL LAUNDRY COLLABORATIVE, LLC</b>			
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$0</b>
	<b>Total of all Affiliates (before Intercompany Eliminations)</b>	<b>Fund Balance:</b>	<b>\$26,375,867</b>
	<b>Intercompany Eliminations</b>		<b>(\$17,665,052)</b>
	<b>Total of all Affiliates</b>	<b>Fund Balance:</b>	<b>\$8,710,815</b>

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**REPORT 6 - TRANSACTIONS BETWEEN THE HOSPITAL AND AFFILIATES OR RELATED CORPORATIONS**

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
<b>A.</b>	<b>BRISTOL HOSPITAL &amp; HEALTH CARE GROUP, INC.</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2008</b>	<b>\$26,424,439</b>
1		Net Asset Transfer	09/30/2009	(\$19,185,179)
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2009</b>	<b>\$7,239,260</b>
<b>B.</b>	<b>BRISTOL HEALTH CARE INC.</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2008</b>	<b>\$1,531,162</b>
1		Payments	09/30/2009	(\$1,701,673)
2		Sale of Services	09/30/2009	\$409,556
3		Interest	09/30/2009	\$767,385
4		Employee Benefits	09/30/2009	\$4,644
5		Rent	09/30/2009	(\$28,644)
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2009</b>	<b>\$982,430</b>
<b>C.</b>	<b>BRISTOL HEALTH SERVICES, INC.</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2008</b>	<b>\$0</b>
		Nothing to Report		\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2009</b>	<b>\$0</b>
<b>D.</b>	<b>BRISTOL HOSPITAL DEVELOPMENT FOUNDATION, INC.</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2008</b>	<b>\$4,218,500</b>
1		Payments	09/30/2009	(\$519,937)
2		Interest	09/30/2009	\$189,444
3		Rent	09/30/2009	\$6,000
4		Salaries & Benefits	09/30/2009	\$312,920
5		Purchase of Services	09/30/2009	\$113,565
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2009</b>	<b>\$4,320,492</b>
<b>E.</b>	<b>BRISTOL HOSPITAL EMS, LLC.</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2008</b>	<b>\$314,890</b>
1		Rent	09/30/2009	\$60,456
2		Purchase of Services	09/30/2009	\$8,392
3		Payments	09/30/2009	(\$493,937)
4		Salaries & Benefits	09/30/2009	\$140,036
5		other	09/30/2009	\$13,462
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2009</b>	<b>\$43,299</b>

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**REPORT 6 - TRANSACTIONS BETWEEN THE HOSPITAL AND AFFILIATES OR RELATED CORPORATIONS**

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
F.	BRISTOL MSO, LLC			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	9/30/2008	\$0
		Nothing to Report		\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	9/30/2009	\$0
G.	BRISTOL PSYCHIATRIC SERVICES, P.C.			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	9/30/2008	\$0
		Nothing to Report		\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	9/30/2009	\$0
H.	CENTRAL CONNECTICUT ENDOSCOPY CENTER, LLC			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	9/30/2008	\$0
		Nothing to Report		\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	9/30/2009	\$0
I.	CENTRAL CONNECTICUT MEDICAL MANAGEMENT, INC			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	9/30/2008	\$0
		Nothing to Report		\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	9/30/2009	\$0
J.	COLLABORATIVE LABORATORY SERVICES, LLC			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	9/30/2008	\$0
		Nothing to Report		\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	9/30/2009	\$0
K.	CONNECTICUT OCCUPATIONAL MEDICAL PARTNERS			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	9/30/2008	\$0
		Nothing to Report		\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	9/30/2009	\$0
L.	GREATER BRISTOL PRIMARY CARE GROUP, P.C.			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	9/30/2008	\$0
		Nothing to Report		\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	9/30/2009	\$0
M.	HEALTH CONNECTICUT			

**BRISTOL HOSPITAL  
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**REPORT 6 - TRANSACTIONS BETWEEN THE HOSPITAL AND AFFILIATES OR RELATED CORPORATIONS**

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2008</b>	<b>\$0</b>
		Nothing to Report		\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2009</b>	<b>\$0</b>
<b>N.</b>	<b>MED-HELP, INC.</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2008</b>	<b>\$0</b>
		Nothing to Report		\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2009</b>	<b>\$0</b>
<b>O.</b>	<b>MEDCONN COLLECTION AGENCY, LLC</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2008</b>	<b>\$0</b>
		Nothing to Report		\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2009</b>	<b>\$0</b>
<b>P.</b>	<b>MEDWORKS, LLC</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2008</b>	<b>\$0</b>
		Nothing to Report		\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2009</b>	<b>\$0</b>
<b>Q.</b>	<b>TOTAL LAUNDRY COLLABORATIVE, LLC</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2008</b>	<b>\$0</b>
		Nothing to Report		\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2009</b>	<b>\$0</b>
			<b>Grand Total:</b>	<b>\$12,585,481</b>

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REPORT 6A - TRANSACTIONS BETWEEN HOSPITAL AFFILIATES OR RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)	(6)
LINE	AFFILIATE TRANSFERRING FUNDS	AFFILIATE RECEIVING FUNDS	DESCRIPTION OF TRANSFER	DATE	AMOUNT
			<b>Beginning Unconsolidated Intercompany Balance</b>	<b>10/01/2008</b>	<b>\$6,720,931</b>
<b>A.</b>	<b>BRISTOL HOSPITAL &amp; HEALTH CARE GROUP, INC.</b>				
1		BRISTOL HOSPITAL EMS, LLC.	Parent Company Investment in Subsidiary Net Assets	09/30/2009	(\$76,161)
2		BRISTOL HOSPITAL DEVELOPMENT FOUNDATION, INC.	Parent Company Investment in Subsidiary Net Assets	09/30/2009	\$128,205
3		BRISTOL HEALTH CARE INC.	Accounting Fees	09/30/2009	(\$19,284)
4		BRISTOL HEALTH SERVICES, INC.	Parent Company Investment in Subsidiary Net Assets	09/30/2009	(\$415,128)
			<b>Total:</b>	<b>9/30/2009</b>	<b>(\$382,368)</b>
<b>B.</b>	<b>BRISTOL HEALTH CARE INC.</b>				
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2009</b>	<b>\$0</b>
<b>C.</b>	<b>BRISTOL HEALTH SERVICES, INC.</b>				
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2009</b>	<b>\$0</b>
<b>D.</b>	<b>BRISTOL HOSPITAL DEVELOPMENT FOUNDATION, INC.</b>				
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2009</b>	<b>\$0</b>
<b>E.</b>	<b>BRISTOL HOSPITAL EMS, LLC.</b>				
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2009</b>	<b>\$0</b>
<b>F.</b>	<b>BRISTOL MSO, LLC</b>				
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2009</b>	<b>\$0</b>
<b>G.</b>	<b>BRISTOL PSYCHIATRIC SERVICES, P.C.</b>				
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2009</b>	<b>\$0</b>
<b>H.</b>	<b>CENTRAL CONNECTICUT ENDOSCOPY CENTER, LLC</b>				

BRISTOL HOSPITAL  
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REPORT 6A - TRANSACTIONS BETWEEN HOSPITAL AFFILIATES OR RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)	(6)
LINE	AFFILIATE TRANSFERRING FUNDS	AFFILIATE RECEIVING FUNDS	DESCRIPTION OF TRANSFER	DATE	AMOUNT
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2009</b>	<b>\$0</b>
<b>I.</b>	<b>CENTRAL CONNECTICUT MEDICAL MANAGEMENT, INC</b>				
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2009</b>	<b>\$0</b>
<b>J.</b>	<b>COLLABORATIVE LABORATORY SERVICES, LLC</b>				
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2009</b>	<b>\$0</b>
<b>K.</b>	<b>CONNECTICUT OCCUPATIONAL MEDICAL PARTNERS</b>				
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2009</b>	<b>\$0</b>
<b>L.</b>	<b>GREATER BRISTOL PRIMARY CARE GROUP, P.C.</b>				
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2009</b>	<b>\$0</b>
<b>M.</b>	<b>HEALTH CONNECTICUT</b>				
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2009</b>	<b>\$0</b>
<b>N.</b>	<b>MED-HELP, INC.</b>				
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2009</b>	<b>\$0</b>
<b>O.</b>	<b>MEDCONN COLLECTION AGENCY, LLC</b>				
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2009</b>	<b>\$0</b>
<b>P.</b>	<b>MEDWORKS, LLC</b>				
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2009</b>	<b>\$0</b>
<b>Q.</b>	<b>TOTAL LAUNDRY COLLABORATIVE, LLC</b>				

BRISTOL HOSPITAL  
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REPORT 6A - TRANSACTIONS BETWEEN HOSPITAL AFFILIATES OR RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)	(6)
LINE	AFFILIATE TRANSFERRING FUNDS	AFFILIATE RECEIVING FUNDS	DESCRIPTION OF TRANSFER	DATE	AMOUNT
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2009</b>	<b>\$0</b>
			<b>Ending Unconsolidated Intercompany Balance</b>	<b>9/30/2009</b>	<b>\$6,338,563</b>

BRISTOL HOSPITAL  
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REPORT 7- EXPENDITURES BY AFFILIATES / RELATED CORPORATIONS FOR THE BENEFIT OF THE HOSPITAL

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME & DESCRIPTION OF EXPENDITURE	AMOUNT	DATE
<b>A.</b>	<b>BRISTOL HOSPITAL &amp; HEALTH CARE GROUP, INC.</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2009</b>
<b>B.</b>	<b>BRISTOL HEALTH CARE INC.</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2009</b>
<b>C.</b>	<b>BRISTOL HEALTH SERVICES, INC.</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2009</b>
<b>D.</b>	<b>BRISTOL HOSPITAL DEVELOPMENT FOUNDATION, INC.</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2009</b>
<b>E.</b>	<b>BRISTOL HOSPITAL EMS, LLC.</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2009</b>
<b>F.</b>	<b>BRISTOL MSO, LLC</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2009</b>
<b>G.</b>	<b>BRISTOL PSYCHIATRIC SERVICES, P.C.</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2009</b>
<b>H.</b>	<b>CENTRAL CONNECTICUT ENDOSCOPY CENTER, LLC</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2009</b>
<b>I.</b>	<b>CENTRAL CONNECTICUT MEDICAL MANAGEMENT, INC</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2009</b>
<b>J.</b>	<b>COLLABORATIVE LABORATORY SERVICES, LLC</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2009</b>
<b>K.</b>	<b>CONNECTICUT OCCUPATIONAL MEDICAL PARTNERS</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2009</b>
<b>L.</b>	<b>GREATER BRISTOL PRIMARY CARE GROUP, P.C.</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2009</b>
<b>M.</b>	<b>HEALTH CONNECTICUT</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2009</b>
<b>N.</b>	<b>MED-HELP, INC.</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2009</b>
<b>O.</b>	<b>MEDCONN COLLECTION AGENCY, LLC</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2009</b>
<b>P.</b>	<b>MEDWORKS, LLC</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2009</b>
<b>Q.</b>	<b>TOTAL LAUNDRY COLLABORATIVE, LLC</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2009</b>



BRISTOL HOSPITAL  
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REPORT 7- EXPENDITURES BY AFFILIATES / RELATED CORPORATIONS FOR THE BENEFIT OF THE HOSPITAL

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME & DESCRIPTION OF EXPENDITURE	AMOUNT	DATE
	Grand Total:	\$0	9/30/2009

**BRISTOL HOSPITAL  
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REPORT 8 - HOSPITAL COMMITMENTS / ENDORSEMENTS FOR THE BENEFIT OF AFFILIATES / RELATED CORPORATIONS**

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME & DESCRIPTION OF THE COMMITMENT AND/OR ENDORSEMENT	AMOUNT	TERM IN YEARS
<b>A.</b>	<b>BRISTOL HOSPITAL &amp; HEALTH CARE GROUP, INC.</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>B.</b>	<b>BRISTOL HEALTH CARE INC.</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>C.</b>	<b>BRISTOL HEALTH SERVICES, INC.</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>D.</b>	<b>BRISTOL HOSPITAL DEVELOPMENT FOUNDATION, INC.</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>E.</b>	<b>BRISTOL HOSPITAL EMS, LLC.</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>F.</b>	<b>BRISTOL MSO, LLC</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>G.</b>	<b>BRISTOL PSYCHIATRIC SERVICES, P.C.</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>H.</b>	<b>CENTRAL CONNECTICUT ENDOSCOPY CENTER, LLC</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>I.</b>	<b>CENTRAL CONNECTICUT MEDICAL MANAGEMENT, INC</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>J.</b>	<b>COLLABORATIVE LABORATORY SERVICES, LLC</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	

**BRISTOL HOSPITAL  
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REPORT 8 - HOSPITAL COMMITMENTS / ENDORSEMENTS FOR THE BENEFIT OF AFFILIATES / RELATED CORPORATIONS**

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME & DESCRIPTION OF THE COMMITMENT AND/OR ENDORSEMENT	AMOUNT	TERM IN YEARS
K.	<b>CONNECTICUT OCCUPATIONAL MEDICAL PARTNERS</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
L.	<b>GREATER BRISTOL PRIMARY CARE GROUP, P.C.</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
M.	<b>HEALTH CONNECTICUT</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
N.	<b>MED-HELP, INC.</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
O.	<b>MEDCONN COLLECTION AGENCY, LLC</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
P.	<b>MEDWORKS, LLC</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
Q.	<b>TOTAL LAUNDRY COLLABORATIVE, LLC</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
	<b>Grand Total:</b>	<b>\$0</b>	

**BRISTOL HOSPITAL  
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REPORT 16 - DONATIONS AND FUNDS RESTRICTED FOR  
INDIGENT CARE AND FREE BEDS**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A. Indigent Care</b>					
	<b>Beginning Balance</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>0%</b>
1	Donations	\$0.00	\$0.00	\$0.00	0%
2	Income	\$0.00	\$0.00	\$0.00	0%
3	Expenditures	\$0.00	\$0.00	\$0.00	0%
4	Unrealized Gains and Losses	\$0.00	\$0.00	\$0.00	0%
	<b>Ending Balance</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>0%</b>
5	Projected Interest Income	\$0.00	\$0.00	\$0.00	0%
<b>B. Free Beds</b>					
	<b>Beginning Balance</b>	<b>\$1,819,542.00</b>	<b>\$1,368,741.00</b>	<b>(\$450,801.00)</b>	<b>-25%</b>
1	Donations	\$0.00	\$0.00	\$0.00	0%
2	Income	\$88,292.00	\$23,382.00	(\$64,910.00)	-74%
3	Expenditures	\$63,093.00	\$3,370.00	(\$59,723.00)	-95%
4	Unrealized Gains and Losses	(\$476,000.00)	(\$127,247.00)	\$348,753.00	-73%
	<b>Ending Balance</b>	<b>\$1,368,741.00</b>	<b>\$1,261,506.00</b>	<b>(\$107,235.00)</b>	<b>-8%</b>
5	Projected Interest Income	\$25,000.00	\$25,000.00	\$0.00	0%
<b>C. Other</b>					
	<b>Beginning Balance</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>0%</b>
1	Donations	\$0.00	\$0.00	\$0.00	0%
2	Income	\$0.00	\$0.00	\$0.00	0%
3	Expenditures	\$0.00	\$0.00	\$0.00	0%
4	Unrealized Gains and Losses	\$0.00	\$0.00	\$0.00	0%
	<b>Ending Balance</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>0%</b>
5	Projected Interest Income	\$0.00	\$0.00	\$0.00	0%

BRISTOL HOSPITAL		
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REPORT 17 - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY THE HOSPITAL		
A. Patient Activity		
(1)	(2)	(3)
Patient	Name of Hospital Bed Fund (FULL NAME)	Amount
<b>1.Number of Applications for Hospital Bed Funds</b>		<b>5</b>
<b>2. A. Number of Patients receiving Hospital Bed Fund Grants</b>		<b>5</b>
<b>2. B. The Actual Total Dollar Amount provided to all patients from Hospital Bed F</b>		<b>\$3,369.63</b>
<b>1</b>	<b>Meader Fund</b>	<b>\$258.50</b>
<b>2</b>	<b>Meader Fund</b>	<b>\$484.46</b>
<b>3</b>	<b>Meader Fund</b>	<b>\$2,100.46</b>
<b>4</b>	<b>Meader Fund</b>	<b>\$284.50</b>
<b>5</b>	<b>Meader Fund</b>	<b>\$241.71</b>
<b>Grand Total</b>		<b>\$3,369.63</b>

BRISTOL HOSPITAL					
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REPORT 17 - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY THE HOSPITAL					
B. BED FUND ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
Line	Name of Hospital Bed Fund	FMV of Principal	Actual Earnings	Earnings Reinvested	Earnings Available
(3)	Fair Market Value of the Principal of each individual Hospital Bed Fund, or the Principal attributable to each Hospital				
(4)	Total Actual Earnings for each Hospital Bed Fund or the Earnings attributable to each Hospital Bed Fund.				
(5)	Actual Dollar Amount of Earnings reinvested as Principal, if any.				
(6)	Actual Dollar Amount of Earnings available for Patient Care.				
	Meader Fund	\$1,261,506.00	(\$76,446.00)	\$0.00	\$30,787.00
	<b>Total Bed Funds :</b>	<b>\$1,261,506.00</b>	<b>(\$76,446.00)</b>	<b>\$0.00</b>	<b>\$30,787.00</b>

**BRISTOL HOSPITAL  
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**REPORT 18 - HOSPITAL COLLECTION PLACEMENT POLICIES AND COLLECTION AGENT INFORMATION**

(1)	(2)	(3)
LINE	DESCRIPTION	COLLECTION INFORMATION
<b>I. GENERAL COLLECTION PROCESSES AND PROCEDURES</b>		
A.	Hospital's processes and policies for assigning a debt to a Collection Agent	Patients who have not paid their balances or complied with payment agreements following 60 days of prior activity will be referred to a collection agency. Patient account balances deemed delinquent by Bristol Hospital will be referred to an agency on a monthly basis.
B.	Hospital's processes and policies for compensating a Collection Agent for services rendered	24% on Regular Accounts, 40% on Legal Accounts, 50% on Out of State Legal Accounts, 25% on Medicare Accounts, 14% on Compensation Accounts.
C.	Total Recovery Rate on accounts assigned (excluding Medicare accounts) to Collection Agents	3.91%
<b>II. SPECIFIC COLLECTION AGENT INFORMATION</b>		
<b>Collection Agent</b>		
1	Collection Agent Name	American Adjustment Bureau
2	Collection Agent Type	Collection Agency
3	Related / Not Related Entity	Not Related
4	If the Hospital follows the same processes and policies described in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	Each monthly referral will consist of the accounts in common categories and will encompass accounts with patients last names beginning with the letter A through Z totaling 10% of total dollars deemed delinquent in Hospital 1.
5	If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	25% on Regular Accounts, 40% on Legal Accounts, 50% on Out of State Legal Accounts, 25% on Medicare Accounts.

**BRISTOL HOSPITAL  
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**REPORT 18 - HOSPITAL COLLECTION PLACEMENT POLICIES AND COLLECTION AGENT INFORMATION**

(1)	(2)	(3)
LINE	DESCRIPTION	COLLECTION INFORMATION
6	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent.	2.56%
	<b>Collection Agent</b>	
1	Collection Agent Name	MedConn Collection Agency, LLC
2	Collection Agent Type	Collection Agency
3	Related / Not Related Entity	Related
4	If the Hospital follows the same processes and policies described in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	Each Monthly referral will consist of the accounts in common categories and will encompass accounts with patients last names beginning with the letters A through Z totaling 90% of dollars deemed delinquent in Hospital I and 100% of total dollars deemed delinquent in Hospital II.
5	If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	24% on Regular Accounts, 40% on Legal Accounts, 50% on Out of State Legal Accounts, 14% on Compensation Accounts.
6	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent.	4.79%



**BRISTOL HOSPITAL  
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REPORT 19 - SALARIES AND FRINGE BENEFITS OF THE TEN HIGHEST PAID HOSPITAL POSITIONS**

LINE	POSITION TITLE	SALARY	FRINGE BENEFITS	TOTAL
1.	President & CEO	\$330,562	\$38,423	\$368,985
2.	Oncology Physician	\$299,787	\$27,925	\$327,712
3.	Sr. Vice President, Chief Medical Officer	\$280,910	\$26,466	\$307,376
4.	Sr. Vice President/ CFO	\$259,685	\$27,393	\$287,078
5.	Vice President of Patient Care Services	\$181,294	\$30,811	\$212,105
6.	Clinic Physician	\$168,775	\$31,685	\$200,460
7.	Vice President of Operations	\$171,050	\$26,333	\$197,383
8.	Occupational Health Physician	\$180,545	\$15,305	\$195,850
9.	Assistant Vice President, Information Services	\$127,236	\$30,456	\$157,692
10.	Controller	\$112,302	\$29,789	\$142,091
	<b>Grand Total:</b>	<b>\$2,112,146</b>	<b>\$284,586</b>	<b>\$2,396,732</b>

**BRISTOL HOSPITAL  
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**REPORT 21- HOSPITAL SALARIES AND FRINGE BENEFITS  
PAID BY JOINT VENTURES, AFFILIATES AND RELATED CORPORATIONS**

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	SALARIES (Directly or Indirectly) <sup>C</sup>	FRINGE BENEFITS <sup>A</sup> (Directly or Indirectly) <sup>C</sup>	TOTAL
<b>A .</b>	<b>BRISTOL HOSPITAL &amp; HEALTH CARE GROUP, INC.</b>			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>B .</b>	<b>BRISTOL HEALTH CARE INC.</b>			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>C .</b>	<b>BRISTOL HEALTH SERVICES, INC.</b>			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>D .</b>	<b>BRISTOL HOSPITAL DEVELOPMENT FOUNDATION, INC.</b>			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>E .</b>	<b>BRISTOL HOSPITAL EMS, LLC.</b>			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>F .</b>	<b>BRISTOL MSO, LLC</b>			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>G .</b>	<b>BRISTOL PSYCHIATRIC SERVICES, P.C.</b>			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>H .</b>	<b>CENTRAL CONNECTICUT ENDOSCOPY CENTER, LLC</b>			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>I .</b>	<b>CENTRAL CONNECTICUT MEDICAL MANAGEMENT, INC</b>			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>J .</b>	<b>COLLABORATIVE LABORATORY SERVICES, LLC</b>			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$1,457,873	\$451,264	\$1,909,137
<b>K .</b>	<b>CONNECTICUT OCCUPATIONAL MEDICAL PARTNERS</b>			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>L .</b>	<b>GREATER BRISTOL PRIMARY CARE GROUP, P.C.</b>			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>M .</b>	<b>HEALTH CONNECTICUT</b>			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>N .</b>	<b>MED-HELP, INC.</b>			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>O .</b>	<b>MEDCONN COLLECTION AGENCY, LLC</b>			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>P .</b>	<b>MEDWORKS, LLC</b>			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>Q .</b>	<b>TOTAL LAUNDRY COLLABORATIVE, LLC</b>			

**BRISTOL HOSPITAL  
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REPORT 21- HOSPITAL SALARIES AND FRINGE BENEFITS  
PAID BY JOINT VENTURES, AFFILIATES AND RELATED CORPORATIONS**

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	SALARIES (Directly or Indirectly) <sup>C</sup>	FRINGE BENEFITS <sup>A</sup> (Directly or Indirectly) <sup>C</sup>	TOTAL
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0

*For each entity listed on Report 20, complete Report 21.*

*A - Fringe benefits shall represent the value of all forms of compensation as described in Section 19a-643-206-(b)(21), including the fair market value where appropriate.*

*B - A hospital employee is anyone who provides a service which incurs an expense for the hospital.*

*C - Indirect payments include but are not limited to payments made to related entities.*

**BRISTOL HOSPITAL  
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REPORT 22 - TRANSFER OF ASSETS OR OPERATIONS OR  
CHANGE OF CONTROL FROM THE HOSPITAL TO A PROFIT ENTITY**

(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2009
<b>A</b>	<b>Transfer of Assets or Operations</b>	
1.	Name of the Person or Entity Organized or Operated For Profit involved in each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions.	N/A
2.	Description of each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions.	N/A
3.	Description of each Hospital Clinical or Nonclinical Service or Function transferred or involved in a change of control.	N/A
4.	Date that each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions occurred.	N/A
5.	Amount of each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions.	\$0

BRISTOL HOSPITAL ANNUAL REPORTING FISCAL YEAR 2009 REPORT 23 - CHARITY CARE AND REDUCED COST SERVICES PROVIDED BY THE HOSPITAL					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2008	FY 2009	AMOUNT	%
LINE	DESCRIPTION	AMOUNT	AMOUNT	DIFFERENCE	DIFFERENCE
<b>A. Hospital Charity Care (see Hospital Audited Financial Statement Notes)</b>					
1.	Number of Applicants	274	310	36	13%
2.	Number of Approved Applicants	262	271	9	3%
3.	Total Charges (A)	\$929,468	\$558,883	(\$370,585)	-40%
	<b>Average Charges</b>	<b>\$3,548</b>	<b>\$2,062</b>	<b>(\$1,485)</b>	<b>-42%</b>
4.	Ratio of Cost to Charges (RCC)	0.333691	0.327496	(0.006195)	-2%
	<b>Total Cost</b>	<b>\$310,155</b>	<b>\$183,032</b>	<b>(\$127,123)</b>	<b>-41%</b>
	<b>Average Cost</b>	<b>\$1,184</b>	<b>\$675</b>	<b>(\$508)</b>	<b>-43%</b>
5.	Charity Care - Inpatient Charges	\$302,760	\$311,902	\$9,142	3%
6.	Charity Care - Outpatient Emergency Department Charges	123,065	98,235	(24,830)	-20%
7.	Charity Care - Outpatient Charges (Excludes ED Charges)	503,643	148,746	(354,897)	-70%
	<b>Total Charges (A)</b>	<b>\$929,468</b>	<b>\$558,883</b>	<b>(\$370,585)</b>	<b>-40%</b>
8.	Charity Care - Number of Patient Days	108	64	(44)	-41%
9.	Charity Care - Number of Discharges	57	14	(43)	-75%
10.	Charity Care - Number of Outpatient ED Visits	119	97	(22)	-18%
11.	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	351	251	(100)	-28%
<b>(A) The total amount must agree with the total amount listed in the Hospital Audited Financial Statement Notes.</b>					
<b>B. Hospital Bed Funds (see Hospital Reporting System - Report 17)</b>					
1.	Number of Applicants	38	5	(33)	-87%
2.	Number of Approved Applicants	38	5	(33)	-87%
3.	Total Charges (B)	\$63,093	\$3,370	(\$59,723)	-95%
	<b>Average Charges</b>	<b>\$1,660</b>	<b>\$674</b>	<b>(\$986)</b>	<b>-59%</b>
4.	Ratio of Cost to Charges (RCC)	0.333691	0.327496	(0.006195)	-2%
	<b>Total Cost</b>	<b>\$21,054</b>	<b>\$1,104</b>	<b>(\$19,950)</b>	<b>-95%</b>
	<b>Average Cost</b>	<b>\$554</b>	<b>\$221</b>	<b>(\$333)</b>	<b>-60%</b>
5.	Bed Funds - Inpatient Charges	\$1,020	\$0	(\$1,020)	-100%
6.	Bed Funds - Outpatient Emergency Department Charges	39,324	2,585	(36,739)	-93%
7.	Bed Funds - Outpatient Charges (Excludes ED Charges)	22,749	785	(21,964)	-97%
	<b>Total Charges (B)</b>	<b>\$63,093</b>	<b>\$3,370</b>	<b>(\$59,723)</b>	<b>-95%</b>
8.	Bed Funds - Number of Patient Days	1	0	(1)	-100%
9.	Bed Funds - Number of Discharges	1	0	(1)	-100%
10.	Bed Funds - Number of Outpatient ED Visits	33	2	(31)	-94%
11.	Bed Funds - Number of Outpatient Visits (Excludes ED Visits)	28	3	(25)	-89%
<b>(B) The total amount must agree with the total amount listed on Hospital Reporting System - Report 17.</b>					