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		
Α.	AFFILIATE NAME	YNH NETWORK CORPORATION		
		YNH NETWORK CORP. IS THE PARENT CORPORATION TO YALE-NEW HAVEN		
		HOSP., YALE-NEW HAVEN AMBULATORY SERVICES CORP., YORK		
		ENTERPRISES, INC., COMMUNITY HEALTH CARE PHYSICIANS (CHCP), AND		
	Affiliate Description	QUINNIPIAC MEDICAL PC.		
	Affiliate type of service	Parent Corporation		
3	Tax Status	Not for Profit		
4	Street Address	789 Howard Avenue, New Haven, Connecticut		
5 6	Town State	New Haven Connecticut		
	Zip Code	06519 -		
	CEO Name	Marvin K. Lender		
	CEO Title	Director		
	CT Agent Name	William J. Aseltyne		
	CT Agent Company	Yale-New Haven Health Services Corporation		
12		789 Howard Ave, CB 230, Legal and Risk Services Dept		
	CT Agent Town	New Haven		
	CT Agent State	Connecticut		
	CT Agent Zip Code	06519 -		
B.	AFFILIATE NAME	CARITAS INSURANCE COMPANY LTD.		
	Affiliate Description	Caritas provides excess professional and general liability insurance.		
	Affiliate type of service	Insurance		
3	Tax Status	Not for Profit		
4	Street Address	30 Main Street, Suite 330		
5	Town	Burlington		
	State	Vermont 05401 -		
	Zip Code CEO Name	Christopher M. O'Connor		
	CEO Title	President		
	CT Agent Name	Robert Gagliardi, CPA		
	CT Agent Company	Robert Gagilardi, Of A		
		30 Main Street, Suite 330		
13	CT Agent Town	Burlington		
	CT Agent State	Vermont		
	CT Agent Zip Code	05401 -		
C.	AFFILIATE NAME	CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENTURY)		
		CENTURY OPERATES AN AGENCY SPECIALIZING IN HEALTHCARE PATIENT		
		RECEIVABLE COLLECTIONS IN WHICH YORK ENTERPRISES OWNS A 47.6%		
1	Affiliate Description	INTEREST.		
2	Affiliate type of service	Collection Agency		
3	Tax Status	For Profit		
4	Street Address	23 Maiden Lane		
5	Town	North Haven		
6	State	Connecticut		
	Zip Code	06473 -		
8	CEO Name	Eugene Colucci CFO		
9	CEO Title	Steven Markesich		
	CT Agent Name CT Agent Company	Steven Markesich Century Financial Services		
11 12	CT Agent Company CT Agent Company Street Address	23 Maiden Lane		
	CT Agent Company Street Address CT Agent Town	North Haven		
	CT Agent Town CT Agent State	Connecticut		
15	CT Agent Zip Code	06473 -		
D.	AFFILIATE NAME	COMMUNITY HEALTH CARE PHYSICIANS (CHCP)		
	ļ	•		

REPORT 20 1 OF 42 8/1/2013,8:36 AM

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
LINE	DESCRIPTION	
		A CONNECTICUT STOCK, FOR-PROFIT, PROFESSIONAL CORPORATION FORMED IN 1996. ALL STOCK OF CHCP IS OWNED BY THE CHIEF OF STAFF OF
		YALE-NEW HAVEN HOSPITAL. ORGANIZATION HOLDS LEASE AT A FACILITY IN
		NEW HAVEN.
	Affiliate type of service	For Profit Services (Specify)
	Tax Status	For Profit
4	Street Address	789 Howard Avenue
5	Town	New Haven
	State	Connecticut
	Zip Code	06519 -
	CEO Name	Peter N. Herbert, M.D.
	CEO Title	President
	CT Agent Name	William J Aseltyne
11	CT Agent Company	Yale New Health Services Corporation
		789 Howard Avenue, CB230, Legal & Risk Services Dept
	CT Agent Town	New Haven
	CT Agent State CT Agent Zip Code	Connecticut 06519 -
15	OT Agent Zip Code	00010
E.	AFFILIATE NAME	LUKAN INDEMNITY COMPANY LTD.
	Affiliate Description	Lukan provides malpractice liability insuranance.
	Affiliate type of service	Insurance
3	Tax Status	Not for Profit
4	Street Address	c/o Quest Mgmt Services, 40 Church St, PO Box HM2062
5	Town	Hamilton HMHX
_	State	Bermuda
	Zip Code	-
8	CEO Name	Christopher M. O'Connor
	CEO Title	President
	CT Agent Name	Nick Frost
	CT Agent Company	Quest Management Services, Ltd
	CT Agent Company Street Address	10 Church Street
	CT Agent Town	Hamilton HMHX
14	CT Agent State	Bermuda
15	CT Agent Zip Code	-
_	AFFU LATE NAME	MEDICAL CENTER PHARMACY AND HOME CARE CENTER, INC.
F.	AFFILIATE NAME	·
		MEDICAL CENTER PHARMACY IS A WHOLLY OWNED SUBSIDIARY OF YORK
		ENTERPRISES, INC. IT OPERATES A RETAIL PHARMACY WITH MULTIPLE LOCATIONS. CURRENTLY INACTIVE IN PROVIDING HOME IV INFUSION
	Affiliate Department	
	Affiliate Description	SERVICES.
3	Affiliate type of service Tax Status	Pharmacy For Profit
4	Street Address	50 York Street
5	Town	New Haven
6	State	Connecticut
	Zip Code	06511 -
	CEO Name	Vincent Tammaro
	CEO Title	President
	CT Agent Name	William J Aseltyne
11	CT Agent Company	Yale New Haven Hospital
	CT Agent Company Street Address	20 York Street, CB-230
	CT Agent Town	New Haven
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06505 -
		MEDICAL CENTER REALTY INC
G.	AFFILIATE NAME	MEDICAL CENTER REALTY, INC.

REPORT 20 2 OF 42 8/1/2013,8:36 AM

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	
		MEDICAL CENTER REALTY, INC. IS A WHOLLY OWNED SUBSIDIARY OF YORK	
1	Affiliate Description	ENTERPRISES, INC.	
2	Affiliate type of service	Real Estate	
3	Tax Status	For Profit	
4	Street Address	50 York Street	
5	Town	New Haven	
	State	Connecticut	
	Zip Code	06511 - No. 100 To 100	
_	CEO Name CEO Title	Vincent Tammaro President	
	CT Agent Name	William J Aseltyne	
	CT Agent Name CT Agent Company	Yale-New Haven Health Services Corporation	
12	CT Agent Company Street Address	789 Howard Ave, CB230, Legal & Risk Services Dept	
	CT Agent Town	New Haven	
	CT Agent State	Connecticut	
15	CT Agent Zip Code	06519 -	
l		NORTHEACT MEDICAL OPCUP INC	
H.	AFFILIATE NAME	NORTHEAST MEDICAL GROUP, INC.	
	Affiliate Deposits these	Physician related services, such as patient care, medical education, and research and	
	Affiliate Description Affiliate type of service	administration to YNHH, BH, GH and the community. Physicians Services	
3	Tax Status	Not for Profit	
4	Street Address	226 Mill Hill Avenue	
	Town	Bridgeport	
	State	Connecticut	
	Zip Code	06610 -	
	CEO Name	Peter Herbert	
9	CEO Title	Chairman of the Board	
10	CT Agent Name	Karen Daley	
	CT Agent Company	Bridgeport Hospital	
		267 Grant Street	
	CT Agent Town	Bridgeport	
	CT Agent State CT Agent Zip Code	Connecticut 06610 -	
15	C1 Agent zip Code		
I.	AFFILIATE NAME	NORTHEAST PEDIATRIC SPECIALISTS, INC.	
		Affiliation between Y-NHH and Connecticut Childrens Hospital for Pediatric Specialty	
	Affiliate Description	services.	
	Affiliate type of service	Affilate Support Services	
3	Tax Status	Not for Profit	
	Street Address	c/o Ct Children's Medical Cent, 282 Washington Street	
5	Town	Hartford	
6	State Zip Code	Connecticut 06106 -	
	CEO Name	Cynthia Sparer	
	CEO Name CEO Title	President	
	CT Agent Name	R&C Service Company	
	CT Agent Company	and the secondary	
12	CT Agent Company Street Address	280 Trumbull Street	
13	CT Agent Town	Hartford	
	CT Agent State	Connecticut	
15	CT Agent Zip Code	06103 - 3597	
J.	AFFILIATE NAME	QUINNIPIAC MEDICAL P.C. (QMPC)	
<u> </u>	ru i isla i s isaifis	A CONNECTICUT STOCK, FOR-PROFIT, PROFESSIONAL CORPORATION	
		FORMED IN 1994 AND EMPLOYS PRIMARY CARE HOSPITALIST PHYSICIANS.	
1	Affiliate Description	ALL STOCK IS OWNED BY THE CHIEF OF STAFF OF YALE-NEW HAVEN	
	Affiliate type of service	For Profit Services (Specify)	
3	Tax Status	For Profit	

REPORT 20 3 OF 42 8/1/2013,8:36 AM

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	
4	Street Address	789 Howard Avenue	
5	Town	New Haven	
6	State	Connecticut	
	Zip Code	06519 -	
	CEO Name	Peter Herbert, M.D.	
	CEO Title	President	
	CT Agent Name	Merton G. Gollaher, Jr.	
	CT Agent Company	Wiggin & Dana LLP	
12	CT Agent Company Street Address	1 Century Tower, 195 Church St	
13	CT Agent Town	New Haven	
	CT Agent State	Connecticut	
15	CT Agent Zip Code	06508 -	
K.	AFFILIATE NAME	SHORELINE SURGERY CENTER, LLC	
		SHORELINE SURGERY CENTER LLC IS A LIMITED LIABLITY COMPANY AND IS A	
		PARTNERSHIP BETWEEN CGC ENDOSCOPY, LLC, UNRELATED THIRD PARTY	
1		AND YALE-NEW HAVEN AMBULATORY SERVICES CORP WHICH HAS A 51%	
1	Affiliate Description	INTEREST.	
2	Affiliate type of service	Ambulatory/OP Surgery Center	
3	Tax Status	Not for Profit	
4	Street Address	789 Howard Avenue	
5	Town	New Haven	
6	State	Connecticut	
	Zip Code CEO Name	06504 -	
	CEO Title	Gayle L. Capozzalo Member	
	CT Agent Name	Merton G. Gollaher, Jr	
11	CT Agent Name CT Agent Company	Wiggin & Dana LLP	
12	CT Agent Company Street Address	1 Century Tower, 195 Church St	
13	CT Agent Town	New Haven	
	CT Agent State	Connecticut	
	CT Agent Zip Code	06508 -	
L.	AFFILIATE NAME	SSC II, LLC	
		SSC II, LLC IS A LIMITED LIABILITY COMPANY AND IS A SUBSIDIARY OF	
		SHORELINE SURGERY CENTER, LLC. SSC II, LLC IS AN ENDOSCOPY SURGERY	
	Affiliate Description	CENTER	
2	Affiliate type of service	Ambulatory/OP Surgery Center	
3	Tax Status	Not for Profit	
4	Street Address	111 GOOSE LANE	
5	Town	GUILFORD	
6	State	Connecticut	
7	Zip Code	06437 -	
8	CEO Name	SHORELINE PHYSICIANS HOLDING CO., LLC	
9	CEO Title	MEMBER	
10	CT Agent Name CT Agent Company	MERTONG. GOLLAHER, JR WIGGIN & DANA LLP	
		1 CENTURY TOWER, 195 CHURCH STREET	
	CT Agent Company Street Address CT Agent Town	NEW HAVEN	
	CT Agent Town	Connecticut	
15	CT Agent State CT Agent Zip Code	06510 -	
.0			
М.	AFFILIATE NAME	THE GREATER NEW HAVEN PARTNERSHIP FOR A HEALTHY COMMUNITY, INC.	
		Partnership between Y-NHH and New Haven for community health services.	
1	Affiliate Description	Corporation was created but was never put into operation. Corporation is now defunct.	
2	Affiliate type of service	Community Services	
3	Tax Status	Not for Profit	
4	Street Address	Yale-New Haven Hospital, 20 York Street	
5	Town	New Haven	
-			

REPORT 20 4 OF 42 8/1/2013,8:36 AM

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	
6	State	Connecticut	
	Zip Code	06510 -	
8	CEO Name	James Rawlings	
9	CEO Title	President	
	CT Agent Name	Stuart G. Warner	
	CT Agent Company	20 Varie Chroat	
	CT Agent Company Street Address CT Agent Town	New Haven	
15	14 CT Agent State Connecticut 15 CT Agent Zip Code 06504 -		
13	Of Agent Zip Gode		
N.	AFFILIATE NAME	THE NEW CLINICAL DEVELOPMENT PROGRAM CORPORATION (NCPD)	
		NCPD is a CT non-profit, non-stock corporation created to provide support for the	
		development of clinical programs and services that will enhance the rendering of	
1	Affiliate Description	patient care at Yale University and Yale-New Haven Hospital.	
2	Affiliate type of service	Other HealthCare Svcs(Specify)	
3	Tax Status	Not for Profit	
4	Street Address	789 Howard Avenue	
5	Town	New Haven	
6	State	Connecticut	
7	Zip Code	06519 -	
8	CEO Name	Gayle Capozzalo	
9	CEO Title	President	
10	CT Agent Name	D. Terence Jones	
	CT Agent Company	Wiggin and Dana	
	CT Agent Company Street Address		
13	CT Agent Town	New Haven	
14	CT Agent State	Connecticut	
15	CT Agent Zip Code	06508 - 1832	
	l		
Ο.	AFFILIATE NAME	YALE-NEW HAVEN AMBULATORY SERVICES CORP.	
0.	AFFILIATE NAME	YALE-NEW HAVEN AMBULATORY SERVICES CORP. YALE-NEW HAVEN AMBULATORY SERVICES CORP. IS A WHOLLY OWNED	
0.	AFFILIATE NAME		
0.	AFFILIATE NAME	YALE-NEW HAVEN AMBULATORY SERVICES CORP. IS A WHOLLY OWNED	
	Affiliate Description	YALE-NEW HAVEN AMBULATORY SERVICES CORP. IS A WHOLLY OWNED SUBSIDIARY OF YNH NETWORK CORP. IT OPERATES A RECOVERY CARE CENTER. IN FY04, IT ACQUIRED A 51% INTEREST IN YALE-NEW HAVEN SHORELINE SURGERY CENTER LLC.	
1		YALE-NEW HAVEN AMBULATORY SERVICES CORP. IS A WHOLLY OWNED SUBSIDIARY OF YNH NETWORK CORP. IT OPERATES A RECOVERY CARE CENTER. IN FY04, IT ACQUIRED A 51% INTEREST IN YALE-NEW HAVEN	
1	Affiliate Description Affiliate type of service Tax Status	YALE-NEW HAVEN AMBULATORY SERVICES CORP. IS A WHOLLY OWNED SUBSIDIARY OF YNH NETWORK CORP. IT OPERATES A RECOVERY CARE CENTER. IN FY04, IT ACQUIRED A 51% INTEREST IN YALE-NEW HAVEN SHORELINE SURGERY CENTER LLC. Ambulatory/OP Surgery Center Not for Profit	
1 2	Affiliate Description Affiliate type of service	YALE-NEW HAVEN AMBULATORY SERVICES CORP. IS A WHOLLY OWNED SUBSIDIARY OF YNH NETWORK CORP. IT OPERATES A RECOVERY CARE CENTER. IN FY04, IT ACQUIRED A 51% INTEREST IN YALE-NEW HAVEN SHORELINE SURGERY CENTER LLC. Ambulatory/OP Surgery Center Not for Profit 60 Temple Street	
1 2 3 4 5	Affiliate Description Affiliate type of service Tax Status Street Address Town	YALE-NEW HAVEN AMBULATORY SERVICES CORP. IS A WHOLLY OWNED SUBSIDIARY OF YNH NETWORK CORP. IT OPERATES A RECOVERY CARE CENTER. IN FY04, IT ACQUIRED A 51% INTEREST IN YALE-NEW HAVEN SHORELINE SURGERY CENTER LLC. Ambulatory/OP Surgery Center Not for Profit 60 Temple Street New Haven	
1 2 3 4 5 6	Affiliate Description Affiliate type of service Tax Status Street Address Town State	YALE-NEW HAVEN AMBULATORY SERVICES CORP. IS A WHOLLY OWNED SUBSIDIARY OF YNH NETWORK CORP. IT OPERATES A RECOVERY CARE CENTER. IN FY04, IT ACQUIRED A 51% INTEREST IN YALE-NEW HAVEN SHORELINE SURGERY CENTER LLC. Ambulatory/OP Surgery Center Not for Profit 60 Temple Street New Haven Connecticut	
1 2 3 4 5 6 7	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code	YALE-NEW HAVEN AMBULATORY SERVICES CORP. IS A WHOLLY OWNED SUBSIDIARY OF YNH NETWORK CORP. IT OPERATES A RECOVERY CARE CENTER. IN FY04, IT ACQUIRED A 51% INTEREST IN YALE-NEW HAVEN SHORELINE SURGERY CENTER LLC. Ambulatory/OP Surgery Center Not for Profit 60 Temple Street New Haven Connecticut 06510 -	
1 2 3 4 5 6 7 8	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name	YALE-NEW HAVEN AMBULATORY SERVICES CORP. IS A WHOLLY OWNED SUBSIDIARY OF YNH NETWORK CORP. IT OPERATES A RECOVERY CARE CENTER. IN FY04, IT ACQUIRED A 51% INTEREST IN YALE-NEW HAVEN SHORELINE SURGERY CENTER LLC. Ambulatory/OP Surgery Center Not for Profit 60 Temple Street New Haven Connecticut 06510 - Richard D`Aquila	
1 2 3 4 5 6 7 8	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title	YALE-NEW HAVEN AMBULATORY SERVICES CORP. IS A WHOLLY OWNED SUBSIDIARY OF YNH NETWORK CORP. IT OPERATES A RECOVERY CARE CENTER. IN FY04, IT ACQUIRED A 51% INTEREST IN YALE-NEW HAVEN SHORELINE SURGERY CENTER LLC. Ambulatory/OP Surgery Center Not for Profit 60 Temple Street New Haven Connecticut 06510 - Richard D`Aquila President	
1 2 3 4 5 6 7 8 9	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name	YALE-NEW HAVEN AMBULATORY SERVICES CORP. IS A WHOLLY OWNED SUBSIDIARY OF YNH NETWORK CORP. IT OPERATES A RECOVERY CARE CENTER. IN FY04, IT ACQUIRED A 51% INTEREST IN YALE-NEW HAVEN SHORELINE SURGERY CENTER LLC. Ambulatory/OP Surgery Center Not for Profit 60 Temple Street New Haven Connecticut 06510 - Richard D`Aquila President William J Aseltyne	
1 2 3 4 5 6 7 8 9	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company	YALE-NEW HAVEN AMBULATORY SERVICES CORP. IS A WHOLLY OWNED SUBSIDIARY OF YNH NETWORK CORP. IT OPERATES A RECOVERY CARE CENTER. IN FY04, IT ACQUIRED A 51% INTEREST IN YALE-NEW HAVEN SHORELINE SURGERY CENTER LLC. Ambulatory/OP Surgery Center Not for Profit 60 Temple Street New Haven Connecticut 06510 - Richard D`Aquila President William J Aseltyne Yale New Haven Hospital	
1 2 3 4 5 6 7 8 9 10 11	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address	YALE-NEW HAVEN AMBULATORY SERVICES CORP. IS A WHOLLY OWNED SUBSIDIARY OF YNH NETWORK CORP. IT OPERATES A RECOVERY CARE CENTER. IN FY04, IT ACQUIRED A 51% INTEREST IN YALE-NEW HAVEN SHORELINE SURGERY CENTER LLC. Ambulatory/OP Surgery Center Not for Profit 60 Temple Street New Haven Connecticut 06510 - Richard D`Aquila President William J Aseltyne Yale New Haven Hospital 20 York Street, CB-230	
1 2 3 4 5 6 7 8 9 10 11 12 13	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town	YALE-NEW HAVEN AMBULATORY SERVICES CORP. IS A WHOLLY OWNED SUBSIDIARY OF YNH NETWORK CORP. IT OPERATES A RECOVERY CARE CENTER. IN FY04, IT ACQUIRED A 51% INTEREST IN YALE-NEW HAVEN SHORELINE SURGERY CENTER LLC. Ambulatory/OP Surgery Center Not for Profit 60 Temple Street New Haven Connecticut 06510 - Richard D'Aquila President William J Aseltyne Yale New Haven Hospital 20 York Street, CB-230 New Haven	
1 2 3 4 5 6 7 8 9 10 11 12 13	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent Town CT Agent State	YALE-NEW HAVEN AMBULATORY SERVICES CORP. IS A WHOLLY OWNED SUBSIDIARY OF YNH NETWORK CORP. IT OPERATES A RECOVERY CARE CENTER. IN FY04, IT ACQUIRED A 51% INTEREST IN YALE-NEW HAVEN SHORELINE SURGERY CENTER LLC. Ambulatory/OP Surgery Center Not for Profit 60 Temple Street New Haven Connecticut 06510 - Richard D`Aquila President William J Aseltyne Yale New Haven Hospital 20 York Street, CB-230 New Haven Connecticut	
1 2 3 4 5 6 7 8 9 10 11 12 13	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town	YALE-NEW HAVEN AMBULATORY SERVICES CORP. IS A WHOLLY OWNED SUBSIDIARY OF YNH NETWORK CORP. IT OPERATES A RECOVERY CARE CENTER. IN FY04, IT ACQUIRED A 51% INTEREST IN YALE-NEW HAVEN SHORELINE SURGERY CENTER LLC. Ambulatory/OP Surgery Center Not for Profit 60 Temple Street New Haven Connecticut 06510 - Richard D'Aquila President William J Aseltyne Yale New Haven Hospital 20 York Street, CB-230 New Haven	
1 2 3 4 5 6 7 8 9 10 11 12 13	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent Town CT Agent State	YALE-NEW HAVEN AMBULATORY SERVICES CORP. IS A WHOLLY OWNED SUBSIDIARY OF YNH NETWORK CORP. IT OPERATES A RECOVERY CARE CENTER. IN FY04, IT ACQUIRED A 51% INTEREST IN YALE-NEW HAVEN SHORELINE SURGERY CENTER LLC. Ambulatory/OP Surgery Center Not for Profit 60 Temple Street New Haven Connecticut 06510 - Richard D`Aquila President William J Aseltyne Yale New Haven Hospital 20 York Street, CB-230 New Haven Connecticut	
1 2 3 4 5 6 7 8 9 10 11 12 13 14	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent Town CT Agent State	YALE-NEW HAVEN AMBULATORY SERVICES CORP. IS A WHOLLY OWNED SUBSIDIARY OF YNH NETWORK CORP. IT OPERATES A RECOVERY CARE CENTER. IN FY04, IT ACQUIRED A 51% INTEREST IN YALE-NEW HAVEN SHORELINE SURGERY CENTER LLC. Ambulatory/OP Surgery Center Not for Profit 60 Temple Street New Haven Connecticut 06510 - Richard D'Aquila President William J Aseltyne Yale New Haven Hospital 20 York Street, CB-230 New Haven Connecticut 06510 - YALE-NEW HAVEN CARE CONTINUUM	
1 2 3 4 5 6 7 8 9 10 11 12 13 14	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent State CT Agent State CT Agent State CT Agent Zip Code	YALE-NEW HAVEN AMBULATORY SERVICES CORP. IS A WHOLLY OWNED SUBSIDIARY OF YNH NETWORK CORP. IT OPERATES A RECOVERY CARE CENTER. IN FY04, IT ACQUIRED A 51% INTEREST IN YALE-NEW HAVEN SHORELINE SURGERY CENTER LLC. Ambulatory/OP Surgery Center Not for Profit 60 Temple Street New Haven Connecticut 06510 - Richard D'Aquila President William J Aseltyne Yale New Haven Hospital 20 York Street, CB-230 New Haven Connecticut 06510 - YALE-NEW HAVEN CARE CONTINUUM YNHCCC provides long-term care for those unable to live independently and short-term	
1 2 3 4 5 6 7 8 9 10 11 12 13 14	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent State CT Agent State CT Agent State CT Agent Zip Code	YALE-NEW HAVEN AMBULATORY SERVICES CORP. IS A WHOLLY OWNED SUBSIDIARY OF YNH NETWORK CORP. IT OPERATES A RECOVERY CARE CENTER. IN FY04, IT ACQUIRED A 51% INTEREST IN YALE-NEW HAVEN SHORELINE SURGERY CENTER LLC. Ambulatory/OP Surgery Center Not for Profit 60 Temple Street New Haven Connecticut 06510 - Richard D'Aquila President William J Aseltyne Yale New Haven Hospital 20 York Street, CB-230 New Haven Connecticut 06510 - YALE-NEW HAVEN CARE CONTINUUM	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent State CT Agent Zip Code AFFILIATE NAME Affiliate Description	YALE-NEW HAVEN AMBULATORY SERVICES CORP. IS A WHOLLY OWNED SUBSIDIARY OF YNH NETWORK CORP. IT OPERATES A RECOVERY CARE CENTER. IN FY04, IT ACQUIRED A 51% INTEREST IN YALE-NEW HAVEN SHORELINE SURGERY CENTER LLC. Ambulatory/OP Surgery Center Not for Profit 60 Temple Street New Haven Connecticut 06510 - Richard D'Aquila President William J Aseltyne Yale New Haven Hospital 20 York Street, CB-230 New Haven Connecticut 06510 - YALE-NEW HAVEN CARE CONTINUUM YNHCCC provides long-term care for those unable to live independently and short-term	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 P.	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent State CT Agent State CT Agent Zip Code AFFILIATE NAME Affiliate Description Affiliate type of service	YALE-NEW HAVEN AMBULATORY SERVICES CORP. IS A WHOLLY OWNED SUBSIDIARY OF YNH NETWORK CORP. IT OPERATES A RECOVERY CARE CENTER. IN FY04, IT ACQUIRED A 51% INTEREST IN YALE-NEW HAVEN SHORELINE SURGERY CENTER LLC. Ambulatory/OP Surgery Center Not for Profit 60 Temple Street New Haven Connecticut 06510 - Richard D`Aquila President William J Aseltyne Yale New Haven Hospital 20 York Street, CB-230 New Haven Connecticut 06510 - YALE-NEW HAVEN CARE CONTINUUM YNHCCC provides long-term care for those unable to live independently and short-term rehabilitation for patients who have experienced elective surgery, an injury or a traumatic major illness. Care for the Aged	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 P.	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent State CT Agent State CT Agent Zip Code AFFILIATE NAME Affiliate Description Affiliate type of service Tax Status	YALE-NEW HAVEN AMBULATORY SERVICES CORP. IS A WHOLLY OWNED SUBSIDIARY OF YNH NETWORK CORP. IT OPERATES A RECOVERY CARE CENTER. IN FY04, IT ACQUIRED A 51% INTEREST IN YALE-NEW HAVEN SHORELINE SURGERY CENTER LLC. Ambulatory/OP Surgery Center Not for Profit 60 Temple Street New Haven Connecticut 06510 - Richard D'Aquila President William J Aseltyne Yale New Haven Hospital 20 York Street, CB-230 New Haven Connecticut 06510 - YALE-NEW HAVEN CARE CONTINUUM YNHCCC provides long-term care for those unable to live independently and short-term rehabilitation for patients who have experienced elective surgery, an injury or a traumatic major illness. Care for the Aged Not for Profit	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 P.	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent State CT Agent State CT Agent Zip Code AFFILIATE NAME Affiliate Description Affiliate type of service	YALE-NEW HAVEN AMBULATORY SERVICES CORP. IS A WHOLLY OWNED SUBSIDIARY OF YNH NETWORK CORP. IT OPERATES A RECOVERY CARE CENTER. IN FY04, IT ACQUIRED A 51% INTEREST IN YALE-NEW HAVEN SHORELINE SURGERY CENTER LLC. Ambulatory/OP Surgery Center Not for Profit 60 Temple Street New Haven Connecticut 06510 - Richard D`Aquila President William J Aseltyne Yale New Haven Hospital 20 York Street, CB-230 New Haven Connecticut 06510 - YALE-NEW HAVEN CARE CONTINUUM YNHCCC provides long-term care for those unable to live independently and short-term rehabilitation for patients who have experienced elective surgery, an injury or a traumatic major illness. Care for the Aged	

REPORT 20 5 OF 42 8/1/2013,8:36 AM

OFFICE OF HEALTH CARE ACCESS

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	
	DESCRIPTION		
6	State	Connecticut	
	Zip Code	06511 - 4420	
8	CEO Name	Marna P. Borgstrom	
9	CEO Title	CEO	
	CT Agent Name	William J. Aseltyne	
	CT Agent Company	Yale-New Haven Health Services Corporation	
12	CT Agent Company Street Address	789 Howard Avenue, CB230, Legal & Risk Serv D	
	CT Agent Town	New Haven	
	CT Agent State	Connecticut	
15	CT Agent Zip Code	06519 -	
Q.	AFFILIATE NAME	YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	
Q.	AFFILIATE NAME		
		YNHHSC IS THE PARENT CORPORATION OF YNH NETWORK CORP., YNHHS	
		MSO INC. WHICH ARE AFFILIATED WITH YALE-NEW HAVEN HOSP.,	
	Affiliate Description	BRIDGEPORT VERTICAL NETWORK, AND GREENWICH VERTICAL NETWORK.	
2	Affiliate type of service	Parent Corporation	
3	Tax Status	Not for Profit	
4	Street Address	789 Howard Avenue	
5	Town	New Haven	
6	State	Connecticut	
7	Zip Code	06519 -	
8	CEO Name	Marna P. Borgstrom	
9	CEO Title	President	
10	CT Agent Name	William J Aseltyne	
11	CT Agent Company	Yale New Haven Hospital	
12		20 York Street, CB230, Legal & Risk Services Dept	
13	CT Agent Town	New Haven	
14	CT Agent State	Connecticut	
15	CT Agent Zip Code	06510 -	
R.	AFFILIATE NAME	YALE-NEW HAVEN MEDICAL CENTER, INC. (MEDICAL CENTER)	
K.	AFFILIATE NAME		
		A TAX-EXEMPT NONPROFIT ORGANIZATION WITH THE PRIMARY PURPOSE TO	
		COORDINATE ACTIVITIES OF YALE-NEW HAVEN HOSPITAL, INC. AND YALE	
		UNIVERSITY-SCHOOLS OF MEDICINE AND NURSING IN AREAS OF MUTUAL	
		CONCERN AND TO CONDUCT LONG-RANGE PLANNING FOR THE HOSPITAL'S	
1	Affiliate Description	MED	
2	Affiliate type of service	Affilate Support Services	
3	Tax Status	Not for Profit	
4	Street Address	20 York Street, Suite T-102	
5	Town	New Haven	
	State	Connecticut	
	Zip Code	06504 -	
8	CEO Name	Steve Merz	
9	CEO Title	President	
	CT Agent Name	William J Aseltyne	
	CT Agent Company	Yale-New Haven Health Services Corporation	
12	CT Agent Company Street Address	789 Howard Avenue, CB230, Legal & Risk Services Dept	
13	CT Agent Town	New Haven	
	CT Agent State	Connecticut	
15	CT Agent Zip Code	06519 -	
S.	AFFILIATE NAME	YNH GERIATRIC SERVICES, P.C.	
		Provides elder care services for Nursing Home Practices in the community. P.C.	
I		employed physicians and physician assistants visit patients in Practice affiliated nursing	
1	Affiliate Description	facilities, in their homes in affiliated retirement communities and in office setting	
2	Affiliate type of service	Physicians Services	
3	Tax Status	Not for Profit	
4	Street Address	789 Howard Avenue	
	Ottool Addition	7 00 Floward 7 Worldo	

REPORT 20 6 OF 42 8/1/2013,8:36 AM

YALE-NEW HAVEN HOSPITAL

ANNUAL REPORTING

FISCAL YEAR 2012

REPORT 20 - REPORT OF EACH JOINT VENTURE, PARTNERSHIP AND CORPORATION RELATED TO THE HOSPITAL

(1)	(2)	(3)	
l			
	DESCRIPTION	AFFILIATE INFORMATION	
5	Town	New Haven	
6	State	Connecticut 06519 -	
	Zip Code CEO Name	Peter Herbert	
	CEO Title	President	
	CT Agent Name	Merton G. Gollaher	
	CT Agent Name CT Agent Company	Wiggin & Dana	
	CT Agent Town	New Haven	
	CT Agent State	Connecticut	
	CT Agent Zip Code	06508 - 1832	
		VALL MEDIAN GEDWAFA B.O.	
Т.	AFFILIATE NAME	YNH MEDICAL SERVICES, P.C.	
١.	A ((1))	Known as the Hospitalist Service, provides inpatient care supporting the community	
1	Affiliate Description	physicians from direct referrals as well as any overflow patients.	
3	Affiliate type of service Tax Status	Physicians Services Not for Profit	
4	Street Address	20 York Street, CB 2041	
5	Town	New Haven	
6	State	Connecticut	
	Zip Code	06510 -	
	CEO Name	Peter Herbert	
9	CEO Title	President	
	CT Agent Name	Merton G. Gollaher	
11	CT Agent Company	Wiggin & Dana	
	CT Agent Company Street Address	One CenturyTower, P.O. Box 1832	
13	CT Agent Town	New Haven	
14	CT Agent State	Connecticut	
15	CT Agent Zip Code	06508 - 1832	
U.	AFFILIATE NAME	YNHH-PHYSICIANS CORPORATION	
<u> </u>	AFFICIATE NAME	PHYSICIAN HOSPITAL ORGANIZATION IS A MANAGED CARE CONTRACTING	
		ORGANIZATION. YNHH DOES NOT CONSIDER THE PHO AN AFFILIATE BECAUSE	
		IT IS NOT CONTROLLED BY OR UNDER COMMON CONTROL OR OWNERSHIP	
1	Affiliate Description	WITH YNHH OR YNHH AFFILIATES.	
	Affiliate type of service	Physicians Hospital Org. (PHO)	
3	Tax Status	For Profit	
	Street Address	789 Howard Avenue	
5	Town	New Haven	
6	State	Connecticut	
	Zip Code	06519 -	
8	CEO Name	Dr. Michael Berman	
9	CEO Title	President and Chairman of the Board	
	CT Agent Name	Irving S. Schloss Esq.	
	CT Agent Company	Tyler Cooper & Alcorn LLP	
		205 Church St.	
	CT Agent Town	New Haven	
	CT Agent State	Connecticut	
15	CT Agent Zip Code	06509 -	
٧.	AFFILIATE NAME	YNHHS-MSO, INC.	
		YNNH-MSO, INC. WAS ORIGINALLY FORMED TO MANAGE PHYSICIAN	
		PRACTICES AND PROVIDE THIRD PARTY ADMINISTRATIVE SERVICES ON	
1	Affiliate Description	CERTAIN MANAGED CARE CONTRACTS.	
2	Affiliate type of service	Managed Services Org. (MSO)	
3	Tax Status	For Profit	
4	Street Address	789 Howard Avenue	
5	Town	New Haven	
6	State	Connecticut	

REPORT 20 7 OF 42 8/1/2013,8:36 AM

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	
7	Zip Code	06519 -	
8	CEO Name	Gayle Capozzalo	
9	CEO Title	President	
	CT Agent Name	Merton G. Gollaher, JR.	
11	CT Agent Company	Wiggin & Dana LLP	
12		1 Century Tower, 195 Church St	
13	CT Agent Town	New Haven	
14	CT Agent State	Connecticut	
15	CT Agent Zip Code	06508 - 1832	
w.	AFFILIATE NAME	YORK ENTERPRISES, INC.	
		YORK ENTERPRISES, INC. IS A WHOLLY OWNED SUBSIDIARY OF YNH	
		NETWORK CORP. YORK ENTERPRISES INC IS THE PARENT CORPORATION OF	
		MEDICAL CENTER REALTY INC AND MEDICAL CENTER PHARMACY AND HOME	
1	Affiliate Description	CARE CENTER INC.	
2	Affiliate type of service	Affilate Support Services	
3	Tax Status	For Profit	
4	Street Address	50 York Street	
5	Town	New Haven	
6	State	Connecticut	
7	Zip Code	06511 -	
8	CEO Name	Vincent Tammaro	
9	CEO Title	President	
10	CT Agent Name	William J Aseltyne	
11	CT Agent Company	Yale New Haven Hospital	
12		20 York Street, CB-230	
13	CT Agent Town	New Haven	
14	CT Agent State	Connecticut	
15	CT Agent Zip Code	06510 -	

^{*} P.O. BOX IS UNACCEPTABLE WITHOUT A STREET ADDRESS FOR EACH AGENT COMPANY

REPORT 5 - HOSPITAL, AFFILIATE AND RELATED CORPORATION NET ASSETS

(1)	(2)	(3)	(4)
<u> </u>	, ,	FUND DESCRIPTION /	BALANCE AS OF
LINE	AFFILIATE NAME	FUND PURPOSE	9/30/2012
Α.	YALE-NEW HAVEN HOSPITAL		
1		Unrestricted	\$676,008,000
2		Temporarily Restricted by Donor	\$46,026,000
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor Intercompany Eliminations	\$26,744,000
5		Total:	\$748,778,000
		Total.	\$740,770,000
В.	YNH NETWORK CORPORATION		
1		Unrestricted	\$9,526,000
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	(\$8,706,000)
		Total:	\$820,000
C.	CARITAS INSURANCE COMPANY LTD.		A
1		Unrestricted	\$8,680,000
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	(\$138,000)
		Total:	\$8,542,000
	CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY		
D.	(CENTURY)		
	(CENTURY)	I have at data d	₽0.007.070
1		Unrestricted	\$2,037,370
2		Temporarily Restricted by Donor	\$0
<u>3</u>		Temporarily Restricted by Board Permanently Restricted by Donor	\$0 \$0
5		Intercompany Eliminations	(\$2,037,370)
		Total:	(φ2,037,370) \$0
			11
E.	COMMUNITY HEALTH CARE PHYSICIANS (CHCP)		
1		Unrestricted	\$18,000
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$18,000
F.	LUKAN INDEMNITY COMPANY LTD.		
1		Unrestricted	\$4,105,000
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	(\$21,000)
		Total:	\$4,084,000
	MEDICAL CENTER PHARMACY AND HOME CARE CENTER,		
G.	INC.		
1		Unrestricted	\$671,999
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$671,999
	•	•	

REPORT 5 - HOSPITAL, AFFILIATE AND RELATED CORPORATION NET ASSETS

	(2)	(3)	(4)
(1)	(-)	FUND DESCRIPTION /	BALANCE AS OF
LINE	AFFILIATE NAME	FUND PURPOSE	9/30/2012
Н.	MEDICAL CENTER REALTY, INC.		
1		Unrestricted	(\$1,254,091)
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	(\$1,254,091)
I.	NORTHEAST MEDICAL GROUP, INC.		
1	NOTITIES INC.	Unrestricted	\$2,568,915
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$2,568,915
	NORTHEAST PEDIATRIC SPECIALISTS, INC.		
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
		Total:	\$0
K.	QUINNIPIAC MEDICAL P.C. (QMPC)		
1	activiti inc medicae i .c. (ami o)	Unrestricted	(\$1,390,000)
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	(\$1,390,000)
	SHORELINE SURGERY CENTER, LLC		
1	SHORELINE SURGERY CENTER, LLC	Unrestricted	\$2,350,684
1	SHORELINE SURGERY CENTER, LLC	Temporarily Restricted by Donor	\$2,350,684
1 2 3	SHORELINE SURGERY CENTER, LLC	Temporarily Restricted by Donor Temporarily Restricted by Board	\$2,350,684 \$0 \$0
1 2 3 4	SHORELINE SURGERY CENTER, LLC	Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor	\$2,350,684 \$0 \$0 \$0
1 2 3	SHORELINE SURGERY CENTER, LLC	Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations	\$2,350,684 \$0 \$0 \$0 \$0
1 2 3 4	SHORELINE SURGERY CENTER, LLC	Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor	\$2,350,684 \$0 \$0 \$0 \$0
1 2 3 4 5		Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations	\$2,350,684 \$0 \$0 \$0 \$0
1 2 3 4 5	SHORELINE SURGERY CENTER, LLC SSC II, LLC	Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations Total:	\$2,350,684 \$0 \$0 \$0 \$0 \$0 \$2,350,684
1 2 3 4 5		Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations Total: Unrestricted	\$2,350,684 \$0 \$0 \$0 \$0 \$0 \$2,350,684 \$2,541,290
1 2 3 4 5		Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations Total: Unrestricted Temporarily Restricted by Donor	\$2,350,684 \$0 \$0 \$0 \$0 \$0 \$2,350,684 \$2,541,290 \$0
1 2 3 4 5 M. 1 2 3		Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations Total: Unrestricted Temporarily Restricted by Donor Temporarily Restricted by Board	\$2,350,684 \$0 \$0 \$0 \$0 \$0 \$2,350,684 \$2,541,290 \$0 \$0
1 2 3 4 5		Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations Total: Unrestricted Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor	\$2,350,684 \$0 \$0 \$0 \$0 \$0 \$2,350,684 \$2,541,290 \$0
1 2 3 4 5 M. 1 2 3 4		Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations Total: Unrestricted Temporarily Restricted by Donor Temporarily Restricted by Board	\$2,350,684 \$0 \$0 \$0 \$0 \$0 \$2,350,684 \$2,541,290 \$0 \$0 \$0
1 2 3 4 5 M. 1 2 3 4	SSC II, LLC	Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations Total: Unrestricted Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations	\$2,350,684 \$0 \$0 \$0 \$0 \$2,350,684 \$2,541,290 \$0 \$0 \$0
1 2 3 4 5 M. 1 2 3 4 5	SSC II, LLC THE GREATER NEW HAVEN PARTNERSHIP FOR A HEALTHY	Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations Total: Unrestricted Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations	\$2,350,684 \$0 \$0 \$0 \$0 \$2,350,684 \$2,541,290 \$0 \$0 \$0
1 2 3 4 5 M. 1 2 3 4 5	SSC II, LLC	Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations Total: Unrestricted Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations Total:	\$2,350,684 \$0 \$0 \$0 \$0 \$2,350,684 \$2,541,290 \$0 \$0 \$0 \$2,541,290
M. 1 2 3 4 5 5 N. 1	SSC II, LLC THE GREATER NEW HAVEN PARTNERSHIP FOR A HEALTHY	Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations Total: Unrestricted Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations Total: Unrestricted	\$2,350,684 \$0 \$0 \$0 \$0 \$2,350,684 \$2,541,290 \$0 \$0 \$2,541,290
1 2 3 4 5 M. 1 2 3 4 5 N. 1 2	SSC II, LLC THE GREATER NEW HAVEN PARTNERSHIP FOR A HEALTHY	Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations Total: Unrestricted Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations Total: Unrestricted Temporarily Restricted by Donor	\$2,350,684 \$0 \$0 \$0 \$0 \$0 \$2,350,684 \$2,541,290 \$0 \$0 \$0 \$2,541,290 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$
1 2 3 4 5 M. 1 2 3 4 5 N. 1 2 3	SSC II, LLC THE GREATER NEW HAVEN PARTNERSHIP FOR A HEALTHY	Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations Total: Unrestricted Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations Total: Unrestricted Temporarily Restricted by Donor Intercompany Eliminations Total: Unrestricted Temporarily Restricted by Donor Temporarily Restricted by Donor Temporarily Restricted by Board	\$2,350,684 \$0 \$0 \$0 \$0 \$0 \$0 \$2,350,684 \$2,541,290 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$
1 2 3 4 5 M. 1 2 3 4 5 N. 1 2	SSC II, LLC THE GREATER NEW HAVEN PARTNERSHIP FOR A HEALTHY	Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations Total: Unrestricted Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations Total: Unrestricted Temporarily Restricted by Donor	\$2,350,684 \$0 \$0 \$0 \$0 \$2,350,684 \$2,541,290 \$0 \$0 \$2,541,290 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0

REPORT 5 10 OF 42 8/1/2013, 8:36 AM

REPORT 5 - HOSPITAL, AFFILIATE AND RELATED CORPORATION NET ASSETS

(1)	(2)	(3)	(4)
		FUND DESCRIPTION /	BALANCE AS OF
LINE	AFFILIATE NAME	FUND PURPOSE	9/30/2012
	THE NEW CLINICAL DEVELOPMENT PROGRAM		
	CORPORATION (NCPD)	Hana strint and	¢0.007.000
1		Unrestricted	\$2,397,968
3		Temporarily Restricted by Donor Temporarily Restricted by Board	\$0 (\$2,292)
4		Permanently Restricted by Board	\$0
5		Intercompany Eliminations	(\$2,395,676)
		Total:	\$0
P.	YALE-NEW HAVEN AMBULATORY SERVICES CORP.		
1		Unrestricted	\$5,505,964
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4 5		Permanently Restricted by Donor Intercompany Eliminations	\$0 \$0
5		Total:	\$5,505,964
		rotai.	ψυ,υυυ,904
Q.	YALE-NEW HAVEN CARE CONTINUUM		
1	THE REST HAVER CARE CONTINOUN	Unrestricted	(\$11,719)
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	(\$11,719)
R.	YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)		
1		Unrestricted	\$95,804,000
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4 5		Permanently Restricted by Donor Intercompany Eliminations	\$0 \$0
		Total:	\$95,804,000
		Total.	ψ30,004,000
	YALE-NEW HAVEN MEDICAL CENTER, INC. (MEDICAL		
S.	CENTER)		
1		Unrestricted	\$2,605,814
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$2,605,814
-	VALUEDIATRIO OFRIVISTO, D.O.		
T.	YNH GERIATRIC SERVICES, P.C.	Hamadriata I	A -
1		Unrestricted	\$0
3		Temporarily Restricted by Donor Temporarily Restricted by Board	\$0 \$0
4		Permanently Restricted by Board	\$0
5		Intercompany Eliminations	\$0
Ť		Total:	\$0
U.	YNH MEDICAL SERVICES, P.C.		
1		Unrestricted	(\$111,000)
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	(\$111,000)

REPORT 5 11 OF 42 8/1/2013, 8:36 AM

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
V.	YNHH-PHYSICIANS CORPORATION		
1		Unrestricted	\$78,706
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	(\$78,706)
		Total:	\$0
W.	YNHHS-MSO, INC.		
1		Unrestricted	\$1,588,708
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$1,588,708
Χ.	YORK ENTERPRISES, INC.		•
1		Unrestricted	\$3,298,942
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	(\$582,092)
		Total:	\$2,716,850
	Total of all Affiliates (before Intercompany Eliminations)	Fund Balance:	\$889,788,258
	Intercompany Eliminations	i una Balance.	· · ·
	Total of all Affiliates	Fund Balance	(\$13,958,844)
	Total of all Affiliates	Fund Balance:	\$875,829,414

REPORT 5 12 OF 42 8/1/2013, 8:36 AM

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
Α.	YNH NETWORK CORPORATION			
	THIT HET WORK CORT ORATION	Beginning Unconsolidated Intercompany Balance:	9/30/2011	\$0
1		Transfer of Cash	09/30/2012	\$613,000
<u> </u>		Ending Unconsolidated Intercompany Balance:	9/30/2012	\$613,000
B.	CARITAS INSURANCE COMPANY LTD.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2011	\$0
		Nothing to Report		\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2012	\$0
C.	CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENT			
		Beginning Unconsolidated Intercompany Balance:	9/30/2011	\$0
1		Collection Agency Fees Charged	09/30/2012	\$2,351,102
2		Net Payments	09/30/2012	(\$2,351,102)
		Ending Unconsolidated Intercompany Balance:	9/30/2012	\$0
D.	COMMUNITY HEALTH CARE PHYSICIANS (CHCP)			
-	COMMONITY TIEAETH GAILE FITT SICIANS (CHOF)	Beginning Unconsolidated Intercompany Balance:	9/30/2011	\$0
-		Nothing to Report	0/00/2011	\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2012	\$0
E.	LUKAN INDEMNITY COMPANY LTD.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2011	\$0
1		Malpractice and Insurance	09/30/2012	(\$383,595)
		Ending Unconsolidated Intercompany Balance:	9/30/2012	(\$383,595)
_				
F.	MEDICAL CENTER PHARMACY AND HOME CARE CENTER, INC			*== -==
L.,		Beginning Unconsolidated Intercompany Balance:	9/30/2011	\$72,625
1		Net Payments	09/30/2012	(\$72,625)
		Ending Unconsolidated Intercompany Balance:	9/30/2012	\$0
G.	MEDICAL CENTER REALTY, INC.			
	MEDIONE GENTER REALTY, INC.	Beginning Unconsolidated Intercompany Balance:	9/30/2011	\$60,712
1		Sales/Purchases of Services	09/30/2012	\$71,370
		Ending Unconsolidated Intercompany Balance:	9/30/2012	\$132,082
Н.	NORTHEAST MEDICAL GROUP, INC.			

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
L_		Beginning Unconsolidated Intercompany Balance:	9/30/2011	\$340,000
1		Payments to YNHH	09/30/2012	(\$3,252,320)
		Ending Unconsolidated Intercompany Balance:	9/30/2012	(\$2,912,320)
I.	NORTHEAST PEDIATRIC SPECIALISTS, INC.			
-	NORTHEAST FEBRUARO OF ESTALISTO, INC.	Beginning Unconsolidated Intercompany Balance:	9/30/2011	\$0
		Nothing to Report	0,00,2011	\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2012	\$0
J.	QUINNIPIAC MEDICAL P.C. (QMPC)			
		Beginning Unconsolidated Intercompany Balance:	9/30/2011	\$0
		Nothing to Report		\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2012	\$0
V	CHORELINE CURCERY CENTER 110			
K.	SHORELINE SURGERY CENTER, LLC		0/00/0044	*
		Beginning Unconsolidated Intercompany Balance:	9/30/2011	\$0
		Nothing to Report Ending Unconsolidated Intercompany Balance:	0/00/00/0	\$0 \$0
		Ending officialismated intercompany Balance.	9/30/2012	\$0
L.	SSC II, LLC			
-		Beginning Unconsolidated Intercompany Balance:	9/30/2011	\$0
		Nothing to Report	3/30/2011	\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2012	\$0
М.	THE GREATER NEW HAVEN PARTNERSHIP FOR A HEALTHY C			
		Beginning Unconsolidated Intercompany Balance:	9/30/2011	\$0
		Nothing to Report		\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2012	\$0
N.	THE NEW CLINICAL DEVELOPMENT PROGRAM CORPORATION	(MCDD)		
14.	THE NEW CLINICAL DEVELOPINIENT PROGRAM CORPORATION	Beginning Unconsolidated Intercompany Balance:	9/30/2011	\$0
-		Nothing to Report	9/30/2011	\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2012	\$0
		3 - 13	3/30/2012	
0.	YALE-NEW HAVEN AMBULATORY SERVICES CORP.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2011	\$894,123
1		Sales/Purchases of Services	09/30/2012	\$12,539,721

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
		Ending Unconsolidated Intercompany Balance:	9/30/2012	\$13,433,844
P.	YALE-NEW HAVEN CARE CONTINUUM			
		Beginning Unconsolidated Intercompany Balance:	9/30/2011	\$0
1		Sales/Purchases of Services	09/30/2012	\$3,592,710
		Ending Unconsolidated Intercompany Balance:	9/30/2012	\$3,592,710
Q.	YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)			
٠	TALL-NEW HAVEN HEALTH SERVICES CORF. (TNIHISC)	Beginning Unconsolidated Intercompany Balance:	9/30/2011	(\$20,985,636)
1		System Support Fee	09/30/2012	(\$20,398,452)
2		Information System Contract Fee	09/30/2012	(\$37,672,755)
3		System Business Office Contract Fee	09/30/2012	(\$17,738,823)
4		Professional General Liability Insurance	09/30/2012	(\$20,948,812)
5		Other Fees	09/30/2012	(\$39,906,500)
6		Facilities Rental	09/30/2012	\$2,883
7		Transfer of Cash	09/30/2012	\$9,000,000
8		Transfer of Net Assets	09/30/2012	(\$9,000,000)
9		Net Payments	09/30/2012	\$131,428,454
-		Ending Unconsolidated Intercompany Balance:	9/30/2012	(\$26,219,641)
R.	YALE-NEW HAVEN MEDICAL CENTER, INC. (MEDICAL CENTE			
		Beginning Unconsolidated Intercompany Balance:	9/30/2011	(\$20,108)
1		Sales/Purchases of Services	09/30/2012	\$422,625
		Ending Unconsolidated Intercompany Balance:	9/30/2012	\$402,517
S.	YNH GERIATRIC SERVICES, P.C.			
J	THE GERIATRIC SERVICES, F.C.	Beginning Unconsolidated Intercompany Balance:	9/30/2011	(\$27,423)
1		Sales/Purchases of Services	09/30/2011	\$25,068
-		Ending Unconsolidated Intercompany Balance:	9/30/2012	(\$2,355)
			3/30/2012	(+=,555)
T.	YNH MEDICAL SERVICES, P.C.			
<u> </u>		Beginning Unconsolidated Intercompany Balance:	9/30/2011	\$401
1		Payments to YNHH	09/30/2012	(\$131)
		Ending Unconsolidated Intercompany Balance:	9/30/2012	\$270
U.	YNHH-PHYSICIANS CORPORATION			
		Beginning Unconsolidated Intercompany Balance:	9/30/2011	\$0

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
		Nothing to Report		\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2012	\$0
٧.	YNHHS-MSO, INC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2011	\$0
		Nothing to Report		\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2012	\$0
14/	VODY - WEED TO A WA			
W.	YORK ENTERPRISES, INC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2011	(\$14,216)
1		Sales/Purchases of Services	09/30/2012	(\$1,696)
		Ending Unconsolidated Intercompany Balance:	9/30/2012	(\$15,912)
			Grand Total:	(\$11,359,400)

(1)	(2)	(3)	(4)	(5)	(6)
LINE	AFFILIATE TRANSFERRING FUNDS	AFFILIATE RECEIVING FUNDS	DESCRIPTION OF TRANSFER	DATE	AMOUNT
LINE	AFFILIATE TRANSFERRING FUNDS	AFFILIATE RECEIVING FUNDS		DATE	AWOUNT
			Beginning Unconsolidated	40/04/0044	# 500.000
_	VALUE NETWORK CORRORATION		Intercompany Balance	10/01/2011	\$588,293
A.	YNH NETWORK CORPORATION	VALE NEW HAVEN HEAT THOSE VIOLE			
		YALE-NEW HAVEN HEALTH SERVICES		00/00/0040	
1		CORP. (YNHHSC)	System Support Fee	09/30/2012	\$20,048
		YALE-NEW HAVEN HEALTH SERVICES		00/00/0040	Ф0.000
2		CORP. (YNHHSC) YALE-NEW HAVEN HEALTH SERVICES	Management Services	09/30/2012	\$3,993
_		CORP. (YNHHSC)	Payments/Adjustments	00/20/2040	(040,447)
3		CORP. (TNHH3C)		09/30/2012	(\$13,417)
			Total:	9/30/2012	\$10,624
_	OARITAO INQUIRANIOS COMPANIVI TR				
В.	CARITAS INSURANCE COMPANY LTD.		N. d		*
			Nothing to Report		\$0
			Total:	9/30/2012	\$0
C.	CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENTURY)				
		YALE-NEW HAVEN HEALTH SERVICES			
1		CORP. (YNHHSC)	Management Services	09/30/2012	\$106,846
			Total:	9/30/2012	\$106,846
D.	COMMUNITY HEALTH CARE PHYSICIANS (CHCP)				
			Nothing to Report		\$0
			Total:	9/30/2012	\$0
E.	LUKAN INDEMNITY COMPANY LTD.				
			Nothing to Report		\$0
			Total:	9/30/2012	\$0
				0,00,00	7.
F.	MEDICAL CENTER PHARMACY AND HOME CARE CENTER, INC.				
-		YALE-NEW HAVEN HEALTH SERVICES			
1		CORP. (YNHHSC)	System Support Fee	09/30/2012	(\$1,623)
			Total:	9/30/2012	(\$1,623)
			Total.	3/30/2012	(ψ1,023)
G.	MEDICAL CENTER REALTY, INC.				
.	medicae certer realti, mo.	YALE-NEW HAVEN HEALTH SERVICES			
1		CORP. (YNHHSC)	System Support Fee	09/30/2012	\$26,052
		CORF. (TINHHOU)	System Support Fee	09/30/2012	φ20,052

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
		YALE-NEW HAVEN HEALTH SERVICES			
2		CORP. (YNHHSC) YALE-NEW HAVEN HEALTH SERVICES	Management Services	09/30/2012	\$26,778
					(4
3		CORP. (YNHHSC)	Payments	09/30/2012	(\$250,000)
			Total:	9/30/2012	(\$197,170)
н.	NORTHEAST MEDICAL GROUP, INC.				
- ''	NONTHEAST MEDICAE GROOF, INC.		Nothing to Report		\$0
			Total:	9/30/2012	\$ 0
			10.0	3/30/2012	Ψ
I.	NORTHEAST PEDIATRIC SPECIALISTS, INC.				
			Nothing to Report		\$0
			Total:	9/30/2012	\$0
J.	QUINNIPIAC MEDICAL P.C. (QMPC)				
			Nothing to Report		\$0
			Total:	9/30/2012	\$0
K.	SHORELINE SURGERY CENTER, LLC				
		YALE-NEW HAVEN HEALTH SERVICES			
1		CORP. (YNHHSC) YALE-NEW HAVEN HEALTH SERVICES	Management Services	09/30/2012	\$68,259
2		CORP. (YNHHSC)	Payments/Adjustments	09/30/2012	(\$67,246)
		GOIGT: (TIGHTIGO)	Total:	9/30/2012	\$1,013
			Total.	3/30/2012	ψ1,013
L.	SSC II, LLC				
			Nothing to Report		\$0
			Total:	9/30/2012	\$0
					,
	THE GREATER NEW HAVEN PARTNERSHIP FOR A HEALTHY				
M.	COMMUNITY, INC.				
			Nothing to Report		\$0
			Total:	9/30/2012	\$0
N.	THE NEW CLINICAL DEVELOPMENT PROGRAM CORPORATION (NCPD)		N. d.		
			Nothing to Report		\$0

18 OF 42 8/1/2013,8:36 AM

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	\$0
Ο.	YALE-NEW HAVEN AMBULATORY SERVICES CORP.				
		YALE-NEW HAVEN HEALTH SERVICES			
1		CORP. (YNHHSC)	System Support Fee	09/30/2012	\$45,399
		YALE-NEW HAVEN HEALTH SERVICES			
2		CORP. (YNHHSC)	Management Services	09/30/2012	\$160,444
		YALE-NEW HAVEN HEALTH SERVICES			
3		CORP. (YNHHSC)	Payments	09/30/2012	(\$205,000)
			Total:	9/30/2012	\$843
_					
P.	YALE-NEW HAVEN CARE CONTINUUM				
			Nothing to Report		\$0
			Total:	9/30/2012	\$0
Q.	YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)				
			Nothing to Report		\$0
			Total:	9/30/2012	\$0
R.	YALE-NEW HAVEN MEDICAL CENTER, INC. (MEDICAL CENTER)				
		YALE-NEW HAVEN HEALTH SERVICES			
1		CORP. (YNHHSC)	Management Services	09/30/2012	\$14,990
1 _		YALE-NEW HAVEN HEALTH SERVICES	5		(4
2		CORP. (YNHHSC)	Payments/Adjustments	09/30/2012	(\$30,000)
			Total:	9/30/2012	(\$15,010)
	WALL DEDIATED DEDICATOR D.O.				
S.	YNH GERIATRIC SERVICES, P.C.		N. d. C. S.		
			Nothing to Report		\$0
			Total:	9/30/2012	\$0
T.	YNH MEDICAL SERVICES, P.C.		N. d		
			Nothing to Report		\$0
			Total:	9/30/2012	\$0
U.	YNHH-PHYSICIANS CORPORATION	VALE NEW (100 PARTIES AND ALEXANDER)			
l .		YALE-NEW HAVEN HEALTH SERVICES	Managana	00/00/22	
1		CORP. (YNHHSC)	Management Services	09/30/2012	\$2,295

REPORT 6A 19 OF 42 8/1/2013,8:36 AM

(1)	(2)	(3)	(4)	(5)	(6)
LINE	AFFILIATE TRANSFERRING FUNDS	AFFILIATE RECEIVING FUNDS	DESCRIPTION OF TRANSFER	DATE	AMOUNT
			Total:	9/30/2012	\$2,295
V.	YNHHS-MSO, INC.				
			Nothing to Report		\$0
			Total:	9/30/2012	\$0
W.	YORK ENTERPRISES, INC.				
1		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	System Support Fee	09/30/2012	\$1,650
2		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	Management Services	09/30/2012	\$163,997
3		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	Payments/Adjustments	09/30/2012	(\$507,544)
			Total:	9/30/2012	(\$341,897)
			Ending Unconsolidated Intercompany Balance	9/30/2012	\$154,214

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

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME &	AMOUNT	DATE
LINE	DESCRIPTION OF EXPENDITURE	AMOUNT	DATE
Α.	YNH NETWORK CORPORATION		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2012
B.	CARITAS INSURANCE COMPANY LTD.		
0	Nothing to Report	\$0	
	l otal:	\$0	9/30/2012
C.	CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENTURY)		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2012
	COMMUNITY LIFE A THE CARE BUYOUGHANG (CHOR)		
D .	COMMUNITY HEALTH CARE PHYSICIANS (CHCP) Nothing to Report	\$0	
	Total:	\$0	9/30/2012
E.	LUKAN INDEMNITY COMPANY LTD. Nothing to Report	C O.	
0	Total:	\$0 \$0	9/30/2012
		**	0,00,00
	MEDICAL CENTER PHARMACY AND HOME CARE CENTER, INC.		
0	Nothing to Report Total:	\$0 \$0	9/30/2012
	i otal:	\$0	9/30/2012
	MEDICAL CENTER REALTY, INC.		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2012
Н.	NORTHEAST MEDICAL GROUP, INC.		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2012
	NORTHE ACT DEDIATRIC OREGIALICTO INC		
I.	NORTHEAST PEDIATRIC SPECIALISTS, INC. Nothing to Report	\$0	
	Total:	\$0	9/30/2012
J .	QUINNIPIAC MEDICAL P.C. (QMPC) Nothing to Report	\$0	
_	Total:	\$0	9/30/2012
	SHORELINE SURGERY CENTER, LLC		
0	Nothing to Report Total:	\$0 \$0	9/30/2012
	Totali	Ψ0	3/30/2012
L.	SSC II, LLC		
0	Nothing to Report	\$0	A 12.212.2.
	Total:	\$0	9/30/2012
М.	THE GREATER NEW HAVEN PARTNERSHIP FOR A HEALTHY COMMUNITY, INC		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2012
N.	THE NEW CLINICAL DEVELOPMENT PROGRAM CORPORATION (NCPD)		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2012
_			
O .	YALE-NEW HAVEN AMBULATORY SERVICES CORP. Nothing to Report	\$0	
Ť	Total:	\$0	9/30/2012
P.	YALE-NEW HAVEN CARE CONTINUUM		
0	Nothing to Report Total:	\$0 \$0	9/30/2012
	Total.	20	9/30/2012
Q.	YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2012

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

(1)	(2)	1	(3)	(4)
(' /	AFFILIATE NAME &		(-)	(-)
LINE	DESCRIPTION OF EXPENDITURE		AMOUNT	DATE
R.	YALE-NEW HAVEN MEDICAL CENTER, INC. (MEDICAL CENTER)			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2012
	VANU OF DIA TRIO OF DIVIOSO D.O.			
S .	YNH GERIATRIC SERVICES, P.C.		\$0	
-	Nothing to Report	Total:	\$0 \$0	9/30/2012
		Total.	\$0	9/30/2012
T.	YNH MEDICAL SERVICES, P.C.			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2012
U.	YNHH-PHYSICIANS CORPORATION			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2012
V.	YNHHS-MSO, INC.			
0	Nothing to Report		\$0	
	Notating to Hoport	Total:	\$0	9/30/2012
			·	
W.	YORK ENTERPRISES, INC.			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2012
	Grand	Total:	\$0	9/30/2012

REPORT 7 22 OF 42 8/1/2013, 8:36 AM

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.	YNH NETWORK CORPORATION	60	0
	Nothing to Report Total:	\$0 \$0	0
	1 Ottali	ψ0	
В.	CARITAS INSURANCE COMPANY LTD.		
0	Nothing to Report	\$0	0
	Total:	\$0	
C.	CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENTURY)		
0	Nothing to Report	\$0	0
	Total:	\$0	
D.	COMMUNITY HEALTH CARE PHYSICIANS (CHCP)		
0	Nothing to Report	\$0	0
	Total:	\$0	-
E.	LUKAN INDEMNITY COMPANY LTD.		
0	Nothing to Report	\$0	0
	Total:	\$0	
F .	MEDICAL CENTER PHARMACY AND HOME CARE CENTER, INC. Nothing to Report	50	0
	Nothing to Report Total:	\$0 \$0	0
	i otal.	40	
G.	MEDICAL CENTER REALTY, INC.		
0	Nothing to Report	\$0	0
	Total:	\$0	
H.	NORTHEAST MEDICAL GROUP, INC.		
1	Funding for the Hospitalist Program	\$23,838,355	1
	Total:	\$23,838,355	
I.	NORTHEAST PEDIATRIC SPECIALISTS, INC. Nothing to Report	\$0	<u> </u>
<u> </u>	Total:	\$ 0	0
J.	QUINNIPIAC MEDICAL P.C. (QMPC)		
0	Nothing to Report	\$0	0
	Total:	\$0	
K.	SHORELINE SURGERY CENTER, LLC		

REPORT 8 23 OF 42 8/1/2013,8:36 AM

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	
	Tota	\$0	
	SSC II, LLC	0.0	0
0	Nothing to Report Tota	\$0 : \$0	
	Total	1. VO	
М.	THE GREATER NEW HAVEN PARTNERSHIP FOR A HEALTHY COMMUNITY, INC.		
0	Nothing to Report	\$0	0
	Tota		
N.	THE NEW CLINICAL DEVELOPMENT PROGRAM CORPORATION (NCPD)		
0	Nothing to Report	\$0	0
	Tota	\$0	
0.	YALE-NEW HAVEN AMBULATORY SERVICES CORP.		
0	Nothing to Report	\$0	
	Tota	\$0	
P.	YALE-NEW HAVEN CARE CONTINUUM		
0	Nothing to Report Tota	\$0 : \$0	
	l Ota	\$0	
Q. 0	YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC) Nothing to Report	\$0	0
	Tota		
	1010		
R.	YALE-NEW HAVEN MEDICAL CENTER, INC. (MEDICAL CENTER)		
0	Nothing to Report	\$0	0
	Tota		
S.	YNH GERIATRIC SERVICES, P.C.		
0	Nothing to Report	\$0	0
	Tota	\$0	
T.	YNH MEDICAL SERVICES, P.C.		
0	Nothing to Report	\$0	
	Tota	50	
U.	YNHH-PHYSICIANS CORPORATION	60	
0	Nothing to Report Tota	\$0 : \$0	
	1002	• 1	

REPORT 8 24 OF 42 8/1/2013,8:36 AM

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
٧.	YNHHS-MSO, INC.		
0	Nothing to Report	\$0	0
	Total:	\$0	
W.	YORK ENTERPRISES, INC.		
0	Nothing to Report	\$0	0
	Total:	\$0	
	Grand Total:	\$23,838,355	

REPORT 8 25 OF 42 8/1/2013,8:36 AM

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
LINL	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	/8 DIFFERENCE
A.	Indigent Care				
	Beginning Balance	\$0.00	\$0.00	\$0.00	0%
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%
	Ending Balance	\$0.00	\$0.00	\$0.00	0%
5	Projected Interest Income	\$0.00	\$0.00	\$0.00	0%
B.	Free Beds				
	Beginning Balance	\$9,831,135.00	\$9,414,855.00	(\$416,280.00)	-4%
1	Donations	\$0.00	\$0.00	\$0.00	0%
2	Income	\$329,374.00	\$106,218.00	(\$223,156.00)	-68%
3	Expenditures	\$782,368.00	\$888,528.00	\$106,160.00	14%
4	Unrealized Gains and Losses	\$36,714.00	\$910,647.00	\$873,933.00	2380%
	Ending Balance	\$9,414,855.00	\$9,543,192.00	\$128,337.00	1%
5	Projected Interest Income	\$90,000.00	\$75,000.00	(\$15,000.00)	-17%
C.	Other				
0.	Beginning Balance	\$0.00	\$0.00	\$0.00	0%
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%
7	Ending Balance	\$0.00	\$0.00 \$0.00	\$0.00 \$0.00	0%
5	Projected Interest Income	\$0.00	\$0.00	\$0.00	0%
J	i rojecteu interest income	φυ.υυ	φυ.υυ	φυ.υυ	U70

	YALE-NEW HAVEN HOSPITAL						
	ANNUAL REPORTING						
	FISCAL YEAR 2012						
REPORT 17 - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY THE HOSPITAL							
A. Patient Activity	(6)	(6)					
(1)	(2)	(3)					
<u>Patient</u>	Name of Hospital Bed Fund (FULL NAME)	Amount					
1.Number of Applications for		83					
	2. A. Number of Patients receiving Hospital Bed Fund Grants 2. B. The Actual Total Dollar Amount provided to all patients from Hospital Bed F						
2. B. The Actual Total Dollar	Amount provided to all patients from Hospital Bed F	\$888,527.71					
1	New Haven Grays	\$582.86					
2	New Haven Grays	\$250.00					
3	New Haven Grays	\$175.00					
4	New Haven Grays	\$100.00					
5	New Haven Grays	\$624.14					
6	Julia Alling	\$6,037.92					
6	Charles Amos Baldwin	\$15,483.18					
6	Deane	\$12,712.60					
7	Deane	\$1,618.35					
7	Ellen M. Gifford	\$7,633.57					
7	Wyllys Atwater	\$14,967.99					
8	Wyllys Atwater	\$322.99					
8	Dwight Place Church	\$397.01					
9 10	Dwight Place Church Dwight Place Church	\$659.20					
10	William Townsend Hayes	\$2,766.53					
10	Dr. Thomas Wells	\$15,290.98 \$5,208.44					
11	Dr. Thomas Wells	\$5,208.41 \$2,437.08					
11	Armstrong	\$1,972.03					
12	Armstrong	\$1,327.28					
13	Armstrong	\$1,475.00					
14	Armstrong	\$5,563.92					
14	Frank Walter Benedict	\$15,267.22					
14	Henry Walter Benedict	\$3,321.24					
15	Henry Walter Benedict	\$3,169.78					
16	Henry Walter Benedict	\$6,767.86					
17	Henry Walter Benedict	\$760.00					
18	Henry Walter Benedict	\$1,248.34					
18	Helen & John T. Mason	\$2,194.46					
19	Helen & John T. Mason	\$951.48					
20	Helen & John T. Mason	\$2,100.00					
21 22	Helen & John T. Mason	\$3,175.15					
23	Helen & John T. Mason Helen & John T. Mason	\$703.30					
24	Helen & John T. Mason	\$100.00					
24	Frank L. Hunt	\$12,653.83 \$1,937.69					
25	Frank L. Hunt	\$1,937.69 \$17,259.14					
26	Frank L. Hunt	\$17,259.14					
27	Frank L. Hunt	\$1,340.98					
28	Frank L. Hunt	\$13,974.96					
29	Frank L. Hunt	\$1,345.88					
30	Frank L. Hunt	\$8,822.68					
31	Frank L. Hunt	\$4,215.25					
32	Frank L. Hunt	\$7,942.16					
33	Frank L. Hunt	\$30,733.92					
34	Frank L. Hunt	\$6,808.40					
34	Evelina J. Jones	\$74.29					
35	Evelina J. Jones	\$7,877.36					
35	Elizabeth Hotchkiss	\$5,351.47					
36	Elizabeth Hotchkiss	\$2,600.19					
36	Mary Lamb	\$390.08					
36	Bassett Bed #2	\$1,511.89					
37	Bassett Bed #2	\$7,069.45 \$1,245.50					
38	Bassett Bed #2	\$1,245.50					

YALE-NEW HAVEN HOSPITAL						
	ANNUAL REPORTING					
FISCAL YEAR 2012						
REPORT 17 - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY THE HOSPITAL						
A. Patient Activity	A. Patient Activity					
(1)	(2)	(3)				
Patient	Name of Hospital Bed Fund (FULL NAME)	Amount				
1.Number of Applications for Ho	spital Bed Funds	83				
2. A. Number of Patients receive		83				
2. B. The Actual Total Dollar An	nount provided to all patients from Hospital Bed	I F \$888,527.71				
39	Bassett Bed #2	\$6,091.47				
39 39	Fannie Keyes	\$16,020.33				
39	George T. Newhall & Julia Leete	\$24,060.72				
39	Stiles	\$27,283.44 \$8,420.12				
40	Stiles	\$9,916.19				
41	Stiles	\$6,733.98				
42	Stiles	\$18,887.63				
43	Stiles	\$4,462.96				
44	Stiles	\$4,485.73				
45	Stiles	\$1,900.08				
46	Stiles	\$19,956.52				
47	Stiles	\$22,517.32				
48	Stiles	\$1,215.11				
49	Stiles	\$5,135.00				
50 51	Stiles Stiles	\$91.98				
52	Stiles	\$5,800.00 \$704.18				
53	Stiles	\$62,878.54				
54	Stiles	\$40,430.43				
55	Stiles	\$21,118.99				
56	Stiles	\$165.00				
57	Stiles	\$570.57				
58	Stiles	\$748.07				
59	Stiles	\$14,382.98				
60	Stiles	\$960.00				
61	Stiles	\$8,137.77				
62	Stiles	\$7,710.24				
63 64	Stiles Stiles	\$10,301.31				
65	Stiles	\$10,614.36 \$67,231.73				
66	Stiles	\$18,748.68				
66	Rose Porter	\$10,748.08				
66	Lucy Hall Boardman	\$11,418.15				
66	Ellen M. Gifford Executors	\$7,230.96				
67	Ellen M. Gifford Executors	\$759.06				
67	Nathan Howell Sanford	\$15,983.16				
67	Arthur Herbert Trowbridge	\$8,474.93				
67	Edwin Harrison Beebe	\$11,224.45				
67	Julia A. Leete Newhall	\$32,164.99				
68	Julia A. Leete Newhall	\$2,548.18				
69 70	Julia A. Leete Newhall Julia A. Leete Newhall	\$10,161.21				
71	Julia A. Leete Newhall	\$8,087.58 \$2,274.68				
72	Julia A. Leete Newhall	\$4,750.03				
73	Julia A. Leete Newhall	\$271.68				
74	Julia A. Leete Newhall	\$320.00				
75	Julia A. Leete Newhall	(\$25,042.33)				
76	Strouse Adler	\$270.79				
76	Loring W. Andrews	\$459.11				
76	The "Anna" Fund	\$653.81				
76	Anna F. Ardenghi	\$458.89				
76	Harriet Atwater	\$459.11				
76	Mary E. Baldwin	\$1,029.45				

YALE-NEW HAVEN HOSPITAL							
	ANNUAL REPORTING						
	FISCAL YEAR 2012						
REPORT '	REPORT 17 - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY THE HOSPITAL						
A. Patient Activity	(0)	(0)					
(1)	(2)	(3)					
Patient	Name of Hospital Bed Fund (FULL NAME)	Amount					
1.Number of Applications for		83					
	eiving Hospital Bed Fund Grants Amount provided to all patients from Hospital Bed F	83					
Z. B. The Actual Total Dollar	Amount provided to an patients from Hospital Bed H	\$888,527.71					
76	George Benedict	¢402.92					
76	Bennett Sense Deliver	\$102.82 \$550.93					
76	Edwin B. Bowditch	\$459.11					
76	Henry Bronson	\$459.11					
76	Susan Ellen Brown	\$584.73					
76	Samuel Clifford Carlisle	\$458.96					
76	William & Laura Carmalt	\$1,147.46					
76	Joseph Cimerol, Jr.	\$183.50					
76	Charles Henry Collins	\$459.09					
76	Idalina Darrow	\$335.50					
76	Deane D. Birran Iv	\$425.05					
76 76	George B. Dines, Jr.	\$4.59					
76	Cora C.T. Dwight Dr. Jonathan Edwards	\$229.56					
77	Dr. Jonathan Edwards	\$268.30 \$190.81					
77	Henry Eld	\$229.55					
77	Henry F. English	\$459.11					
77	James E. English	\$518.78					
78	James E. English	\$897.78					
78	Henry Farnum	\$229.55					
78	William Fitch	\$229.55					
78	Edwin Foote	\$4,409.49					
79	Edwin Foote	\$1,849.94					
80	Edwin Foote	\$1,437.15					
81	Edwin Foote	\$1,825.98					
82 83	Edwin Foote	\$79.37					
83	Edwin Foote Grace Salisbury Foote	\$18,446.32 \$24.24					
83	Levi Goodell Fox	\$24.24 \$459.11					
83	Elizabeth Hamlin Fox	\$459.11					
83	Simeon & Arthur Ward Fox	\$1,504.32					
83	Charles D. Hall	\$670.81					
83	Sylvia C. Hall	\$1,257.97					
83	Jessie A. Harmon	\$459.11					
83	Henry Baldwin Harrison	\$445.89					
83	Mrs. Henry Baldwin Harrison	\$445.89					
83	John H. Hopson	\$229.55					
83	Henry Hotchkiss	\$0.00					
83 83	Timothy A. Hunt	\$419.97					
83	Abigail Bradley Hunt Hoadley B. Ives	\$419.97 \$229.55					
83	Mary E. Ives	\$229.55 \$229.56					
83	Robert E. Ives	\$459.11					
83	Walter Judson	\$45.91					
83	Charles Kohn	\$4.59					
83	Lenhardt	\$229.56					
83	George W. Mallory	\$229.55					
83	Mary B. Mallory	\$179.76					
83	John W. Mansfield	\$229.55					
83	Philip Marett	\$7,138.22					
83	Levy Morris	\$547.92					
83	Paul	\$229.55					
83	Maud Trowbridge Reynolds	\$2,135.22					
83	Leonard J.Sanford & Anna Cutter	\$446.25					

	YALE-NEW HAVEN HOSPITAL			
	ANNUAL REPORTING			
	FISCAL YEAR 2012			
REPO	ORT 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		
1.Number of Application	s for Hospital Bed Funds	83		
2. A. Number of Patients	receiving Hospital Bed Fund Grants	83		
2. B. The Actual Total Dollar Amount provided to all patients from Hospital Bed F \$888,				
83	Julia Sanford	\$459.11		
83	Sargent	\$229.56		
83	Mark M. Selleck	\$459.11		
83	George Thomas Smith	\$229.55		
83	Chris Tanuis	\$1.38		
83	Margarette Elford Dean Trowbridge	\$688.66		
83	Morton Warner	\$550.93		
83	Hermanus M. Welch	\$229.55		
83	Whitney	\$477.47		
83	Albert Aaron Williams	\$1,240.76		
83	Ann Phillips Wurtenberg	\$328.01		
83	Alfred Blakeslee	\$459.11		
	Grand Total	\$888,527.71		

	YALE-NEW HAVEN HOSPITAL					
		ANNUAL REPO				
		FISCAL YEAR				
	REPORT 17 - HOSPITAL	BED FUNDS HELD C	R ADMINISTERED E	BY THE HOSPITAL		
B. BI	ED FUND ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)	
		FMV of Principal	Actual Earnings	Earnings	Earnings	
Line	Name of Hospital Bed Fund	•	_	Reinvested	Available	
(3)	Fair Market Value of the Principal of ea	ach individual Hospi	tal Bed Fund, or the	Principal attributable	le to each	
(4)	(4) Total Actual Earnings for each Hospital Bed Fund or the Earnings attributable to each Hospital Bed Fund.					
(+)	(4) Four Found Earlings for each freeprical and of the Earlings and additional to each freeprical and fund					
(5)	Actual Dollar Amount of Earnings rein	vested as Principal,	if any.			
(6)	Actual Dollar Amount of Earnings available for Patient Care.					
	New Haven Grays Hospital Bed Fund \$10,000.00 \$2,452.00 \$0.00 \$2,452.00					
	Thanksgiving Hospital Bed Fund	\$10,000.00	\$2,452.00 \$254.00	\$0.00	\$2,452.00 \$254.00	
	Trinity Church Hospital Bed Fund	\$5,000.00	\$1,237.00	\$0.00	\$1,237.00	
	Mary Wade Hospita Bed Fund	\$5,000.00	\$1,462.00	\$0.00	\$1,462.00	
	Erika Banhan Hospital Bed Fund	\$40.097.00	\$530.00	\$0.00	\$530.00	
	Womens Seamans Friend Society of	, i,ii	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	******	
	Conn. Hospital Bed Fund	\$10,000.00	\$2,973.00	\$0.00	\$2,973.00	
	Adelaide Bushnell Curtis Hospital					
	Bed Fund	\$5,000.00	\$55.00	\$0.00	\$55.00	
	Robert Dickerman Hospital Bed Fund	\$6,000.00	\$65.00	\$0.00	\$65.00	
	German Society Hospital Bed Fund	\$21,269.00	\$232.00	\$0.00	\$232.00	
	Walter Charles Goodrich Hospital	+	V =0=100	* 5.55	*	
	Bed Fund	\$25,223.00	\$275.00	\$0.00	\$275.00	
	Sarah Barney Harrison Hospital Bed	_				
	Fund	\$9,712.00	\$106.00	\$0.00	\$106.00	
	Elret Stone Hospital Bed Fund Alma DeBeust Streitein Hospital Bed	\$500.00	\$5.00	\$0.00	\$5.00	
	Fund	\$35,984.00	\$393.00	\$0.00	\$393.00	
	Mary Southgate Trowbridge Hospital	400,00 00	4000.00	40.00	V	
	Bed Fund	\$5,000.00	\$55.00	\$0.00	\$55.00	
	Ellen Treadway Yeckley Hospital Bed					
	Fund	\$5,000.00	\$55.00	\$0.00	\$55.00	
	Marcellus B Wilcox Hospital Bed Fund	£40,000,00	¢400.00	¢0.00	¢400.00	
	Henry Baldwin Harrison Hospital Bed	\$10,000.00	\$109.00	\$0.00	\$109.00	
	Fund	\$9,712.00	\$107.00	\$0.00	\$107.00	
	Mrs. Henry Baldwin Harrison Hospital	. ,	,	,	·	
	Bed Fund	\$9,712.00	\$107.00	\$0.00	\$107.00	
	Home for the Friendliness Hospital		***		***	
	Bed Fund John H. Hopson Hospital Bed Fund	\$2,500.00	\$27.00	\$0.00	\$27.00	
	Henry Hotchkiss Hospital Bed Fund	\$5,000.00	\$55.00 \$55.00	\$0.00	\$55.00 \$55.00	
	Timothy A. Hunt Hospital Bed Fund	\$5,000.00 \$9,148.00	\$55.00 \$101.00	\$0.00 \$0.00	\$55.00 \$101.00	
	Abigail Bradley Hunt Hospital Bed	¥5,170.00	Ψ101.00	ψ0.00	\$101.00	
	Fund	\$9,148.00	\$101.00	\$0.00	\$101.00	
	Hoadley B. Ives Hospital Bed Fund	\$5,000.00	\$55.00	\$0.00	\$55.00	
	Mary E. Ives Hospital Bed Fund	\$5,000.00	\$55.00	\$0.00	\$55.00	
	Robert E. Ives Hospital Bed Fund	\$10,000.00	\$111.00	\$0.00	\$111.00	
	Walter Judson Hospital Bed Fund	\$1,000.00	\$11.00	\$0.00	\$11.00	
	Charles Kohn Hospital Bed Fund Lenhardt Hospital Bed Fund	\$100.00	\$1.00 \$55.00	\$0.00	\$1.00 \$55.00	
	Leimarut Hospitai Deu Fullu	\$5,000.00	\$55.00	\$0.00	\$55.00	
	George W. Mallory Hospital Bed Fund	\$5,000.00	\$55.00	\$0.00	\$55.00	
	Mary B. Mallory Hospital Bed Fund	\$4,000.00	\$44.00	\$0.00	\$44.00	
		<u></u>				
	John W. Mansfield Hospital Bed Fund Philip Marett Hospital Bed Fund	\$5,000.00	\$55.00	\$0.00	\$55.00	
<u> </u>	Levy Morris Hospital Bed Fund	\$155,480.00 \$11,938.00	\$1,719.00 \$132.00	\$0.00 \$0.00	\$1,719.00 \$132.00	
	Lory morris riospital Dea I alla	φιι, 3 30.00	\$132.00	Φ υ.υυ	\$132.00	

YALE-NEW HAVEN HOSPITAL ANNUAL REPORTING

FISCAL YEAR 2012

REPORT 17 - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY THE HOSPITAL

(1)	(2)	(3)	(4)	(5)	(6)
,	()	FMV of Principal	Actual Earnings	Earnings	Earnings
ine	Name of Hospital Bed Fund	•		Reinvested	Available
	Organized Charities Hospital Bed				
	Fund	\$10,000.00	\$109.00	\$0.00	\$109.
	Paul Hospital Bed Fund	\$5,000.00	\$55.00	\$0.00	\$55.
	Maud Trowbridge Reynolds Hospital Bed Fund	¢40 500 00	¢544.00	¢0.00	¢54.4
	Leonard J.Sanford & Anna Cutter	\$46,508.00	\$514.00	\$0.00	\$514.
	Hospital Bed Fund	\$9,720.00	\$107.00	\$0.00	\$107
	Julia Sanford Hospital Bed Fund	\$10,000.00	\$111.00	\$0.00	\$111
	Sargent Hospital Bed Fund	\$5,000.00	\$55.00	\$0.00	\$55
	Mark M. Selleck Hospital Bed Fund	\$10,000.00	\$111.00	\$0.00	\$111
	George Thomas Smith Hospital Bed	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	,	
	Fund	\$5,000.00	\$55.00	\$0.00	\$55.
	Chris Tanuis Hospital Bed Fund	\$30.00	\$0.00	\$0.00	\$0
	Margarette Elford Dean Trowbridge				
	Hospital Bed Fund	\$15,000.00	\$166.00	\$0.00	\$166
	Morton Warner Hospital Bed Fund	\$12,000.00	\$133.00	\$0.00	\$133
	Hermanus M. Welch Hospital Bed	AF	^		A
	Fund	\$5,000.00	\$55.00	\$0.00	\$55
	Cynthia Ann Tracy Wetmore Hospital Bed Fund	¢c0 000 00	¢cee oo	\$0.00	¢cee.
	Whitney Hospital Bed Fund	\$60,000.00 \$10,400.00	\$655.00 \$115.00	\$0.00	\$655 \$115
	Albert Aaron Williams Hospital Bed	\$10,400.00	\$115.00	\$0.00	\$115
	Fund	\$27,034.00	\$299.00	\$0.00	\$299
	Ann Phillips Wurtenberg Hospital	\$21,00 1100	Ψ200.00	ψο.οο	\$200
	Bed Fund	\$7,141.00	\$79.00	\$0.00	\$79
	Alfred Blakeslee Hospital Bed Fund	\$10,000.00	\$111.00	\$0.00	\$111
	Julia Alling Hospital Bed Fund	\$5,000.00	\$516.00	\$0.00	\$516
	Charles Amos Baldwin Hospital Bed				
	Fund	\$10,000.00	\$1,324.00	\$0.00	\$1,324
	Deane Hospital Bed Fund	\$10,000.00	\$1,225.00	\$0.00	\$1,225
	Ellen M. Gifford Hospital Bed Fund	\$5,000.00	\$653.00	\$0.00	\$653
	Wyllys Atwater Hospital Bed Fund	\$10,000.00	\$1,307.00	\$0.00	\$1,307
	Dwight Place Church Hospital Bed	4		*	*
	Fund	\$5,000.00	\$327.00	\$0.00	\$327
	William Townsend Hayes Hospital Bed Fund	* 40.000.00	£4 007 00	***	£4.007
	Dr. Thomas Wells Hospital Bed Fund	\$10,000.00 \$5,000.00	\$1,307.00 \$654.00	\$0.00 \$0.00	\$1,307 \$654
	Armstrong Hospital Bed Fund	\$5,000.00	\$884.00	\$0.00	\$884
	Frank Walter Benedict Hospital Bed	\$5,000.00	Ф004.00	\$0.00	\$604
	Fund	\$10,000.00	\$1,305.00	\$0.00	\$1,305
	Henry Walter Benedict Hospital Bed	\$10,000.00	\$1,000.00	ψο.οο	ψ.,σσσ
	Fund	\$10,000.00	\$1,305.00	\$0.00	\$1,305
	Helen & John T. Mason Hospital Bed	•			
	Fund	\$14,318.00	\$1,871.00	\$0.00	\$1,871
	Frank L. Hunt Hospital Bed Fund	\$80,976.00	\$8,504.00	\$0.00	\$8,504
_	Evelina J. Jones Hospital Bed Fund	\$5,000.00	\$680.00	\$0.00	\$680
	Elizabeth Hotchkiss Hospital Bed				
	Fund	\$5,000.00	\$680.00	\$0.00	\$680
	Mary Lamb Hospital Bed Fund	\$275.00	\$33.00	\$0.00	\$33.
	Bassett Bed #2 Hospital Bed Fund	\$10,000.00	\$1,361.00	\$0.00	\$1,361
	Fannie Keyes Hospital Bed Fund	\$10,000.00	\$1,370.00	\$0.00	\$1,370
	Leete Hospital Bed Fund	\$15,000.00	\$2,057.00	\$0.00	\$2,057
	George T. Newhall & Julia Leete	¢47 440 00	¢0.000.00	***	#0.000
	Hospital Bed Fund	\$17,412.00	\$2,333.00	\$0.00	\$2,333
	Stiles Hospital Bed Fund	\$113,304.00	\$31,996.00	\$0.00	\$31,996
	Rose Porter Hospital Bed Fund Lucy Hall Boardman Hospital Bed	\$5,000.00	\$884.00	\$0.00	\$884
	Fund	\$11,329.00	\$976.00	\$0.00	\$976.

YALE-NEW HAVEN HOSPITAL ANNUAL REPORTING

FISCAL YEAR 2012 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
Line	Ellen M. Gifford Executors Hospital			Remivested	Available
	Bed Fund	\$5,000.00	\$683.00	\$0.00	\$683.00
	Nathan Howell Sanford Hospital Bed				
	Fund	\$10,000.00	\$1,367.00	\$0.00	\$1,367.00
	Arthur Herbert Trowbridge Hospital Bed Fund	¢E 000 00	¢725.00	\$0.00	¢725.00
	Edwin Harrison Beebe Hospital Bed	\$5,000.00	\$725.00	\$0.00	\$725.00
	Fund	\$25,000.00	\$960.00	\$0.00	\$960.00
	Julia A. Leete Newhall Hospital Bed				
	Fund	\$17,412.00	\$3,038.00	\$0.00	\$3,038.00
	Bassett Bed #1 Hospital Bed Fund	\$10,000.00	\$2,923.00	\$0.00	\$2,923.00
	Richard S Fellowes Hospital Bed Fund	\$5,165.00	\$338.00	\$0.00	\$338.00
	Isaphene Hillhouse Hospital Bed	ψ3,103.00	ψ330.00	ψ0.00	ψ330.00
	Fund	\$5,000.00	\$1,462.00	\$0.00	\$1,462.00
	Joseph T Mary L Hotchkiss Hospital				
	Bed Fund	\$15,000.00	\$4,391.00	\$0.00	\$4,391.00
	"Anna" Hospital Bed Fund	\$14,241.00	\$157.00	\$0.00	\$157.00
	Anna F. Ardenghi Hospital Bed Fund Strouse Adler Hospital Bed Fund	\$10,000.00 \$5,900.00	\$111.00 \$65.00	\$0.00 \$0.00	\$111.00 \$65.00
	Loring W. Andrews Hospital bed	\$5,900.00	\$00.00	\$0.00	\$65.00
	Fund	\$10,000.00	\$111.00	\$0.00	\$111.00
	Harriet Atwater Hospital Bed Fund	\$10,000.00	\$111.00	\$0.00	\$111.00
	Mary E. Baldwin Hospital Bed Fund	\$22,423.00	\$248.00	\$0.00	\$248.00
	George Benedict Hospital Bed Fund	\$10,000.00	\$109.00	\$0.00	\$109.00
	Bennett Hospital Bed Fund	\$12,000.00	\$133.00	\$0.00	\$133.00
	Edwin B. Bowditch Hospital Bed				
	Fund	\$10,000.00	\$111.00	\$0.00	\$111.00
	Henry Bronson Hospital Bed Fund Susan Ellen Brown Hospital Bed	\$10,000.00	\$111.00	\$0.00	\$111.00
	Fund	\$12,736.00	\$141.00	\$0.00	\$141.00
	Samuel Clifford Carlisle Hospital Bed	4.12 ,1.00.00	Vc	V 0.00	V
	Fund	\$10,000.00	\$111.00	\$0.00	\$111.00
	William & Laura Carmalt Hospital Bed				
	Fund	\$25,000.00	\$276.00	\$0.00	\$276.00
	Joseph Cimerol, Jr. Hospital Bed Fund	\$4,000.00	\$44.00	\$0.00	\$44.00
	Charles Henry Collins Hospital Bed	\$4,000.00	\$44.00	\$0.00	Φ44.0 0
	Fund	\$10,000.00	\$111.00	\$0.00	\$111.00
	Idalina Darrow Hospital Bed Fund	\$7,308.00	\$81.00	\$0.00	\$81.00
	Deane Hospital Bed Fund	\$9,258.00	\$102.00	\$0.00	\$102.00
	George B. Dines, Jr. Hospital Bed				
	Fund	\$100.00	\$1.00	\$0.00	\$1.00
	Cora C.T. Dwight Hospital Bed Fund Dr. Jonathan Edwards Hospital Bed	\$5,000.00	\$55.00	\$0.00	\$55.00
	Fund	\$10,000.00	\$111.00	\$0.00	\$111.00
	Henry Eld Hospital Bed Fund	\$5,000.00	\$55.00	\$0.00	\$55.00
	Henry F. English Hospital Bed Fund	\$10,000.00	\$111.00	\$0.00	\$111.00
	James E. English Hospital Bed Fund	\$30,855.00	\$341.00	\$0.00	\$341.00
	Henry Farnum Hospital Bed Fund	\$5,000.00	\$55.00	\$0.00	\$55.00
	William Fitch Hospital Bed Fund	\$5,000.00	\$55.00	\$0.00	\$55.00
	Edwin Foote Hospital Bed Fund	\$611,185.00	\$6,759.00	\$0.00	\$6,759.00
	Grace Salisbury Foote Hospital Bed	¢40 000 00	6400.00	60.00	6400 0
	Fund Levi Goodell Fox Hospital Bed Fund	\$10,000.00 \$10,000.00	\$109.00 \$111.00	\$0.00 \$0.00	\$109.0
	Elizabeth Hamlin Fox Hospital Bed	\$10,000.00	\$111.00	\$0.00	\$111.00
	Fund	\$10,000.00	\$111.00	\$0.00	\$111.00
	Simeon & Arthur Ward Fox Hospital	Ţ: -,•••·•	Ţ .	+ + + + + + + + + + + + + + + + + + +	Ţ 70
	Bed Fund	\$32,767.00	\$362.00	\$0.00	\$362.00

YALE-NEW HAVEN HOSPITAL ANNUAL REPORTING

FISCAL YEAR 2012

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
	Charles D. Hall Hospital Bed Fund	\$14,611.00	\$162.00	\$0.00	\$162.00
	Sylvia C. Hall Hospital Bed Fund	\$27,400.00	\$303.00	\$0.00	\$303.00
	Jessie A. Harmon Hospital Bed Fund	\$10,000.00	\$111.00	\$0.00	\$111.00
	James E. English Hospital Bed Fund	\$0.00	\$0.00	\$0.00	\$0.00
	Total Bed Funds :	\$2,164,331.00	\$106,218.00	\$0.00	\$106,218.00

REPORT 18 - HOSPITAL COLLECTION PLACEMENT POLICIES AND COLLECTION AGENT INFORMATION

(1)	(2)	(3)
LINE	DESCRIPTION	COLLECTION INFORMATION
I.	GENERAL COLLECTION PROCESSES AND PROCEDURES	
Α.	Hospital's processes and policies for assigning a debt to a Collection Agent	
		See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22)
B.	Hospital's processes and policies for compensating a Collection Agent for services rendered	
		Each collection agent is reimbursed for services and rendered based on separately negotiated performance related contracts.
C.	Total Recovery Rate on accounts assigned (excluding Medicare accounts) to Collection Agents	10.80%
II.	SPECIFIC COLLECTION AGENT INFORMATION	
11.	Collection Agent	
1	Collection Agent Name	Century Financial Services
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.	
		See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22)
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.	
		Each collection agent is reimbursed for services and rendered based on separately negotiated performance related contracts.

REPORT 18 35 OF 42 8/1/2013,8:36 AM

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.	11.20%		
	Collection Agent			
1	Collection Agent Name	Nair & Levin, PC		
2	Collection Agent Type	Attorney		
3	Related / Not Related Entity	Not Related		
	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.			
		See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22)		
	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.			
		Each collection agent is reimbursed for services and rendered based on		
		separately negotiated performance related contracts.		
	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent.	10.70%		
	Collection Agent			
1	Collection Agent Name	Tobin, Cerberry, OMallery, Riley, Selinger PC		
2	Collection Agent Type	Attorney		
3	Related / Not Related Entity	Not Related		
	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.			
		See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22)		

REPORT 18 - HOSPITAL COLLECTION PLACEMENT POLICIES AND COLLECTION AGENT INFORMATION

(1)	(2)	(3)
LINE	DESCRIPTION	COLLECTION INFORMATION
	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.	Each collection agent is reimbursed for services and rendered based on
6		separately negotiated performance related contracts.
	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent.	8.60%

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

LINE	POSITION TITLE	SALARY	FRINGE BENEFITS	TOTAL
1.	President & CEO(repr YNHH & YNHHS)	\$2,147,548	\$655,680	\$2,803,228
2.	Exec VP, COO(repr YNHH & YNHHS)	\$1,276,872	\$403,261	\$1,680,133
3.	SR VP, Chief of Staff(repr YNHH & YNHHS)	\$1,555,338	\$118,274	\$1,673,612
4.	SR VP Finance, CFO(repr YNHH & YNHHS)	\$1,087,321	\$344,893	\$1,432,214
5.	Senior VP of Human Resources	\$720,622	\$224,766	\$945,388
6.	VP of Legal Services	\$697,219	\$206,116	\$903,335
7.	Senior VP, CIO(repr YNHH & YNHHS)	\$669,189	\$226,793	\$895,982
8.	Senior VP Patient Services	\$717,814	\$51,999	\$769,813
9.	SVP OPS/SMILOW	\$614,808	\$32,858	\$647,666
10.	VP Ambulatory Services	\$596,954	\$25,944	\$622,898
	Grand Total:	\$10,083,685	\$2,290,584	\$12,374,269

REPORT 19 38 OF 42 8/1/2013, 8:36 AM

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) ^c	FRINGE BENEFITS ^A (Directly or Indirectly) ^C	TOTAL
LINE	DESCRIPTION	or manectry)	munectly)	TOTAL
Α.	YNH NETWORK CORPORATION			
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
В.	CARITAS INSURANCE COMPANY LTD.	7		
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
	OCNITUDY CINANOLAL OCCUPACION AND CUDOIDIARY (OCNITUDY)	7		
C.	CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENTURY) 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
_	and by the receptor to Employees of the Emily Eleted risers	— — —	+ 5	\$
D.	COMMUNITY HEALTH CARE PHYSICIANS (CHCP)			
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
Ε.	LUKAN INDEMNITY COMPANY LTD.	1		
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
F.	MEDICAL CENTER PHARMACY AND HOME CARE CENTER, INC.	7		
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
G.	MEDICAL CENTER REALTY, INC.			
2	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
Η.	NORTHEAST MEDICAL GROUP, INC.	7		
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
Ι.	NORTHEAST PEDIATRIC SPECIALISTS, INC.	7		
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
	OURINIPRIA O MEDICAL D.O. (OMBO)	7		
J.	QUINNIPIAC MEDICAL P.C. (QMPC) 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 \$0
_	and by the Hoopital to Employees of the Emity Elected / Bove	Ψ	ΨΟ	Ψ
Κ.	SHORELINE SURGERY CENTER, LLC			
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
L.	SSC II, LLC			
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
	THE GREATER NEW HAVEN PARTNERSHIP FOR A HEALTHY	7		
М.	COMMUNITY, INC.			
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
N.	THE NEW CLINICAL DEVELOPMENT PROGRAM CORPORATION (NCPD)	7		
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
	VALE NEW LANGUAGE			
0.	YALE-NEW HAVEN AMBULATORY SERVICES CORP.	60	¢c.	\$0
2	Paid by the Entity Listed Above to Hospital Employees(B) Paid by the Hospital to Employees of the Entity Listed Above	\$0 \$0	\$0 \$0	\$0 \$0
	and by the Hospital to Employees of the Entity Listed Above	Φυ	φυ	φυ
Ρ.	YALE-NEW HAVEN CARE CONTINUUM			
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

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) ^C	FRINGE BENEFITS ^A (Directly or Indirectly) ^C	TOTAL
	VALE NEW LAYER LIE ALTIL GERWINES GORD (VALUE 100)			
Q.	YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	22.212.712	^	A /
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$2,249,712	\$525,073	\$2,774,785
2	Paid by the Hospital to Employees of the Entity Listed Above	\$74,283,116	\$23,566,044	\$97,849,160
R.	YALE-NEW HAVEN MEDICAL CENTER, INC. (MEDICAL CENTER)			
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
S.	YNH GERIATRIC SERVICES, P.C.			
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
Т.	YNH MEDICAL SERVICES, P.C.	**		
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
U.	YNHH-PHYSICIANS CORPORATION			
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 \$0
	and by the Hospital to Employees of the Emity Eisted Above	ΨΟ	ΨΟ	ΨΟ
٧.	YNHHS-MSO, INC.			
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
W.	YORK ENTERPRISES, INC.			
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.

REPORT 21 40 OF 42 8/1/2013,8:36 AM

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.

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
Α	Transfer of Assets or Operations	
	Name of the Person or Entity Organized or Operated For Profit involved in each	
1.	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

REPORT 22 41 OF 42 8/1/2013,8:36 AM

		VEN HOSPITAL			
		REPORTING			
		/EAR 2012	DDOWIDED DV	THE HOODITAL	
	REPORT 23 - CHARITY CARE AND REDUCED	COST SERVICES	PROVIDED BY	THE HOSPITAL	
(1)	(2)	(3)	(4)	(5)	(6)
(1)	(2)	FY 2011	FY 2012	AMOUNT	(6) %
LINE	DESCRIPTION	AMOUNT	AMOUNT	DIFFERENCE	DIFFERENCE
	<u>DESCRIPTION</u>	<u> </u>	744100111	DITTERCENCE	DIFFERENCE
A.	Hospital Charity Care (see Hospital Audited Financial St	atement Notes)			
		_			
1.	Number of Applicants	26,561	29,220	2,659	10%
2.	Number of Approved Applicants	25,079	27,590	2,511	10%
3.	Total Charges (A)	\$60,516,632	\$78,094,472	\$17,577,840	29%
	Average Charges	\$2,413	\$2,831	\$417	17%
	D (1 (0 (1 (0)))	0.00400	2 222 455	(0.00005)	
4.	Ratio of Cost to Charges (RCC) Total Cost	0.33166	0.322455	(0.009205)	-3%
	Average Cost	\$20,070,946 \$800	\$25,181,953 \$913	\$5,111,007 \$112	25% 14%
	Average Cost	\$000	\$913	\$112	1470
5.	Charity Care - Inpatient Charges	\$24,559,333	\$28,944,417	\$4,385,084	18%
6.	Charity Care - Impatient Charges Charity Care - Outpatient Emergency Department Charges	8,063,907	9,964,992	1,901,085	24%
7.	Charity Care - Outpatient Charges (Excludes ED Charges)	27,893,392	39,185,063	11,291,671	40%
	Total Charges (A)	\$60,516,632	\$78,094,472	\$17,577,840	29%
			, , ,	. , ,	
8.	Charity Care - Number of Patient Days	17,290	10,004	(7,286)	-42%
9.	Charity Care - Number of Discharges	3,751	1,354	(2,397)	-64%
10.	Charity Care - Number of Outpatient ED Visits	7,210	5,058	(2,152)	-30%
	Charity Care - Number of Outpatient Visits (Excludes ED				
11.	Visits)	24,924	24,265	(659)	-3%
(A) TI	21.0	41 - 11 24 - 1 A - 12			
(A) In	e total amount must agree with the total amount listed in	tne Hospitai Aud	ited Financiai St	atement Notes.	
В.	Hospital Bed Funds (see Hospital Reporting System - Re	enort 17)			
<u> </u>	Troopital Bea Funds (See Frospital Reporting System 18	cport 177			
1.	Number of Applicants	84	83	(1)	-1%
2.	Number of Approved Applicants	84	83	(1)	-1%
				()	
3.	Total Charges (B)	\$782,368	\$888,528	\$106,160	14%
	Average Charges	\$9,314	\$10,705	\$1,391	15%
		7-,	T ,		
		40,0 11	, ,		
4.	Ratio of Cost to Charges (RCC)	0.33166	0.322455	(0.009205)	
4.	Total Cost			(0.009205) \$27,030	-3% 10%
4.		0.33166	0.322455		10%
	Total Cost Average Cost	0.33166 \$259,480 \$3,089	0.322455 \$286,510 \$3,452	\$27,030 \$363	10% 12%
5.	Total Cost Average Cost Bed Funds - Inpatient Charges	0.33166 \$259,480 \$3,089 \$317,507	0.322455 \$286,510 \$3,452 \$329,318	\$27,030 \$363 \$11,811	10% 12% 4%
5. 6.	Total Cost Average Cost Bed Funds - Inpatient Charges Bed Funds - Outpatient Emergency Department Charges	0.33166 \$259,480 \$3,089 \$317,507 104,251	0.322455 \$286,510 \$3,452 \$329,318 113,378	\$27,030 \$363 \$11,811 9,127	10% 12% 4% 9%
5.	Total Cost Average Cost Bed Funds - Inpatient Charges Bed Funds - Outpatient Emergency Department Charges Bed Funds - Outpatient Charges (Excludes ED Charges)	0.33166 \$259,480 \$3,089 \$317,507 104,251 360,610	0.322455 \$286,510 \$3,452 \$329,318 113,378 445,832	\$27,030 \$363 \$11,811 9,127 85,222	10% 12% 4% 9% 24%
5. 6.	Total Cost Average Cost Bed Funds - Inpatient Charges Bed Funds - Outpatient Emergency Department Charges	0.33166 \$259,480 \$3,089 \$317,507 104,251	0.322455 \$286,510 \$3,452 \$329,318 113,378	\$27,030 \$363 \$11,811 9,127	10% 12% 4%
5. 6. 7.	Total Cost Average Cost Bed Funds - Inpatient Charges Bed Funds - Outpatient Emergency Department Charges Bed Funds - Outpatient Charges (Excludes ED Charges) Total Charges (B)	0.33166 \$259,480 \$3,089 \$317,507 104,251 360,610 \$782,368	0.322455 \$286,510 \$3,452 \$329,318 113,378 445,832 \$888,528	\$27,030 \$363 \$11,811 9,127 85,222 \$106,160	10% 12% 4% 9% 24% 14%
5. 6.	Total Cost Average Cost Bed Funds - Inpatient Charges Bed Funds - Outpatient Emergency Department Charges Bed Funds - Outpatient Charges (Excludes ED Charges) Total Charges (B) Bed Funds - Number of Patient Days	0.33166 \$259,480 \$3,089 \$317,507 104,251 360,610	0.322455 \$286,510 \$3,452 \$329,318 113,378 445,832	\$27,030 \$363 \$11,811 9,127 85,222	10% 12% 4% 9% 24% 14%
5. 6. 7.	Total Cost Average Cost Bed Funds - Inpatient Charges Bed Funds - Outpatient Emergency Department Charges Bed Funds - Outpatient Charges (Excludes ED Charges) Total Charges (B)	0.33166 \$259,480 \$3,089 \$317,507 104,251 360,610 \$782,368	0.322455 \$286,510 \$3,452 \$329,318 113,378 445,832 \$888,528	\$27,030 \$363 \$11,811 9,127 85,222 \$106,160	10% 12% 4% 9% 24% 14% 4%
5. 6. 7. 8. 9.	Total Cost Average Cost Bed Funds - Inpatient Charges Bed Funds - Outpatient Emergency Department Charges Bed Funds - Outpatient Charges (Excludes ED Charges) Total Charges (B) Bed Funds - Number of Patient Days Bed Funds - Number of Discharges Bed Funds - Number of Outpatient ED Visits	0.33166 \$259,480 \$3,089 \$317,507 104,251 360,610 \$782,368	0.322455 \$286,510 \$3,452 \$329,318 113,378 445,832 \$888,528 632 173	\$27,030 \$363 \$11,811 9,127 85,222 \$106,160	10% 12% 4% 9% 24% 14% 4%
5. 6. 7. 8. 9.	Total Cost Average Cost Bed Funds - Inpatient Charges Bed Funds - Outpatient Emergency Department Charges Bed Funds - Outpatient Charges (Excludes ED Charges) Total Charges (B) Bed Funds - Number of Patient Days Bed Funds - Number of Discharges	0.33166 \$259,480 \$3,089 \$317,507 104,251 360,610 \$782,368	0.322455 \$286,510 \$3,452 \$329,318 113,378 445,832 \$888,528 632 173	\$27,030 \$363 \$11,811 9,127 85,222 \$106,160	10% 12% 4% 9% 24% 14%
5. 6. 7. 8. 9.	Total Cost Average Cost Bed Funds - Inpatient Charges Bed Funds - Outpatient Emergency Department Charges Bed Funds - Outpatient Charges (Excludes ED Charges) Total Charges (B) Bed Funds - Number of Patient Days Bed Funds - Number of Discharges Bed Funds - Number of Outpatient ED Visits Bed Funds - Number of Outpatient Visits (Excludes ED	0.33166 \$259,480 \$3,089 \$317,507 104,251 360,610 \$782,368 610 159 1,401	0.322455 \$286,510 \$3,452 \$329,318 113,378 445,832 \$888,528 632 173 1,732	\$27,030 \$363 \$11,811 9,127 85,222 \$106,160 22 14	10% 12% 4% 9% 24%

REPORT 23 42 of 42 8/1/2013, 8:36 AM