

**SAINT FRANCIS HOSPITAL AND MEDICAL CENTER**  
**ANNUAL REPORTING**  
**FISCAL YEAR 2012**  
**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>SAINT FRANCIS CARE, INC.</b>
1	Affiliate Description	PARENT CORPORATION OF SAINT FRANCIS HOSPITAL AND MEDICAL CENTER. OVERSEES AND COORDINATES THE STRATEGIC PLANNING, FINANCIAL PLANNING AND OTHER ACTIVITIES OF SAINT FRANCIS HOSPITAL AND SAINT FRANCIS' AFFILIATES.
2	Affiliate type of service	Parent Corporation
3	Tax Status	Not for Profit
4	Street Address	114 Woodland Street
5	Town	Hartford
6	State	Connecticut
7	Zip Code	06105 -
8	CEO Name	Christopher M. Dadlez
9	CEO Title	President and CEO
10	CT Agent Name	Theresa Bolton, Esq.
11	CT Agent Company	Saint Francis Hospital and Medical Center
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>B. AFFILIATE NAME</b>		
		<b>ASYLUM HILL FAMILY MEDICINE CENTER, INC.</b>
1	Affiliate Description	PROVIDES PROFESSIONAL AND MEDICAL SERVICES AND RELATED RESEARCH ACTIVITIES.
2	Affiliate type of service	Medical Practices
3	Tax Status	Not for Profit
4	Street Address	114 Woodland Street
5	Town	Hartford
6	State	Connecticut
7	Zip Code	06105 -
8	CEO Name	Adam R. Silverman, MD
9	CEO Title	President
10	CT Agent Name	Theresa Bolton, Esq.
11	CT Agent Company	Saint Francis Hospital and Medical Center
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>C. 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	Rolf Knoll, MD
9	CEO Title	President
10	CT Agent Name	Theresa Bolton, Esq.
11	CT Agent Company	Saint Francis Hospital and Medical Center
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>D. AFFILIATE NAME</b>		
		<b>MOUNT SINAI REHABILITATION HOSPITAL INC.</b>
1	Affiliate Description	OPERATES THE MOUNT SINAI REHABILITATION HOSPITAL

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(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
2	Affiliate type of service	Rehabilitation Facility
3	Tax Status	Not for Profit
4	Street Address	490 Blue Hills Avenue
5	Town	Hartford
6	State	Connecticut
7	Zip Code	06112 -
8	CEO Name	Christopher M. Dadlez
9	CEO Title	President and Chief Executive Officer
10	CT Agent Name	Theresa Bolton, Esq.
11	CT Agent Company	Saint Francis Hospital and Medical Center
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>E. AFFILIATE NAME</b>		
<b>AFFILIATE NAME</b>		<b>NEW ASYLUM MANAGEMENT CORPORATION</b>
1	Affiliate Description	PARTICIPATES IN CERTAIN TAXABLE INVESTMENTS ON BEHALF OF CAMILLUS CORPORATION.
2	Affiliate type of service	For Profit Services (Specify)
3	Tax Status	For Profit
4	Street Address	1000 Asylum Avenue
5	Town	Hartford
6	State	Connecticut
7	Zip Code	06105 -
8	CEO Name	Christopher M. Dadlez
9	CEO Title	President
10	CT Agent Name	Theresa Bolton, Esq.
11	CT Agent Company	Saint Francis Hospital and Medical Center
12	CT Agent Company Street Address	114 Woodland Street, Hartford
13	CT Agent Town	Hartford
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06105 -
<b>F. AFFILIATE NAME</b>		
<b>AFFILIATE NAME</b>		<b>ONE THOUSAND CORPORATION</b>
1	Affiliate Description	THE PURPOSE OF THE CORPORATION SHALL BE TO ACQUIRE, HOLD TITLE TO; MANAGE AND COLLECT INCOME FROM REAL PROPERTY AND TO TURN OVER THE ENTIRE AMOUNT OF SUCH INCOME, LESS EXPENSES TO THE CAMILLUS CORPORATION
2	Affiliate type of service	Real Estate
3	Tax Status	Not for Profit
4	Street Address	114 Woodland Street
5	Town	Hartford
6	State	Connecticut
7	Zip Code	06105 -
8	CEO Name	Christopher M. Dadlez
9	CEO Title	President
10	CT Agent Name	Theresa Bolton, Esq.
11	CT Agent Company	Saint Francis Hospital and Medical Center
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>G. AFFILIATE NAME</b>		
<b>AFFILIATE NAME</b>		<b>SAINT FRANCIS BEHAVIORAL HEALTH GROUP, P.C.(FORMERLY PATH, P.C.)</b>
1	Affiliate Description	TO RENDER PROFESSIONAL PSYCHOLOGICAL SERVICES TO PERSONS IN NEED OF SUCH SERVICES. Formerly known as PATH, the new name became effective 9/1/09
2	Affiliate type of service	Mental Health Services
3	Tax Status	For Profit

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(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
4	Street Address	500 Blue Hills Avenue
5	Town	Portland
6	State	Connecticut
7	Zip Code	06112 -
8	CEO Name	Surita Rao, M.D.
9	CEO Title	President
10	CT Agent Name	Theresa Bolton, Esq.
11	CT Agent Company	Saint Francis Hospital and Medical Center
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>H. AFFILIATE NAME</b>		
		<b>SAINT FRANCIS CARE MEDICAL GROUP, P.C.</b>
1	Affiliate Description	THE PURPOSES FOR WHICH THE CORPORATION IS ORGANIZED IS TO PRACTICE, THROUGH INDIVIDUALS AUTHORIZED BY LAW, THE PROFESSION OF MEDICINE, AND IN FURTHERANCE OF THE FOREGOING, TO ENGAGE IN SUCH OTHER ACTIVITIES AS ARE PERMITTED BY LAW.
2	Affiliate type of service	Medical Practices
3	Tax Status	For Profit
4	Street Address	114 Woodland Street
5	Town	Hartford
6	State	Connecticut
7	Zip Code	06105 -
8	CEO Name	Rolf Knoll, M.D.
9	CEO Title	President
10	CT Agent Name	Theresa Bolton, Esq.
11	CT Agent Company	Saint Francis Hospital and Medical Center
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>I. AFFILIATE NAME</b>		
		<b>SAINT FRANCIS EMERGENCY MEDICAL GROUP (A SUBSIDIARY OF ST. FRANCIS MEDICAL GROUP)</b>
1	Affiliate Description	TO ENGAGE IN TEACHING AND EDUCAT OF MED STUDENTS, RESIDENTS, FELLOWS. TO PERFORM MEDICAL AND RELATED RESEARCH ACTIVITIES. TO RENDER PROF MED SVCS TO PERSONS IN NEED OF SUCH SVCS, ESPECIALLY EMERGENCY MEDICAL CARE
2	Affiliate type of service	Physicians Services
3	Tax Status	Not for Profit
4	Street Address	114 Woodland Street
5	Town	Hartford
6	State	Connecticut
7	Zip Code	06105 -
8	CEO Name	Rolf Knoll, MD
9	CEO Title	President
10	CT Agent Name	Theresa Bolton, Esq
11	CT Agent Company	
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>J. AFFILIATE NAME</b>		
		<b>SAINT FRANCIS HEALTHCARE PARTNERS (FORMERLY ST FRAN/MT SINAI PHYSICIAN HOSPITAL ORGANIZATION, INC.)</b>
1	Affiliate Description	ARRANGING FOR THE HEALTH CARE SERVICES TO PERSONS RESIDING IN CONNECTICUT AND PROVIDE VARIOUS MANAGEMENT SERVICES TO DOCTORS AND DENTISTS. Formerly known as St. Francis /Mt. Sinai Physician Hospital Organization, Inc., the name change became eff. 1/27/09

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(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
2	Affiliate type of service	Physicians Hospital Org. (PHO)
3	Tax Status	Not for Profit
4	Street Address	114 Woodland Street
5	Town	Hartford
6	State	Connecticut
7	Zip Code	06105 -
8	CEO Name	Jess Kupec
9	CEO Title	President& CEO
10	CT Agent Name	Lisa Boyle
11	CT Agent Company	Robinson & Cole
12	CT Agent Company Street Address	280 Trumbull Street
13	CT Agent Town	Hartford
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06103 -
<b>K.</b>	<b>AFFILIATE NAME</b>	<b>SAINT FRANCIS HEALTHCARE PARTNERS ACO, INC</b>
1	Affiliate Description	ARRANGING FOR THE HEALTH CARE SERVICES TO PERSONS RESIDING IN CONN. AND PROVIDE VARIOUS MANAGEMENT SERVICES TO DOCTORS AND DENTISTS
2	Affiliate type of service	Physicians Hospital Org. (PHO)
3	Tax Status	Not for Profit
4	Street Address	114 Woodland Street
5	Town	Hartford
6	State	Connecticut
7	Zip Code	06105 -
8	CEO Name	Jess Kupec
9	CEO Title	President & CEO
10	CT Agent Name	Lisa Boyle
11	CT Agent Company	Robinson & Cole
12	CT Agent Company Street Address	280 Trumbull Street
13	CT Agent Town	Hartford
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06103 -
<b>L.</b>	<b>AFFILIATE NAME</b>	<b>SAINT FRANCIS HOSPITAL AND MEDICAL CENTER FOUNDATION, INC.</b>
1	Affiliate Description	TO OPERATE EXCLUSIVELY FOR CHARITABLE, SCIENTIFIC & EDUCATIONAL PURPOSES
2	Affiliate type of service	Foundation
3	Tax Status	Not for Profit
4	Street Address	95 Woodland Street
5	Town	Hartford
6	State	Connecticut
7	Zip Code	06105 -
8	CEO Name	E. Merritt McDonough, Jr.
9	CEO Title	President
10	CT Agent Name	LISA BOYLE
11	CT Agent Company	ROBINSON AND COLE
12	CT Agent Company Street Address	280 TRUMBULL STREET
13	CT Agent Town	Hartford
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06103 -
<b>M.</b>	<b>AFFILIATE NAME</b>	<b>SAINT FRANCIS INDEMNITY</b>
1	Affiliate Description	Vermont limited liability company for the purpose of writing & reinsurance as a captive insurance company
2	Affiliate type of service	Insurance
3	Tax Status	For Profit
4	Street Address	76 Paul Street, Suite 500
5	Town	Burlington

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(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
6	State	Vermont
7	Zip Code	05401 -
8	CEO Name	John Giamalis
9	CEO Title	President
10	CT Agent Name	Theresa Bolton, Esq.
11	CT Agent Company	Saint Francis Hospital & Medical Center
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>N. AFFILIATE NAME</b>		
		<b>SAINT FRANCIS MEDICAL GROUP, INC. (FORMERLY WOODLAND PHYSICIANS ASSOCIATES)</b>
1	Affiliate Description	TO ENGAGE IN THE TEACHING AND EDUCAT OF MEDICAL STUDENTS, RESIDENTS AND FELLOWS. TO PERFORM MEDICAL AND RELATED RESEARCH ACTIVITIES. TO RENDER PROFESSIONAL MED. SVCS. Formerly known as Woodland Phys Assoc, the name change became eff. 2/20/09
2	Affiliate type of service	Physicians Services
3	Tax Status	Not for Profit
4	Street Address	114 Woodland Street
5	Town	Hartford
6	State	Connecticut
7	Zip Code	06105 -
8	CEO Name	Rolf Knoll, MD
9	CEO Title	President
10	CT Agent Name	Theresa Bolton, Esq.
11	CT Agent Company	Saint Francis Hospital and Medical Center
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>O. AFFILIATE NAME</b>		
		<b>SAINT FRANCIS PHO FOUNDATION, INC.</b>
1	Affiliate Description	THE PURPOSES OF THE CORPORATION ARE TO ASSESS AND IMPROVE THE QUALITY AND SAFETY OF HEALTH CARE DELIVERED TO PATIENTS, AND TO IMPLEMENT CHANGE TO IMPROVE THE EFFICIENCY AND COST EFFECTIVENESS OF THE HEALTH CARE DELIVERY SYSTEM
2	Affiliate type of service	Foundation
3	Tax Status	Not for Profit
4	Street Address	114 WOODLAND STREET
5	Town	HARTFORD
6	State	Connecticut
7	Zip Code	06105 -
8	CEO Name	JESS KUPEC
9	CEO Title	PRESIDENT
10	CT Agent Name	LISA BOYLE
11	CT Agent Company	ROBINSON AND COLE
12	CT Agent Company Street Address	280 TRUMBULL STREET
13	CT Agent Town	HARTFORD
14	CT Agent State	Connecticut
15	CT Agent Zip Code	16103 -
<b>P. AFFILIATE NAME</b>		
		<b>THE CAMILLUS CORPORATION</b>
1	Affiliate Description	NON-STOCK CORPORATION FORMED BY ARCHDIOCESE OF HARTFORD. OWNS SEVERAL CORPORATIONS WHICH PROVIDE SERVICES TO THE HOSPITAL AND TO OTHERS.
2	Affiliate type of service	Other HealthCare Svcs(Specify)
3	Tax Status	Not for Profit
4	Street Address	1000 Asylum Avenue

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(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
5	Town	Hartford
6	State	Connecticut
7	Zip Code	06105 -
8	CEO Name	Christopher M. Dadlez
9	CEO Title	President and Executive Vice President
10	CT Agent Name	Theresa Bolton, Esq.
11	CT Agent Company	Saint Francis Hospital and Medical Center
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. AFFILIATE NAME</b>		
		<b>TOTAL LAUNDRY COLLABORATIVE, LLC</b>
1	Affiliate Description	The purpose of the company shall be to provide laundry services
2	Affiliate type of service	Other HealthCare Svcs(Specify)
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	Chief Operating Officer
10	CT Agent Name	Theresa Bolton, Esq.
11	CT Agent Company	Saint Francis Hospital and Medical Center
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 -

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

**SAINT FRANCIS HOSPITAL AND MEDICAL CENTER**  
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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 9/30/2012
<b>A. SAINT FRANCIS HOSPITAL AND MEDICAL CENTER</b>			
1		Unrestricted	\$5,944,000
2		Temporarily Restricted by Donor	\$44,602,000
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$52,824,000
5		Intercompany Eliminations	(\$1,925,000)
		<b>Total:</b>	<b>\$101,445,000</b>
<b>B. SAINT FRANCIS CARE, INC.</b>			
1		Unrestricted	\$15,847,000
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	(\$28,636,000)
		<b>Total:</b>	<b>(\$12,789,000)</b>
<b>C. ASYLUM HILL FAMILY MEDICINE CENTER, INC.</b>			
1		Unrestricted	\$129,000
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>\$129,000</b>
<b>D. COLLABORATIVE LABORATORY SERVICES, LLC</b>			
1		Unrestricted	\$25,000
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>\$25,000</b>
<b>E. MOUNT SINAI REHABILITATION HOSPITAL INC.</b>			
1		Unrestricted	\$21,195,000
2		Temporarily Restricted by Donor	\$1,067,000
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$22,262,000</b>
<b>F. NEW ASYLUM MANAGEMENT CORPORATION</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>G. ONE THOUSAND CORPORATION</b>			
1		Unrestricted	\$14,354,000
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>\$14,354,000</b>

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(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME	FUND DESCRIPTION / FUND PURPOSE	BALANCE AS OF 9/30/2012
	<b>H. SAINT FRANCIS BEHAVIORAL HEALTH GROUP, P.C.(FORMERLY PATH, P.C.)</b>		
1		Unrestricted	(\$3,342,000)
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>(\$3,342,000)</b>
	<b>I. SAINT FRANCIS CARE MEDICAL GROUP, P.C.</b>		
1		Unrestricted	(\$90,000)
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>(\$90,000)</b>
	<b>J. SAINT FRANCIS EMERGENCY MEDICAL GROUP (A SUBSIDIARY OF ST. FRANCIS MEDICAL GROUP)</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>K. SAINT FRANCIS HEALTHCARE PARTNERS (FORMERLY ST FRAN/MT SINAI PHYSICIAN HOSPITAL ORGANIZATION, 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>L. SAINT FRANCIS HEALTHCARE PARTNERS ACO, 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>M. SAINT FRANCIS HOSPITAL AND MEDICAL CENTER FOUNDATION, INC.</b>		
1		Unrestricted	(\$322,000)
2		Temporarily Restricted by Donor	\$12,575,000
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$213,000
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$12,466,000</b>
	<b>N. SAINT FRANCIS INDEMNITY</b>		
1		Unrestricted	\$15,718,000
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0



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(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME	FUND DESCRIPTION / FUND PURPOSE	BALANCE AS OF 9/30/2012
		<b>Total:</b>	<b>\$15,718,000</b>

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(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME	FUND DESCRIPTION / FUND PURPOSE	BALANCE AS OF 9/30/2012
	<b>O. SAINT FRANCIS MEDICAL GROUP, INC. (FORMERLY WOODLAND PHYSICIANS ASSOCIATES)</b>		
1		Unrestricted	(\$8,235,000)
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>(\$8,235,000)</b>
	<b>P. SAINT FRANCIS PHO FOUNDATION, 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>Q. THE CAMILLUS CORPORATION</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	\$2,215,000
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>\$2,215,000</b>
	<b>Total of all Affiliates (before Intercompany Eliminations)</b>	<b>Fund Balance:</b>	<b>\$174,719,000</b>
	<b>Intercompany Eliminations</b>		<b>(\$30,561,000)</b>
	<b>Total of all Affiliates</b>	<b>Fund Balance:</b>	<b>\$144,158,000</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. SAINT FRANCIS CARE, INC.</b>				
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2011</b>	<b>\$0</b>
		Nothing to Report		\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2012</b>	<b>\$0</b>
<b>B. ASYLUM HILL FAMILY MEDICINE CENTER, INC.</b>				
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2011</b>	<b>(\$33,084)</b>
1		Purchase of Services	09/30/2011	\$35,444
2		Payments	09/30/2011	\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2012</b>	<b>\$2,360</b>
<b>C. COLLABORATIVE LABORATORY SERVICES, LLC</b>				
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2011</b>	<b>(\$770,142)</b>
1		Supplies Sold	09/30/2012	<b>(\$14,027,906)</b>
2		Purchase of Services	09/30/2012	\$1,193,105
3		Supplies Purchased	09/30/2012	\$14,425,300
4		Salary & Benefits charged to Affiliate by Hospital	09/30/2012	\$36,514
5		Salaries & Benefits charged to Hospital	09/30/2012	<b>(\$10,854,669)</b>
6		Payments	09/30/2012	\$4,750,000
7		Transfer of Funds	09/30/2012	<b>(\$1,158,714)</b>
8		Health Insurance Premiums charged to Affiliate	09/30/2012	\$2,482,752
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2012</b>	<b>(\$3,923,760)</b>
<b>D. MOUNT SINAI REHABILITATION HOSPITAL INC.</b>				
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2011</b>	<b>(\$4,472,751)</b>
1		Purchase of Services	09/30/2012	\$9,448,052
2		Salaries & Benefits charged to Hospital	09/30/2012	<b>(\$4,026,489)</b>
3		Salary & Benefits charged to Affiliate by Hospital	09/30/2012	\$1,962,212
4		Transfer of Funds	09/30/2012	<b>(\$3,499,044)</b>
5		Payments	09/30/2012	\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2012</b>	<b>(\$588,020)</b>
<b>E. NEW ASYLUM MANAGEMENT CORPORATION</b>				
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2011</b>	<b>\$0</b>
		Nothing to Report		\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2012</b>	<b>\$0</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>F. ONE THOUSAND CORPORATION</b>				
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2011</b>	<b>(\$3,509,398)</b>
1		Salaries charged to Affiliate	09/30/2012	\$126,630
2		Purchase of Services	09/30/2012	\$84,698
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2012</b>	<b>(\$3,298,070)</b>
<b>G. SAINT FRANCIS BEHAVIORAL HEALTH GROUP, P.C.(FORMERLY PATH, P.C.)</b>				
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2011</b>	<b>\$2,642,434</b>
1		Purchase of Services	09/30/2012	<b>(\$2,100,000)</b>
2		Transfer of Funds	09/30/2012	\$2,294,204
3		Salary & Benefits charged to Affiliate by Hospital	09/30/2012	\$54,541
4		Purchase of Services	09/30/2012	\$583,493
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2012</b>	<b>\$3,474,672</b>
<b>H. SAINT FRANCIS CARE MEDICAL GROUP, P.C.</b>				
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2011</b>	<b>\$1,147,800</b>
1		Purchase of Services	09/30/2012	<b>(\$700,000)</b>
2		Payments	09/30/2012	<b>(\$161,545)</b>
3		Transfer of Funds	09/30/2012	\$281,560
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2012</b>	<b>\$567,815</b>
<b>I. SAINT FRANCIS EMERGENCY MEDICAL GROUP (A SUBSIDIARY OF ST. FRANCIS MEDICAL GROUP)</b>				
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2011</b>	<b>\$0</b>
		Nothing to Report		\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2012</b>	<b>\$0</b>
<b>J. SAINT FRANCIS HEALTHCARE PARTNERS (FORMERLY ST FRAN/MT SINAI PHYSICIAN HOSPITAL ORGANIZATION, INC.)</b>				
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2011</b>	<b>\$215,167</b>
1		Purchase of Services	09/30/2012	\$1,969,462
2		Purchase of Services	09/30/2012	<b>(\$188,221)</b>
3		Salaries & Benefits charged to Hospital	09/30/2012	<b>(\$1,086,965)</b>
4		Revenue from Services	09/30/2012	<b>(\$1,640,508)</b>
5		Payments	09/30/2012	<b>(\$185,257)</b>
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2012</b>	<b>(\$916,322)</b>
<b>K. SAINT FRANCIS HEALTHCARE PARTNERS ACO, INC</b>				
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2011</b>	<b>\$0</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
		Nothing to Report		\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2012</b>	<b>\$0</b>
<b>L.</b>	<b>SAINT FRANCIS HOSPITAL AND MEDICAL CENTER FOUNDATION, INC.</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2011</b>	<b>\$0</b>
1		Donations to Hospital	09/30/2012	\$996,768
2		Salary & Benefits charged to Affiliate by Hospital	09/30/2012	\$1,163,554
3		Transfer of Funds	09/30/2012	(\$2,160,322)
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2012</b>	<b>\$0</b>
<b>M.</b>	<b>SAINT FRANCIS INDEMNITY</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2011</b>	<b>(\$4,853,538)</b>
1		Purchase of Services	09/30/2012	(\$4,804,075)
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2012</b>	<b>(\$9,657,613)</b>
<b>N.</b>	<b>SAINT FRANCIS MEDICAL GROUP, INC. (FORMERLY WOODLAND PHYSICIANS ASSOCIATES)</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2011</b>	<b>(\$36,070)</b>
1		Income from Services	09/30/2012	(\$3,764,424)
2		Transfer of Funds	09/30/2012	\$28,490,367
3		Payments for Physician & PA services	09/30/2012	(\$28,157,001)
4		Purchased Services	09/30/2012	\$7,005,159
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2012</b>	<b>\$3,538,031</b>
<b>O.</b>	<b>SAINT FRANCIS PHO FOUNDATION, INC.</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2011</b>	<b>\$0</b>
		Nothing to Report		\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2012</b>	<b>\$0</b>
<b>P.</b>	<b>THE CAMILLUS CORPORATION</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2011</b>	<b>\$0</b>
		Nothing to Report		\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2012</b>	<b>\$0</b>
<b>Q.</b>	<b>TOTAL LAUNDRY COLLABORATIVE, LLC</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2011</b>	<b>\$1,035,663</b>
1		Transfer of Funds	09/30/2012	\$0
2		Salary & Benefits charged to Affiliate by Hospital	09/30/2012	\$2,063,631

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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
3		Laundry charged out	09/30/2012	(\$3,294,724)
4		Purchase of Services	09/30/2012	\$1,025,650
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2012</b>	<b>\$830,220</b>
			<b>Grand Total:</b>	<b>(\$9,970,687)</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>10/01/2011</b>	<b>\$26,902,371</b>
<b>A.</b>	<b>SAINT FRANCIS CARE, INC.</b>		Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2012</b>	<b>\$0</b>
<b>B.</b>	<b>ASYLUM HILL FAMILY MEDICINE CENTER, INC.</b>		Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2012</b>	<b>\$0</b>
<b>C.</b>	<b>COLLABORATIVE LABORATORY SERVICES, LLC</b>		Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2012</b>	<b>\$0</b>
<b>D.</b>	<b>MOUNT SINAI REHABILITATION HOSPITAL INC.</b>				
1		SAINT FRANCIS MEDICAL GROUP, INC. (FORMERLY WOODLAND PHYSICIANS ASSOCIATES)	various payments	09/30/2012	(\$56,917)
2		SAINT FRANCIS MEDICAL GROUP, INC. (FORMERLY WOODLAND PHYSICIANS ASSOCIATES)	various payments	09/30/2012	\$220,421
3		SAINT FRANCIS MEDICAL GROUP, INC. (FORMERLY WOODLAND PHYSICIANS ASSOCIATES)	various payments	09/30/2012	\$193,136
			<b>Total:</b>	<b>9/30/2012</b>	<b>\$356,640</b>
<b>E.</b>	<b>NEW ASYLUM MANAGEMENT CORPORATION</b>		Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2012</b>	<b>\$0</b>
<b>F.</b>	<b>ONE THOUSAND CORPORATION</b>		Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2012</b>	<b>\$0</b>
<b>G.</b>	<b>SAINT FRANCIS BEHAVIORAL HEALTH GROUP, P.C.(FORMERLY PATH, P.C.)</b>				

SAINT FRANCIS HOSPITAL AND MEDICAL CENTER  
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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
1		MOUNT SINAI REHABILITATION HOSPITAL INC.	salaries and benefits	09/30/2012	\$69,149
			<b>Total:</b>	<b>9/30/2012</b>	<b>\$69,149</b>
<b>H.</b>	<b>SAINT FRANCIS CARE MEDICAL GROUP, P.C.</b>				
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2012</b>	<b>\$0</b>
<b>I.</b>	<b>SAINT FRANCIS EMERGENCY MEDICAL GROUP (A SUBSIDIARY OF ST. FRANCIS MEDICAL GROUP)</b>				
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2012</b>	<b>\$0</b>
<b>J.</b>	<b>SAINT FRANCIS HEALTHCARE PARTNERS (FORMERLY ST FRAN/MT SINAI PHYSICIAN HOSPITAL ORGANIZATION, INC.)</b>				
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2012</b>	<b>\$0</b>
<b>K.</b>	<b>SAINT FRANCIS HEALTHCARE PARTNERS ACO, INC</b>				
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2012</b>	<b>\$0</b>
<b>L.</b>	<b>SAINT FRANCIS HOSPITAL AND MEDICAL CENTER FOUNDATION, INC.</b>				
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2012</b>	<b>\$0</b>
<b>M.</b>	<b>SAINT FRANCIS INDEMNITY</b>				
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2012</b>	<b>\$0</b>
<b>N.</b>	<b>SAINT FRANCIS MEDICAL GROUP, INC. (FORMERLY WOODLAND PHYSICIANS ASSOCIATES)</b>				
1		MOUNT SINAI REHABILITATION HOSPITAL INC.	Rent	09/30/2012	(\$16,632)
2		MOUNT SINAI REHABILITATION HOSPITAL INC.	Salaries & Benefits	09/30/2012	(\$312,683)



SAINT FRANCIS HOSPITAL AND MEDICAL CENTER  
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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
			Total:	9/30/2012	(\$329,315)
O.	SAINT FRANCIS PHO FOUNDATION, INC.		Nothing to Report		\$0
			Total:	9/30/2012	\$0
P.	THE CAMILLUS CORPORATION		Nothing to Report		\$0
			Total:	9/30/2012	\$0
Q.	TOTAL LAUNDRY COLLABORATIVE, LLC		Nothing to Report		\$0
			Total:	9/30/2012	\$0
			Ending Unconsolidated Intercompany Balance	9/30/2012	\$26,998,845

**SAINT FRANCIS HOSPITAL AND MEDICAL CENTER  
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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. SAINT FRANCIS CARE, INC.</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2012</b>
	<b>B. ASYLUM HILL FAMILY MEDICINE CENTER, INC.</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2012</b>
	<b>C. COLLABORATIVE LABORATORY SERVICES, LLC</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2012</b>
	<b>D. MOUNT SINAI REHABILITATION HOSPITAL INC.</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2012</b>
	<b>E. NEW ASYLUM MANAGEMENT CORPORATION</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2012</b>
	<b>F. ONE THOUSAND CORPORATION</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2012</b>
	<b>G. SAINT FRANCIS BEHAVIORAL HEALTH GROUP, P.C.(FORMERLY PATH, P.C.)</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2012</b>
	<b>H. SAINT FRANCIS CARE MEDICAL GROUP, P.C.</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2012</b>
	<b>I. SAINT FRANCIS EMERGENCY MEDICAL GROUP (A SUBSIDIARY OF ST. FRANCIS MEDICAL GROUP)</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2012</b>
	<b>J. SAINT FRANCIS HEALTHCARE PARTNERS (FORMERLY ST FRAN/MT SINAI PHYSICIAN HOSPITAL ORGANIZATION, INC.)</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2012</b>
	<b>K. SAINT FRANCIS HEALTHCARE PARTNERS ACO, INC</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2012</b>
	<b>L. SAINT FRANCIS HOSPITAL AND MEDICAL CENTER FOUNDATION, INC.</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2012</b>
	<b>M. SAINT FRANCIS INDEMNITY</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2012</b>
	<b>N. SAINT FRANCIS MEDICAL GROUP, INC. (FORMERLY WOODLAND PHYSICIANS ASSOCIATES)</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2012</b>
	<b>O. SAINT FRANCIS PHO FOUNDATION, INC.</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2012</b>
	<b>P. THE CAMILLUS CORPORATION</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2012</b>
	<b>Q. TOTAL LAUNDRY COLLABORATIVE, LLC</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2012</b>

SAINT FRANCIS HOSPITAL AND MEDICAL CENTER  
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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	9/30/2012

SAINT FRANCIS HOSPITAL AND MEDICAL CENTER  
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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
A.	<b>SAINT FRANCIS CARE, INC.</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
B.	<b>ASYLUM HILL FAMILY MEDICINE CENTER, INC.</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
C.	<b>COLLABORATIVE LABORATORY SERVICES, LLC</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
D.	<b>MOUNT SINAI REHABILITATION HOSPITAL INC.</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
E.	<b>NEW ASYLUM MANAGEMENT CORPORATION</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
F.	<b>ONE THOUSAND CORPORATION</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
G.	<b>SAINT FRANCIS BEHAVIORAL HEALTH GROUP, P.C.(FORMERLY PATH, P.C.)</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
H.	<b>SAINT FRANCIS CARE MEDICAL GROUP, P.C.</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
I.	<b>SAINT FRANCIS EMERGENCY MEDICAL GROUP (A SUBSIDIARY OF ST. FRANCIS MEDICAL GROUP)</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
J.	<b>SAINT FRANCIS HEALTHCARE PARTNERS (FORMERLY ST FRAN/MT SINAI PHYSICIAN HOSPITAL ORGANIZATION, INC.)</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
K.	<b>SAINT FRANCIS HEALTHCARE PARTNERS ACO, INC</b>		

SAINT FRANCIS HOSPITAL AND MEDICAL CENTER  
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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
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>L.</b>	<b>SAINT FRANCIS HOSPITAL AND MEDICAL CENTER FOUNDATION, INC.</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>M.</b>	<b>SAINT FRANCIS INDEMNITY</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>N.</b>	<b>SAINT FRANCIS MEDICAL GROUP, INC. (FORMERLY WOODLAND PHYSICIANS ASSOCIATES)</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>O.</b>	<b>SAINT FRANCIS PHO FOUNDATION, INC.</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>P.</b>	<b>THE CAMILLUS CORPORATION</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>Q.</b>	<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>	

**SAINT FRANCIS HOSPITAL AND MEDICAL CENTER  
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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 2011 ACTUAL	FY 2012 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>\$933,005.00</b>	<b>\$929,560.00</b>	<b>(\$3,445.00)</b>	<b>0%</b>
1	Donations	\$0.00	\$0.00	\$0.00	0%
2	Income	\$17,346.00	\$41,654.00	\$24,308.00	140%
3	Expenditures	\$5,654.00	\$13,995.00	\$8,341.00	148%
4	Unrealized Gains and Losses	(\$15,137.00)	(\$3,174.00)	\$11,963.00	-79%
	<b>Ending Balance</b>	<b>\$929,560.00</b>	<b>\$954,045.00</b>	<b>\$24,485.00</b>	<b>3%</b>
5	Projected Interest Income	\$18,200.00	\$20,000.00	\$1,800.00	10%
<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%

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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>\$13,995.00</b>
<b>1</b>	<b>Free Bed Fund</b>	<b>\$1,852.00</b>
<b>2</b>	<b>Free Bed Fund</b>	<b>\$11,193.00</b>
<b>3</b>	<b>Free Bed Fund</b>	<b>\$1.00</b>
<b>4</b>	<b>Free Bed Fund</b>	<b>\$4.00</b>
<b>5</b>	<b>Free Bed Fund</b>	<b>\$945.00</b>
<b>Grand Total</b>		<b>\$13,995.00</b>

SAINT FRANCIS HOSPITAL AND MEDICAL CENTER					
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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				
(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.				
	Israel Dubrow	\$226.00	\$14.00	\$0.00	\$14.00
	Suisman	\$12,000.00	\$170.00	\$0.00	\$170.00
	Mary Carroll Garvan	\$5,000.00	\$71.00	\$0.00	\$71.00
	Patrick Garvan	\$5,000.00	\$71.00	\$0.00	\$71.00
	Mother Angeline Garvan	\$5,000.00	\$71.00	\$0.00	\$71.00
	Mary Hooker	\$10,000.00	\$142.00	\$0.00	\$142.00
	Anne B. Fischer	\$5,000.00	\$71.00	\$0.00	\$71.00
	Charles Dillon	\$10,000.00	\$141.00	\$0.00	\$141.00
	John and Ellen Lorden	\$5,000.00	\$71.00	\$0.00	\$71.00
	Dr. Phillip Kennedy	\$5,000.00	\$71.00	\$0.00	\$71.00
	Reverend Tierney	\$10,000.00	\$141.00	\$0.00	\$141.00
	Moses Fox	\$20,000.00	\$282.00	\$0.00	\$282.00
	Juliette McLean	\$60,000.00	\$847.00	\$0.00	\$847.00
	Charles J. Reardon	\$6,000.00	\$85.00	\$0.00	\$85.00
	F.W. Swindell	\$50,000.00	\$70.00	\$0.00	\$70.00
	Katherine Nugent	\$1,000.00	\$14.00	\$0.00	\$14.00
	Ladies of Charity	\$20,000.00	\$282.00	\$0.00	\$282.00
	Monsignor Routhier	\$33,897.00	\$479.00	\$0.00	\$479.00
	Marcellus B. Wilcox	\$10,000.00	\$141.00	\$0.00	\$141.00
	Alice F. Noonan	\$352.00	\$14.00	\$0.00	\$14.00
	Rene Landry	\$1,365.00	\$19.00	\$0.00	\$19.00
	Terry Steam	\$42,984.00	\$7,120.00	\$0.00	\$7,120.00
	Mary Brady	\$1,000.00	\$213.00	\$0.00	\$213.00
	Solomon and Katie Wohl	\$5,000.00	\$71.00	\$0.00	\$71.00
	Edward Dillon	\$40,000.00	\$565.00	\$0.00	\$565.00
	Mark Hanlon	\$5,000.00	\$71.00	\$0.00	\$71.00
	Samuel and Tillie Cheiffetz	\$9,758.00	\$438.00	\$0.00	\$438.00
	Dr. and Mrs. John O'Flaherty	\$10,000.00	\$141.00	\$0.00	\$141.00
	St. Francis Hospital Womens Auxiliary	\$14,200.00	\$201.00	\$0.00	\$201.00
	Ellen O'Brien Lyons	\$5,000.00	\$71.00	\$0.00	\$71.00
	Anna C. Goodrich	\$5,000.00	\$71.00	\$0.00	\$71.00
	General Free Bed Fund	\$214,519.00	\$29,425.00	\$0.00	\$29,425.00
	<b>Total Bed Funds :</b>	<b>\$627,301.00</b>	<b>\$41,654.00</b>	<b>\$0.00</b>	<b>\$41,654.00</b>



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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	An Automatic write off to a collection agency is based on the # of statements sent to the patient, age, and value of account, or if deemed uncollectible. See our automatic write off policy. Once the account is deemed uncollectible, account may be considered for second placement.
B.	Hospital's processes and policies for compensating a Collection Agent for services rendered	Collection agencies are compensated based on percentage of dollars collected. In addition, collection attorneys, are paid on a hourly rate for specific accounts requiring legal intervention.
C.	Total Recovery Rate on accounts assigned (excluding Medicare accounts) to Collection Agents	12.20%
<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.	Contract includes pre-collection billing and management of self pay balances to initiate account resolution w/o being placed for collection. Unresolved accounts are written off automatically for direct collection based on # of statements, age, value of account, or deemed uncollectible.
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.	Collection agencies are compensated based on percentage of dollars collected. In addition, collection attorneys are paid an hourly rate for specific accounts requiring legal intervention.

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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.	9.50%
	<b>Collection Agent</b>	
1	Collection Agent Name	Nair and Levin
2	Collection Agent Type	Attorney
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.	Same as General Processes and Policies.
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.	Collection agencies are compensated based on percentage of dollars collected. In addition, collection attorneys are paid an hourly rate for specific accounts requiring legal intervention.
6	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent.	16.40%

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

<b>LINE</b>	<b>POSITION TITLE</b>	<b>SALARY</b>	<b>FRINGE BENEFITS</b>	<b>TOTAL</b>
1.	President	\$1,377,167	\$143,923	\$1,521,090
2.	Executive Vice President and COO	\$653,018	\$78,085	\$731,103
3.	Senior Vice President and CFO	\$638,000	\$77,743	\$715,743
4.	Department Chairman - Surgery	\$560,500	\$66,585	\$627,085
5.	Executive Vice President and CPO	\$499,500	\$65,496	\$564,996
6.	Senior Vice President, Chief Academic Officer	\$439,369	\$57,890	\$497,259
7.	Vice President, Financial Planning	\$437,376	\$57,934	\$495,310
8.	Senior Vice President - Nursing	\$370,260	\$48,828	\$419,088
9.	Senior Vice President - Planning	\$357,488	\$56,024	\$413,512
10.	Senior Vice President and General Counsel	\$347,019	\$48,243	\$395,262
	<b>Grand Total:</b>	<b>\$5,679,697</b>	<b>\$700,751</b>	<b>\$6,380,448</b>

**SAINT FRANCIS HOSPITAL AND MEDICAL CENTER**  
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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 . SAINT FRANCIS 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>B . ASYLUM HILL FAMILY MEDICINE CENTER, 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 . COLLABORATIVE LABORATORY SERVICES, LLC</b>				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$29,391	\$7,123	\$36,514
2	Paid by the Hospital to Employees of the Entity Listed Above	\$8,322,430	\$2,532,239	\$10,854,669
<b>D . MOUNT SINAI REHABILITATION HOSPITAL INC.</b>				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$1,615,669	\$346,543	\$1,962,212
2	Paid by the Hospital to Employees of the Entity Listed Above	\$3,170,464	\$856,025	\$4,026,489
<b>E . NEW ASYLUM MANAGEMENT CORPORATION</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 . ONE THOUSAND CORPORATION</b>				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$126,630	\$0	\$126,630
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>G . SAINT FRANCIS BEHAVIORAL HEALTH GROUP, P.C.(FORMERLY PATH, P.C.)</b>				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$42,944	\$11,597	\$54,541
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>H . SAINT FRANCIS CARE MEDICAL 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>I . SAINT FRANCIS EMERGENCY MEDICAL GROUP (A SUBSIDIARY OF ST. FRANCIS MEDICAL GROUP)</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 . SAINT FRANCIS HEALTHCARE PARTNERS (FORMERLY ST FRAN/MT SINAI PHYSICIAN HOSPITAL ORGANIZATION, 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	\$855,878	\$231,087	\$1,086,965
<b>K . SAINT FRANCIS HEALTHCARE PARTNERS ACO, 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>L . SAINT FRANCIS HOSPITAL AND MEDICAL CENTER FOUNDATION, INC.</b>				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$1,163,554	\$0	\$1,163,554
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>M . SAINT FRANCIS INDEMNITY</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 . SAINT FRANCIS MEDICAL GROUP, INC. (FORMERLY WOODLAND PHYSICIANS ASSOCIATES)</b>				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$999,219	\$240,042	\$1,239,261
2	Paid by the Hospital to Employees of the Entity Listed Above	\$24,401,595	\$3,755,406	\$28,157,001
<b>O . SAINT FRANCIS PHO 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>P . THE CAMILLUS CORPORATION</b>				

**SAINT FRANCIS HOSPITAL AND MEDICAL CENTER  
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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
Q .	<b>TOTAL LAUNDRY COLLABORATIVE, 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	\$1,676,782	\$386,849	\$2,063,631

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.

**SAINT FRANCIS HOSPITAL AND MEDICAL CENTER  
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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 2012
<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.	Saint Francis Emergency Medical Group
2.	Description of each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions.	St. Francis Hospital employees Emergency Room physicians
3.	Description of each Hospital Clinical or Nonclinical Service or Function transferred or involved in a change of control.	St. Francis Hospital employees Emergency Room physicians
4.	Date that each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions occurred.	10/01/2011
5.	Amount of each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions.	\$0

SAINT FRANCIS HOSPITAL AND MEDICAL CENTER					
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REPORT 23 - CHARITY CARE AND REDUCED COST SERVICES PROVIDED BY THE HOSPITAL					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	AMOUNT	AMOUNT	DIFFERENCE	DIFFERENCE
<b>A. Hospital Charity Care (see Hospital Audited Financial Statement Notes)</b>					
1.	Number of Applicants	12,477	12,835	358	3%
2.	Number of Approved Applicants	11,424	11,378	(46)	0%
3.	Total Charges (A)	\$13,174,202	\$18,950,000	\$5,775,798	44%
	<b>Average Charges</b>	<b>\$1,153</b>	<b>\$1,665</b>	<b>\$512</b>	<b>44%</b>
4.	Ratio of Cost to Charges (RCC)	0.428621	0.40604	(0.022581)	-5%
	<b>Total Cost</b>	<b>\$5,646,740</b>	<b>\$7,694,458</b>	<b>\$2,047,718</b>	<b>36%</b>
	<b>Average Cost</b>	<b>\$494</b>	<b>\$676</b>	<b>\$182</b>	<b>37%</b>
5.	Charity Care - Inpatient Charges	\$2,845,652	\$4,034,260	\$1,188,608	42%
6.	Charity Care - Outpatient Emergency Department Charges	5,558,809	8,491,900	2,933,091	53%
7.	Charity Care - Outpatient Charges (Excludes ED Charges)	4,769,741	6,423,840	1,654,099	35%
	<b>Total Charges (A)</b>	<b>\$13,174,202</b>	<b>\$18,950,000</b>	<b>\$5,775,798</b>	<b>44%</b>
8.	Charity Care - Number of Patient Days	3,550	3,548	(2)	0%
9.	Charity Care - Number of Discharges	944	959	15	2%
10.	Charity Care - Number of Outpatient ED Visits	8,302	9,136	834	10%
11.	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	15,541	14,791	(750)	-5%
<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	8	5	(3)	-38%
2.	Number of Approved Applicants	8	5	(3)	-38%
3.	Total Charges (B)	\$5,654	\$13,995	\$8,341	148%
	<b>Average Charges</b>	<b>\$707</b>	<b>\$2,799</b>	<b>\$2,092</b>	<b>296%</b>
4.	Ratio of Cost to Charges (RCC)	0.428621	0.40604	(0.022581)	-5%
	<b>Total Cost</b>	<b>\$2,423</b>	<b>\$5,683</b>	<b>\$3,259</b>	<b>134%</b>
	<b>Average Cost</b>	<b>\$303</b>	<b>\$1,137</b>	<b>\$834</b>	<b>275%</b>
5.	Bed Funds - Inpatient Charges	\$3,950	\$1,852	(\$2,098)	-53%
6.	Bed Funds - Outpatient Emergency Department Charges	506	945	439	87%
7.	Bed Funds - Outpatient Charges (Excludes ED Charges)	1,198	11,198	10,000	835%
	<b>Total Charges (B)</b>	<b>\$5,654</b>	<b>\$13,995</b>	<b>\$8,341</b>	<b>148%</b>
8.	Bed Funds - Number of Patient Days	2	1	(1)	-50%
9.	Bed Funds - Number of Discharges	2	1	(1)	-50%
10.	Bed Funds - Number of Outpatient ED Visits	1	1	0	0%
11.	Bed Funds - Number of Outpatient Visits (Excludes ED Visits)	5	3	(2)	-40%
<b>(B) The total amount must agree with the total amount listed on Hospital Reporting System - Report 17.</b>					