Electronic Filing Page 1 of 1

Cumulati	Cumulative e-File History 2010							
	FED							
Locator:	4219CV							
Taxpayer Name:	Baltimore Washington Medical Center, Inc.							
Return Type:	990							
Submitted Date:	05/14/2012 11:09:39							
Acknowledgement Date:	05/14/2012 11:27:14							
Status:	Accepted							
Submission ID:	23695320121355000003							

Form 8879-EO

# IRS e-file Signature Authorization

▶ Do not send to the IRS. Keep for your records.

OMB No. 1545-1878

Department of the Treasury Internal Revenue Service ► See instructions on back. Name of exempt organization Employer identification number BALTIMORE WASHINGTON MEDICAL CENTER, INC. 52-0689917 ALFRED A PIETSCH, VP-FINANCE/CFO Type of Return and Return Information (Whole Dollars Only) Check the box for the return for which you are using this Form 8879-E0 and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I. 1a Form 990 check here ► X b Total revenue, if any (Form 990, Part VIII, column (A), line 12) . . . . 1b 333753989. b Total revenue, if any (Form 990-EZ, line 9) . . . . . . . . . . . . 2b 2a Form 990-EZ check here ▶ 3a Form 1120-POL check here ▶ 4a Form 990-PF check here ▶ b Tax based on investment income (Form 990-PF, Part VI, line 5) . 4b b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c). . . . . 5b 5a Form 8868 check here ▶ **Declaration and Signature Authorization of Officer** Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2010 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal. Officer's PIN: check one box only X Lauthorize GRANT THORNTON LLP 4 3 6 as my signature Enter five numbers, but do not enter all zeros on the organization's tax year 2010 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2010 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Part III Certification and Authentication ERO's EFIN/PIN. Enter your six-digit electronic filing identification 3 6 number (EFIN) followed by your five-digit self-selected PIN. do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2010 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. 05/08/2012 ERO's signature > \_\_ **ERO Must Retain This Form - See Instructions** Do Not Submit This Form To the IRS Unless Requested To Do So For Paperwork Reduction Act Notice, see back of form. Form 8879-EO (2010)

# Form **990**

Department of the Treasury Internal Revenue Service

A For the 2010 calendar year, or tax year beginning

## **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

07/01, **2010**, and ending

Open to Public Inspection

06/30, 20 11

В	Check if a	pplicable:			organization	0117	NCHON	MEDI	- C 3 T	CENT		TNC				1		identifica		umber	
	Addre				MORE WA	SHI	NGTON	I MEDI	LCAL	CENT	EK	, INC.				<b></b>	52-06	589917			
	chan				siness As								I _			L					
	Name	e change			and street (or F			s not deliv	ered to s	treet ad	dress	5)	Roon	n/su	ite	1		e number	_		
	Initia	I return			IOSPITAL											(4)	10) 3	328-69	84		
	Term	inated	_		wn, state or cou																
	Amei retur				BURNIE,											G	Pross rec	eipts \$	364	4 <b>,</b> 383	<u>,018</u>
	Appli pend	cation ing	F Na	ame a	and address of	princi	pal officer:	K/	AREN	E. (	DLS	CAMP				H(a)	Is this a gaffiliates?	group return	for	Yes	X No
		-	30	1 E	IOSPITAL	DR	IVE G	SLEN E	BURNI	E, N	ΙD	21061				H(b)		ffiliates inclu	ded?	Yes	No
ī	Tax-ex	cempt sta	atus:	Х	501(c)(3)		501(c) (	) ◀	(insert	t no.)		4947(a)(1)	or		527		If "No," a	attach a list. (	see ins	tructions)	
J	Webs	ite: 🕨	WWW.		BWMC.ORG	;										H(c)	Group ex	emption nun	nber	<b>&gt;</b>	
ĸ	Form	of organ	ization:	Х	Corporation	-	Trust	Associa	tion	Othe	r 🕨			<b>L</b> Ye	ar of forma	tion:	1964	M State o	f legal	domicile:	MD
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9			ERV				<b>-</b>														
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Activities & Governance			46:- 6		: 415						4:										
တိ	2	Check				-				•		s or dispose									19
න් ග	3	Numb	er of v	oting	members of	the	governin	g body (F	art VI, I	ine 1a)	٠							3			15
itie	4	Numb	er of ir	idepe	endent voting	g mer	nbers of	the gove	erning b	ody (P	art V	I, line 1b)						. 4			
ξ	5	Total r	numbe	r of i	ndividuals en	nploy	ed in ca	lendar ye	ear 2010	(Part	V, lin	ne 2a)						. 5		3	,002
¥		Total r	numbe	r of \	olunteers (es	timat	e if nece	ssary)										6			200
	7 a	Total (	gross ι	ınrel	ated business	reve	nue from	n Part VII	I, colum	ın (C),	line 1	12						7a			0
	b	Net ur	relate	d bus	siness taxabl	e inco	ome from	Form 99	90-T, lin	e 34 .								7b			0
																Pri	or Year		C	urrent Y	ear
ø	8	Contri	bution	s and	d grants (Part	VIII,	line 1h)											0.			0
nue	9	Progra	am ser	vice r	evenue (Part	VIII,	line 2g)								🗀		440,		320	6 <b>,</b> 215	,805
Revenue	10	Invest	ment i	ncon	ne (Part VIII,	colun	nn (A), lir	nes 3, 4,	and 7d)							6,	614,	295.	4	4,245	,993
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)  Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)											3,	250,	628.	3,292,1		,191			
	12															319,	305,	681.	333	3,753	,989
	13																	0.			0
	14	Benefits paid to or for members (Part IX, column (A), line 4)										0.					0				
"	4-											146,988,090.				147,835,29					
Expenses	16a																<u> </u>	0.		•	<del>.</del> 0
per	h	Total f	essional fundraising fees (Part IX, column (A), line 11e)  If fundraising expenses (Part IX, column (D), line 25)   0																_		
Ĕ	17				Part IX, colur											163.	725,	627	166	6,765	. 537
					Add lines 13-												713,			4,600	
												٥)			• • ├──`		591,			9,153	
- 0		Reven	ue ies	s exp	enses. Subtr	act II	ne is iro	miline iz	<u> </u>						Pogis		of Curre			End of Ye	
Net Assets or Fund Balances		T . ( . )		(D - 1	V (1 - 40)												451,			1,912	
Sse	20				X, line 16)												682,			7,864	
et A	21				art X, line 26)																•
					d balances.	Subtr	act line 2	1 from III	ne 20.		• • •		• •			109,	768,	600.	13,	4,048	, 349
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USE	Only			s 🕨	2001 MARKET	STR	EET, SU	ITE 310	O PHILA	ADELPH	IA,	PA 19103				Phon	ne no.	215-	561	-4200	)
Ma	y the I				turn with the														Х	Yes	No
_																					

Form **990** (2010)

52-0689917 Form 990 (2010) Page 2

Pa	rt III	Statement of Program Ser Check if Schedule O contain	vice Accomplishments as a response to any question in this Part		1
1	Briefly d	escribe the organization's m ACHMENT 1			
			significant program services during the		No
	If "Yes,"	describe these new services	on Schedule O.		,
	services	?	ing, or make significant changes in how		No
4	Describe Section	501(c)(3) and 501(c)(4) org	rements for each of the organization's thre	re required to report the amount of grants and	
4a	_		285,801,337. including grants of \$	o. ) (Revenue \$326,215,805. )	
	<u>ATT</u>	ACHMENT 2			—
4b	(Code: _	) (Expenses \$	including grants of \$	) (Revenue \$)	
4 c	(Code:_	) (Expenses \$	including grants of \$	) (Revenue \$)	
<u>4</u>	Other n	rogram services. (Describe ir	schedule ()		
	(Expens	-		ue\$	
		rogram service expenses ►	285 - 801 - 337	<del>-</del> - /	

Form **990** (2010)

Part	Checklist of Required Schedules		v	
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		x	
_	complete Schedule A	1	Λ	X
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			37
	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	_	3.7	
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section $501(c)(4)$ , $501(c)(5)$ , or $501(c)(6)$ organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	_		3.7
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			3.7
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes,"			37
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"	_		3.7
	complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			37
	quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete		х	
	Schedule D, Part VI	11a	Λ	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	445		Х
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more	44-		Х
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
a	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	11d	х	
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11e	X	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	TTE	71	
ī	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f	х	
40-	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes."</i>	111	21	
12 a	,	12a		Х
h	complete Schedule D, Parts XI, XII, and XIII	124		
b	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? <i>If</i> "Yes," complete Schedule F, Parts I and N	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		Х
20 a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	Х	
	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form			
	990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	X	

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Part	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	X	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	IV, and V, line 1	34	Х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Х
а	Did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,			
	Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	Х	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? <b>Note</b> . All Form 990 filers are required to complete Schedule O	38	X	

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Statements Regarding Other IRS Filings and Tax Compliance
Check if Schedule O contains a response to any question in this Part V Part V

	Check it Schedule O contains a response to any question in this Part V			·
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		-,,	
	reportable gaming (gambling) winnings to prize winners?	1 c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 3,002			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		Χ
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
-	and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
•	required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
١	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
)	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			
	Section 501(c)(12) organizations. Enter:			
1	Gross income from members or shareholders			
Ŋ	Gross income from other sources (Do not net amounts due or paid to other sources			
n -	against amounts due or received from them.)  Section 4047(a)(4) non-exempt charitable trusts let be exemptation filing form 000 in liquid form 10412	120		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
_	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	40		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans 13b			
	Enter the amount of reserves on hand	_		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	· ·	4 4 1.		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 990 (2010) 52-0689917 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes Nο 19 1a Enter the number of voting members of the governing body at the end of the tax year . . . . . 15 **b** Enter the number of voting members included in line 1a, above, who are independent . . . . . . L Did any officer, director, trustee, or key employee have a family relationship or a business relationship with Х 2 any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct 3 Х 3 supervision of officers, directors or trustees, or key employees to a management company or other person? . . . X 4 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . Х 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets?.... Х 6 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members Х 7 a Х 7b **b** Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . . . Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х 8a a The governing body?...... 8b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at Х the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Х 10a b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?....... 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the Х 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give Х 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"

12c describe in Schedule O how this is done Х 13 13 Does the organization have a written whistleblower policy?................ Х 14 14 Does the organization have a written document retention and destruction policy?............ Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х 15a The organization's CEO, Executive Director, or top management official Х 15b If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement Х with a taxable entity during the year? 16a b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard 

#### Section C. Disclosure

- List the states with which a copy of this Form 990 is required to be filed ▶\_MD\_ 17
- Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) 18 available for public inspection. Indicate how you make these available. Check all that apply.

X Another's website X Upon request Own website

- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest 19 policy, and financial statements available to the public.
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶AL CRISP 250 WEST PRATT STREET BALTIMORE, MD 21201 20 410-328-0649

JSA 0E1042 1.000

2128878

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII........

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

<b>(A)</b> Name and Title	(B) Average	Poci	tion (d	)) choo		that app	oly)	( <b>D</b> ) Reportable	<b>(E)</b> Reportable	<b>(F)</b> Estimated
ATTACHMENT 4	hours per week (describe hours for related organizations in Schedule O)	Individual tru or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Fomer	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) MICHAEL P. CARUTHERS										
CHAIRMAN	1.00	Х		Х				0.	0.	0
(2) LOUIS L. ZAGARINO VICE CHAIRMAN	1.00	х		Х				0.	0.	0
(3) JOHN G. WARNER	1.00	Λ						0.	0.	0
SECRETARY	1.00	Х		Х				0.	0.	0
(4) JAN W. CLARK										
TREASURER	1.00	Х		Х				0.	0.	0
(5) KAREN E. OLSCAMP										
PRESIDENT & CEO	5.00	Х		Х				0.	579 <b>,</b> 426.	11,552
(6) JEFFREY S. ARMIGER										·
DIRECTOR	1.00	Х						0.	ο.	0
(7) DANNY G. BOYD										
DIRECTOR	1.00	Х						0.	0.	0
(8) ROBERT A. CHRENCIK DIRECTOR	1.00	х						0.	1,654,567.	198,872
(9)LORAINE M. DAILEY										
DIRECTOR	1.00	Х						0.	0.	0
(10)CHRISTOPHER DEBORJA										
DIRECTOR	1.00	Х						50,000.	0.	0
(11)RONALD C. DILLON, JR.										
DIRECTOR	1.00	Х						0.	0.	0
(12)PAUL P. GABLE										
DIRECTOR	1.00	Х						0.	0.	0
(13)WALTER J. HALL										
DIRECTOR	1.00	Х						0.	0.	0
(14)THOMAS B. HOWELL										
DIRECTOR	1.00	Х						0.	0.	0
(15)FRANCES L. LESSANS DIRECTOR		v						0.		0
	1.00	Х						0.	0.	0
(16)MARY ANN LOVE DIRECTOR	1.00	Х						0.	ο.	0
DIVECTOR	1 1.00	^						<u> </u>	1 01	Form <b>990</b> (2010)

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Part VII Section A. Officers, Directors, 1	Γrustees, Κα	y En	nplo	ye	es,	and I	lig	hest Compensat	ed Employees (co	ontinued)
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average hours per week (describe hours for related organizations in Schedule O)	ndividual trustee or director	tion (Institutional trustee	Officer	Rey employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(17) KORKUT ONAL										
DIRECTOR	1.00	Х						0.	0.	0.
(18) WILLIAM M. PASSANO, JR.										
DIRECTOR	1.00	Х						0.	0.	0.
(19) R. KENT SCHWAB										
DIRECTOR	1.00	Х						0.	0.	0.
(20) ALFRED A. PIETSCH										
VP-FINANCE/CFO	5.00			Х				0.	420,755.	28,111.
(21) LAWRENCE S. LINDER										
SVP & CMO	5.00				Х			0.	421,597.	27,124.
(22) COLLEEN H. ROACH										
VP & CNO	5.00				X			0.	249,184.	29,814.
(23) FRANK V. VENUTO										
VP-HR	5.00				Х			0.	206,940.	46,880.
(24) KATHLEEN C. MCCOLLUM SVP - BUS DEVEL	5.00				Х			0.	268,360.	26,682.
(25) CLIFFORD SOLOMON PHYSICIAN	40.00					x		1,060,692.	0.	26,123.
(26) AYOKU S. OKETUNJI PHYSICIAN	40.00					Х		347,940.	0.	31,608.
(27) BRUCE VANDERVER PHYSICIAN	40.00					Х		345,739.	0.	25,453.
(28) KOFI OWUSU BOAITEY PHYSICIAN	40.00					x		341,318.		31,669.
1b Sub-total								2,145,689.	1	483,888.
c Total from continuation sheets to Part VII,	Section A A	TTA	СНМ	ΙEΝ	Т	3	<b>&gt;</b>	339,467.	0.	25,934.
d Total (add lines 1b and 1c)							<b>&gt;</b>	2,485,156.	3,800,829.	509,822.
2 Total number of individuals (including but no reportable compensation from the organizar		hose 123		d a	bov	e) wh	o re	ceived more than	\$100,000 in	
										Yes No
3 Did the organization list any former of	fficer, direct	or or	tru	ıste	e,	key e	emp	loyee, or highest	t compensated	

# for services rendered to the organization? *If "Yes," complete Schedule J for such person*Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 5		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► 75

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	990 (2					32 0003317		Page <b>3</b>
Pai	rt VII	Statement of Reve	nue		<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions, gifts, grant and similar amounts not included Noncash contributions included in the state of the sta	1 b 1 c 1 d 1 d 1 tions)					
	h	Total. Add lines 1a-1f		<u></u> ▶	0.			
щe				Business Code				
Program Service Revenue	2a b c	NET PATIENT REVENUE		900099	326,215,805.	326,215,805.		
Ē	e							
g	f	All other program service rev	venue					
Pro	g	Total. Add lines 2a-2f			326,215,805.			
	3	Investment income (includin other similar amounts) Income from investment of t	g dividends, inter	est, and	1,038,137.			1,038,137.
	5	Royalties			0.			
	•	Noyanies	(i) Real	(ii) Personal				
		Cross Donts	544,216.					
	6a	Gross Rents						
	b	Less: rental expenses	544 016					
	С	Rental income or (loss)	544,216.					
	d	Net rental income or (loss).			544,216.			544,216.
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	33,836,885.					
	b	Less: cost or other basis						
		and sales expenses	30,629,029.					
	С	Gain or (loss)	3,207,856.					
	d	Net gain or (loss)			3,207,856.			3,207,856.
Other Revenue	8a		undraising					
æ								
ē		See Part IV, line 18						
ŧ		Less: direct expenses			0.			
0	9a	Net income or (loss) from fur Gross income from gaming a See Part IV, line 19	activities.		0.			
	b	Less: direct expenses						
	c	Net income or (loss) from ga			0.		<u> </u>	
	10a	Gross sales of inventor	ory, less					
	b	Less: cost of goods sold						
	С	( )			0.			
		Miscellaneous Reven	iue	Business Code				
	11a	CAFETERIA/CAFE SALES		900099	1,459,277.			1,459,277
	b	MEDICAL RECORDS REVENUE		900099	134,710.			134,710.
	C	MANAGEMENT FEES		900099	605,000.			605,000.
	d	All other revenue		900099	548,988.			548,988.
	e	Total. Add lines 11a-11d			2,747,975.			
	12	Total revenue. See instruction			333,753,989.	326,215,805.	0.	7,538,184.
	·	. Jean revenue. Oce mondelle	/110		220,,00,,00,.	0,210,000.	<u> </u>	7,530,104.

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#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

7b,	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B)</b> Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and	_			
	organizations in the U.S. See Part IV, line 21	0.			
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	0.			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	0.			
4	Benefits paid to or for members	0.			
5	Compensation of current officers, directors, trustees, and key employees	0.			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	0			
	persons described in section 4958(c)(3)(B)	0.	107 604 574	11 064 052	
7	Other salaries and wages	119,649,527.	107,684,574.	11,964,953.	
8	Pension plan contributions (include section 401(k)	4 242 104	2 007 066	424 210	
	and section 403(b) employer contributions)	4,342,184.	3,907,966. 13,566,174.	434,218.	
9	Other employee benefits	15,073,527.	· · · · · · · · · · · · · · · · · · ·	1,507,353.	
0	Payroll taxes	8,770,061.	7,893,055.	877,006.	
1	Fees for services (non-employees):	2,702,582.	2,432,324.	270,258.	
	Management		2,432,324.		
	Legal	138,484.		138,484.	
	Accounting	0.		22 222	
	Lobbying	23,232.		23,232.	
	Professional fundraising services. See Part IV, line 17	0.		125 100	
	Investment management fees	135,100.	1 200 001	135,100.	
	Other	1,407,734.	1,266,961.	140,773.	
2	Advertising and promotion	926,089.	833,480.	92,609.	
3	Office expenses	0.	0 650 706	0.60, 0.70	
4	Information technology	9,620,785.	8,658,706.	962,079.	
5	Royalties	0.			
6	Occupancy	0.			
7	Travel	0.			
8	Payments of travel or entertainment expenses	^			
	for any federal, state, or local public officials	0.			
9	Conferences, conventions, and meetings	0.	E 001 000	E01 047	
20	Interest	5,812,473.	5,231,226.	581,247.	
1	Payments to affiliates	0.	10 000 000	2 200 077	
2	Depreciation, depletion, and amortization	22,000,767.	19,800,690.	2,200,077.	
3	Insurance	299,739.	269,765.	29,974.	
4	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24f. If				
	line 24f amount exceeds 10% of line 25, column				
	(A) amount, list line 24f expenses on Schedule O.)	60 200 400	E4 250 460	6 020 040	
	SUPPLIES - MEDICAL & NON-MED	60,399,402.	54,359,462.	6,039,940.	
	PURCHASED SERVICES	29,869,217.	26,882,295.	2,986,922.	
-	BAD DEBT EXPENSE	21,447,074.	21,447,074.		
-	PROFESSIONAL FEES	7,830,118.	7,830,118.	415 074	
-	UTILITIES	4,152,741.	3,737,467.	415,274.	0
	All other expenses	214 600 026	205 001 227	20 700 400	0
	Total functional expenses. Add lines 1 through 24f	314,600,836.	285,801,337.	28,799,499.	C
26	Joint Costs. Check here ▶ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
JSA 52 1.		I			Form <b>990</b> (2010

#### Part X **Balance Sheet** Beginning of year End of year 24,561,145. Cash - non-interest-bearing 15,471,344. 1 1 Savings and temporary cash investments 2 Pledges and grants receivable, net 3 3 35,624,499. 35,323,062. Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 6 Notes and loans receivable, net 629,653. 7 6,014,490. Inventories for sale or use 5,455,631. 8 Prepaid expenses and deferred charges 9,228,010. 9,993,281. 10a Land, buildings, and equipment: cost or 427,048,527. other basis. Complete Part VI of Schedule D 10a 183,176,061. 232,964,744.10c 243,872,466. b Less: accumulated depreciation | 10b | 27,647,000. 11 31,167,000. 11 14,474,262. 12 17,252,756. 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 13 14 14 46,586,096. 43,098,944. 15 15 387,451,586. 411,912,797. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 31,167,876. 40,551,328. 17 17 18 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key 22 employees, highest compensated employees, and disqualified persons. 22 23 23 24 Unsecured notes and loans payable to unrelated third parties. 24 246,515,110. 237,313,120. 25 Other liabilities. Complete Part X of Schedule D 25 Total liabilities. Add lines 17 through 25. \_\_\_\_\_\_ 277,682,986. 277,864,448. 26 Organizations that follow SFAS 117, check here | X | and complete lines 27 through 29, and lines 33 and 34. Balances 27 103,874,058. 27 128, 152, 044. 5,894,542. 5,896,305. 28 28 Fund 29 29 Organizations that do not follow SFAS 117, check here ▶ ŏ complete lines 30 through 34. Assets 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 Net 109,768,600. 134,048,349. 33 33 Total liabilities and net assets/fund balances 387,451,586. 34 411,912,797.

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Pa	Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				X	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3	33,7	53,9	989.
2	Total expenses (must equal Part IX, column (A), line 25)	2		14,6		
3	Revenue less expenses. Subtract line 2 from line 1	3		19,1	53,2	153.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	10	09,7	68,6	600.
5	Other changes in net assets or fund balances (explain in Schedule O)	5		5,1	26,5	596.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,					
	column (B))	6	1	34,0	48,3	349.
Pa	Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		х
b	Ware the experimentable financial statements audited by an independent accountant?			2b	Х	
c						
	the audit, review, or compilation of its financial statements and selection of an independent accountant?			2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain	n	• •			
	Schedule O.					
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were	Э				
	issued on a separate basis, consolidated basis, or both:					
	Separate basis X Consolidated basis Both consolidated and separate basis					
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in					
	the Single Audit Act and OMB Circular A-133?		_	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	;				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		

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#### SCHEDULE A (Form 990 or 990-EZ)

### **Public Charity Status and Public Support**

OMB No. 1545-0047
2010
Open to Public

Department of the Treasury Internal Revenue Service Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Open to Public Inspection

**Employer identification number** Name of the organization BALTIMORE WASHINGTON MEDICAL CENTER, INC. 52-0689917 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 11 purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. Type II С Type III - Functionally integrated Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes and (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii)

h	Provide the following	ng information abo	out the supported organization	ation(s)	).						
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	col. (i) listed in your governing document? in col. (i) of collection your support?		organiz col. (i) o	Is the zation in rganized U.S.?	(vii) Amount of support			
				Yes	No	Yes	No	Yes	No		
(A)											
(B)											
(C)											
(D)											
(E)											
Tota											
For	For Panerwork Reduction Act Notice, see the Instructions for Schedule A (Form 990 or 990-F7) 2010										

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part II Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	<b>(e)</b> 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or						
	publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.						
	tion B. Total Support	(=) 2006	(b) 2007	(2) 2000	(4) 2000	(=) 2010	(f) Total
_	ndar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	<b>Total support</b> . Add lines 7 through 10						
12	Gross receipts from related activities, etc. (s						
13	First five years. If the Form 990 is f organization, check this box and stop here	<u> </u>					
Sec	tion C. Computation of Public Sup	•					
14	Public support percentage for 2010 (li	•				14	<u>%</u>
15	Public support percentage from 2009					15	<u>%</u>
16a	331/3% support test - 2010. If the o	_					
	this box and <b>stop here</b> . The organizati						
a	331/3% support test - 2009. If the concept this box and stop here. The org						
17a	10%-facts-and-circumstances test - 2						
	or more, and if the organization me	_					
	Part IV how the organization meets t						
	organization			_	· ·		<b>▶</b>
b	10%-facts-and-circumstances test -						and line
	15 is 10% or more, and if the organization in Part IV how the organization	anization meets	s the "facts-an	d-circumstances	s" test, check t	his box and <b>st</b>	op here.
18	supported organization						
	instructions					<u> </u>	▶ 🔼
					-	chadula A /Farm C	00 000 F7\ 0040

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

<u>Sec</u>	tion A. Public Support						
Ca	alendar year (or fiscal year beginning in) 🕨	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
-	unrelated trade or business under section 513						
4	Tax revenues levied for the organization's						
•	benefit and either paid to or expended on						
	its behalf						
5	The value of services or facilities						
J	furnished by a governmental unit to the						
	, ,						
_	organization without charge						
6	Total. Add lines 1 through 5						
ı a	Amounts included on lines 1, 2, and 3						
b	received from disqualified persons  Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
	line 6.)						
Sec	tion B. Total Support						
Ca	alendar year (or fiscal year beginning in) 🕨	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 10a	Amounts from line 6.  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for	the organizatio	n's first, second,	third, fourth, or	fifth tax year a	as a section 501(	c)(3)
	organization, check this box and stop here.	<u> </u>					▶
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2010 (line 8,	column (f) divide	ed by line 13, colur	nn (f))		15	%
16	Public support percentage from 2009 Scheo	dule A, Part III, lir	ne 15			16	%
Sec	tion D. Computation of Investmen	t Income Per	centage				
17	Investment income percentage for 2010 (lin	e 10c, column (	(f) divided by line 1	3, column (f))		17	%
18	Investment income percentage from 2009 S						%
19a	331/3% support tests - 2010. If the org						and line
	17 is not more than 331/3%, check this						. —
b	331/3% support tests - 2009. If the organ			•			
	line 18 is not more than 331/3%, check						
20	Private foundation. If the organization of	did not check	a box on line	14, 19a, or 19b	, check this bo	ox and see instr	uctions ►

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Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See

#### **SCHEDULE C**

(Form 990 or 990-EZ)

#### **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

	e organization answered "Yes," Section 501(c)(4), (5), or (6) org	to Form 990, Part IV, line 5 (Proxy Ta anizations: Complete Part III.	ax) or Form 990-EZ, Pa	rt V, line 35a (Proxy Tax), t	hen
Nam	e of organization			Employer identi	fication number
BA		MEDICAL CENTER, INC.		52-06	
Pa	rt I-A Complete if the o	rganization is exempt under s	section 501(c) or i	s a section 527 orgar	nization.
1	Provide a description of the	organization's direct and indirect p	oolitical campaign a	ctivities on behalf of or i	n opposition to
	candidates for public office i				
2	Political expenditures			▶ \$	
3	Volunteer hours				
Pa	rt I-B Complete if the o	rganization is exempt under s	ection 501(c)(3).		
1	Enter the amount of any exc	cise tax incurred by the organizatio	n under section 495	5 ▶ \$	
2	Enter the amount of any exc	cise tax incurred by organization m	anagers under secti	on 4955     ▶ \$	
3	If the organization incurred a	a section 4955 tax, did it file Form	4720 for this year?		Yes N
4a	Was a correction made?				Yes N
b	,				
Pa	•	rganization is exempt under			).
1	•	spended by the filing organization			
2		g organization's funds contributed	_		
_		es			
3	·	nditures. Add lines 1 and 2. Ente			
		- 4400 - 501 ( 111			
4		e Form 1120-POL for this year?			
5		s and employer identification num s. For each organization listed, ent			
		ributions received that were prom			
		nd or a political action committee (F			
		(b) Address	,	1	(e) Amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	contributions received ar
				funds. If none, enter -0	promptly and directly
					delivered to a separate political organization. If
					none, enter -0
(1)					
(2)					
(3)					
(4)		<u> </u>			
(5)		<u> </u>			
_					
(6)		L	]		

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2010

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P	art II-A Complete if the organi section 501(h)).	zation is exe	mpt under section	n 501(c)(3) and	filed Form 5768 (ele	ction under				
A B	Check ► if the filing organization if the filing organization if the filing organization if the filing organization is the filing organization in the filing organization in the filing organization is the filing organization organization in the filing organization is the filing organization organization in the filing organization is the filing organization orga				ons apply.					
	Limits on (The term "expenditures	Lobbying Expers" means amou		.)	(a) Filing organization's totals	( <b>b)</b> Affiliated group totals				
1 a	Total lobbying expenditures to influence	nce public opin	ion (grass roots lobl	oying)						
b	Total lobbying expenditures to influe	ng)								
С	: Total lobbying expenditures (add lin									
d	I Other exempt purpose expenditures									
е	<ul> <li>Total exempt purpose expenditures</li> </ul>	(add lines 1c ar	nd 1d)							
f	Lobbying nontaxable amount. Enter	the amount fro	m the following table	e in both						
	columns.									
	If the amount on line 1e, column (a) or (	b) is: The lobbyi	ng nontaxable amount	is:						
	Not over \$500,000	20% of the	amount on line 1e.							
	Over \$500,000 but not over \$1,000,000	\$100,000 p	lus 15% of the excess	over \$500,000.						
	Over \$1,000,000 but not over \$1,500,0		lus 10% of the excess							
	Over \$1,500,000 but not over \$17,000,	000 \$225,000 p	olus 5% of the excess of	over \$1,500,000.						
	Over \$17,000,000	\$1,000,000	· · · · · · · · · · · · · · · · · · ·							
g	Grassroots nontaxable amount (ent									
h		or less, enter -0	)- 							
i Subtract line 1f from line 1c. If zero or less, enter -0-										
j	If there is an amount other than zer	o on either line			Form 4720 reporting					
-	section 4911 tax for this year?					Yes No				
	columns	that made a so below. See the	e instructions for lir	on do not have to nes 2a through 2		ve				
_		Lobbying Expe	enditures During 4-Y	ear Averaging Pe ⊺	riod					
	Calendar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) Total				
2 a	Lobbying nontaxable amount									
b	Lobbying ceiling amount (150% of line 2a, column (e))									
c	: Total lobbying expenditures									
d	Grassroots nontaxable amount									
е	Grassroots ceiling amount (150% of line 2d, column (e))									
f	Grassroots lobbying expenditures									

Schedule C (Form 990 or 990-EZ) 2010

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Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). Part II-B

		(6	(a)		(b)	
		Yes	No	A	mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or					
а	referendum, through the use of: Volunteers?		х			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X			
c			X			
d	Media advertisements? Mailings to members, legislators, or the public?		Х			
е	Publications, or published or broadcast statements?  Grants to other organizations for Johnving purposes?		Х			
f	Grants to other organizations for lobbying purposes?		Х			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Х			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х			
i	Other activities? If "Yes," describe in Part IV	Х			23	,232
j	Total. Add lines 1c through 1i				23	,232
2 a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х			
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6).	(c)(5)	, or s	ection		
1 2 3 Pa 1 2	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carryover lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501  501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A  "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	(c)(5) , line politic	, or s 3 is a	section 2	Yes 1 2 3 1	No
С	Total			2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) du			3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible I		- 1			
				1		
5	and political expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)		• • •	5		
	rt IV Supplemental Information					
Con	nplete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C o, complete this part for any additional information.		5; and	Part II-B	, line 1i	
SE	E PAGE 4					

Schedule C (Form 990 or 990-EZ) 2010

Schedule C (Form 990 or 990-EZ) 2010 Page **4** 

#### Part IV Supplemental Information (continued)

OTHER ACTIVITIES

SCHEDULE C, PART II-B, LINE 1I

THE ORGANIZATION DOES NOT ENGAGE IN ANY DIRECT LOBBYING ACTIVITIES. THE ORGANIZATION PAYS MEMBERSHIP DUES TO THE MARYLAND HOSPITAL ASSOCIATION (MHA) AND THE AMERICAN HOSPITAL ASSOCIATION (AHA). MHA AND AHA ENGAGE IN MANY SUPPORT ACTIVITIES INCLUDING LOBBYING AND ADVOCATING FOR THEIR MEMBER HOSPITALS. THE MHA AND AHA REPORTED THAT 8.65% AND 24.42% OF MEMBER DUES WERE USED FOR LOBBYING PURPOSES AND AS SUCH, THE ORGANIZATION HAS REPORTED THIS AMOUNT ON SCHEDULE C PART IV AS LOBBYING ACTIVITIES.

#### **SCHEDULE D** (Form 990)

# **Supplemental Financial Statements**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Cumplement identification u

	e of the organization	Employer Identification number
	LTIMORE WASHINGTON MEDICAL CENTER, INC.	52-0689917
Pa	Organizations Maintaining Donor Advised Funds or Other Similar Funds or organization answered "Yes" to Form 990, Part IV, line 6.	·
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in d	onor advised
	funds are the organization's property, subject to the organization's exclusive legal control? .	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fundused only for charitable purposes and not for the benefit of the donor or donor advisor, or fo	r any other
	purpose conferring impermissible private benefit?	Yes No
Pa	rt II Conservation Easements. Complete if the organization answered "Yes" to F	orm 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	Preservation of land for public use (e.g., recreation or education)	of an historically important land area
	Protection of natural habitat Preservation of	of a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in	the form of a conservation
	easement on the last day of the tax year.	
		Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
С	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a	
	historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminate	ated by the organization during the
	tax year ▶	
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, have	- 1 1 1 1
	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation eas	sements during the year
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easeme  \$\\$\	nts during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of se	ection 170(h)(4)(B)
	(i) and 170(h)(4)(B)(ii)?	
9	In Part XIV, describe how the organization reports conservation easements in its revenue an	
	balance sheet, and include, if applicable, the text of the footnote to the organization's finance	cial statements that describes the
	organization's accounting for conservation easements.	
Pa	rt III Organizations Maintaining Collections of Art, Historical Treasures, or Othe Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	r Similar Assets.
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its works of art, historical treasures, or other similar assets held for public exhibition, edupublic service, provide, in Part XIV, the text of the footnote to its financial statements that despends to the control of the	revenue statement and balance sheet location, or research in furtherance of scribes these items
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its r	
~	works of art, historical treasures, or other similar assets held for public exhibition, edupublic service, provide the following amounts relating to these items:	ication, or research in furtherance of
	(i) Revenues included in Form 990, Part VIII, line 1	
	(ii) Assets included in Form 990, Part X	<b> ▶</b> \$
2	If the organization received or held works of art, historical treasures, or other similar	assets for financial gain, provide the
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these item	
а	Revenues included in Form 990, Part VIII, line 1	
<u>b</u>	Assets included in Form 990, Part X	▶ \$

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Schedule D (Form 990) 2010 52-0689917 Page **2** 

Par	t III Organizations Maintaini	ing Collection	s of Art, Hi	storical	Treasures	, or Ot	her Similar As	sets (contin	ued)
3	Using the organization's acquisition collection items (check all that app		and other re	ecords, c	heck any o	f the fo	llowing that are	e a significan	t use of its
а	Public exhibition		d		Loan or exc	change	programs		
b	Scholarly research		е		Other				
С	Preservation for future ge	enerations							
4	Provide a description of the organ	nization's collec	ctions and e	xplain ho	w they fur	ther the	e organization's	exempt purp	ose in Part
	XIV.			•					
5	During the year, did the organization	on solicit or rec	eive donation	ns of art,	historical tre	easures,	or other similar	r	
	assets to be sold to raise funds rath								s No
Par	Escrow and Custodial A line 9, or reported an an	rrangements	Complete	if the or	ganization				
1 a	Is the organization an agent, truste	e, custodian or	other interm	nediary fo	r contribution	ons or o	ther assets not		
	included on Form 990, Part X?							Ye	s No
b	If "Yes," explain the arrangement in	n Part XIV and o	omplete the	following	table:				
							Am	nount	
С	Beginning balance					1c			
d	Additions during the year				[	1d			
е	Distributions during the year				[	1e			
f	Ending balance					1f			
2a	Did the organization include an am	ount on Form 9	990, Part X,	line 21?				Ye	s No
b	If "Yes," explain the arrangement in	n Part XIV.							
Par	t V Endowment Funds. Con	nplete if orga	nization an	swered '	Yes" to Fo	rm 990	), Part IV, line	10.	
		(a) Current year		or year	(c) Two year		(d) Three years		our years back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains,								
	and losses								
d	Grants or scholarships								
	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
a	End of year balance								
2	Provide the estimated percentage	of the year end	halance held	1 as <sup>.</sup>					
	Board designated or quasi-endown	•	%	<i>i</i> 40.					
	Permanent endowment ►								
	Term endowment	/º							
	Are there endowment funds not in	- ' '	of the orga	nization t	hat are held	d and a	dministered for th	he	
	organization by:	ino poddoddioi	. or the orga	· ····································	nat are not	a and a		.0	Yes No
	(i) unrelated organizations							3a(i	
	(ii) related organizations							3a(ii	
b	If "Yes" to 3a(ii), are the related ord							3b	
4	Describe in Part XIV the intended u	•							
	t VI Land, Buildings, and Equ								
	Description of investment		Cost or other bas		cost or other ba		) Accumulated depreciation	(d) Book	value
12	Land		· ·		602,54				602,544.
	Buildings			2.4	0,676,6		0,992,550.		684,121.
	Leasehold improvements				2,279,8		1,609,785.		670,055.
Ч	Equipment						0,573,726.		999,359.
u A	Other				5,916,38		0,0,0,120.		916,387.
Tota	I. Add lines 1a through 1e. (Column		Form 990 E						372,466.
old	. Add illes la tillough le. (Column	i (u) musi equal	i Ullil 990, F	art A, CO	uiiii (D), IIII	υ τυ(υ <i>).)</i>	·		572,400.

Schedule D (Form 990) 2010 52-0689917 Page 3

Ochedule B (1	om 550) 2010		02 0003327	i age <b>o</b>
Part VII	Investments - Other Securities. See Fo	rm 990, Part X, line	e 12.	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v Cost or end-of-year	
(1) Financia	Il derivatives			
	held equity interests			
<u>(A)</u>				
(B)				
<u>(C)</u>				
(D)				
(E)				
<del>(F)</del>				
<u>(G)</u> (H)				
<u>(I)</u>				
	(b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments - Program Related. See Fo	orm 990, Part X, line	e 13.	
	(a) Description of investment type	(b) Book value	(c) Method of v Cost or end-of-year	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)	(h) word a ward 5- wa 000 Bart V and (D) fine 40 )			
Part IX	(b) must equal Form 990, Part X, col. (B) line 13.) Other Assets. See Form 990, Part X, lin	0.15		
Pailix		Description		(b) Book value
(1) SELF	INSURANCE TRUST	ocacription		17,328,344
	TED USE ASSET - BWMC FOUND			5,896,305
	TRUCTION FUNDS			19,874,295
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				10.000.011
	(b) must equal Form 990, Part X, col. (B) line 15.)		<del> </del>	<b>43,098,944</b>
Part X	Other Liabilities. See Form 990, Part X,			
1. (1) Fodor:	(a) Description of liability	(b) Amount		
(2) DUE :	al income taxes	191,640,4	459	
	NCES - THIRD PARTY PAYORS	8,111,8		
	RACTICE INSURANCE LIABILITY	7,497,8		
	AFFILIATES	22,573,		
	ION LIABILITY	7,489,1		
(7)		, ===,		
(8)				
(9)				
(10)				
(11)				
	n (b) must equal Form 990, Part X, col. (B) line 25.)	<b>▶</b> 237,313,1	120.	

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

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Part	XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Stateme	ents
1		1
2		2
3		3
4		4
5		5
6		6
7		7
8		8
9		9
10		0
	XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Retu	
1	Total revenue, gains, and other support per audited financial statements	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
а	Net unrealized gains on investments 2a	
b	Donated services and use of facilities 2b	
C	Recoveries of prior year grants 2c	
d	Other (Describe in Part XIV.)	
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIV.)	
C	Add lines 4a and 4b	4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	
Part	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Ret	
1	Total expenses and losses per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
а	Donated services and use of facilities 2a	
b	Prior year adjustments 2b	
С	Other losses 2c	
d	Other (Describe in Part XIV.)	
е	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	. 3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
а	Investment expenses not included on Form 990, Part VIII, line 7b	
b	Other (Describe in Part XIV.)	
С	Add lines 4a and 4b	4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).	. 5
Part	XIV Supplemental Information	
Part V	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also completed the formation.	
SEE	PAGE 5	

Schedule D (Form 990) 2010 52-0689917

Part XIV Supplemental Information (continued)

FIN 48 FOOTNOTE PER AUDIT REPORT

SCHEDULE D, PART X, LINE 2

THE ORGANIZATION IS A SUBSIDIARY OF THE UNIVERSITY OF MARYLAND MEDICAL SYSTEM CORPORATION (THE CORPORATION). THE CORPORATION ADOPTED THE PROVISIONS OF ASC 740, ACCOUNTING FOR UNCERTAINTY IN THE INCOME TAXES (FIN 48) ON JULY 1, 2007. THE FOOTNOTE RELATED TO ASC 740 IN THE CORPORATION'S AUDITED FINANCIAL STATEMENTS IS AS FOLLOWS: THE CORPORATION FOLLOWS A THRESHOLD OF MORE-LIKELY-THAN-NOT FOR RECOGNITION AND DERECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. MANAGEMENT DOES NOT BELIEVE THAT THERE ARE ANY UNRECOGNIZED TAX BENEFITS THAT SHOULD BE RECOGNIZED.

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#### SCHEDULE H (Form 990)

# **Hospitals**

Complete if the organization answered "Yes" to Form 990, Part IV, question 20.
 ► Attach to Form 990.
 ► See separate instructions.

2010
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

BALTIMORE WASHINGTON MEDICAL CENTER, INC.

52-0689917

Par	tl Financial Assis	tance and	Certain C	Other Community Ber	nefits at Cost					
								Yes	No	
1a	Did the organization has	ve a financi	al assistar	ice policy during the tax	vear? If "No." skip to que	stion 6a	1a	Х		
b	If "Yes," was it a written						1b	Х		
2	If the organization had the financial assistance	multiple h	ospital fac	ilities, indicate which o	f the following best de					
	Applied uniformly	•			$oxedsymbol{oxed}$ Applied uniformly to m	nost hospital facilities				
	Generally tailored	to individua	al hospital t	facilities						
3	Answer the following the organization's patien				riteria that applied to t	he largest number of				
а	Did the organization use individuals? If "Yes," indicat	e which of th	-		e limit for eligibility for free of		3a	Х		
b	Did the organization us	se FPG to d	etermine e	eligibility for providing a			3 b	Х		
	200% 250	37	300%	350% 400		%	36			
С	If the organization did				ibe in Part VI the incor	ne based criteria for				
	c If the organization did not use FPG to determine eligibility, describe in Part VI the income based criteria for determining eligibility for free or discounted care. Include in the description whether the organization used an asset test or other threshold, regardless of income, to determine eligibility for free or discounted care.									
4	Did the organization's financial assistance policy that applied to the largest number of its patients during the									
	tax year provide for free or discounted care to the "medically indigent"?									
5a	5a Did the organization budget amounts for free or discounted care provided under its financial assistance policy during the tax year?									
b	b If "Yes," did the organization's financial assistance expenses exceed the budgeted amount?									
С	c If "Yes" to line 5b, as a result of budget considerations, was the organization unable to provide free or discounted									
	care to a patient who was eligible for free or discounted care?								X	
6a	Did the organization pre	epare a con	nmunity be	nefit report during the ta	ıx year?		6a	X		
b	b If "Yes," did the organization make it available to the public?									
	Complete the following	g table usi	ng the wo	rksheets provided in t	he Schedule H instruc	tions. Do not submit				
	these worksheets with t									
7	Financial Assistance									
	inancial Assistance and eans-Tested Government Programs	(a) Number of activities or programs (optional)	(b) Persons served (optional)	(c) Total community benefit expense	(d) Direct offsetting revenue	(e) Net community benefit expense	•	) Perconstant of total expense	al	
а	Financial Assistance at cost			7,786,329.		7,786,329.		2	.47	
	(from Worksheets 1 and 2)			1,100,329.		1,100,329.			-4/	
b	Unreimbursed Medicaid (from									
С	Worksheet 3, column a) Unreimbursed costs - other meanstested government programs (from Worksheet 3, column b)									
d	<b>Total</b> Financial Assistance and Means-Tested Government			7,786,329.		7,786,329.		2	.47	
	Other Benefits			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
e	Community health improvement									
	services and community benefit operations (from Worksheet 4)			1,482,674.	31,024.	1,451,650.			.46	
f	Health professions education			4 050 000		4 050 000		,	20	
	(from Worksheet 5)			4,052,022.		4,052,022.		T	.29	
g	Subsidized health services (from			6,693,891.	7,533,153.	-839,262.		_	.27	
h	Worksheet 6)  Research (from Worksheet 7)			39,103.	, ,	39,103.			.01	
i	Cash and in-kind contributions to					·				
•	community groups (from Worksheet 8)			296,279.		296,279.			.09	
j	Total. Other Benefits			12,563,969.	7,564,177.	4,999,792.			.58	
k	Total. Add lines 7d and 7j			20,350,298.	7,564,177.	12,786,121.		4	.05	

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

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Community Building Activities Complete this table if the organization conducted any community building activities during the tax year, and describe in Part VI how its community building activities promoted the health of the communities it serves.

	(a) Number of activities or programs (optional)	(b) Persons served (optional)	(c) Total community building expense	(d) Direct offsetting revenue	(e) Net community building expense	(f) Percent of total expense
1 Physical improvements and housing						
2 Economic development			2,343.		2,343.	
3 Community support						
4 Environmental improvements						
5 Leadership development and						
training for community members						
6 Coalition building						
7 Community health improvement						
advocacy						
8 Workforce development						
9 Other				·		
10 Total			2,343.	·	2,343.	

Part III Bad Debt, Medicare, & Collection Practices

Section A. Bad Debt Expense							
1	1 Does the organization report bad debt expense in accordance with Healthcare Financial Management						
	Association Statement No. 15?	1	Х				
2	Enter the amount of the organization's bad debt expense (at cost) 2						
3	Enter the estimated amount of the organization's bad debt expense (at cost) attributable						
	to patients eligible under the organization's financial assistance policy						
4	Provide in Part VI the text of the footnote to the organization's financial statements that describes bad debt						
	expense. In addition, describe the costing methodology used in determining the amounts reported on lines						
	2 and 3, and rationale for including a portion of bad debt amounts in community benefit.						
Sec	tion B. Medicare						
5	Enter total revenue received from Medicare (including DSH and IME)						
6	Enter Medicare allowable costs of care relating to payments on line 5						
7	Subtract line 6 from line 5. This is the surplus (or shortfall)						
8	Describe in Part VI the extent to which any shortfall reported in line 7 should be treated as community benefit.						
	Also describe in Part VI the costing methodology or source used to determine the amount reported on line 6.						
	Check the box that describes the method used:						
	Cost accounting system X Cost to charge ratio U Other						
Sec	tion C. Collection Practices						
9 a	Does the organization have a written debt collection policy during the tax year?	9a	Х				
b	<b>b</b> If "Yes," did the organization's collection policy that applied to the largest number of its patients during the tax year contain provisions on the						
	collection practices to be followed for patients who are known to qualify for financial assistance? Describe in Part VI						

Part IV **Management Companies and Joint Ventures** (c) Organization's profit % or stock (b) Description of primary (d) Officers, directors, (e) Physicians' (a) Name of entity profit % or stock ownership % trustees, or key employees' profit % activity of entity ownership % or stock ownership % 2 3 4 5 6 7 8 9 10 11 12 13

52-0689917 Page 3 Schedule H (Form 990) 2010

Part V Facility Information									
Section A. Hospital Facilities		0	C		C	ZJ	Ш	т	
(list in order of size, measured by total revenue per facility, from largest to smallest)  How many hospital facilities did the organization operate	Licensed hospital	General medical & surgical	Children's hospital	Teaching hospital	Critical access hospital	Research facility	ER-24 hours	ER-other	
during the tax year? 1		sur \$	_		spita				
		gical			_				
Name and address  1 BALTIMORE WASHINGTON MEDICAL CENTER									Other (describe)
301 HOSPITAL DRIVE									
GLEN BURNIE MD 21061	Х	Х					Х		
2									
3									
3									
4									
-									
5									
6									
7	!								
8									
9									
10									
11									
.11									
12									
13									
13									
14									
45									
15									
16									

#### Part V Facility Information (continued)

#### Section B. Facility Policies and Practices

(Cor	mplete a separate Section B for each of the hospital facilities listed in Part V, Section A)					
Name	of Hospital Facility: BALTIMORE WASHINGTON MEDICAL CENTER					
Line N	lumber of Hospital Facility (from Schedule H, Part V, Section A):1					
	, , , , , , , , , , , , , , , , , , , ,		Yes	No		
Com	munity Health Needs Assessment (Lines 1 through 7 are optional for 2010)					
1	During the tax year or any prior tax year, did the hospital facility conduct a community health needs assessment (Needs Assessment)? If "No," skip to line 8	1				
	If "Yes," indicate what the Needs Assessment describes (check all that apply):					
а	A definition of the community served by the hospital facility					
b	Demographics of the community					
С	Existing health care facilities and resources within the community that are available to respond to the					
لم	health needs of the community  How data was obtained					
d	The health needs of the community					
e f	Primary and chronic disease needs and other health issues of uninsured persons, low-income persons,					
•	and minority groups					
g	The process for identifying and prioritizing community health needs and services to meet the community health needs					
h	The process for consulting with persons representing the community's interests					
i	Information gaps that limit the hospital facility's ability to assess all of the community's health needs					
j	Other (describe in Part VI)					
2	Indicate the tax year the hospital facility last conducted a Needs Assessment: 20					
3	In conducting its most recent Needs Assessment, did the hospital facility take into account input from					
	persons who represent the community served by the hospital facility? If "Yes," describe in Part VI how the					
	hospital facility took into account input from persons who represent the community, and identify the persons					
	the hospital facility consulted	3				
4	Was the hospital facility's Needs Assessment conducted with one or more other hospital facilities? If "Yes,"					
	list the other hospital facilities in Part VI	4				
5	Did the hospital facility make its Needs Assessment widely available to the public?	5				
	If "Yes," indicate how the Needs Assessment was made widely available (check all that apply):					
а	Hospital facility's website					
b	Available upon request from the hospital facility					
С	Other (describe in Part VI)					
6	If the hospital facility addressed needs identified in its most recently conducted Needs Assessment, indicate how (check all that apply):					
а	Adoption of an implementation strategy to address the health needs of the hospital facility's community					
b	Execution of the implementation strategy					
С	Participation in the development of a community-wide community benefit plan					
d	Participation in the execution of a community-wide community benefit plan					
е	Inclusion of a community benefit section in operational plans					
f	Adoption of a budget for provision of services that address the needs identified in the Needs Assessment					
g	Prioritization of health needs in its community					
h	Prioritization of services that the hospital facility will undertake to meet health needs in its community					
i	Other (describe in Part VI)					
7	Did the hospital facility address all of the needs identified in its most recently conducted Needs Assessment?					
	If "No," explain in Part VI which needs it has not addressed and the reasons why it has not addressed such	_				
	needs	7				
rınan	cial Assistance Policy					
^	Did the hospital facility have in place during the tax year a written financial assistance policy that:					
8	Explained eligibility criteria for financial assistance, and whether such assistance includes free or discounted					
9	care?	8	Х			
J		9	Х			
	individuals? If "Yes," indicate the FPG family income limit for eligibility for free care: $2 \ 0 \ 0 \ \%$					

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Par		(1 0111	Facility Information (continued) BALTIMORE WASHINGTON MEDICAL CENTER			age <b>J</b>	
rai	ιv		Tacility illioi liation (continued) BABTIMONE WASHINGTON MEDICAE CENTER		Yes	No	
10	He	۵d	FPG to determine eligibility for providing discounted care to low income individuals?	10	X	110	
10			" indicate the FPG family income limit for eligibility for discounted care: $\frac{3}{2}$ $\frac{0}{2}$ $\frac{0}{2}$	10	**		
11				11	Х		
• •		Explained the basis for calculating amounts charged to patients?  If "Yes," indicate the factors used in determining such amounts (check all that apply):					
a		x X	Income level				
k	· -	7	Asset level				
•	_ <del> </del>	X	Medical indigency				
,			Insurance status				
•			Uninsured discount				
f			Medicaid/Medicare				
ç			State regulation				
ŀ			Other (describe in Part VI)				
12		 plair	ned the method for applying for financial assistance?	12	Х		
13	Inc	:lude	ed measures to publicize the policy within the community served by the hospital facility?	13	Х		
			," indicate how the hospital facility publicized the policy (check all that apply):				
a			The policy was posted on the hospital facility's website				
k			The policy was attached to billing invoices				
c	; 🗀	X	The policy was posted in the hospital facility's emergency rooms or waiting rooms				
c	ı 🗀	X	The policy was posted in the hospital facility's admissions offices				
e	, 🗆	X	The policy was provided, in writing, to patients on admission to the hospital facility				
f		X	The policy was available on request				
ç	, [		Other (describe in Part VI)				
Billi	ng a	nd C	Collections				
14			e hospital facility have in place during the tax year a separate billing and collections policy, or a written				
			al assistance policy that explained actions the hospital facility may take upon non-payment?	14	Х		
15			all of the following collection actions against a patient that were permitted under the hospital facility's				
		_	s at any time during the tax year:				
ā	_	X	Reporting to credit agency				
k	) [-]	X	Lawsuits				
C	. —	_	Liens on residences				
C	'	_	Body attachments				
			Other actions (describe in Part VI)				
16			e hospital facility engage in or authorize a third party to perform any of the following collection actions	4.5	v		
		_	the tax year?	16	Х		
			" check all collection actions in which the hospital facility or a third party engaged (check all that				
_		ply): X	Reporting to credit agency				
a k	· -	-	Lawsuits				
		$\dashv$	Liens on residences				
	. —	-	Body attachments				
6		-	Other actions (describe in Part VI)				
17		_ licat	e which actions the hospital facility took before initiating any of the collection actions checked in line				
• •			eck all that apply):				
a	Γ,	x]	Notified patients of the financial assistance policy on admission				
k	· -	x	Notified patients of the financial assistance policy prior to discharge				
		X	Notified patients of the financial assistance policy in communications with the patients regarding the				
			patients' bills				
c	1 [2	X	Documented its determination of whether a patient who applied for financial assistance under the				
		_	financial assistance policy qualified for financial assistance				
e	_ [		Other (describe in Part VI)				

Page 6 Schedule H (Form 990) 2010

Part '	V Facility Information (continued) BALTIMORE WASHINGTON MEDICAL CENTER				
Polic	y Relating to Emergency Medical Care				
			Yes	No	
18	Did the hospital facility have in place during the tax year a written policy relating to emergency medical care that requires the hospital facility to provide, without discrimination, care for emergency medical conditions to individuals regardless of their eligibility under the hospital facility's financial assistance policy?	18	х		
	If "No," indicate the reasons why (check all that apply):				
a b c	The hospital facility did not provide care for any emergency medical conditions  The hospital facility did not have a policy relating to emergency medical care  The hospital facility limited who was eligible to receive care for emergency medical conditions (describe in Part VI)				
d	Other (describe in Part VI)				
Char	ges for Medical Care				
19	Indicate how the hospital facility determined the amounts billed to individuals who did not have insurance				
	covering emergency or other medically necessary care (check all that apply):				
а	The hospital facility used the lowest negotiated commercial insurance rate for those services at the hospital facility				
b	The hospital facility used the average of the three lowest negotiated commercial insurance rates for those services at the hospital facility				
c d	The hospital facility used the Medicare rate for those services  Other (describe in Part VI)				
20	Did the hospital facility charge any of its patients who were eligible for assistance under the hospital facility's financial assistance policy, and to whom the hospital facility provided emergency or other medically necessary services, more than the amounts generally billed to individuals who had insurance covering such care?	20		Х	
	If "Yes," explain in Part VI.				
21	Did the hospital facility charge any of its patients an amount equal to the gross charge for any service provided to that patient?	21	х		

# Part V Facility Information (continued)

Section C. Other Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility (list in order of size, measured by total revenue per facility, from largest to smallest)

Name and address
Type of Facility (describe)

1
2
3
3
4
5
6
7
7
8
8

#### Part VI Supplemental Information

Complete this part to provide the following information.

1 Required descriptions. Provide the descriptions required for Part I, lines 3c, 6a, and 7; Part II; Part III, lines 4, 8, and 9b; and Part V, Section B, lines 1j, 3, 4, 5c, 6i, 7, 11h, 13g, 15e, 16e, 17e, 18d, 19d, 20, and 21.

- 2 Needs assessment. Describe how the organization assesses the health care needs of the communities it serves, in addition to any needs assessments reported in Part V, Section B.
- **3 Patient education of eligibility for assistance.** Describe how the organization informs and educates patients and persons who may be billed for patient care about their eligibility for assistance under federal, state, or local government programs or under the organization's financial assistance policy.
- **4 Community information.** Describe the community the organization serves, taking into account the geographic area and demographic constituents it serves.
- 5 Promotion of community health. Provide any other information important to describing how the organization's hospitals facilities or other health care facilities further its exempt purpose by promoting the health of the community (e.g., open medical staff, community board, use of surplus funds, etc.).
- **6** Affiliated health care system. If the organization is part of an affiliated health care system, describe the respective roles of the organization and its affiliates in promoting the health of the communities served.
- **7 State filing of community benefit report.** If applicable, identify all states with which the organization, or a related organization, files a community benefit report.

RELATED ORGANIZATION REPORT SCHEDULE H, PART I, LINE 6A AN ANNUAL COMMUNITY BENEFIT REPORT IS PREPARED FOR EACH FISCAL YEAR ENDING THIS REPORT IS SUBMITTED TO THE HEALTH SERVICES COST REVIEW COMMISSION (HSCRC), A STATE REGULATORY AGENCY, BY DECEMBER 31 OF EACH IN ADDITION, THE ANNUAL COMMUNITY BENEFIT REPORT IS AVAILABLE UPON YEAR. REQUEST AT THE ENTITY'S CORPORATE OFFICES. COSTING METHODOLOGY SCHEDULE H, PART I, LINE 7A, COLUMN (D) MARYLAND'S REGULATORY SYSTEM CREATES A UNIQUE PROCESS FOR HOSPITAL PAYMENT THAT DIFFERS FROM THE REST OF THE NATION. THE HEALTH SERVICES COST REVIEW COMMISSION, (HSCRC) DETERMINES PAYMENT THROUGH A RATE SETTING PROCESS AND ALL PAYORS, INCLUDING GOVERNMENTAL PAYORS, PAY THE SAME AMOUNT FOR THE SAME SERVICES DELIVERED AT THE SAME HOSPITAL. UNIQUE ALL PAYOR SYSTEM INCLUDES A METHOD FOR REFERENCING UNCOMPENSATED CARE IN EACH PAYORS' RATES, WHICH DOES NOT ENABLE MARYLAND HOSPITALS TO BREAKOUT ANY OFFSETTING REVENUE RELATED TO UNCOMPENSATED CARE.

#### Part VI Supplemental Information

Complete this part to provide the following information.

1 Required descriptions. Provide the descriptions required for Part I, lines 3c, 6a, and 7; Part II; Part III, lines 4, 8, and 9b; and Part V, Section B, lines 1j, 3, 4, 5c, 6i, 7, 11h, 13g, 15e, 16e, 17e, 18d, 19d, 20, and 21.

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### Part VI Supplemental Information

Complete this part to provide the following information.

1 Required descriptions. Provide the descriptions required for Part I, lines 3c, 6a, and 7; Part II; Part III, lines 4, 8, and 9b; and Part V, Section B, lines 1j, 3, 4, 5c, 6i, 7, 11h, 13g, 15e, 16e, 17e, 18d, 19d, 20, and 21.

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COST REVIEW COMMISSION, (HSCRC) DETERMINES PAYMENT THROUGH A RATE SETTING
PROCESS AND ALL PAYORS, INCLUDING GOVERNMENTAL PAYORS, PAY THE SAME
AMOUNT FOR THE SAME SERVICES DELIVERED AT THE SAME HOSPITAL. MARYLAND'S
UNIQUE ALL PAYOR SYSTEM INCLUDES A METHOD FOR REFERENCING UNCOMPENSATED
CARE IN EACH PAYORS' RATES, WHICH DOES NOT ENABLE MARYLAND HOSPITALS TO
BREAKOUT ANY OFFSETTING REVENUE RELATED TO UNCOMPENSATED CARE.
SCHEDULE H, PART I, LINE 7F, COLUMN (D)
MARYLAND'S REGULATORY SYSTEM CREATES A UNIQUE PROCESS FOR HOSPITAL
PAYMENT THAT DIFFERS FROM THE REST OF THE NATION. THE HEALTH SERVICES
COST REVIEW COMMISSION, (HSCRC) DETERMINES PAYMENT THROUGH A RATE SETTING
PROCESS AND ALL PAYORS, INCLUDING GOVERNMENTAL PAYORS, PAY THE SAME
AMOUNT FOR THE SAME SERVICES DELIVERED AT THE SAME HOSPITAL. MARYLAND'S
UNIQUE ALL PAYOR SYSTEM INCLUDES A METHOD FOR REFERENCING UNCOMPENSATED
CARE IN EACH PAYORS' RATES, WHICH DOES NOT ENABLE MARYLAND HOSPITALS TO
BREAKOUT ANY OFFSETTING REVENUE RELATED TO UNCOMPENSATED CARE.

## Part VI Supplemental Information

Complete this part to provide the following information.

1 Required descriptions. Provide the descriptions required for Part I, lines 3c, 6a, and 7; Part II; Part III, lines 4, 8, and 9b; and Part V, Section B, lines 1j, 3, 4, 5c, 6i, 7, 11h, 13g, 15e, 16e, 17e, 18d, 19d, 20, and 21.

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- **7 State filing of community benefit report.** If applicable, identify all states with which the organization, or a related organization, files a community benefit report.

COMMUNITY BUILDING ACTIVITIES
SCHEDULE H, PART II
BALTIMORE WASHINGTON MEDICAL CENTER IS A TRUSTED SOURCED OF RELIABLE,
HEALTH INFORMATION FOR THE BUSINESS COMMUNITY IN ANNE ARUNDEL COUNTY. AS
AN ACTIVE MEMBER OF SEVERAL CHAMBERS OF COMMERCE, BWMC PROVIDES CLINICAL
EXPERTISE, LEADERSHIP AND BEST PRACTICE MODELS TO OTHER COUNTY EMPLOYERS.
BAD DEBT EXPENSE
SCHEDULE H, PART III, LINE 4
THE PROVISION FOR BAD DEBTS IS BASED UPON MANAGEMENT'S ASSESSMENT OF
HISTORICAL AND EXPECTED NET COLLECTIONS CONSIDERING HISTORICAL BUSINESS
AND ECONOMIC CONDITIONS, TRENDS IN HEALTH CARE COVERAGE, AND OTHER
COLLECTION INDICATORS. PERIODICALLY THROUGHOUT THE YEAR, MANAGEMENT
ASSESSES THE ADEQUACY OF THE ALLOWANCE FOR UNCOLLECTIBLE ACCOUNTS BASED
UPON HISTORICAL WRITE OFF EXPERIENCE BY PAYOR CATEGORY. THE RESULTS OF
THIS REVIEW ARE THEN USED TO MAKE MODIFICATIONS TO THE PROVISION FOR BAD
DEBTS AND TO ESTABLISH AN ALLOWANCE FOR UNCOLLECTIBLE RECEIVABLES. AFTER
COLLECTION OF AMOUNTS DUE FROM INSURERS, THE CORPORATION FOLLOWS INTERNAL

Schedule H (Form 990) 2010

## Part VI Supplemental Information

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GUIDELINES FOR PLACING CERTAIN PAST DUE BALANCES WITH COLLECTION AGENCIES.
MEDICARE COST REPORT
SCHEDULE H, PART III, LINE 8
IN MARYLAND, THE HEALTH SERVICES COST REVIEW COMMISSION (HSCRC) STARTED
SETTING HOSPITAL RATES IN 1974. AT THAT TIME, THE HSCRC APPROVED RATES
APPLIED ONLY TO COMMERCIAL INSURERS. IN 1977, THE HSCRC NEGOTIATED A
WAIVER FROM MEDICARE HOSPITAL PAYMENT RULES FOR MARYLAND HOSPITALS TO
BRING THE FEDERAL MEDICARE PAYMENTS UNDER HSCRC CONTROL.
MEDICARE REIMBURSES MARYLAND HOSPITALS ACCORDING TO RATES ESTABLISHED BY
THE HSCRC AS LONG AS THE STATE CONTINUES TO MEET A TWO-PART TEST. THIS
TWO-PART WAIVER TEST ALLOWS MEDICARE TO PARTICIPATE IN THE MARYLAND
SYSTEM AS LONG AS TWO CONDITIONS ARE MET.
* ALL OTHER PAYERS PARTICIPATING IN THE SYSTEM PAY HSCRC SET RATES AND
* THE RATE OF GROWTH IN MEDICARE PAYMENTS TO MARYLAND HOSPITALS FROM 1981
TO THE PRESENT IS NOT GREATER THAN THE RATE OF GROWTH IN MEDICARE

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PAYMENTS TO HOSPITALS NATIONALLY OVER THE SAME TIME FRAME.
COLLECTION PRACTICES
SCHEDULE H, PART III, LINE 9B
THE ORGANIZATION EXPECTS PAYMENT AT THE TIME THE SERVICE IS PROVIDED.
OUR POLICY IS TO COMPLY WITH ALL STATE AND FEDERAL LAW AND THIRD PARTY
REGULATIONS AND TO PERFORM ALL CREDIT AND COLLECTION FUNCTIONS IN A
DIGNIFIED AND RESPECTFUL MANNER. EMERGENCY SERVICES WILL BE PROVIDED TO
ALL PATIENTS REGARDLESS OF ABILITY TO PAY. FINANCIAL ASSISTANCE IS
AVAILABLE FOR PATIENTS BASED ON FINANCIAL NEED AS DEFINED IN THE
FINANCIAL ASSISTANCE POLICY. THE ORGANIZATION DOES NOT DISCRIMINATE ON
THE BASIS OF AGE, RACE, CREED, SEX OR ABILITY TO PAY.
PATIENTS WHO ARE UNABLE TO PAY MAY REQUEST A FINANCIAL ASSISTANCE
APPLICATION AT ANY TIME PRIOR TO SERVICE OR DURING THE BILLING AND
COLLECTION PROCESS. THE ORGANIZATION MAY REQUEST THE PATIENT TO APPLY
FOR MEDICAL ASSISTANCE PRIOR TO APPLYING FOR FINANCIAL ASSISTANCE. THE
ACCOUNT WILL NOT BE FORWARDED FOR COLLECTION DURING THE MEDICAL

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ASSISTANCE APPLICATION PROCESS OR THE FINANCIAL ASSISTANCE APPLICATION
PROCESS.
BALTIMORE WASHINGTON MEDICAL CENTER
SCHEDULE H, PART V, SECTION B
LINE 19D - ALL PATIENTS ARE CHARGED STATE REGULATED RATES, REGARDLESS OF
THEIR ABILITY TO PAY.
LINE 21 - DUE TO STATE REGULATIONS, CHARGES ARE NOT REDUCED FOR ANY
PAYER, INCLUDING COMMERICAL INSURANCE, GOVERNMENT PAYERS, OR UNINSURED
PATIENTS. ALL CHARGES ARE GROSS CHARGES.
COMMUNITY HEALTH CARE NEEDS ASSESSMENT
SCHEDULE H, PART VI, LINE 2
BALTIMORE WASHINGTON MEDICAL CENTER DID NOT PERFORM A COMMUNITY HEALTH
NEEDS ASSESSMENT AS DEFINED BY THE FEDERAL REFORM BILL IN FY11. SUCH AN
ASSESSMENT IS CURRENTLY BEING CONDUCTED (IN FY12) AND WILL BE FULLY
IMPLEMENTED IN FY13. BALTIMORE WASHINGTON MEDICAL CENTER UTILIZED THE

Schedule H (Form 990) 2010

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ANNE ARUNDEL COUNTY DEPARTMENT OF HEALTH REPORT CARD OF COMMUNITY HEALTH

ANNE ARUNDEL COUNTY DEPARTMENT OF HEALTH REPORT CARD OF COMMUNITY HEALTH
INDICATORS TO DIRECT COMMUNITY OUTREACH ACTIVITIES IN FY11. THIS REPORT
CARD IS ISSUED BY THE ANNE ARUNDEL COUNTY DEPARTMENT OF HEALTH AND
REVIEWED BY BWMC EACH YEAR. THE MAY 2010 REPORT CARD WAS UTILIZED TO
DIRECT FY11 COMMUNITY OUTREACH EFFORTS. ADDITIONAL RESOURCES REFERENCED
TO IDENTIFY COMMUNITY HEALTH NEEDS INCLUDED COUNTY HEALTH RANKINGS (HTTP:
//www.countyhealthrankings.org) and maryland department of health and
MENTAL HYGIENE'S STATE HEALTH IMPROVEMENT PLAN (SHIP)
(HTTP://DHMH.MARYLAND.GOV/SHIP/). BWMC MAINTAINS OPEN COMMUNICATION WITH
THE ANNE ARUNDEL COUNTY DEPARTMENT OF HEALTH, ANNE ARUNDEL COUNTY PUBLIC
SCHOOL SYSTEM AND CHURCH LEADERS. BWMC'S COMMUNITY OUTREACH PROGRAMS CAN
BE FOUND IN COUNTY SCHOOLS, SENIOR CENTERS, COMMUNITY CENTERS AND
CHURCHES THROUGHOUT THE COUNTY. THE ASSISTANT DIRECTOR OF COMMUNITY
OUTREACH PARTICIPATES ON COMMITTEES AND ADVISORY COUNCILS, PROMOTING
CONTINUOUS DIALOGUE BETWEEN THE MEDICAL CENTER AND COMMUNITY
STAKEHOLDERS. THIS PROVIDES OPPORTUNITIES FOR NEW IDEAS AND PROGRAMS TO
BE EXCHANGED, ALLOWING BWMC TO MAXIMIZE COMMUNITY OUTREACH EFFORTS. IN
FY11, IN AN EFFORT TO GAIN INSIGHT FROM COMMUNITY MEMBERS ATTENDING

Schedule H (Form 990) 2010

Page 8

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EDUCATIONAL PROGRAMS, BWMC IMPLEMENTED AN EVALUATION TOOL. PROGRAM

<u> </u>
PARTICIPANTS WERE ASKED TO COMPLETE A BRIEF SURVEY, PROVIDING FEEDBACK
AND COMMENTS ABOUT THE PROGRAM THEY ATTENDED, AS WELL AS PROVIDING
SUGGESTIONS FOR FUTURE PROGRAM TOPICS. THIS VALUABLE INSIGHT IS USED IN
CONJUNCTION WITH THE ANNE ARUNDEL COUNTY DEPARTMENT OF HEALTH REPORT CARD
OF COMMUNITY HEALTH INDICATORS TO PLAN FUTURE EDUCATIONAL OFFERINGS AND
DIRECT OUTREACH ACTIVITIES.
ELIGIBILITY EDUCATION
SCHEDULE H, PART VI, LINE 3
BALTIMORE WASHINGTON MEDICAL CENTER'S FINANCIAL ASSISTANCE POLICY IS
ESTABLISHED TO ASSIST PATIENTS IN OBTAINING FINANCIAL AID WHEN IT IS
BEYOND THEIR ABILITY TO PAY FOR SERVICES RENDERED. A PATIENT'S INABILITY
TO OBTAIN FINANCIAL ASSISTANCE DOES NOT, IN ANY WAY, PRECLUDE THE
PATIENT'S RIGHT TO RECEIVE AND HAVE ACCESS TO MEDICAL TREATMENT AT
BALTIMORE WASHINGTON MEDICAL CENTER. BALTIMORE WASHINGTON MEDICAL CENTER
INFORMS PATIENTS AND PERSONS WHO WOULD OTHERWISE BE BILLED FOR SERVICES
ABOUT THEIR ELIGIBILITY FOR ASSISTANCE UNDER FEDERAL, STATE OR LOCAL

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GOVERNMENT PROGRAMS OR UNDER THE HOSPITAL'S FINANCIAL ASSISTANCE POLICY
IN THE FOLLOWING MANNER:
* BWMC POSTS ITS FINANCIAL ASSISTANCE POLICY AND FINANCIAL ASSISTANCE
CONTACT INFORMATION IN ALL ADMISSION AREAS, THE EMERGENCY ROOM AND ALL
OTHER OUTPATIENT AREAS THROUGHOUT THE FACILITY.
* BWMC DISCUSSES WITH PATIENTS OR THEIR FAMILIES THE AVAILABILITY OF
VARIOUS GOVERNMENT BENEFITS, SUCH AS MEDICAID OR STATE PROGRAMS, AND
EMPLOYS DEDICATED STAFF ON-SITE TO ASSIST PATIENTS WITH QUALIFICATION FOR
SUCH PROGRAMS.
* A COPY OF BWMC'S FINANCIAL ASSISTANCE POLICY IS INCLUDED IN THE PATIENT
HANDBOOK THAT IS PROVIDED TO EACH PATIENT UPON ADMISSION.
* AN ABBREVIATED STATEMENT REFERENCING BWMC'S FINANCIAL ASSISTANCE
POLICY, INCLUDING A PHONE NUMBER TO CALL FOR MORE INFORMATION, IS
PUBLISHED ANNUALLY IN THE LOCAL NEWSPAPERS (MARYLAND GAZETTE AND
CAPITAL).

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DESCRIPTION OF COMMUNITY SERVED
SCHEDULE H, PART VI, LINE 4
ANNE ARUNDEL COUNTY, PART OF THE BALTIMORE METROPOLITAN AREA, IS LOCATED
ON THE CHESAPEAKE BAY AND ENCOMPASSES A 454 SQUARE MILE AREA. THE CITY OF
ANNAPOLIS (ZIP CODE 21401), THE STATE CAPITOL, IS CENTRALLY LOCATED
BETWEEN BALTIMORE AND WASHINGTON, D.C. THE NORTHERN PART OF THE COUNTY IS
SUBURBAN AND URBAN WITH THE SOUTHERN PART PRIMARILY RURAL AND
AGRICULTURAL. ANNE ARUNDEL COUNTY HAS A DIVERSE POPULATION WITH RESPECT
TO AGE DISTRIBUTION. ACCORDING TO CENSUS DATA FROM YEARS 2008 TO 2010,
PERSONS BETWEEN THE AGES OF 20 AND 44 YEARS OLD COMPRISED THE LARGEST
SEGMENT OF THE POPULATION AT 34.5%. THE NEXT LARGEST GROUP WAS PERSONS
AGE 45 TO 64, WHICH MADE UP APPROXIMATELY 28.2% OF THE TOTAL POPULATION.
(SOURCE: 2008-2010 AMERICAN COMMUNITY SURVEY, U.S. CENSUS BUREAU).
ONE OF THE MOST BENEFICIAL ASSETS TO ANNE ARUNDEL COUNTY IS ITS
WELL-EDUCATED POPULATION. CENSUS ESTIMATES FROM 2008 TO 2010 SHOW THAT
APPROXIMATELY 36% OF ANNE ARUNDEL COUNTY'S POPULATION AGE 25 AND OVER HAS
EITHER A BACHELOR'S DEGREE OR A GRADUATE PROFESSIONAL DEGREE, AND THAT

Schedule H (Form 990) 2010

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LESS THAN 11% OF THE POPULATION OVER 25 DID NOT OBTAIN A HIGH SCHOOL
DIPLOMA. (SOURCE: 2008-2010 AMERICAN COMMUNITY SURVEY, U.S. CENSUS
BUREAU).
EMPLOYMENT IN ANNE ARUNDEL COUNTY IS DISTRIBUTED ACROSS A WIDE ARRAY OF
INDUSTRIAL SECTORS. BASED ON 2010 EMPLOYMENT FIGURES, TRADE AND
TRANSPORTATION, GOVERNMENT AND PROFESSIONAL AND BUSINESS SERVICES ACCOUNT
FOR OVER HALF OF THE TOTAL COUNTY EMPLOYMENT: 23%, 17%, AND 15%
RESPECTIVELY. OTHER MAJOR EMPLOYMENT SECTORS INCLUDE LEISURE AND
HOSPITALITY SERVICES (12%) FOLLOWED BY EDUCATION AND HEALTH SERVICES
(11%). (SOURCE: MD DEPARTMENT OF LABOR, LICENSING, AND REGULATION, 2010).
BALTIMORE WASHINGTON MEDICAL CENTER CONSIDERS MOST OF ANNE ARUNDEL COUNTY
THE HOSPITAL'S COMMUNITY BENEFIT SERVICE AREA (CBSA):
BWMC PRIMARY COMMUNITY BENEFIT SERVICE AREA ZIP CODES ARE AS FOLLOWS:
21060, 21061, 21122, 21144, 21225 AND 21226

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BWMC SOUTH COMMUNITY BENEFIT SERVICE AREA ZIP CODES: 21012, 21032,
21054, 21108, 21114, 21401, 21402 AND 21146
BWMC WEST COMMUNITY BENEFIT SERVICE AREA ZIP CODES: 21090, 21113, 20755,
21240, 21227 AND 21076
A FEW SOUTHERN ANNE ARUNDEL COUNTY ZIP CODES HAVE BEEN EXCLUDED (20711,
20733, 20751, 20758, 20764, 20765, AND 20779) AND A FEW EASTERN HOWARD
COUNTY ZIP CODES (20723, 20794, AND 21075) ARE INCLUDED AS PART OF THE
HOSPITAL'S CBSA.
THE TOTAL POPULATION OF ANNE ARUNDEL COUNTY IS 521,209. THE MEDIAN
HOUSEHOLD INCOME IS \$82,400. 5.2% OF INDIVIDUALS LIVE BELOW POVERTY LEVEL
AND 3.3% OF FAMILIES LIVE BELOW POVERTY LEVEL (2009 ESTIMATES). (DATA
SOURCE: 2009 AMERICAN COMMUNITY SURVEY, U.S. CENSUS BUREAU; MARYLAND
STATE DATA CENTER, MARYLAND DEPARTMENT OF PLANNING.)
THE AVERAGE LIFE EXPECTANCY (YEARS) IS 79.1 FOR ALL RACES. (DATA SOURCE:
DEATH CERTIFICATE DATA, MARYLAND DIVISION OF HEALTH STATISTICS, MARYLAND

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COMMUNITIES. IN DOING SO, BALTIMORE WASHINGTON MEDICAL CENTER ASSESSES
NEEDS, SETS BUDGETS AND RESPONDS WITH SERVICES, PROGRAMS AND INDIVIDUAL
EFFORTS THAT MAKE A POSITIVE IMPACT ON MANY PEOPLE'S LIVES. WITH
REPRESENTATION FROM ALL UMMS HOSPITALS, THE MEDICAL SYSTEM'S COMMUNITY
HEALTH AND ADVOCACY COALITION COORDINATES THE EFFECTIVE AND EFFICIENT
UTILIZATION AND DEPLOYMENT OF RESOURCES FOR COMMUNITY-BASED ACTIVITIES AND
EVALUATES HOW SERVICES AND ACTIVITIES MEET TARGETED COMMUNITY NEEDS WITHIN
DEFINED GEOGRAPHIC AREAS. BWMC IS COMMITTED TO HEALTH EDUCATION, ADVOCACY,
PARTNERSHIPS AND PROGRAMS THAT IMPROVE ACCESS AND HEALTH AWARENESS FOR ALL
MARYLAND RESIDENTS.
COMMUNITY BENEFIT REPORT STATE FILINGS
SCHEDULE H, PART VI, LINE 7
MARYLAND

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization area 22

Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047 **Open to Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

BALTIMORE WASHINGTON MEDICAL CENTER, INC.

Employer identification number 52-0689917

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form			
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments X Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
L	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
b	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b	Х	
2				
	directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Х	
_				
3	Indicate which, if any, of the following the organization uses to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply.			
	X Compensation committee Written employment contract			
	X   Independent compensation consultant   X   Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
				v
a	Receive a severance payment or change-of-control payment from the organization or a related organization?	4a	Х	Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	_ X	Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Λ
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
3	compensation contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		X
-	If "Yes" to line 5a or 5b, describe in Part III.	0.5		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а	The organization?	6a		Х
b	Any related organization?	6b		Х
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		Х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

# Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

_		(B) Breakdown	of W-2 and/or 1099-MIS0	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	reported in prior Form 990 or Form 990-EZ
	(i)	0.	0.	0.	0.	0.	0.	
1 KAREN E. OLSCAMP	(ii)	396,935.	120 <b>,</b> 735.	61,756.	8,818.	2,734.	590,978.	
	(i)	0.	0.	0.	0.	0.	0.	
2 ROBERT A. CHRENCIK	(ii)	986 <b>,</b> 285.	659 <b>,</b> 250.	9,032.	179,103.	19 <b>,</b> 769.	1,853,439.	
	(i)	0.	0.	0.	0.	0.	0.	
3 ALFRED A. PIETSCH	(ii)	232,182.	71 <b>,</b> 355.	117,218.	8,883.	19 <b>,</b> 228.	448,866.	
	(i)	0.	0.	0.	0.	0.	0.	
4 LAWRENCE S. LINDER	(ii)	301,495.	75 <b>,</b> 854.	44,248.	9,041.	18,083.	448,721.	
	(i)	0.	0.	0.	0.	0.	0.	
5 COLLEEN H. ROACH	(ii)	199,216.	43,999.	5,969.	27 <b>,</b> 828.	1,986.	278,998.	
	(i)	0.	0.	0.	0.	0.	0.	
6 FRANK V. VENUTO	(ii)	164,011.	37,400.	5,529.	18,889.	27,991.	253,820.	
	(i)	0.	0.	0.	0.	0.	0.	
7 KATHLEEN C. MCCOLLUM	(ii)	193,980.	50 <b>,</b> 880.	23 <b>,</b> 500.	7,676.	19,006.	295,042.	
	(i)	824,513.	234,740.	1,439.	8 <b>,</b> 575.	17,548.	1,086,815.	
8 CLIFFORD SOLOMON	(ii)	0.		0.	0.	0.	0.	
	(i)	328 <b>,</b> 903.	16,700.	2 <b>,</b> 337.	14,700.	16,908.	379,548.	
9 AYOKU S. OKETUNJI	(ii)	0.	0.	0.	0.	0.	0.	
	(i)	327 <b>,</b> 079.	18 <b>,</b> 500.	160.	8 <b>,</b> 575.	16,878.	371,192.	
10 BRUCE VANDERVER	(ii)	0.	0.	0.	0.	0.	0.	
	(i)	324,439.	16 <b>,</b> 554.	325.	14,700.	16,969.	372 <b>,</b> 987.	
11 KOFI OWUSU BOAITEY	(ii)	0.	0.	0.	0.	0.	0.	
	(i)	335 <b>,</b> 640.	3,038.	789.	8 <b>,</b> 575.	17 <b>,</b> 359.	365,401.	
12 GALEN OHNMACHT	(ii)	0.	0.	0.	0.	0.	0.	
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2010 52-0689917 Page **3** 

### Part | Supplemental Information

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

HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES

SCHEDULE J, PART I, LINE 1A

UNIVERSITY OF MARYLAND MEDICAL SYSTEM EXECUTIVES RECEIVE A BENEFIT

PACKAGE PAID BY A RELATED ORGANIZATION WHICH MAY BE USED TOWARDS HEALTH

CLUB DUES OR OTHER HEALTH MAINTENANCE PROGRAMS. SUCH BENEFITS ARE CAPPED

AT \$7,000, \$5,000 OR \$3,000 DEPENDING ON JOB TITLE AS DESCRIBED IN THE

PROGRAM DOCUMENTS.

SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN

SCHEDULE J, PART I, LINE 4B

DURING THE FISCAL YEAR END JUNE 30, 2011, CERTAIN OFFICERS AND KEY
EMPLOYEES PARTICIPATED IN THE UNIVERSITY OF MARYLAND MEDICAL SYSTEM

(UMMS) SUPPLEMENTAL NONQUALIFIED PLAN. THE INDIVIDUALS, LISTED BELOW

HAVE NOT VESTED IN THE PLAN THEREFORE THE ACCRUED CONTRIBUTION TO THE

PLAN FOR THE FISCAL YEAR IS REPORTED ON SCHEDULE J, PART II, COLUMN (C),

RETIREMENT AND OTHER DEFERRED COMPENSATION.

ROBERT A. CHRENCIK

FRANK V. VENUTO

Schedule J (Form 990) 2010 52-0689917 Page **3** 

### Part | Supplemental Information

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

COLLEEN H. ROACH

DURING THE FISCAL YEAR END JUNE 30, 2011, CERTAIN OFFICERS AND KEY EMPLOYEES PARTICIPATED IN THE UNIVERSITY OF MARYLAND MEDICAL SYSTEM (UMMS) SUPPLEMENTAL NONQUALIFIED PLAN. THE OFFICERS AND KEY EMPLOYEES LISTED BELOW HAVE VESTED IN THE PLAN IN A PRIOR YEAR, THEREFORE THE CONTRIBUTION TO THE PLAN FOR THE FISCAL YEAR IS REPORTED AS TAXABLE COMPENSATION AND REPORTED ON SCHEDULE J, PART II, COLUMN (BIII), OTHER REPORTABLE COMPENSATION.

KAREN E. OLSCAMP

ALFRED A. PIETSCH

LAWRENCE S. LINDER

KATHLEEN C. MCCOLLUM

## **SCHEDULE L** (Form 990 or 990-EZ)

# **Transactions With Interested Persons**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. OMB No. 1545-0047 Open To Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

BALTI	MORE WASHINGTON MEDICAL CEN	NTER	, II	NC.				52	-068	991	7		
Part I	Excess Benefit Transactions (section Complete if the organization answere								Z, Pa	rt V, li	ine 40	b.	
1	(a) Name of disqualified person				(	<b>b)</b> Description	on of tran	saction	1			(c)	Corrected
	(a) Name of disqualities person					b) Description	JII OI (I'dii	Judition				Ye	es No
_(1)													$\perp$
(2)													
(3)													$\perp$
_(4)													$\bot$
_(5)													$\bot$
(6)													
ur	nter the amount of tax imposed on the ornder section 4958									* \$_ * \$_			
Part II	Complete if the organization answere												
	(a) Name of interested person and purpose			n to or from panization?	(c) Original principal amount	(d) Balar	nce due	(e) In (	default?	by bo	proved ard or nittee?	(g) W agreer	
			То	From				Yes	No	Yes	No	Yes	No
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													<u> </u>
(9)													<u> </u>
(10)													
Total .	<u> </u>				▶\$								
Part III	Grants or Assistance Benefiting Complete if the organization answere	Inter	este	d Per	sons.								
	(a) Name of interested person	(b)	Relati	ionship	between interested perso organization	on and the	(c)	Amoui	nt and	type c	of assis	stance	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)												-	

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2010

(10)

Page 2

**Business Transactions Involving Interested Persons.** 

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organi	aring of zation's nues?
				Yes	No
(1) TECH USA, LLC	CEO OF TECH USA-BD MEMBER	216,717.	SEE SCHEDULE L, PART V		х
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(7) (8)					
(9)					
(10)					

#### Part V **Supplemental Information**

Schedule L (Form 990 or 990-EZ) 2010

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS THOMAS B. HOWELL, A BOARD MEMBER OF BALTIMORE WASHINGTON MEDICAL CENTER, IS ALSO THE CHIEF EXECUTIVE OFFICER OF TECH USA, LLC. DURING THE YEAR, TECH USA, LLC PROVIDED CONSULTING SERVICES TO BALTIMORE WASHINGTON MEDICAL CENTER AT FAIR MARKET VALUE. TECH USA, LLC WAS ALSO PROVIDING CONSULTING SERVICES TO BALTIMORE WASHINGTON MEDICAL CENTER PRIOR TO MR. HOWELL JOINING THE BOARD.

# SCHEDULE O

(Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Name of the organization

BALTIMORE WASHINGTON MEDICAL CENTER, INC.

Employer identification number
52-0689917

MEMBER DISCLOSURE

FORM 990, PART VI, SECTION A, QUESTION 6 AND 7

BALTIMORE WASHINGTON MEDICAL SYSTEM, INC. (BWMS) IS THE SOLE MEMBER OF

BALTIMORE WASHINGTON MEDICAL CENTER, INC. (BWMC). BWMS MAY ELECT ONE OR

MORE BOARD MEMBERS OF THE GOVERNING BODY AND ALL DECISIONS OF THE

GOVERNING BODY MUST BE APPROVED BY BWMS.

FORM 990 REVIEW PROCESS

FORM 990, PART VI, LINE 11B

THE IRS FORM 990 IS PREPARED AND REVIEWED BY THE ACCOUNTING FIRM OF GRANT THORNTON. ACCOUNTING PERSONNEL IN FINANCE SHARED SERVICES AT THE UNIVERSITY OF MARYLAND MEDICAL SYSTEM GATHER THE INFORMATION NEEDED TO COMPLETE THE RETURN AND INPUT THE DATA INTO THE GRANT THORNTON TAX ORGANIZER.

WHEN ALL DATA HAS BEEN ENTERED, THE INFORMATION IS SUBMITTED TO GRANT
THORNTON FOR IMPORTATION INTO THEIR TAX SOFTWARE. AT THIS POINT, GRANT
THORNTON STAFF MEMBERS REVIEW THE DATA, ASK FOR ADDITIONAL INFORMATION IF
NEEDED AND PREPARE THE TAX RETURN. EACH RETURN IS REVIEWED AT SEVERAL
LEVELS AT GRANT THORNTON INCLUDING THE TAX PARTNER. AFTER THEIR REVIEW
PROCESS, A DRAFT RETURN IS SENT TO THE ACCOUNTING STAFF AT UMMS FOR AN
IN-HOUSE REVIEW.

UPON COMPLETION OF THE IN-HOUSE REVIEW, GRANT THORNTON IS INSTRUCTED TO

MAKE ANY NECESSARY CHANGES AND TO PREPARE THE FINAL TAX RETURN. THE FINAL RETURN UNDERGOES ANOTHER REVIEW BY THE ACCOUNTING STAFF AT FINANCE SHARED SERVICES AND IS ALSO REVIEWED BY THE ACCOUNTING MANAGER, THE DIRECTOR OF FINANCIAL REPORTING, THE VICE PRESIDENT OF FINANCE AND THE CFO, WHO SIGNS THE RETURN.

PRIOR TO FILING THE IRS FORM 990, THE ORGANIZATION'S BOARD CHAIRMAN,
TREASURER, AUDIT COMMITTEE CHAIRMAN, EXECUTIVE COMMITTEE CHAIRMAN OR
OTHER MEMBER OF THE BOARD WITH SIMILAR AUTHORITY WILL REVIEW THE IRS FORM
990. AT THE DISCRETION OF THE REVIEWING BOARD MEMBER, SUCH MEMBER WILL
BRING ANY ISSUES OR QUESTIONS RELATED TO THE COMPLETED IRS FORM 990 TO
THE ATTENTION OF THE BOARD. NOTWITHSTANDING THE ABOVE, A BOARD
RESOLUTION IS NOT REQUIRED FOR THE FILING OF THE ORGANIZATION'S IRS FORM
990. EACH BOARD MEMBER IS PROVIDED WITH A COPY OF THE FINAL IRS FORM 990
BEFORE FILING.

CONFLICT OF INTEREST POLICY MONITORING & ENFORCEMENT

FORM 990, PART VI, LINE 12C

THE ORGANIZATION'S OFFICERS, DIRECTORS, EMPLOYEES AND MEDICAL STAFF

MEMBERS, AS APPLICABLE, SHALL DISCLOSE CONFLICTS OF INTEREST OR POTENTIAL

CONFLICTS OF INTEREST BETWEEN THEIR PERSONAL INTERESTS AND THE INTERESTS

OF THE ORGANIZATION, OR ANY ENTITY CONTROLLED BY OR OWNED IN SUBSTANTIAL

PART BY THE ORGANIZATION.

A QUESTIONNAIRE WHICH DISCLOSES POTENTIAL CONFLICTS OF INTEREST IS
DISTRIBUTED ANNUALLY TO ALL OFFICERS, DIRECTORS AND KEY EMPLOYEES. THE

GENERAL COUNSEL OF THE UNIVERSITY OF MARYLAND MEDICAL SYSTEM CORPORATION (UMMSC) REVIEWS THE RESPONSES FOR UMMSC, UNIVERSITY SPECIALTY HOSPITAL AND JAMES LAWRENCE KERNAN HOSPITAL. THE CEO OR CFO OF EACH OF THE OTHER ENTITIES IN THE UNIVERSITY OF MARYLAND MEDICAL SYSTEM REVIEWS THE RESPONSES FOR THOSE ENTITIES.

THE GENERAL COUNSEL, IN CONSULTATION WITH THE AUDIT COMMITTEE, IF

NECESSARY, WOULD DETERMINE IF A CONFLICT OF INTEREST EXISTED FOR UMMSC,

UNIVERSITY SPECIALTY HOSPITAL AND JAMES LAWRENCE KERNAN HOSPITAL. WITH

RESPECT TO THE OTHER ENTITIES IN THE UNIVERSITY OF MARYLAND MEDICAL

SYSTEM, THE GENERAL COUNSEL MAY BE CALLED FOR CONSULT. IF SO, THE

GENERAL COUNSEL MAY CONSULT THE AUDIT COMMITTEE, IF NECESSARY.

WHENEVER A CONFLICT OR POTENTIAL CONFLICT OF INTEREST EXISTS, THE NATURE OF THE CONFLICT OR POTENTIAL CONFLICT OF INTEREST MUST BE DISCLOSED IN WRITING TO THE ORGANIZATION'S BOARD, BOARD COMMITTEE, AN OFFICER OF THE ORGANIZATION OR OTHER APPROPRIATE EXECUTIVE. SUCH INDIVIDUAL HAVING A POTENTIAL CONFLICT OF INTEREST SHALL PLAY NO ROLE ON BEHALF OF THE ORGANIZATION, OR ANY ORGANIZATION CONTROLLED OR SUBSTANTIALLY OWNED, IN ANY TRANSACTION IN WHICH A CONFLICT EXISTS.

ALL INVITATIONS FOR BIDS, PROPOSALS OR SOLICITATIONS FOR OFFERS INCLUDE
THE FOLLOWING PROVISION: ANY VENDOR, SUPPLIER OR CONTRACTOR MUST
DISCLOSE ANY ACTUAL OR POTENTIAL TRANSACTION WITH ANY ORGANIZATION
OFFICER, DIRECTOR, EMPLOYEE OR MEMBER OF THE MEDICAL STAFF, INCLUDING

FAMILY MEMBERS WITHIN FIVE DAYS OF THE TRANSACTION. FAILURE TO COMPLY WITH THIS PROVISION IS A MATERIAL BREACH OF AGREEMENT.

IN ADDITION, A BOARD DISCLOSURE REPORT IS FILED WITH THE MARYLAND HEALTH SERVICES COST REVIEW COMMISSION ON AN ANNUAL BASIS SHOWING ANY BUSINESS TRANSACTIONS BETWEEN THE BOARD MEMBERS AND THE ORGANIZATION.

PROCESS FOR DETERMINING COMPENSATION

FORM 990, PART VI, LINE 15

THE ORGANIZATION DETERMINES THE EXECUTIVE COMPENSATION PAID TO ITS

EXECUTIVES IN THE FOLLOWING MANNER PRESCRIBED IN THE IRS REGULATIONS:

EXECUTIVE COMPENSATION PACKAGES ARE DETERMINED BY A COMMITTEE OF THE

BOARD THAT IS COMPOSED ENTIRELY OF BOARD MEMBERS WHO HAVE NO CONFLICT OF

INTEREST.

THE COMMITTEE ACQUIRES CREDIBLE COMPARABILITY MARKET DATA CONCERNING THE COMPENSATION PACKAGES OF SIMILARLY SITUATED EXECUTIVES. THE COMMITTEE CAREFULLY REVIEWS THAT DATA, THE EXECUTIVE'S PERFORMANCE AND THE PROPOSED COMPENSATION PACKAGES DURING THE DECISION MAKING PROCESS.

THE COMMITTEE MEMORIALIZES ITS DELIBERATIONS IN DETAILED MINUTES REVIEWED AND ADOPTED AT THE NEXT-FOLLOWING MEETING.

THE COMMITTEE SEEKS AN OPINION OF COUNSEL THAT IT HAS MET THE REQUIREMENTS OF THE IRS INTERMEDIATE SANCTIONS REGULATIONS.

Employer identification number 52-0689917

THIS PROCESS IS USED TO DETERMINE THE COMPENSATION PACKAGES FOR ALL MANAGEMENT EMPLOYEES FROM THE VICE PRESIDENT LEVEL AND UP.

HOW DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC

FORM 990, PART VI, LINE 19

IN GENERAL, FINANCIAL AND TAX INFORMATION RELATING TO THE ORGANIZATION IS DEEMED PROPRIETARY AND NOT SUBJECT TO DISCLOSURE UPON REQUEST. HOWEVER, SPECIFIC PROVISIONS OF FEDERAL AND STATE LAW REQUIRE THE ORGANIZATION TO DISCLOSE CERTAIN LIMITED FINANCIAL AND TAX DATA UPON A SPECIFIC REQUEST FOR THAT INFORMATION.

REQUESTS FOR FORM 990 AND FORM 1023:

A REQUESTOR SEEKING TO REVIEW AND/OR OBTAIN A COPY OF THE ORGANIZATION'S IRS FORM 990 OR FORM 1023 AS FILED WITH THE INTERNAL REVENUE SERVICE, INCLUDING ALL SCHEDULES AND ATTACHMENTS, MAY APPEAR IN PERSON OR SUBMIT A WRITTEN REQUEST. THE MOST RECENT THREE YEARS OF IRS FORM 990 MAY BE REQUESTED.

IF THE REQUESTER APPEARS IN PERSON, THE INDIVIDUAL IS DIRECTED TO THE OFFICE OF THE CHIEF FINANCIAL OFFICER FOR THE ORGANIZATION AND THE FORM 990 AND/OR FORM 1023 ARE MADE AVAILABLE FOR INSPECTION. THE INDIVIDUAL IS PERMITTED TO REVIEW THE RETURN, TAKE NOTES AND REQUEST A COPY. IF REQUESTED, A COPY IS PROVIDED ON THE SAME DAY. A NOMINAL FEE IS CHARGED FOR MAKING THE COPIES. THE ORGANIZATION MAY HAVE AN EMPLOYEE PRESENT DURING THE PUBLIC INSPECTION OF THE DOCUMENT.

Name of the organization
BALTIMORE WASHINGTON MEDICAL CENTER, INC.

Employer identification number 52-0689917

WRITTEN REQUESTS FOR AN ENTITY'S FORM 990 OR FORM 1023 ARE DIRECTED IMMEDIATELY TO THE OFFICE OF THE CHIEF FINANCIAL OFFICER FOR THE ORGANIZATION. THE REQUESTED COPIES ARE MAILED WITHIN 30 DAYS OF THE REQUEST. REPRODUCTION FEES AND MAILING COSTS ARE CHARGED TO THE REQUESTOR.

CONFLICT OF INTEREST POLICY AND GOVERNING DOCUMENTS:

IF THE GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY OF OUR
ORGANIZATION ARE SUBJECT TO THE FEDERAL PUBLIC DISCLOSURE RULES (OR STATE
PUBLIC DISCLOSURE RULES), THESE DOCUMENTS WILL BE MADE PUBLICLY AVAILABLE
AS APPLICABLE LAW MAY REQUIRE. OTHERWISE, THE GOVERNING DOCUMENTS AND
CONFLICT OF INTEREST POLICY WILL BE PROVIDED TO THE PUBLIC AT THE
DISCRETION OF MANAGEMENT.

### RECONCILIATION OF NET ASSETS

FORM	990.	PART	XI,	LINE	5
	,,,,		/		_

FAS 158 ADJUSTMENT AT 06/30/10	(361,081)
FAS 158 ADJUSTMENT AT 06/30/11	4,735,907
TRANSFERS FROM BWMC FOUNDATION	750,000
CHANGE IN BWMC FD NET ASSETS	1,770
TOTAL	5,126,596

\_\_\_\_\_

2128878

52-0689917

### HOURS FOR RELATED ORGANIZATIONS

PART VII, SECTION A, COLUMN (B)

THE UNIVERSITY OF MARYLAND MEDICAL SYSTEM (UMMS) IS A MULTI-ENTITY HEALTH CARE SYSTEM INCLUDING 8 ACUTE CARE HOSPITALS AND VARIOUS SUPPORTING ENTITIES. A NUMBER OF INDIVIDUALS PROVIDE SERVICES TO VARIOUS ENTITIES WITHIN THE SYSTEM. IN GENERAL, THE OFFICERS AND KEY EMPLOYEES OF UMMS AVERAGE IN EXCESS OF 40 HOURS PER WEEK SERVING THE DIFFERENT ENTITIES THE COMPRISE UMMS.

### TAX EXEMPT BONDS

PURSUANT TO A MASTER LOAN AGREEMENT DATED JUNE 20, 1991 (THE "MASTER LOAN AGREEMENT"), AS AMENDED, THE UNIVERSITY OF MARYLAND MEDICAL SYSTEM CORPORATION (THE "CORPORATION") AND SEVERAL OF ITS SUBSIDIARIES HAVE ISSUED DEBT THROUGH THE MARYLAND HEALTH AND HIGHER EDUCATION FACILITY AUTHORITY (THE "AUTHORITY"). AS SECURITY FOR THE PERFORMANCE OF THE BOND OBLIGATION UNDER THE MASTER LOAN AGREEMENT, THE AUTHORITY MAINTAINS A SECURITY INTEREST IN THE REVENUE OF THE OBLIGORS. THE MASTER LOAN AGREEMENT CONTAINS CERTAIN RESTRICTIVE COVENANTS. THESE COVENANTS REQUIRE THAT RATES AND CHARGES BE SET AT CERTAIN LEVELS, LIMIT INCURRENCE OF ADDITIONAL DEBT, REQUIRE COMPLIANCE WITH CERTAIN OPERATING RATIOS AND RESTRICT THE DISPOSITION OF ASSETS.

THE OBLIGATED GROUP UNDER THE MASTER LOAN AGREEMENT INCLUDES THE

CORPORATION, UNIVERSITY SPECIALTY HOSPITAL, INC., THE JAMES LAWRENCE

KERNAN HOSPITAL, INC., MARYLAND GENERAL HOSPITAL, INC., BALTIMORE

WASHINGTON MEDICAL CENTER, INC., SHORE HEALTH SYSTEM, INC., CHESTER RIVER

Name of the organization
BALTIMORE WASHINGTON MEDICAL CENTER, INC.

Employer identification number 52-0689917

HEALTH SYSTEM, INC. AND THE UNIVERSITY OF MARYLAND MEDICAL SYSTEM FOUNDATION, INC. EACH MEMBER OF THE OBLIGATED GROUP IS JOINTLY AND SEVERALLY LIABLE FOR THE REPAYMENT OF THE OBLIGATIONS UNDER THE MASTER LOAN AGREEMENT OF THE CORPORATION'S \$994,560,000 OF OUTSTANDING AUTHORITY BONDS ON JUNE 30, 2011.

ALL OF THE BONDS WERE ISSUED IN THE NAME OF THE UNIVERSITY OF MARYLAND MEDICAL SYSTEM CORPORATION AND ARE REPORTED ON SCHEDULE K OF ITS FORM 990.

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE MISSION OF BALTIMORE WASHINGTON MEDICAL CENTER IS TO PROVIDE THE HIGHEST QUALITY HEALTHCARE SERVICES TO THE COMMUNITIES WE SERVE. OUR VISION IS TO BE THE PREFERRED REGIONAL MEDICAL CENTER THROUGH NATIONALLY RECOGNIZED QUALITY, PERSONALIZED SERVICE AND OUTSTANDING PEOPLE.

ATTACHMENT 2

FORM 990, PART III - PROGRAM SERVICE, LINE 4A

BALTIMORE WASHINGTON MEDICAL CENTER, INC. IS A COMMUNITY HOSPITAL WITH 321 LICENSED BEDS. 19,797 PATIENTS WERE ADMITTED IN FISCAL YEAR ENDED JUNE 30, 2011, ACCOUNTING FOR 82,260 PATIENT DAYS OF CARE. 104,284 PATIENTS WERE TREATED IN THE CENTER'S EMERGENCY DEPARTMENT. 15,198 PATIENTS REQUIRED SURGICAL PROCEDURES IN THE CENTER'S OPERATING AND ENDOSCOPY ROOMS.

Name of the organization BALTIMORE WASHINGTON MEDICAL CENTER, INC. Employer identification number 52-0689917

ATTACHMENT 2 (CONT'D)

THE MEDICAL CENTER TREATED 382,605 PATIENTS IN THEIR ANCILLARY DEPARTMENTS: LABORATORY, RADIOLOGY, PULMONARY, RESPIRATORY, REHABILITATION, OP-INFUSION AND EEG-SLEEP STUDIES.

THE MEDICAL CENTER EMPLOYED 3,002 EMPLOYEES IN CALENDAR YEAR 2010.

THE CENTER'S MISSION IS TO PROVIDE QUALITY HEALTH CARE TO ALL, REGARDLESS OF RACE, CREED, SEX, NATIONAL ORIGIN, AGE, HANDICAP OR ABILITY TO PAY. BALTIMORE WASHINGTON MEDICAL CENTER ALSO PROVIDES NUMEROUS FREE PROGRAMS AND SERVICES SUCH AS HEALTH CARE SEMINARS, BLOOD PRESSURE AND CHOLESTEROL SCREENINGS, EXERCISE PROGRAMS, PUBLIC SPEAKING ENGAGEMENTS, ETC. THE CENTER'S FACILITIES ARE ALSO UTILIZED BY MANY PUBLIC SERVICE GROUPS AND ORGANIZATIONS THROUGHOUT THE YEAR AT NO CHARGE.

DURING FISCAL YEAR ENDED JUNE 30, 2011, BALTIMORE WASHINGTON MEDICAL CENTER PROVIDED \$9,945,668 OF CHARITY CARE TO THOSE WHO QUALIFIED UNDER REGULATORY GUIDELINES AND WROTE OFF ANOTHER \$21,447,074 OF PATIENT SERVICE REVENUE AS BAD DEBTS.

ATTACHMENT 3

PART VII - CONTINUATION OF OFFICERS, DIRECTORS, TRUSTEES, KEY EMPLOYEES AND HIGHEST COMPENSATED EMPLOYEES

(1)=IND.TRUSTEE/DIR. (2)=INS.TRUSTEE (3)=OFFICER (4)=KEY EMP. (5)=HIGHEST COMP. (6)=FORMER

(C) POSITION

(A) NAME AND TITLE

(B) HOURS (1)(2)(3)(4)(5)(6) (D) ORG. (E) REL. ORG. (F) OTHER

COMPENSATION FROM

29 GALEN OHNMACHT PHYSICIAN

40.00

339,467. Х

0. 25,934.

Name of the organization	Employer identification number
BALTIMORE WASHINGTON MEDICAL CENTER, INC.	52-0689917
	ATTACHMENT 4

# FORM 990, PART VII, COLUMN B - ESTIMATED AVERAGE PER WEEK

NAME AND TITLE	HOURS DEVOTED FOR RELATED ORGANIZATION
KAREN E. OLSCAMP	
PRESIDENT & CEO	40.00
ROBERT A. CHRENCIK	
DIRECTOR	40.00
ALFRED A. PIETSCH	
VP-FINANCE/CFO	40.00
LAWRENCE S. LINDER	
SVP & CMO	40.00
COLLEEN H. ROACH	
VP & CNO	40.00
FRANK V. VENUTO	
VP-HR	40.00
KATHLEEN C. MCCOLLUM	
SVP - BUS DEVEL	40.00

ATTACHMENT	5	

# 990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
WHITING TURNER CONTRACTING COMPANY PO BOX 17596 BALTIMORE, MD 21297	CONSTRUCTION	10,010,138.
UNIV OF MD SURGICAL ASSOCIATES 110 S PACA STREET BALTIMORE, MD 21201	PHYSICIANS SERVICES	573,885.
UNIV OF MD RADIOLOGY ONCOLOGY 22 S GREENE STREET BALTIMORE, MD 20201	PHYSICIANS SERVICES	636,565.
SEVERN ANESTHESIA SERVICES PO BOX 403 MILLERSVILLE, MD 21108	PHYSICIANS SERVICES	1,323,477.
KELLY & ASSOCIATES 301 INTERNATIONAL CIRCLE HUNT VALLEY, MD 21030	INSURANCE	1,949,100.
TOTAL COM	IPENSATION	14,493,165.

# **Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047 Open to Public

Inspection

Department of the Treasury Internal Revenue Service

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990.

See separate instructions.

Name of the organization

BALTIMORE WASHINGTON MEDICAL CENTER, INC.

Employer identification number 52-0689917

Part I Identification of Disregarded Entities (Complete if the organization	n answered "Yes" o	on Form 990, Part	IV, line 33.)		
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	<b>(d)</b> Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
		1			l

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had Part II one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5	g) 512(b)(13) rolled tity?
						Yes	No
(1) BALTIMORE WASHINGTON EMERGENCY PHYS INC 52-175633	26						
301 HOSPITAL DRIVE GLEN BURNIE, MD 21061	HEALTH CARE	MD	501 (C) (3)	11	BWMS		Х
(2) BALTIMORE WASHINGTON HEALTHCARE SERVICES 52-18302	43						
301 HOSPITAL DRIVE GLEN BURNIE, MD 21061	HEALTH CARE	MD	501 (C) (3)	11	BWMS		Х
(3) BALTIMORE WASHINGTON MEDICAL SYSTEM INC 52-18302	42						
301 HOSPITAL DRIVE GLEN BURNIE, MD 21061	HEALTH CARE	MD	501 (C) (3)	11	UMMSC		X
(4) BW MEDICAL CENTER FOUNDATION INC 52-18136	56						
301 HOSPITAL DRIVE GLEN BURNIE, MD 21061	FUNDRAISING	MD	501 (C) (3)	11	BWMS		X
(5) NORTH ARUNDEL DEVELOPMENT CORPORATION 52-13184	04						
301 HOSPITAL DRIVE GLEN BURNIE, MD 21061	REAL ESTATE	MD	501 (C) (2)		BWMS		X
(6) NORTH COUNTY CORPORATION 52-15913	55						
301 HOSPITAL DRIVE GLEN BURNIE, MD 21061	REAL ESTATE	MD	501 (C) (2)		BWMS		Х
(7) CHESTER RIVER HEALTH FOUNDATION INC 52-13388	61						
100 BROWN STREET CHESTERTOWN, MD 21620	FUNDRAISING	MD	501 (C) (3)	11	CRHS		Х

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

# **Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. See separate instructions. Open to Public Inspection

Name of the organization Employer identification number 52-0689917 BALTIMORE WASHINGTON MEDICAL CENTER, INC.

Part I	Identification of Disregarded Entities (Complete if the organization	n answered "Yes" o	on Form 990, Part	IV, line 33.)		
	(a) Name, address, and EIN of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
_(1)						
_(2)						
_(3)						
_(4)						
_(5)						
<u>(6)</u>						
-	II of a spirit T - 10 in the spirit T		1 1157 11	- 000 D 1	D. / II. O. / I	

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had Part II one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of rela	ated organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5	g) 512(b)(13) rolled tity?
							Yes	No
(1) CHESTER RIVER HEALTH SYSTEM INC	52-2046500							
100 BROWN STREET	CHESTERTOWN, MD 21620	HEALTH CARE	MD	501 (C) (3)	11	UMMSC		Х
(2) CHESTER RIVER HOSPITAL CENTER	52-0679694							
100 BROWN STREET	CHESTERTOWN, MD 21620	HEALTH CARE	MD	501 (C) (3)	03	CRHS		Х
(3) CHESTER RIVER MANOR INC	52-6070333							
200 MORGNEC ROAD	CHESTERTOWN, MD 21620	HEALTH CARE	MD	501 (C) (3)	11	CRHS		Х
(4) MARYLAND GENERAL CLINICAL PRACTICE (	52-1566211							
827 LINDEN AVENUE	BALTIMORE, MD 21201	HEALTH CARE	MD	501 (C) (3)	11	MGHS		X
(5) MARYLAND GENERAL COMM HEALTH FOUNDAT	52-2147532							
827 LINDEN AVENUE	BALTIMORE, MD 21201	FUNDRAISING	MD	501 (C) (3)	11	MGHS		Х
(6) MARYLAND GENERAL HEALTH SYSTEMS INC	52-1175337							
827 LINDEN AVENUE	BALTIMORE, MD 21201	HEALTH CARE	MD	501 (C) (3)	11	UMMSC		Х
(7) MARYLAND GENERAL HOSPITAL INC	52-0591667							
827 LINDEN AVENUE	BALTIMORE, MD 21201	HEALTH CARE	MD	501 (C) (3)	03	MGHS		Х

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

# **Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. See separate instructions. Open to Public Inspection

BALTIMORE WASHINGTON MEDICAL CENTER, INC.

Employer identification number 52-0689917

Part I	Identification of Disregarded Entities (Complete if the organization	n answered "Yes" o	on Form 990, Part	IV, line 33.)		
	(a) Name, address, and EIN of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	<b>(d)</b> Total income	(e) End-of-year assets	(f) Direct controlling entity
_(1)						
(2)						
(3)						
<u>(4)</u>						
<u>(5)</u>						
<u>(6)</u>						

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had Part II one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5	g) 512(b)(13) rolled tity?
						Yes	No
(1) CARE HEALTH SERVICES INC 52-15102	69						
219 SOUTH WASHINGTON STREET EASTON, MD 21601	HEALTH CARE	MD	501 (C) (3)	11	SHS		Х
(2) DORCHESTER GENERAL HOSPITAL FOUNDATION 52-17032	42						
219 SOUTH WASHINGTON STREET EASTON, MD 21601	FUNDRAISING	MD	501 (C) (3)	11	SHS		Х
(3) MEMORIAL HOSPITAL FOUNDATION INC 52-128208	80						
219 SOUTH WASHINGTON STREET EASTON, MD 21601	FUNDRAISING	MD	501 (C) (3)	11	SHS		X
(4) SHORE CLINICAL FOUNDATION INC 52-18741:	11						
219 SOUTH WASHINGTON STREET EASTON, MD 21601	HEALTH CARE	MD	501 (C) (3)	11	SHS		X
(5) SHORE HEALTH SYSTEM INC 52-061053	38						
219 SOUTH WASHINGTON STREET EASTON, MD 21601	HEALTH CARE	MD	501 (C) (3)	03	UMMSC		X
(6) JAMES LAWRENCE KERNAN HOSP ENDOW FD 23-73607	43						
2200 KERNAN DRIVE BALTIMORE, MD 21207	FUNDRAISING	MD	501 (C) (3)	11	UMMSC		X
(7) JAMES LAWRENCE KERNAN HOSPITAL INC 52-059163	39						
2200 KERNAN DRIVE BALTIMORE, MD 21207	HEALTH CARE	MD	501 (C) (3)	03	UMMSC		Х

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

# **Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047 Open to Public

52-0689917

Department of the Treasury Internal Revenue Service

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990.

See separate instructions. Inspection Employer identification number

Name of the organization BALTIMORE WASHINGTON MEDICAL CENTER, INC.

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
_(1)					
<u>(2)</u>					
<u>(4)</u>					
<u>(5)</u>					
<u>(6)</u>					

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had Part II one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 8	(g) 512(b)(13) trolled tity?
						Yes	No
(1) SHIPLEYS CHOICE MEDICAL PARK INC 04-3643849							
22 SOUTH GREENE STREET BALTIMORE, MD 21201	REAL ESTATE	MD	501 (C) (2)		UMMSC		Х
(2) UMMS FOUNDATION, INC. 52-2238893							
22 SOUTH GREENE STREET BALTIMORE, MD 21201	FUNDRAISING	MD	501 (C) (3)	11	UMMSC		Х
(3) UNIVERSITY OF MD MEDICAL SYSTEM CORP 52-1362793							
22 SOUTH GREENE STREET BALTIMORE, MD 21201	HEALTH CARE	MD	501 (C) (3)	03	UMMSC		Х
(4) UNIVERSITY SPECIALTY HOSPITAL 52-0882914							
611 SOUTH CHARLES STREET BALTIMORE, MD 21230	HEALTH CARE	MD	501 (C) (3)	03	UMMSC		Х
(5)							
_(6)							
_(7)							

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

52-0689917 Schedule R (Form 990) 2010 Page 2

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 Part III because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h Disprop alloca	ortionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	aging ner?	(k) Percentage ownership
							Yes	No		Yes	No	
(1) ARUNDEL PHYSICIANS ASSOCIATES												
301 HOSPITAL DRIVE	HEALTH CARE	MD	N/A									
(2) CENTRAL MARYLAND RADIOLOGY ONC												
10710 CHARTER DRIVE	HEALTH CARE	MD	N/A									
(3) CENTRAL MD REHABILITATION CENT												
22 SOUTH GREENE STREET	HEALTH CARE	MD	N/A									
(4) HELEN P DENIT CANCER TREATMENT												
22 SOUTH GREENE STREET	HEALTH CARE	MD	N/A									
(5) INNOVATIVE HEALTH LLC 52-19972												
29165 CANVASBACK DRIVE, SUITE	BILLING	MD	N/A									
(6) NORTH ARUNDEL PET CENTER LLC 2												
301 HOSPITAL DRIVE	HEALTH CARE	MD	N/A									
(7) NORTH ARUNDEL SENIOR LIVING LL												
301 HOSPITAL DRIVE	HEALTH CARE	MD	N/A									

**Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Part IV

		•		• • •			
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) ARUNDEL PHYSICIANS ASSOCIATES, INC. 52-1992649							
301 HOSPITAL DRIVE GLEN BURNIE, MD 21061	HEALTH CARE	MD	N/A	C CORP			
(2) BALTIMORE WASHINGTON HEALTH ENTERPRISES 52-1936656							
301 HOSPITAL DRIVE GLEN BURNIE, MD 21061	HEALTH CARE	MD	N/A	C CORP			
(3) BW PROFESSIONAL SERVICES, INC. 52-1655640							
301 HOSPITAL DRIVE GLEN BURNIE, MD 21061	HEALTH CARE	MD	N/A	C CORP			
(4) COUNCIL OF UNIT OWNERS OF MD GEN PC 52-1891126							
827 LINDEN AVENUE BALTIMORE, MD 21201	REAL ESTATE	MD	N/A	C CORP			
(5) SHORE HEALTH ENTERPRISES, INC. 52-1363201							
219 SOUTH WASHINGTON STREET EASTON, MD 21601	REAL ESTATE	MD	N/A	C CORP			
(6) UNIVERSITY LITHOTRIPTER, INC. 52-1451021							
22 SOUTH GREENE STREET BALTIMORE, MD 21201	HEALTH CARE	MD	N/A	C CORP			
(7) UMMS SELF INSURANCE TRUST 52-6315433							
22 SOUTH GREENE STREET BALTIMORE, MD 21201	INSURANCE	MD	N/A	TRUST			

Schedule R (Form 990) 2010 52-0689917 Page **2** 

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

Decause it had one of t	nore related orga	IIIZation	s ireated as a pe	in the strip during the	tax year.)							
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets			(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene	aging	(k) Percentage ownership
		• • • • • • • • • • • • • • • • • • • •					Yes	No	,	Yes	No	
(1) NAH/SUNRISE OF SEVERNA PARK LL												
301 HOSPITAL DRIVE	HEALTH CARE	MD	N/A									
(2) SHIPLEY'S IMAGING CENTER LLC 5												
22 SOUTH GREENE STREET	HEALTH CARE	MD	N/A									
(3) UNIVERSITYCARE LLC 52-1914892												
22 SOUTH GREENE STREET	HEALTH CARE	MD	N/A									
<u>(4)</u>												
<u>(5)</u>												
<u>(6)</u>												
_(7)												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

mile of because it had one of mere related organ		p	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	, , ,			
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) TERRAPIN INSURANCE COMPANY 98-0129232							
P.O. BOX 1109 KY1-1102 GRAND CAYMAN, CAYMAN ISLANDS CJ	INSURANCE	CJ	N/A	C CORP			
(2) NA EXECUTIVE BUILDING CONDO ASSN, INC.							
301 HOSPITAL DRIVE GLEN BURNIE, MD 21061	REAL ESTATE	MD	N/A	C CORP			
<u>(3)</u>							
<u>(4)</u>							
<u>(5)</u>							
<u>(6)</u>							
(7)							

Schedule R (Form 990) 2010 52-0689917 Page **3** 

# Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.  1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts III-IV?  a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity.  b Gift, grant, or capital contribution to other organization(s).  c Gift, grant, or capital contribution from other organization(s).  d Loans or loan guarantees to or for other organization(s).  e Loans or loan guarantees by other organization(s).  f Sale of assets to other organization(s).  g Purchase of assets from other organization(s).  b Exchange of assets.  i Lease of facilities, equipment, or other assets to other organization(s).  j Lease of facilities, equipment, or other assets from other organization(s).  p Performance of services or membership or fundraising solicitations for other organization(s).  p Performance of services or membership or fundraising solicitations by other organization(s).  s Sharing of facilities, equipment, mailing lists, or other assets.  n Sharing of paid employees.	 	1a 1b 1c 1d	Yes I	X X X
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity.  b Gift, grant, or capital contribution to other organization(s).  c Gift, grant, or capital contribution from other organization(s).  d Loans or loan guarantees to or for other organization(s).  e Loans or loan guarantees by other organization(s).  f Sale of assets to other organization(s).  g Purchase of assets from other organization(s).  Exchange of assets.  i Lease of facilities, equipment, or other assets to other organization(s).  j Lease of facilities, equipment, or other assets from other organization(s).  k Performance of services or membership or fundraising solicitations for other organization(s).  Performance of services or membership or fundraising solicitations by other organization(s).  sharing of facilities, equipment, mailing lists, or other assets.  n Sharing of paid employees.	 	1b 1c 1d		X X X
b Gift, grant, or capital contribution to other organization(s) c Gift, grant, or capital contribution from other organization(s) d Loans or loan guarantees to or for other organization(s) e Loans or loan guarantees by other organization(s)  f Sale of assets to other organization(s) g Purchase of assets from other organization(s)  Exchange of assets i Lease of facilities, equipment, or other assets to other organization(s)  j Lease of facilities, equipment, or other assets from other organization(s) k Performance of services or membership or fundraising solicitations for other organization(s) l Performance of services or membership or fundraising solicitations by other organization(s) Sharing of facilities, equipment, mailing lists, or other assets n Sharing of paid employees	 	1b 1c 1d	<u> </u>	X X X
b Gift, grant, or capital contribution to other organization(s) c Gift, grant, or capital contribution from other organization(s) d Loans or loan guarantees to or for other organization(s) e Loans or loan guarantees by other organization(s)  f Sale of assets to other organization(s) g Purchase of assets from other organization(s)  Exchange of assets i Lease of facilities, equipment, or other assets to other organization(s)  j Lease of facilities, equipment, or other assets from other organization(s) k Performance of services or membership or fundraising solicitations for other organization(s) l Performance of services or membership or fundraising solicitations by other organization(s) Sharing of facilities, equipment, mailing lists, or other assets n Sharing of paid employees	 	1c 1d	<u> </u>	X
c Gift, grant, or capital contribution from other organization(s)	 	1d	$\equiv$	
d Loans or loan guarantees to or for other organization(s)	 		$\equiv$	
e Loans or loan guarantees by other organization(s)  f Sale of assets to other organization(s)  g Purchase of assets from other organization(s)  h Exchange of assets  i Lease of facilities, equipment, or other assets to other organization(s)  j Lease of facilities, equipment, or other assets from other organization(s)  k Performance of services or membership or fundraising solicitations for other organization(s).  l Performance of services or membership or fundraising solicitations by other organization(s)  m Sharing of facilities, equipment, mailing lists, or other assets  n Sharing of paid employees	 	1e		
f Sale of assets to other organization(s).  g Purchase of assets from other organization(s).  h Exchange of assets.  i Lease of facilities, equipment, or other assets to other organization(s).  j Lease of facilities, equipment, or other assets from other organization(s).  k Performance of services or membership or fundraising solicitations for other organization(s)  l Performance of services or membership or fundraising solicitations by other organization(s).  m Sharing of facilities, equipment, mailing lists, or other assets.  n Sharing of paid employees.				Χ
purchase of assets from other organization(s)				
purchase of assets from other organization(s)		1f		Х
h Exchange of assets	,	1g		X
i Lease of facilities, equipment, or other assets to other organization(s)		1h		Х
j Lease of facilities, equipment, or other assets from other organization(s)		1i		Х
k       Performance of services or membership or fundraising solicitations for other organization(s)          I       Performance of services or membership or fundraising solicitations by other organization(s)          m       Sharing of facilities, equipment, mailing lists, or other assets          n       Sharing of paid employees	 			
k       Performance of services or membership or fundraising solicitations for other organization(s)          I       Performance of services or membership or fundraising solicitations by other organization(s)          m       Sharing of facilities, equipment, mailing lists, or other assets          n       Sharing of paid employees		1j	Х	
Performance of services or membership or fundraising solicitations by other organization(s)		1k		Х
m    Sharing of facilities, equipment, mailing lists, or other assets		11		Х
n Sharing of paid employees		1 m	-	X
		1n	+	X
o Reimbursement paid to other organization for expenses	 	111		
o Reimbursement paid to other organization for expenses		10		Х
		10	+	X
p Reimbursement paid by other organization for expenses		1p		
				Х
q Other transfer of cash or property to other organization(s)		1q	-	<u>х</u> Х
r Other transfer of cash or property from other organization(s)		1r		_X
If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and	 			

(a)  Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) NORTH COUNTY CORPORATION	J	257,816.	FMV
(2) NORTH ARUNDEL DEVELOPMENT CORPORATION	J	624,376.	FMV
<u>(3)</u>			
<u>(4)</u>			
<u>(5)</u>			
<u>(6)</u>			

JSA 0E1309 1.000 4219CV 700P

## Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a)  Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproportionate allocations?		(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No	(1 01111 1003)	Yes	s No
_(1)										
(2)										
<u>(3)</u>										
<u>(4)</u>										
<u>(5)</u>										
<u>(6)</u>										
<u>(7)</u>										
<u>(8)</u>										
<u>(9)</u>										
(10)										
(11)										
(12)										
(13)										
(14)										
(15)										
(16)										+

Schedule R (Form 990) 2010 Page 5

## Part VII

Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).



Consolidated Financial Statements and Schedules

June 30, 2011 and 2010

(With Independent Auditors' Report Thereon)

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KPMG LLP 1 East Pratt Street Baltimore, MD 21202-1128

#### **Independent Auditors' Report**

The Board of Directors University of Maryland Medical System Corporation:

We have audited the accompanying consolidated balance sheets of the University of Maryland Medical System Corporation and Subsidiaries (the Corporation) as of June 30, 2011 and 2010, and the related consolidated statements of operations, changes in net assets, and cash flows for the years then ended. These consolidated financial statements are the responsibility of the Corporation's management. Our responsibility is to express an opinion on these consolidated financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the consolidated financial statements are free of material misstatement. An audit includes consideration of internal control over financial reporting as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Corporation's internal control over financial reporting. Accordingly, we express no such opinion. An audit also includes examining, on a test basis, evidence supporting the amounts and disclosures in the consolidated financial statements, assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of the University of Maryland Medical System Corporation and Subsidiaries as of June 30, 2011 and 2010, and the results of their operations, changes in their net assets, and their cash flows for the years then ended in conformity with U.S. generally accepted accounting principles.

Our audits were made for the purpose of forming an opinion on the basic consolidated financial statements taken as a whole. The supplementary information included in schedules 1 through 8 is presented for purposes of additional analysis and is not a required part of the basic consolidated financial statements. Such information has been subjected to the auditing procedures applied in the audits of the basic consolidated financial statements and, in our opinion, is fairly stated in all material respects in relation to the consolidated financial statements taken as a whole.

KPMG LLP

October 27, 2011

## Consolidated Balance Sheets

June 30, 2011 and 2010

(In thousands)

Assets		2011	2010
Current assets: Cash and cash equivalents Assets limited as to use, current portion	\$	217,517 40,114	238,548 39,228
Accounts receivable: Patient accounts receivable, less allowance for doubtful accounts of \$161,124 and \$136,278 as of June 30, 2011		262.401	040.105
and 2010, respectively Other		262,421 24,579	249,127 24,155
Inventories Prepaid expenses and other current assets		32,181 51,871	30,230 67,681
Total current assets		628,683	648,969
Investments Assets limited as to use, less current portion Property and equipment, net Deferred financing costs, net Investments in joint ventures Other assets	_	406,850 505,466 1,298,650 7,547 169,220 9,925	281,108 490,119 1,240,114 8,661 107,851 8,329
Total assets	\$	3,026,341	2,785,151
Liabilities and Net Assets			
Current liabilities: Trade accounts payable Accrued payroll and benefits Advances from third-party payors Lines of credit Other current liabilities Long-term debt subject to short-term remarketing arrangements Current portion of long-term debt	\$	154,995 128,420 96,012 54,600 87,643 166,765 24,242	146,149 121,683 87,558 63,300 83,958 70,069 36,442
Total current liabilities		712,677	609,159
Long-term debt, less current portion and amount subject to short-term remarketing arrangements Other long-term liabilities Interest rate swap liabilities		869,372 87,858 105,400	959,243 105,794 128,575
Total liabilities		1,775,307	1,802,771
Net assets:     Unrestricted     Temporarily restricted     Permanently restricted		1,142,835 75,656 32,543	894,949 56,184 31,247
Total net assets	_	1,251,034	982,380
Total liabilities and net assets	\$ 	3,026,341	2,785,151

## Consolidated Statements of Operations

## Years ended June 30, 2011 and 2010

(In thousands)

		2011	2010
Unrestricted revenues, gains and other support:			
Net patient service revenue	\$	2,270,416	2,129,662
Other operating revenue:		2 200	2 200
State support Other revenue		3,200	3,200
Other revenue	_	70,588	66,106
Total unrestricted revenues, gains and other support		2,344,204	2,198,968
Operating expenses:			
Salaries, wages and benefits		1,041,344	988,399
Expendable supplies		380,222	357,793
Purchased services		336,281	312,381
Contracted services		139,710	140,844
Depreciation and amortization		129,012	117,766
Interest expense		40,341	40,051
Provision for bad debts		177,013	179,289
Total operating expenses		2,243,923	2,136,523
Operating income		100,281	62,445
Nonoperating income and expenses, net:			
Contributions		6,055	8,137
Equity in net income of joint ventures		20,534	3,514
Investment income		39,207	136
Change in fair value of investments		36,364	45,592
Change in fair value of undesignated interest rate swaps		18,640	(33,700)
Loss on early extinguishment of debt			(816)
Other nonoperating losses, net		(17,947)	(13,798)
Excess of revenues over expenses		203,134	71,510
Net assets released from restrictions used for the			
purchase of property and equipment		23,964	32,612
Other		20,788	(8,728)
Increase in unrestricted net assets	\$	247,886	95,394

Consolidated Statements of Changes in Net Assets Years ended June 30, 2011 and 2010

(In thousands)

	_	Unrestricted net assets	Temporarily restricted net assets	Permanently restricted net assets	Total
Balance at June 30, 2009	\$	799,555	76,204	28,160	903,919
Excess of revenues over expenses		71,510	_		71,510
Investment gains, net			3,338	136	3,474
State support for capital		_	7,965	· <del>-</del>	7,965
Contributions, net		_	21,011	2,866	23,877
Net assets released from restrictions used for			(F 900)		(£ 900)
operations and nonoperating activities  Net assets released from restrictions used for purchase		_	(5,890)	_	(5,890)
of property and equipment		32,612	(32,612)		
Change in economic and beneficial interests in the		32,012	(32,012)		
net assets of related organizations			(14,986)	85	(14,901)
Change in ownership interest of joint ventures		3,478	1,141		4,619
Change in fair value of designated interest rate swaps		(7,410)	_	_	(7,410)
Change in funded status of defined benefit pension plans		(4,766)		******	(4,766)
Other	_	(30)	13		(17)
Increase (decrease) in net assets	_	95,394	(20,020)	3,087	78,461
Balance at June 30, 2010		894,949	56,184	31,247	982,380
Excess of revenues over expenses		203,134			203,134
Investment gains, net			5,102	177	5,279
State support for capital			21,565		21,565
Contributions, net			17,058	1,079	18,137
Net assets released from restrictions used for			(0.000)		(0. (0.0)
operations and nonoperating activities		_	(3,639)	_	(3,639)
Net assets released from restrictions used for purchase of property and equipment		23,964	(23,964)		
Change in economic and beneficial interests in the		23,904	(23,904)	<del>_</del>	
net assets of related organizations			3,324	40	3,364
Change in ownership interest of joint ventures		2,268	102		2,370
Change in fair value of designated interest rate swaps		2,298	******		2,298
Change in funded status of defined benefit pension plans		16,322	_		16,322
Other	_	(100)	(76)		(176)
Increase in net assets	_	247,886	19,472	1,296	268,654
Balance at June 30, 2011	\$ _	1,142,835	75,656	32,543	1,251,034
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### Consolidated Statements of Cash Flows

## Years ended June 30, 2011 and 2010

## (In thousands)

		2011	2010
Cash flows from operating activities:			
Increase in net assets	\$	268,654	78,461
Adjustments to reconcile increase in net assets		•	,
to net cash provided by operating activities:			
Depreciation and amortization		129,012	117,766
Provision for bad debts		177,013	179,289
Amortization of bond premium and deferred financing costs		1,562	1,178
Net realized gains and change in fair value			
of investments		(70,293)	(38,703)
Loss on early extinguishment of debt			816
Equity in net income of joint ventures		(20,534)	(3,514)
Contribution of land held for sale			(1,800)
Decrease in economic and beneficial interests in net			
assets of related organizations		(3,364)	14,901
Change in fair value of interest rate swaps		(23,175)	40,649
Change in funded status of defined benefit pension plans		16,322	4,766
Increase in patient accounts receivable		(190,307)	(186,637)
Increase in other receivables, prepaid expenses,			
other current assets and other assets		(6,431)	(8,635)
(Increase) decrease in inventories		(1,951)	1,323
(Decrease) increase in trade accounts payable, accrued			
payroll and benefits, other current liabilities and other long-term liabilities		(23,940)	27,047
Increase in advances from third-party payors		8,454	3,030
Restricted contributions, investment income and state			
support		(44,981)	(35,316)
Net cash provided by operating activities		216,041	194,621
Cash flows from investing activities:			
Purchases and sales of investments and assets limited as			
to use, net		(44,076)	(153,660)
Purchases of property and equipment		(169,198)	(141,686)
Distributions from joint ventures, net		4,388	1,924
Investment in joint ventures		(39,954)	(26,750)
Change in deposit for undesignated interest rate swaps on			
hand with swap counterparty	_	11,438	(13,420)
Net cash used in investing activities		(237,402)	(333,592)

## Consolidated Statements of Cash Flows

## Years ended June 30, 2011 and 2010

(In thousands)

		2011	2010
Cash flows from financing activities:			
Proceeds from long-term debt	\$	26,750	245,942
Repayment of long-term debt and capital leases		(56,815)	(139,915)
(Repayments) draws on lines of credit, net		(8,700)	35,500
Change in deposit for designated interest rate swaps on hand with			
swap counterparty		3,514	(3,941)
Payment of debt issuance costs			(2,420)
Restricted contributions, investment income and state support	***************************************	35,581	35,316
Net cash provided by financing activities		330	170,482
Net (decrease) increase in cash and cash equivalents		(21,031)	31,511
Cash and cash equivalents, beginning of year		238,548	207,037
Cash and cash equivalents, end of year	\$	217,517	238,548
Supplemental disclosures of cash flow information:			
Cash paid during the year for interest	\$	41,802	37,269
Amount included in accounts payable for construction in progress		17,146	11,981
Supplemental disclosures of noncash information:			
Capital leases	\$	3,785	11,232
Contributed land	*	9,400	1,800
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Notes to Consolidated Financial Statements

June 30, 2011 and 2010

### (1) Organization and Summary of Significant Accounting Policies

## (a) Organization

The University of Maryland Medical System Corporation (the Corporation or UMMS) is engaged in providing comprehensive healthcare services through an integrated network of hospitals and other inpatient and outpatient clinical enterprises. The Corporation operates University Hospital, University of Maryland Marlene and Stewart Greenebaum Cancer Center (Greenebaum Cancer Center), and The R Adams Cowley Shock Trauma Center (Shock Trauma Center), collectively referred to as University of Maryland Medical Center (Medical Center) and is the sole member of The James Lawrence Kernan Hospital, Inc. (Kernan); University Specialty Hospital, Inc. (University Specialty); Maryland General Health Systems, Inc. (Maryland General); Baltimore Washington Medical System, Inc. (Baltimore Washington); Shore Health System, Inc. (Shore Health); Chester River Health System, Inc. (Chester River); University of Maryland Medical System Foundation, Inc. (UMMS Foundation); Shipley's Choice Medical Park, Inc. (Shipley's); and 36 South Paca Street, LLC (36 South Paca); each of which is described below. In addition, the Corporation has a majority interest in UniversityCARE, LLC (UCARE), and accordingly, it is a consolidated subsidiary of the Corporation. The Corporation also maintains equity interests in various unconsolidated joint ventures, which are described in note 4. All material intercompany balances and transactions have been eliminated in consolidation.

### **University of Maryland Medical Center**

The Medical Center is comprised of three operating divisions: University Hospital, Greenebaum Cancer Center and Shock Trauma Center. University Hospital is a tertiary teaching hospital located in Baltimore with 565 licensed beds. The Greenebaum Cancer Center is a 51-bed program which specializes in the treatment of cancer patients. The Shock Trauma Center is a program with 115 licensed beds which provides both treatment to victims of trauma and training in establishing shock trauma systems.

## The James Lawrence Kernan Hospital, Inc.

Kernan is comprised of a medical/surgical and rehabilitation hospital in Baltimore with 132 licensed beds, including 98 rehabilitation beds, 24 chronic care beds, 10 medical/beds; and off-site physical therapy facilities.

A related corporation, The James Lawrence Kernan Endowment Fund, Inc. (Kernan Endowment), is governed by a separate, independent board of directors and is required to hold investments and income derived therefrom for the exclusive benefit of Kernan. Accordingly, the accompanying consolidated financial statements reflect an economic interest in the net assets of the Kernan Endowment.

### University Specialty Hospital, Inc.

University Specialty is a 180-bed facility located in Baltimore providing chronic care.

Notes to Consolidated Financial Statements
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### Maryland General Health Systems, Inc.

Maryland General is a West Baltimore health system comprised of Maryland General Hospital, a 213-bed acute care hospital; a wholly owned subsidiary providing primary care; and a noncontrolling 25% interest in a managed care organization providing services primarily to Medicaid patients.

A related corporation, Maryland General Community Health Foundation, Inc. (Maryland General Foundation), is required to hold investments and income derived therefrom for the exclusive benefit of Maryland General. As of June 30, 2011, Maryland General Foundation had contributed all of its assets to Maryland General Hospital in support of future capital projects.

#### Baltimore Washington Medical System, Inc.

Baltimore Washington is a health system comprised of Baltimore Washington Medical Center, a 311-bed acute care hospital providing a broad range of services, and several wholly owned subsidiaries providing emergency physician and other services.

Baltimore Washington Medical Center Foundation, Inc. (BWMC Foundation) is governed by a separate, independent board of directors and is required to hold investments and income derived therefrom for the exclusive benefit of Baltimore Washington Medical Center. Accordingly, the accompanying consolidated financial statements reflect an economic interest in the net assets of the BWMC Foundation.

### Shore Health System, Inc.

Shore Health is a two-hospital health system located on the Eastern Shore of Maryland. Shore Health owns and operates Memorial Hospital, a 145-bed acute care hospital providing inpatient and outpatient services in Easton, Maryland; Dorchester Hospital, a 54-bed acute care hospital providing inpatient and outpatient services in Cambridge, Maryland; Memorial Hospital Foundation (Memorial Foundation), a nonprofit corporation established to solicit donations for the benefit of Memorial Hospital; and several other subsidiaries providing various outpatient and home care services.

Dorchester General Hospital Foundation, Inc. (Dorchester Foundation) is governed by a separate, independent board of directors to raise funds on behalf of Dorchester Hospital. Shore Health does not have control over the policies or decisions of the Dorchester Foundation, and accordingly, the accompanying consolidated financial statements reflect a beneficial interest in the net assets of the Dorchester Foundation.

#### Chester River Health System, Inc.

Chester River owns and operates Chester River Hospital Center (CRHC), a 53-bed acute care hospital providing inpatient and outpatient services to the residents of Kent and Queen Anne's counties; Chester River Health Foundation (Chester River Foundation), a nonprofit corporation established to solicit donations for the benefit of Chester River; and two other subsidiaries providing outpatient and homecare services.

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Notes to Consolidated Financial Statements
June 30, 2011 and 2010

### University of Maryland Medical System Foundation, Inc.

The UMMS Foundation, a not-for-profit foundation, was established for the purpose of soliciting contributions on behalf of the Corporation.

### 36 South Paca Street, LLC

36 South Paca is a single-member limited liability company that owns and operates a residential apartment building near the Corporation's Baltimore campus.

## University CARE, LLC

UCARE, a physician hospital organization was established as a joint venture between the Corporation and University Physicians, Inc. (UPI). The purpose of UCARE is to operate an integrated healthcare services delivery system in a manner that integrates the teaching and research missions of the Corporation, UPI and their affiliates with the delivery of care in a cost efficient manner. The Corporation's ownership percentage and income (loss) sharing percentage is 90% and UPI's percentage is 10%. Accordingly, the assets, liabilities, unrestricted net assets and operations of UCARE are consolidated with the Corporation in the accompanying consolidated financial statements, and UPI's ownership interest is treated as a noncontrolling interest.

#### Shipley's Choice Medical Park, Inc.

Shipley's, a wholly owned subsidiary, is a 501(c) (2) title-holding corporation, formed for the purpose of managing property investments located in Anne Arundel County. The operations of Shipley's are solely comprised of the management of this property.

#### (b) Basis of Presentation

The consolidated financial statements are prepared on the accrual basis of accounting in accordance with U.S. generally accepted accounting principles.

### (c) Cash Equivalents

Cash and cash equivalents consist of cash and interest-bearing deposits with maturities of three months or less from the date of purchase.

#### (d) Investments and Assets Limited as to Use

The Corporation's investment portfolio is classified as trading, and is reported in the consolidated balance sheets at its fair value, based on quoted market prices, at June 30, 2011 and 2010. Unrealized holding gains and losses on trading securities with readily determinable market values are included in nonoperating income. Investment income, including realized gains and losses, is included in nonoperating income in the accompanying consolidated statement of operations.

Assets limited as to use include investments set aside at the discretion of the board of directors for the replacement or acquisition of property and equipment, investments held by trustees under bond indenture agreements and self-insurance trust arrangements, and assets whose use is restricted by donors. Such investments are stated at fair value. Amounts required to meet current liabilities have

Notes to Consolidated Financial Statements
June 30, 2011 and 2010

been included in current assets in the consolidated balance sheets. Changes in fair values of donor-restricted investments are recorded in temporarily restricted net assets unless otherwise required by the donor or state law.

Assets limited as to use also include the Corporation's economic interests in financially interrelated organizations (note 12).

Alternative investments are recorded under the equity method of accounting. Underlying securities of these alternative investments may include certain debt and equity securities that are not readily marketable. Because certain investments are not readily marketable, their fair value is subject to additional uncertainty, and therefore values realized upon disposition may vary significantly from current reported values.

Investments are exposed to certain risks such as interest rate, credit and overall market volatility. Due to the level of risk associated with certain investment securities, changes in the value of investment securities could occur in the near term, and these changes could materially differ from the amounts reported in the accompanying consolidated financial statements.

### (e) Inventories

Inventories, consisting primarily of drugs and medical/surgical supplies, are carried at the lower of cost or market, on a first-in, first-out basis.

### (f) Economic Interests in Financially Interrelated Organizations

The Corporation recognizes its rights to assets held by recipient organizations, which accept cash or other financial assets from a donor and agree to use those assets on behalf of or transfer those assets, the return on investment of those assets, or both, to the Corporation. Changes in the Corporation's economic interests in these financially interrelated organizations are recognized in the consolidated statements of changes in net assets.

### (g) Property and Equipment

Property and equipment are stated at cost, or estimated fair value at date of contribution, less accumulated depreciation. Depreciation is provided on a straight-line basis over the estimated useful lives of the depreciable assets. The estimated useful lives of the assets are as follows:

Buildings 20 to 40 years
Building and leasehold improvements
Equipment 5 to 20 years
3 to 20 years

Interest costs incurred on borrowed funds less interest income earned on the unexpended bond proceeds during the period of construction are capitalized as a component of the cost of acquiring those assets.

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Notes to Consolidated Financial Statements

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Gifts of long-lived assets such as land, buildings, or equipment are reported as unrestricted support unless explicit donor stipulations specify how the donated assets must be used. Gifts of long-lived assets with explicit restrictions that specify how the assets are to be used and gifts of cash or other assets that must be used to acquire long-lived assets are reported as restricted support. Absent explicit donor stipulations about how long those long-lived assets must be maintained, expirations of donor restrictions are reported when the donated or acquired long-lived assets are placed in service.

### (h) Deferred Financing Costs

Costs incurred related to the issuance of long-term debt are deferred and are amortized over the life of the related debt agreements or the related letter of credit agreements using the effective interest method. Accumulated amortization of such costs amounted to \$7,708,000 and \$6,594,000 as of June 30, 2011 and 2010, respectively. In connection with the refinancing of certain debt in the year ended June 30, 2010, the Corporation recorded a loss on early extinguishment of debt of \$816,000, which consisted of the write-off of deferred financing costs.

### (i) Impairment of Long-Lived Assets

Long-lived assets, such as property, plant, and equipment, and purchased intangibles subject to amortization, are reviewed for impairment whenever events or changes in circumstances indicate that the carrying amount of an asset may not be recoverable. Recoverability of assets to be held and used is measured by comparing the carrying amount of an asset to estimated undiscounted future cash flows expected to be generated by the asset. If the carrying amount of an asset exceeds its estimated future cash flows, an impairment charge is recognized in the amount by which the carrying amount of the asset exceeds the fair value of the asset. Assets to be disposed of would be separately presented in the consolidated balance sheets and reported at the lower of the carrying amount or fair value less costs to sell, and are no longer depreciated. The assets and liabilities of a disposed group classified as held for sale would be presented separately in the appropriate asset and liability sections of the consolidated balance sheets.

### (j) Investments in Joint Ventures

When the Corporation does not have a controlling interest in an entity, but exerts a significant influence over the entity, the Corporation applies the equity method of accounting.

### (k) Self-Insurance

Under the Corporation's self-insurance programs (general and professional liability, workers' compensation and employee health benefits), claims are reflected as a present value liability based upon actuarial estimates, including both reported and incurred but not reported claims taking into consideration the severity of incidents and the expected timing of claim payments.

### (l) Net Assets

The Corporation classifies net assets based on the existence or absence of donor-imposed restrictions. Unrestricted net assets represent contributions, gifts and grants, which have no donor-imposed restrictions or which arise as a result of operations. Temporarily restricted net assets

Notes to Consolidated Financial Statements
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are subject to donor-imposed restrictions that must or will be met either by satisfying a specific purpose and/or passage of time. Permanently restricted net assets are subject to donor-imposed restrictions that must be maintained in perpetuity. Generally, the donors of these assets permit the use of all or part of the income earned on related investments for specific purposes. The restrictions associated with these net assets generally pertain to patient care, specific capital projects and funding of specific hospital operations and community outreach programs.

## (m) Net Patient Service Revenue and Provision for Uncollectible Accounts

Net patient service revenue for the Medical Center, Kernan, Maryland General, Baltimore Washington, Shore Health, Chester River and University Specialty reflects actual charges to patients based on rates established by the State of Maryland Health Services Cost Review Commission (HSCRC) in effect during the period in which the services are rendered, net of contractual adjustments. Contractual adjustments represent the difference between amounts billed as patient service revenue and amounts allowed by third-party payors. Such adjustments include discounts on charges as permitted by the HSCRC.

The Corporation records revenues and accounts receivable from patients and third-party payors at their estimated net realizable value. Revenue is reduced for anticipated discounts under contractual arrangements and for charity care. An estimated provision for bad debts is recorded in the period the related services are provided based upon anticipated uncompensated care, and is adjusted as additional information becomes available.

The provision for bad debts is based upon management's assessment of historical and expected net collections considering historical business and economic conditions, trends in healthcare coverage, and other collection indicators. Periodically throughout the year, management assesses the adequacy of the allowance for uncollectible accounts based upon historical write-off experience by payor category. The results of this review are then used to make modifications to the provision for bad debts and to establish an allowance for uncollectible receivables. After collection of amounts due from insurers, the Corporation follows internal guidelines for placing certain past due balances with collection agencies.

#### (n) Charity Care

The Corporation provides charity care to patients who are unable to pay. Such patients are identified based on information obtained from the patient and subsequent analysis. Because the Corporation does not expect collection of amounts determined to qualify as charity care, they are not reported as revenue. Based on established rates, the Corporation estimates \$83,232,000 and \$68,825,000 of charity care services were provided in the years ended June 30, 2011 and 2010, respectively.

## (o) Nonoperating Income and Expenses, Net

Other activities that are largely unrelated to the Corporation's primary mission are recorded as nonoperating income and expenses, and include investment income, equity in the net income of joint ventures, general donations and fund-raising activities, and loss on early extinguishment of debt.

Notes to Consolidated Financial Statements

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### (p) Derivative Financial Instruments

The Corporation records derivative and hedging activities on the consolidated balance sheet at their respective fair values.

The Corporation utilizes derivative financial instruments to manage its interest rate risks associated with long-term tax-exempt debt. The Corporation does not hold or issue derivative financial instruments for trading purposes.

The Corporation's specific goals are to (a) manage interest rate sensitivity by modifying the repricing or maturity characteristics of some of its tax-exempt debt, and (b) lower unrealized appreciation or depreciation in the market value of the Corporation's fixed-rate tax-exempt debt when that market value is compared with the cost of the borrowed funds. The effect of this unrealized appreciation or depreciation in market value, however, will generally be offset by the income or loss on the derivative instruments that are linked to the debt.

All derivative instruments are reported as other assets or other long-term liabilities in the consolidated balance sheet and measured at fair value. On the date the derivative contract is entered into, the Corporation may designate the derivative as either a hedge of the fair value of a recognized or forecasted liability (fair value hedge) or a hedge of the variability of cash flows to be received or paid related to a recognized liability (cash flow hedge), provided the derivative instrument meets certain criteria related to its effectiveness. Derivatives not designated as hedges or not meeting effectiveness criteria are carried at fair value with changes in the fair value recognized in other nonoperating income and expenses.

The Corporation formally documents all hedge relationships between hedging instruments and hedged items, as well as its risk-management objective and strategy for undertaking various hedge transactions. This process includes linking all derivatives that are designated as fair value or cash flow hedges to specific liabilities on the consolidated balance sheet. The Corporation also formally assesses, both at the hedge's inception and on an ongoing basis, whether the derivatives that are used in hedging transactions are highly effective in offsetting changes in fair values or cash flows of hedged items.

Changes in the fair value of derivative instruments are included in or excluded from the excess of revenues over expenses depending on the use of the derivative and whether it qualifies for hedge accounting. Changes in the fair value of a derivative that is designated and qualifies as a fair value hedge, along with the changes in the fair value of the hedged item related to the risk being hedged, are included in the excess of revenues over expenses. Changes in the fair value of a derivative that is designated as a cash flow hedge are excluded from the excess of revenues over expenses to the extent that the hedge is effective until the excess of revenues over expenses is affected by the variability of cash flows in the hedged transaction. Changes in the fair value that relate to ineffectiveness are included in the excess of revenues over expenses as interest expense.

The Corporation discontinues hedge accounting prospectively when it determines that the derivative is no longer effective in offsetting changes in the fair value or cash flows of a hedged item, when the derivative expires or is sold, terminated or exercised, or when management determines that

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Notes to Consolidated Financial Statements

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designation of the derivative as a hedge instrument is no longer appropriate. When hedge accounting is discontinued and the derivative remains outstanding, all subsequent changes in fair value of the derivative are included in the excess of revenues over expenses.

### (q) Excess of Revenue over Expenses

The consolidated statement of operations includes a performance indicator, excess of revenue over expenses. Changes in unrestricted net assets that are excluded from the performance indicator, consistent with industry practice, include contributions of long-lived assets (including assets acquired using contributions, which, by donor restrictions, were to be used for the purpose of acquiring such assets), pension-related changes other than net periodic pension costs, change in fair value of derivatives that qualify for hedge accounting, and other items that are required by generally accepted accounting principles to be reported separately.

### (r) Income Taxes

The Corporation and most of its subsidiaries are not-for-profit corporations formed under the laws of the State of Maryland, organized for charitable purposes and recognized by the Internal Revenue Service as tax-exempt organizations under Section 501(c)(3) of the Internal Revenue Code pursuant to Section 501(a) of the Code. The effect of the taxable status of its for-profit subsidiaries is not material to the consolidated financial statements. The Corporation paid approximately \$195,000 in income taxes on its unrelated business activities in the year ended June 30, 2010. There were no income taxes paid on unrelated business activities in the year ended June 30, 2011. The Corporation has net operating losses of approximately \$13.5 million as of June 30, 2011, which expire at various dates through 2031. The Corporation's deferred tax assets of approximately \$5.4 million at June 30, 2011 are fully reserved as they are not expected to be utilized.

The Corporation follows a threshold of more-likely-than-not for recognition and derecognition of tax positions taken or expected to be taken in a tax return. Management does not believe that there are any unrecognized tax benefits that should be recognized.

### (s) Donor-Restricted Gifts

Unconditional promises to give cash and other assets to the Corporation are reported at fair value at the date the promise is received. Conditional promises to give and indications of intentions to give are reported at fair value at the date the promise becomes unconditional. Contributions are reported as either temporarily or permanently restricted support if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction is satisfied, temporarily restricted net assets are reclassified as unrestricted net assets and reported in the consolidated statements of operations as net assets released from restrictions. Such amounts are classified as other revenue or transfers and additions to property and equipment.

Contributions to be received after one year are discounted at an appropriate discount rate commensurate with the risks involved. An allowance for uncollectible contributions receivable is provided based upon management's judgment including such factors as prior collection history, type of contributions, and nature of fund-raising activity.

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The Corporation follows accounting guidance for classifying the net assets associated with donor-restricted endowment funds held by organizations that are subject to an enacted version of the Uniform Prudent Management Institutional Funds Act of 2006 (UPMIFA).

### (t) Fair Value Measurements

In January 2010, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update (ASU) No. 2010-06 (ASU 2010-06), *Improving Disclosures about Fair Value Measurements*. ASU 2010-06 amends Accounting Standards Codification Topic 820, *Fair Value Measurements and Disclosures*, to require a number of additional disclosures regarding fair value measurements and disclosure of the amounts of significant transfers between Level 1 and Level 2 investments and the reasons for such transfers, the reasons for any transfers into or out of Level 3 investments, and disclosure of the policy for determining when transfers among levels are recognized. ASU 2010-06 also clarified that disclosures should be provided for each class of assets and liabilities and clarified the requirement to disclose information about the valuation techniques and inputs used in estimating Level 2 and Level 3 measurements. Effective in fiscal year 2011, ASU 2010-06 also requires that information in the reconciliation of recurring Level 3 measurements about purchases, sales, issuances and settlements be provided on a gross basis. The adoption of ASU 2010-06 only required additional disclosures and did not have an impact on the consolidated financial statements.

The following methods and assumptions were used by the Corporation in estimating the fair value of its financial instruments:

Cash and cash equivalents, accounts receivable, assets limited as to use, investments, accounts payable, accrued expenses and advances from third-party payors — The carrying amounts reported in the consolidated balance sheet approximate the related fair values.

Long-term debt — The fair value of the long-term debt issued through the Maryland Health and Higher Educational Facilities Authority (Authority or MHHEFA), based on quoted market prices for the same or similar issues, at June 30, 2011 and 2010, was approximately \$1,018,753,000 and \$1,040,208,000, respectively. The carrying amounts of other long-term debt reported in note 7 and on the consolidated balance sheet approximate the related fair values.

### (u) New Accounting Pronouncements

In April 2009, the FASB issued ASU No. 2010-07, Not-for-Profit Entities: Mergers and Acquisitions (Topic 958). This ASU established principles and requirements for how a not-for-profit entity determines whether a combination is a merger or an acquisition and makes other accounting literature fully applicable to not-for-profit entities. This ASU is effective for mergers for which the merger date is on or after the beginning of an initial reporting period beginning on or after December 15, 2009; therefore, effective for the Corporation January 1, 2010. This ASU is effective for acquisitions for which the acquisition date is on or after the beginning of the first annual reporting period beginning on or after December 15, 2009; therefore, effective for the Corporation on July 1, 2010. It may not be applied to mergers or acquisitions before those dates. The Corporation adopted the provisions of this guidance as of July 1, 2010. The adoption did not have an impact on

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Notes to Consolidated Financial Statements
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the Corporation's financial position or results of operations for the year ended June 30, 2011. The Corporation completed the acquisition of Civista Health, Inc. and Subsidiaries on July 1, 2011. The acquisition will be accounted for under the new guidance and accordingly, the acquired entity will be recorded by the Corporation at its fair value as of the date of acquisition. Refer to note 21 Subsequent Events for additional disclosure regarding the transaction.

ASU 2010-07 also amends previous guidance for the reporting of goodwill and other intangibles and noncontrolling interests in consolidated financial statements to make their provisions fully applicable to not-for-profit entities. This guidance establishes that goodwill be tested annually for impairment and an impairment loss be recognized if it is determined that the carrying amount of the reporting unit's net assets exceeds its fair value. Beginning on July 1, 2010, the Corporation applied the transition provisions of the guidance, which requires the Corporation to cease amortization of previously recognized goodwill and to test goodwill for impairment annually or more frequently if events or circumstances indicate that the carrying value of an asset may not be recoverable. The Corporation completed the transitional and annual goodwill impairment test. No adjustments to the carrying value of previously recognized goodwill were recorded during the year ended June 30, 2011.

In August 2010, the FASB issued ASU No. 2010-24, Health Care Entities (Topic 954): Presentation of Insurance Claims and Related Insurance Recoveries. The amendments in the ASU clarify that a health care entity may not net insurance recoveries against related claim liabilities. In addition, the amount of the claim liability must be determined without consideration of insurance recoveries. This ASU is effective for the Corporation on July 1, 2011.

In August 2010, the FASB issued ASU No. 2010-23, *Health Care Entities (Topic 954): Measuring Charity Care for Disclosure*. ASU 2010-23 is intended to reduce the diversity in practice regarding the measurement basis used in the disclosure of charity care. ASU 2010-23 requires that cost be used at the measurement basis for charity care disclosure purposes and that cost be identified as the direct and indirect cost of providing the charity care, and requires disclosure of the method used to identify or determine such costs. This ASU is effective for the Corporation on July 1, 2011.

In July 2011, the FASB issued ASU No. 2011-07, Health Care Entities (Topic 954): Presentation and Disclosure of Patient Service Revenue, Provision for Bad Debt, and the Allowance for Doubtful Accounts. The ASU requires health care entities that recognize significant amounts of patient service revenue to present the provision for bad debts related to patient service revenue as a deduction from patient service revenue (net of contractual allowances and discounts) on their statement of operations. This ASU is effective for the Corporation on July 1, 2012, with early adoption permitted.

In September 2011, the FASB issued ASU No. 2011-08, *Intangibles — Goodwill and Other (Topic 350)*. This ASU is effective for fiscal years beginning after December 15, 2011, with early adoption permitted. This ASU is effective for the Corporation on July 1, 2012.

The Corporation does not anticipate that the adoption of the aforementioned pronouncements that will become effective in future fiscal years, will have a material impact on its financial position or its results of operations.

Notes to Consolidated Financial Statements

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### (v) Use of Estimates

The preparation of consolidated financial statements in conformity with U.S. generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the consolidated financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

### (2) Investments and Assets Limited as to Use

The fair value of assets limited as to use was as follows at June 30 (in thousands):

		2011	2010
Debt service and reserve funds	\$	76,967	74,160
Construction funds – held by trustee		75,027	123,877
Board designated funds		97,307	86,666
Construction funds – held by the Corporation		105,798	80,212
Self-insurance trust funds		99,663	84,920
Funds restricted by donors		49,016	41,073
Economic and beneficial interests in the net assets of			
related organizations (note 12)		41,802	38,439
Total assets limited as to use		545,580	529,347
Less amounts available for current liabilities	_	(40,114)	(39,228)
Total assets limited as to use, less current portion	\$ _	505,466	490,119

The composition and fair value of assets limited as to use were as follows at June 30, 2011 (in thousands):

	_	Debt service and reserve funds	Construction funds	Board designated funds	Self-insurance trust funds	Funds restricted by donors	Economic and beneficial interests	Total
Cash and cash								
equivalents	\$	33,491	73,904	9,773	477	7,317		124,962
Corporate bonds		´—	2,928	2,862	1,117	4,349		11,256
Collateralized								
corporate obligations			1,684	1,627	3	287		3,601
U.S. government								
and agency securities		43,476	74,791	2,819	604	499		122,189
Common stocks,								mo a # 1
including mutual funds			13,804	39,617	1,036	23,894		78,351
Alternative investments			13,714	40,609	_	12,670		66,993
Assets held by other organizations	_				96,426		41,802	138,228
Total assets								
as to use	\$_	76,967	180,825	97,307	99,663	49,016	41,802	545,580

Notes to Consolidated Financial Statements

June 30, 2011 and 2010

The composition and fair value of assets limited as to use were as follows at June 30, 2010 (in thousands):

	_	Debt service and reserve funds	Construction funds	Board designated funds	Self-insurance trust funds	Funds restricted by donors	Economic and beneficial interests	Total
Cash and cash	Ф	20.255	40.000	7.200	470	10.000		90.197
equivalents	\$	29,357	42,029	7,328	472	10,000		89,186
Corporate bonds			5,196	18,118	1,072	8,299		32,685
Collateralized								
corporate obligations		*******	2,459	1,840	3	31		4,333
U.S. government								
and agency securities		44,803	127,937	3,038	587	197	_	176,562
Common stocks		<i>'</i> —	13,674	26,738	1,006	15,143		56,561
Alternative investments			12,794	29,604		7,403		49,801
Assets held by other			,	,		•		
organizations					81,780		38,439	120,219
Total assets limited								
as to use	\$	74,160	204,089	86,666	84,920	41,073	38,439	529,347
	=							

Self-insurance trust funds include amounts held by the Maryland Medicine Comprehensive Insurance Program (MMCIP) for payment of malpractice claims. These assets consist primarily of stocks, fixed-income corporate obligations, and alternative investments. MMCIP is a funding mechanism for the Corporation's malpractice insurance program. As MMCIP is not an insurance provider, transactions with MMCIP are recorded under the deposit method of accounting. Accordingly, the Corporation accounts for its participation in MMCIP by carrying limited-use assets representing the amount of funds contributed to MMCIP and recording a liability for claims, which is included in other current and other long-term liabilities in the accompanying consolidated balance sheets.

The composition and fair value of investments not limited as to use were as follows at June 30 (in thousands):

	 2011	2010
Cash and cash equivalents Corporate bonds Collateralized corporate obligations U.S. government and agency securities Common stocks Alternative investments	\$ 37,789 28,547 16,403 28,421 147,967 147,723	7,705 40,418 16,130 26,875 97,569 92,411
Anomalivo invostments	\$ 406,850	281,108

Investments at June 30, 2011 include \$150,000,000 of funds for potential future commitments in accordance with the Affiliation Agreement with Upper Chesapeake Health System as discussed in note 4.

Alternative investments include hedge fund, private equity, and commingled fund investments, which are valued using the equity method of accounting.

Notes to Consolidated Financial Statements
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Fair value disclosures related to the Corporation's investments and assets limited as to use are provided in note 19.

The Corporation's total return on its investments and assets limited as to use was as follows for the years ended June 30 (in thousands):

		2011	2010	
Dividends and interest, net of fees Net realized gains (losses)	\$	10,557 30,107	13,232 (10,176)	
Change in fair value of other-than-trading securities Change in fair value of trading securities	·	40,186	48,879	
Total investment gain	\$	80,850	51,935	

Total investment gain is classified in the consolidated statements of operations as follows for the years ended June 30 (in thousands):

	 2011	2010
Nonoperating investment income	\$ 39,207	136
Other operating revenue		2,733
Change in fair value of unrestricted investments	36,364	45,592
Investment gains on restricted net assets	 5,279	3,474
Total investment return	\$ 80,850	51,935

Investment return does not include the returns on the economic interests in the net assets of related organizations, the returns on the self-insurance trust funds, returns on undesignated interest rates swaps, or the returns on certain construction funds where amounts have been capitalized.

### (3) Property and Equipment

The following is a summary of property and equipment at June 30 (in thousands):

	_	2011	2010
Land	\$	82,279	72,945
Buildings		972,683	955,181
Building and leasehold improvements		445,868	433,071
Equipment		948,188	916,454
Construction in progress		141,624	84,513
		2,590,642	2,462,164
Less accumulated depreciation and amortization	_	(1,291,992)	(1,222,050)
	\$ _	1,298,650	1,240,114

Notes to Consolidated Financial Statements

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Interest cost capitalized was \$2,942,000 and \$1,501,000 (net of interest income of \$200,000 and \$374,000) for the years ended June 30, 2011 and 2010, respectively.

Remaining commitments on construction projects were approximately \$100,927,000 at June 30, 2011.

Construction in progress includes building and renovation costs for assets that have not yet been placed into service. These costs relate to major construction projects as well as routine renovations under way at the Corporation's facilities.

Depreciation expense was \$128,970,000 and \$117,470,000 for the years ended June 30, 2011 and 2010, respectively.

### (4) Investments in Joint Ventures

The Corporation has investments of \$169,220,000 and \$107,851,000 at June 30, 2011 and 2010, respectively, in the following unconsolidated joint ventures:

		Percent ov	vnership
Joint venture	Business purpose	FY2011	FY2010
Lithogroup, Inc. Shipley's Imaging Center,	Lithotripsy provider	25%	25%
LLC	Freestanding imaging center	50	50
Maryland Care, Inc. Innovative Health	Managed care organization	25	25
Services, LLC	Third-party insurance claims processor	50	50
Helen P. Denit Cancer			
Treatment Center, LLC NAH/Sunrise of Severna	Cancer treatment services		50
Park, LLC	Senior living facility	50	50
Terrapin Insurance Company (Terrapin)	Healthcare professional liability insurance company	50	50
Mt. Washington Pediatric Hospital, Inc.			
(Mt. Washington) UCHS/UMMS Venture,	Healthcare services	50	50
LLC Central Maryland Radiation	Healthcare services	49	34
Oncology Center LLC	Healthcare services	50	50

The Corporation recorded equity in net earnings of \$20,534,000 and \$3,514,000 related to these joint ventures for the years ended June 30, 2011 and 2010, respectively.

Notes to Consolidated Financial Statements
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Effective June 26, 2009, the Corporation entered into a Membership Interest Purchase Agreement (Membership Agreement) with Upper Chesapeake Health System, Inc. (UCHS), a healthcare system located in Harford County, Maryland, whereby the Corporation purchased a 20% interest in the Upper Chesapeake Health System/University of Maryland Medical System Venture, LLC (UCHS/UMMS Venture, LLC) for \$31,500,000. On October 1, 2009, the Corporation entered into an Affiliation Agreement with UCHS and the UCHS/UMMS Venture, LLC whereby the Corporation paid an additional \$26,750,000 to UCHS/UMMS Venture, LLC for an additional 14% interest in the UCHS/UMMS Venture, LLC to 34%. In accordance with the Affiliation Agreement, the Corporation paid an additional \$26,750,000 to UCHS/UMMS Venture, LLC on October 1, 2010. This payment increased the Corporation's membership interest in UCHS/UMMS Venture, LLC to 49%. In accordance with the Affiliation Agreement, the Corporation has designated \$150 million for future capital improvements of UCHS/UMMS Venture, LLC. The Corporation has committed no less than \$176 million to UCHS/UMMS Venture, LLC for future capital improvements over the next several years, which will increase the Corporation's membership interest in the UCHS/UMMS Venture, LLC to 100%.

The following is a summary of the Corporation's joint ventures' combined unaudited condensed financial information as of and for the years ended June 30 (in thousands):

			2011		
	Mt. Washington	Terrapin	UCHS/UMMS Venture, LLC	Others	Total
Current assets Noncurrent assets	\$ 24,051 47,759	12,398 117,524	97,163 280,831	106,151 70,833	239,763 516,947
Total assets	\$ 71,810	129,922	377,994	176,984	756,710
Current liabilities Noncurrent liabilities Net assets	\$ 9,555 8,189 54,066	3,092 124,880 1,950	51,643 199,695 126,656	94,637 2,636 79,711	158,927 335,400 262,383
Total liabilities and net assets	\$ 71,810	129,922	377,994	176,984	756,710
Total operating revenue Total operating expenses	\$ 50,383 (46,455)	25,361 (34,826)	348,101 (340,285)	668,703 (644,939)	1,092,548 (1,066,505)
Total nonoperating gains/(losses), net	5,168	9,465	19,327	(9,139)	24,821
Other changes in net assets, net	654		30,920	(3,817)	27,757
Increase in net assets	\$ 9,750		58,063	10,808	78,621

Notes to Consolidated Financial Statements

June 30, 2011 and 2010

			2010		
	Mt. Washington	Terrapin	UCHS/UMMS Venture, LLC	Others	<u>Total</u>
Current assets Noncurrent assets	\$ 25,450 37,752	22,584 105,559	68,282 259,953	118,293 60,613	234,609 463,877
Total assets	\$ 63,202	128,143	328,235	178,906	698,486
Current liabilities Noncurrent liabilities Net assets	\$ 9,636 9,250 44,316	102 126,091 1,950	49,865 209,777 68,593	106,300 3,703 68,903	165,903 348,821 183,762
Total liabilities and net assets	\$ 63,202	128,143	328,235	178,906	698,486
Total operating revenue Total operating expenses	\$ 48,901 (46,582)	24,942 (33,643)	294,636 (282,268)	514,305 (499,356)	882,784 (861,849)
Total nonoperating gains/(losses), net	2,244	8,701	(9,574)	1,734	3,105
Other changes in net assets, net	3,068		28,609	14,006	45,683
Increase in net assets	\$ 7,631		31,403	30,689	69,723

#### (5) Leases

The Corporation rents various equipment and facility space. Rent expense under these operating leases for the years ended June 30, 2011 and 2010 was approximately \$16,150,000 and \$16,516,000, respectively.

Future noncancelable minimum lease payments under operating leases are as follows for the years ending June 30 (in thousands):

2012	\$ 5,677
2013	4,541
2014	4,105
2015	3,626
2016	2,579
Thereafter	10,864
	\$ 31,392

The Corporation rents property used for administration under a 99-year lease. The lease was recorded as a capital lease, and the Corporation recorded assets at their respective fair values of \$3,770,000 and \$29,230,000 for land and buildings, respectively. The lease includes an option for the Corporation to purchase the property during the period from April 20, 2017 to February 28, 2021 for a purchase price of not less than \$37,000,000 but not more than \$45,000,000 as determined by appraisals. In addition, the lease agreement includes a put option exercisable through February 28, 2013, whereby the lessor may require the

Notes to Consolidated Financial Statements

June 30, 2011 and 2010

Corporation to purchase the building for \$37,000,000. As of June 30, 2011 and 2010, amounts of \$34,949,000 and \$34,680,000, respectively, representing obligations under the lease have been recorded in other current liabilities.

As of June 30, 2011, amounts of \$2,830,000 and \$10,169,000 representing obligations under all other capital leases are included in other current liabilities and other long-term liabilities, respectively.

The following is a summary of all property and equipment under capital leases at June 30 (in thousands):

	2(	)11	2010
Land Buildings Equipment		3,770 29,230 18,555	3,770 29,230 14,771
1 1		51,555	47,771
Less accumulated amortization		(9,813)	(5,621)
	\$	41,742	42,150

Future minimum lease payments under capital leases, together with the present value of the net minimum lease payments, are as follows as of June 30, 2011 (in thousands):

2012	\$ 6,183
2013	11,458
2014	4,256
2015	3,759
2016	3,505
Thereafter	39,807
Total minimum lease	
payments	68,968
Less amounts representing interest	(21,020)
Present value of net minimum	
lease payments	\$ 47,948

#### (6) Lines of Credit

The Medical Center had unsecured credit lines totaling \$75,000,000 at June 30, 2011 and \$65,000,000 at June 30, 2010, available for working capital purposes under bank credit agreements, of which \$54,600,000 and \$63,300,000 was outstanding at June 30, 2011 and 2010, respectively. Interest is charged on the outstanding balance based on one-month LIBOR plus a percentage spread (rates ranged from 0.99% – 3.25% at June 30, 2011).

Notes to Consolidated Financial Statements
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Maryland General maintained an unsecured line of credit arrangement with a bank of \$5,000,000, of which there was no outstanding balance as of June 30, 2011 or 2010. Interest is charged on the outstanding balance at one-month LIBOR plus 2.20% (2.39% at June 30, 2011).

Baltimore Washington maintained an unsecured line of credit arrangement with a bank of \$5,000,000 at June 30, 2010, of which there was no outstanding balance as of June 30, 2010.

## (7) Long-Term Debt and Other Borrowings

Long-term debt consists of the following at June 30 (in thousands):

		Payable in		
	Interest	fiscal	***	2010
	<u>rate</u>	year(s)	 2011	2010
MHHEFA project revenue bonds:				
Corporation issue, payments due				
annually on July 1:				
Series 2010 Bonds	2.00% - 5.25%	2011 - 2040	\$ 237,210	242,385
Series 2008A-E Bonds	Variable rate	2025 - 2042	280,000	280,000
Series 2008F Bonds	4.00% - 5.25%	2009 - 2024	75,785	81,395
Series 2007A/B Bonds	Variable rate	2008 - 2035	137,320	137,420
Series 2006A Bonds	4.50% - 5.00%	2026 - 2042	45,000	45,000
Series 2005 Bonds	4.00% - 5.50%	2006 - 2032	138,590	141,390
Series 2004B Bonds	3.20% - 5.00%	2005 - 2025	28,165	29,565
Series 2002 Bonds	5.00%	2004 - 2013	2,785	4,085
Series 2001 Bonds	4.25% - 5.00%	2006 - 2012	1,275	2,410
Series 1991B Bonds	7.00%	1992 - 2023	27,315	27,315
Shore Health issue, payments due				
annually on July 1:				
Series 1998 Bonds	4.15% - 5.25%	2000 - 2020	21,115	22,955
MHHEFA pooled loan program:				
Chester River Issue, payments due				
semi-annually on July and				
January 1 Commercial paper series	Variable rate	1990 - 2013	630	865
MHHEFA variable rate demand bonds:				
Chester River Issue, payments due				
semi-annually on July and				
January 1 MHHEFA D	Variable rate	2004 - 2024	2,080	2,395
MHHEFA master lease and sublease	4.40%	2006 - 2013	1,170	1,765

Notes to Consolidated Financial Statements

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	Interest rate	Payable in fiscal year(s)	 2011	2010
Other long-term debt:				
North Arundel Senior Living,		Monthly,		
LLC Mortgage	Variable rate	2014	\$ 10,909	11,167
Term loans	Variable rate	2010 - 2013	43,008	26,644
Other loans and notes payable	5.00% - 7.00%	Monthly,		
		1991 - 2023	 4,462	4,990
			1,056,819	1,061,746
Less current portion of long-term debt			24,242	36,442
Less long-term debt subject to short-term rem	narketing agreements		 166,765	70,069
			865,812	955,235
Plus unamortized premiums and discounts, no	et		 3,560	4,008
			\$ 869,372	959,243

Pursuant to a Master Loan Agreement dated June 20, 1991 (Master Loan Agreement), as amended, the Corporation and several of its subsidiaries have issued debt through MHHEFA. As security for the performance of the bond obligation under the Master Loan Agreement, the Authority maintains a security interest in the revenue of the obligors. The Master Loan Agreement contains certain restrictive covenants. These covenants require that rates and charges be set at certain levels, limit incurrence of additional debt, require compliance with certain operating ratios and restrict the disposition of assets.

The Obligated Group under the Master Loan Agreement includes the Medical Center, University Specialty, Kernan Hospital, Maryland General Hospital, Baltimore Washington Medical Center, and Shore Health. Each member of the Obligated Group is jointly and severally liable for the repayment of the obligations under the Master Loan Agreement. In January 2010, Chester River Health System and the UMMS Foundation were added to the Obligated Group.

Under the terms of the Master Loan Agreement and other loan agreements, certain funds are required to be maintained on deposit with the Master Trustee to provide for repayment of the obligations of the Obligated Group (note 2).

In January 2010, the Corporation refunded \$95,905,000 of the Series 2008G, 2008H, and Shore Health issue Series 2004A bonds. The refunding was completed using the proceeds of a new \$242,385,000 fixed-rate MHHEFA bond issue (the Series 2010 Bonds). The unamortized portion of issuance costs on the refunded debt of \$816,000 was expensed as a loss on early extinguishment of debt during the year ended June 30, 2010.

The payment of principal and interest on the Series 2005 Bonds and the Series 2004B Bonds is insured under a financial guaranty insurance policy. This policy insures the payment of principal, sinking fund

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installments and interest on the corresponding bonds. Premiums related to the policy as well as other costs incurred relating to the bond issuances were capitalized and are being amortized over the life of the bonds. The insurance policy requires the Obligated Group to adhere to the same covenants as those in the Master Loan Agreement.

The aggregate annual future maturities of long-term debt according to the original terms of the Master Loan Agreement and all other loan agreements are as follows for the years ending June 30 (in thousands):

2012	\$ 24,242
2013	52,987
2014	42,646
2015	23,262
2016	24,356
Thereafter	 889,326
	\$ 1,056,819

The Corporation's Series 2007A/B and 2008A-E, and Chester River's MHHEFA Series D and Pooled Loan issuances, are variable rate demand bonds requiring remarketing agents to purchase and remarket any bonds tendered before the stated maturity date. The reimbursement obligations with respect to the letters of credit are evidenced and secured by the respective bonds. To provide liquidity support for the timely payment of any bonds that are not successfully remarketed, the Corporation has entered into letter of credit agreements with six banking institutions. These agreements have terms that expire in 2012 through 2014. If the bonds are not successfully remarketed, the Corporation is required to pay an interest rate specified in the letter of credit agreement, and the principal repayment of bonds may be accelerated to require repayment in periods ranging from 20 to 60 months from the date of the failed remarketing. The Corporation has reflected the amount of its long-term debt that is subject to these short-term remarketing arrangements as a separate component of current liabilities in its consolidated balance sheets. In the event that bonds are not remarketed, the Corporation maintains available lines of credit and has the ability to access other sources to obtain the necessary liquidity to comply with accelerated repayment terms. All variable rate demand bonds were successfully remarketed as of June 30, 2011.

The following table reflects the required repayment terms for the years ended June 30 (in thousands) of the Corporation's debt obligations in the event that the put options associated with variable rate demand bonds subject to short-term remarketing agreements were exercised, but not successfully remarketed:

2012	\$ 191,007
2013	253,097
2014	95,701
2015	23,262
2016	24,356
Thereafter	469,396
	\$ 1,056,819

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The approximate interest rates on MHHEFA project revenue bonds bearing interest at variable rates were as follows at June 30:

	2011	2010
Series 2008A Bonds	0.20%	0.50%
Series 2008B Bonds	0.07	0.22
Series 2008C Bonds	0.09	0.26
Series 2008D Bonds	0.04	0.17
Series 2008E Bonds	0.08	0.29
Series 2007A Bonds	0.07	0.26
Series 2007B Bonds	0.07	0.28
Pooled Loan Program Series A and D, Chester River Issue	0.08	0.30

Chester River's MHHEFA Series D and Pooled Loan notes are secured by CRHS's buildings and equipment, as well as an irrevocable letter of credit, which expires in April 2012. Under the terms of the related loan and letter of credit agreements, Chester River is required to comply with certain restrictive covenants including maintenance of debt to equity and other financial tests.

In May 2006, CRHC entered into a Master Lease and Sublease Agreement (the CRHC Agreement) with MHHEFA and a financial institution to provide financing for CRHC to lease certain equipment essential or convenient for the operation of CRHC. The CRHC Agreement expires in May 2013. During the term of the CRHC Agreement, MHHEFA has legal title to the equipment, including any software license components. At the end of the CRHC Agreement, CRHC has the option to purchase the equipment for a notional amount of \$1.

The Medical Center had term loans outstanding totaling \$38,827,000 and \$22,238,000 at June 30, 2011 and 2010, respectively. One loan (\$11,600,000) is due in December 2011 and is charged interest at a rate of one-month LIBOR plus 0.29% (0.48% at June 30, 2011). The second loan (\$26,750,000) is scheduled to be repaid commencing in January 2013 with 11 equal monthly installments, beginning February 2012, of \$223,000 and a final installment for the remaining balance. This loan is charged interest monthly at one-month LIBOR plus 2.75% (2.9355% at June 30, 2011). The third loan (\$477,000) was repaid in August 2011. Baltimore Washington had a term loan outstanding of \$4,181,000 and \$4,406,000 at June 30, 2011 and 2010, respectively, upon which interest is charged at a rate of one-month LIBOR plus 1.75% (2.19% at June 30, 2011).

### (8) Interest Rate Risk Management

The Corporation uses a combination of fixed and variable rate debt to finance capital needs. The Corporation maintains an interest rate risk-management strategy that uses interest rate swaps to minimize significant, unanticipated earnings fluctuations that may arise from volatility in interest rates. At June 30, 2011 and 2010, the notional values of outstanding interest rate swaps were \$609,669,000 and \$609,869,000, respectively. The interest rate swap agreements provide the Corporation synthetically fixed interest rates ranging from 3.6% - 4.0% with termination dates in 2031 through 2041.

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Notes to Consolidated Financial Statements
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Certain swaps representing a total notional amount of \$137,320,000 qualify as, and are designated as, cash flow hedges. Changes in the fair value of these designated swaps that effectively offset the variability of cash flows associated with the variable rate debt obligation initially are excluded from the excess of revenue over expenses and are reported as a change in the fair value of interest rate swap agreements included in the consolidated statement of changes in net assets. These amounts subsequently are reclassified into interest expense as a yield adjustment of the hedged debt obligation in the same period in which the related interest affects the excess of revenues over expenses. An unrealized gain (loss) on the designated swaps of \$2,298,000 and \$(7,410,000) is recorded in other changes in unrestricted net assets for the years ended June 30, 2011 and 2010, respectively. For the years ended June 30, 2011 and 2010, the Corporation recognized a net gain of \$2,237,000 and \$461,000, respectively, representing hedge ineffectiveness on the designated swaps, which is included in interest expense. The accumulated loss on changes in the fair value of designated swaps that is included in unrestricted net assets was \$23,181,000 and \$25,479,000 at June 30, 2011 and 2010.

Beginning in March 2008, previously designated cash flow hedging relationships were de-designated for accounting purposes. Accordingly, all changes in the fair value of the de-designated swaps since that date have been recognized in nonoperating gains (losses) in the accompanying consolidated statements of operations. The de-designated swaps represent a total notional amount of \$380,000,000 as of June 30, 2011 and 2010. The Corporation recorded a net nonoperating gain (loss) on de-designated interest rate swaps of \$18,640,000 and \$(33,700,000) for the years ended June 30, 2011 and 2010, respectively.

The Corporation has a forward-starting swap agreement representing a total notional amount of \$92,348,500 that takes effect on July 1, 2012. The forward-starting swap agreement provides the Corporation with a synthetically fixed interest rate of 3.6%.

The Corporation recognizes the fair value of interest rate swaps as a component of assets or liabilities, as appropriate. At June 30, 2011 and 2010, a liability representing the fair value of the Corporation's interest rate swaps, including forward-starting swaps, amounts to \$105,400,000 and \$128,575,000, respectively.

The Corporation is subject to a collateral posting requirement with one of its swap counterparties. Collateral posting requirements are based on the Corporation's long-term debt credit ratings, as well as the net liability position of total interest rate swap agreements outstanding with that counterparty. The amount of such posted collateral was \$41,276,000 and \$56,242,000 at June 30, 2011 and 2010, respectively, and is included as a component of other current assets on the Corporation's consolidated balance sheets.

Notes to Consolidated Financial Statements
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### (9) Other Liabilities

Other liabilities consist of the following at June 30 (in thousands):

		2011	2010
Malpractice and other self-insurance liabilities	\$	51,104	53,228
Capital lease obligations		47,948	46,557
Accrued pension obligations		26,267	43,062
Accrued interest payable		14,580	14,793
Other		35,602	32,112
Total other liabilities		175,501	189,752
Less current portion	-	(87,643)	(83,958)
Other long-term liabilities	\$	87,858	105,794

### (10) Retirement Plans

Employees of the Corporation are included in various retirement plans established by the Corporation, the Medical Center, Kernan, University Specialty, Maryland General, Baltimore Washington, Shore Health, Chester River, and the State of Maryland. Participation by employees in their specific plan(s) has evolved based upon the organization by which they were first employed and the elections that they made at the times when their original employers became part of the Corporation, if applicable. Following is a brief description of each of the retirement plans in which employees of the Corporation participate.

### (a) Defined Benefit Plans

State of Maryland Retirement Plans - Defined benefit pension plans sponsored by the State of Maryland in which certain Medical Center and Kernan Hospital employees participate. As required by an agreement with the State of Maryland at the time the Medical Center became an independent not-for-profit organization, the Corporation makes annual contributions to these plans related to certain employees who participate in these plans. The total required contributions and annual installments were determined through actuarial analysis in 1984 and are being funded over a period of 32 years, the expected remaining service lives of the employees at that time. These contributions are for the purpose of funding the net periodic pension costs for all remaining employees participating in these plans. These contributions were fixed via agreement and the Corporation does not have any obligation to fund nor does it have the ability to reduce contributions if net periodic pension costs or the minimum funding requirements as defined by the Employee Retirement Income Security Act of 1974 (ERISA) differ from the fixed contribution. The Corporation expenses costs of this plan as related services are rendered by employees. At June 30, 2011 and 2010, the present value of the Corporation's remaining unfunded amounts under this agreement was \$5,151,000 and \$6,082,000, respectively. Information as to the funded status of these plans and their relationship to the accumulated benefit obligations as they relate specifically to the Corporation's employees is not available.

Notes to Consolidated Financial Statements

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Maryland General Retirement Plan for Non – Union Employees – A noncontributory defined benefit plan covering substantially all nonunion employees. The benefits are based on years of service and compensation. Contributions to this plan are made to satisfy the minimum funding requirements of ERISA. In 2006, Maryland General froze the defined benefit pension plan.

Baltimore Washington Medical Center Pension Plan – A noncontributory defined benefit pension plan covering full-time employees who have been employed for at least one year and have reached 21 years of age.

Baltimore Washington Medical Center Supplemental Executive Retirement Plan – A noncontributory defined benefit pension plan for senior management level employees.

Chester River Health System, Inc. Pension Plan and Trust – A noncontributory defined benefit pension plan covering substantially all CRHC employees as well as employees of a subsidiary. The benefits are paid to retirees based upon age at retirement, years of service and average compensation. Chester River's funding policy is to satisfy the minimum funding requirements of ERISA. Effective June 30, 2008, Chester River froze the defined benefit pension plan.

The Corporation recognizes the funded status (i.e., difference between the fair value of plan assets and projected benefit obligations) of its defined benefit pension plans as an asset or liability in its consolidated balance sheet. The Corporation recognizes changes in the funded status in the year in which the changes occur as changes in unrestricted net assets. All defined benefit pension plans use a June 30 measurement date.

Notes to Consolidated Financial Statements
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The following table sets forth the combined benefit obligations and assets of the defined benefit plans (excluding the State of Maryland Retirement Plan) at June 30 (in thousands):

		2011	2010
Change in projected benefit obligations: Benefit obligations at beginning of year	\$	125,518	110,855
Plan amendment Settlements Service cost Interest cost Actuarial loss Benefit payments		(1,373) 2,649 6,213 (2,851) (4,821)	2,176 6,433 10,351 (4,297)
Projected benefit obligations at end of year	\$	125,335	125,518
Change in plan assets: Fair value of plan assets at beginning of year Actual return on plan assets Settlements Employer contributions Benefit payments	, \$ 	82,456 14,169 (1,373) 8,637 (4,821)	70,337 8,580 7,836 (4,297)
Fair value of plan assets at end of year	\$	99,068	82,456
Accumulated benefit obligation at end of year	\$	120,226	120,027

The funded status of the plans and amounts recognized as other long-term liabilities in the consolidated balance sheets at June 30 are as follows (in thousands):

	 2011	2010
Funded status, end of period: Fair value of plan assets Projected benefit obligations	\$ 99,068 125,335	82,456 125,518
	\$ (26,267)	(43,062)
Amounts recognized in unrestricted net assets at June 30: Net actuarial loss Prior service cost	\$ (45,595) (534)	(61,832) (619)
	\$ (46,129)	(62,451)

# Notes to Consolidated Financial Statements June 30, 2011 and 2010

The estimated amounts that will be amortized from unrestricted net assets into net periodic pension cost in fiscal 2012 are as follows:

Net actuarial loss Prior service cost	\$ (3,490) (87)
	\$ (3,577)

The components of net periodic pension cost for the years ended June 30 are as follows (in thousands):

	 2011	2010
Service cost	\$ 2,649	2,176
Interest cost	6,213	6,433
Expected return on plan assets	(6,661)	(6,242)
Prior service cost recognized	85	85
Recognized gains or losses	 5,878	3,158
Net periodic pension cost	\$ 8,164	5,610

The following table presents the weighted average assumptions used to determine benefit obligations for the plans at June 30:

	2011	2010
Discount rate	5.25%	5.00%
Rate of compensation increase (for nonfrozen plan)	5.00	5.00

The following table presents the weighted average assumptions used to determine net periodic benefit cost for the plans for the years ended June 30:

	2011	2010
Discount rate	5.00%	6.00%
Expected long-term return on plan assets	7.75	7.75% - 8.00%
Rate of compensation increase (for nonfrozen plan)	5.00	5.00%

The investment policies of the Corporation's pension plans incorporate asset allocation and investment strategies designed to earn superior returns on plan assets consistent with reasonable and prudent levels of risk. Investments are diversified across classes, sectors, and manager style to minimize the risk of loss. The Corporation uses investment managers specializing in each asset category, and regularly monitors performance and compliance with investment guidelines. In developing the expected long-term rate of return on assets assumption, the Corporation considered the current level of expected returns on risk-free investments, the historical level of the risk premium

Notes to Consolidated Financial Statements
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associated with the other asset classes in which the portfolio is invested, and the expectations for future returns of each asset class. The expected return for each asset class was then weighted based on the target allocation to develop the expected long-term rate of return on assets assumption for the portfolio.

The Corporation's pension plans' target allocation and weighted average asset allocations at the measurement date of June 30, 2011 and 2010, by asset category, are as follows:

		Percentage of plan assets as of June 30			
	Target				
Asset category	<u>allocation</u>	2011	2010		
Cash and cash equivalents	0 - 10%	7%	22%		
Fixed income securities	25 - 45%	27	14		
Equity securities	30 - 50%	39	46		
Global asset allocation	10 - 20%	17			
Hedge funds	5 - 15%	10	18		
		100%	100%		

Equity and fixed income securities include investments in hedge fund of funds that are categorized in accordance with each fund's respective investment holdings. At both June 30, 2011 and 2010, the Corporation was in the process of implementing changes to its investment classification, which required the liquidation of certain assets, resulting in more cash on hand than targeted. This cash was used to purchase additional securities in subsequent periods in order to restore compliance with the target allocation.

The table below presents the Corporation's combined investable assets of the defined benefit pension plans, excluding the State of Maryland Retirement Plan, as of June 30, 2011 aggregated by the three level valuation hierarchy as described in note 19:

		Level 1	Level 2	Level 3	Total
Cash and cash equivalents	\$	7,138			7,138
Fixed income mutual funds		22,536			22,536
Common and preferred stocks		6,549			6,549
Equity mutual funds		26,501	_		26,501
Other mutual funds		9,858			9,858
Alternative investments			16,594	9,892	26,486
	\$=	72,582	16,594	9,892	99,068

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The table below presents the Corporation's combined investable assets of the defined benefit pension plans, excluding the State of Maryland Retirement Plan, as of June 30, 2010, aggregated by the three level valuation hierarchy as described in note 19:

	_	Level 1	Level 2	Level 3	Total
Cash and cash equivalents	\$	23,700	_		23,700
Fixed income mutual funds		4,477			4,477
Common and preferred stocks		33,253	_		33,253
Equity mutual funds		5,548		1,138	6,686
Other mutual funds		4-14-000	_	_	
Alternative investments				14,340	14,340
	\$ _	66,978		15,478	82,456

Changes to Level 1 and Level 2 inputs between June 30, 2010 and June 30, 2011 were the result of strategic investments and reinvestments, interest income earnings, and changes in the fair value of investments.

Changes to the fair values based on the Level 3 inputs are summarized as follows:

	Equity mutual funds	Hedge funds	Total
Balance as of June 30, 2010 Additions/purchases	\$ 1,138	14,340 8,160	15,478 8,160
Withdrawals/sales Net change in value	(1,372) 234	(11,691) (917)	(13,063) (683)
Balance as of June 30, 2011	\$ 	9,892	9,892

The following summarizes the redemption terms for the hedge fund-of-funds vehicles alternative investments held as of June 30, 2011:

	Fund 1	Fund 2
Redemption timing: Redemption frequency Required notice	Monthly 20 days	Quarterly 70 days
Audit reserve: Percentage held back for audit reserve		· 
Gates: Potential gate holdback Potential gate release timeframe	None N/A	None N/A

Notes to Consolidated Financial Statements

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The Corporation expects to contribute \$10,303,000 to its defined benefit pension plans for the fiscal year ending June 30, 2012.

The following benefit payments, which reflect expected future employee service, as appropriate, are expected to be paid from plan assets in the following years ending June 30 (in thousands):

2012	\$ 3,962
2013	5,401
2014	5,994
2015	6,357
2016	6,641
2017 - 2019	47,698

The expected benefits to be paid are based on the same assumptions used to measure the Corporation's benefit obligation at June 30, 2011.

### (b) Defined Contribution Plans

Corporation Pension Plan – A noncontributory defined contribution plan for all eligible Corporation employees not participating in the State of Maryland Retirement Plans, the Kernan Plan, the University Specialty Retirement Plan or the Maryland General Plan described below. Contributions to this plan by the Corporation are determined as a fixed percentage of total employees' base compensation.

Corporation Salary Reduction 403(b) Plan – A contributory benefit plan covering substantially all employees not participating in the State of Maryland Retirement Plans, the Kernan Plan, the University Specialty Retirement Plan or the Maryland General Plan described below. Employees are immediately eligible for elective deferrals of compensation as contributions to the plan.

Kernan Tax Sheltered Annuity Plan — A contributory benefit plan administered by an insurance company for Kernan employees hired prior to a certain date in 1996. Employee contributions to this plan are eligible for a matching contribution by Kernan after participating employees have completed two years of credited service.

University Specialty Retirement Plan – A defined contribution plan for substantially all full-time employees of University Specialty. Employer contributions are made at the discretion of University Specialty's board of directors. Employees may also make optional contributions within limits specified by the plan agreement.

Maryland General Hospital, Inc. 401(k) Profit Sharing Plan for Union Employees – Defined contribution plan for substantially all union employees of Maryland General. Employer contributions to this plan are determined based on years of service and hours worked. Employees are immediately eligible for elective deferrals of compensation as contributions to the plan.

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Notes to Consolidated Financial Statements

June 30, 2011 and 2010

Baltimore Washington Retirement Plans – Defined contribution plans covering all employees of Baltimore Washington Medical Center, and certain related entities. Employees are eligible for matching contributions after two years of service as defined in the plans.

Shore Health System Retirement Plan – A contributory benefit plan covering substantially all employees of Shore Health. Employees are eligible for matching contributions after one year of service.

Chester River Retirement Plan – A contributory benefit plan covering substantially all employees of Chester River who have met the eligibility requirements.

Total annual retirement costs incurred by the Corporation for the previously discussed defined contribution plans and the State of Maryland Retirement Plans were \$22,794,000 and \$22,051,000 for the years ended June 30, 2011 and 2010, respectively. Such amounts are included in salaries, wages and benefits in the accompanying consolidated statements of operations.

### (11) Temporarily and Permanently Restricted Net Assets

Temporarily restricted net assets are restricted primarily for the following purposes at June 30 (in thousands):

	 2011	2010
Facility construction and renovations, research, education, and other	\$ 33,854	17,745
Economic and beneficial interests in the net assets of related organizations	 41,802	38,439
	\$ 75,656	56,184

Net assets were released from donor restrictions during the years ended June 30, 2011 and 2010 by expending funds satisfying the restricted purposes or by occurrence of other events specified by donors as follows (in thousands):

	2011		2010
Purchases of equipment and construction costs Research, education, uncompensated care, and other	\$	23,964 3,639	32,612 5,890
	\$	27,603	38,502

Included in net assets released from donor restrictions during the year ended June 30, 2011 for research, professional education, faculty support, uncompensated care and other is \$3,416,000 related to nonoperating activities of the Foundation.

Permanently restricted net assets consist primarily of gifts to be held in perpetuity, the income from which may be used to fund the operations of the Corporation.

Notes to Consolidated Financial Statements

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The Corporation's endowments consist of donor-restricted funds established for a variety of purposes. Net assets associated with endowment funds are classified and reported based on the existence or absence of donor-imposed restrictions.

### (a) Interpretation of Relevant Law

The Corporation has interpreted the Maryland Uniform Prudent Management of Institutional Funds Act (MUPMIFA) as requiring the preservation of the fair value of the original gift as of the gift date of the donor-restricted endowment funds absent explicit donor stipulations to the contrary. As a result of this interpretation, the Corporation classifies as permanently restricted net assets (a) the original value of gifts donated to the permanent endowment, (b) the original value of subsequent gifts to the permanent endowment, and (c) accumulations to the permanent endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added to the fund. The remaining portion of the donor-restricted endowment fund that is not classified in permanently restricted net assets is classified as temporarily restricted net assets until those amounts are appropriated for expenditure by the organization in a manner consistent with the standard of prudence prescribed by MUPMIFA. In accordance with MUPMIFA, the Corporation considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds:

- (1) The duration and preservation of the fund
- (2) The purposes of the Corporation and the donor-restricted endowment fund
- (3) General economic conditions
- (4) The possible effect of inflation and deflation
- (5) The expected total return from income and the appreciation of investments
- (6) Other resources of the Corporation
- (7) The investment policies of the Corporation.

Endowment net assets are as follows (in thousands):

	June 30, 2011					
	U	nrestricted	Temporarily restricted	Permanently restricted	Total	
Donor-restricted endowment						
funds	\$		7,596	32,543	40,139	

Notes to Consolidated Financial Statements
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	_	June 30, 2010				
	_	Unrestricted	Temporarily restricted	Permanently restricted	Total	
Donor-restricted endowment						
funds	\$		4,930	31,247	36,177	

### (b) Funds with Deficiencies

From time to time, the fair value of assets associated with individual donor-restricted endowment funds may fall below the level that the donor or MUPMIFA requires the Corporation to retain as a fund of perpetual duration. The Corporation does not have any donor-restricted endowment funds that are below the level that the donor or MUPMIFA requires.

### (c) Investment Strategies

The Corporation has adopted policies for corporate investments, including endowment assets that seek to maximize risk-adjusted returns with preservation of principal. Endowment assets include those assets of donor-restricted funds that the Corporation must hold in perpetuity or for a donor-specified period(s). The endowment assets are invested in a manner that is intended to hold a mix of investment assets designed to meet the objectives of the account. The Corporation expects its endowment funds, over time, to provide an average rate of return that generates earnings to achieve the endowment purpose.

To satisfy its long-term rate-of-return objectives, the Corporation relies on a total return strategy in which investment returns are achieved through both capital appreciation (realized and unrealized) and current yield (interest and dividends). The Corporation employs a diversified asset allocation structure to achieve its long-term return objectives within prudent risk constraints.

The Corporation monitors the endowment funds returns and appropriates average returns for use. In establishing this practice, the Corporation considered the long-term expected return on its endowment. This is consistent with the Corporation's objective to maintain the purchasing power of the endowment assets held in perpetuity or for a specified term as well as to provide additional real growth through new gifts and investment return.

### (12) Economic and Beneficial Interests in the Net Assets of Related Organizations

The Corporation is supported by several related organizations that were formed to raise funds on behalf of the Corporation and certain of its subsidiaries. These interests are accounted for as either economic or beneficial interests in the net assets of such organizations.

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Notes to Consolidated Financial Statements

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The following is a summary of economic and beneficial interests in the net assets of financially interrelated organizations as of June 30 (in thousands):

 2011	2010
\$ 33,354	27,522
5,896	5,895
 	2,672
39,250	36,089
 2,552	2,350
\$ 41,802	38,439
\$  \$	\$ 33,354 5,896 39,250 2,552

At the discretion of its board of trustees, the Kernan Endowment Fund may pledge securities to satisfy various collateral requirements on behalf of Kernan and may provide funding to Kernan to support various clinical programs or capital needs.

BWMC Foundation was formed in July 2000 and supports the activities of Baltimore Washington Medical Center by soliciting charitable contributions on its behalf.

The Maryland General Foundation contributed the remainder of its assets, approximately \$2,590,000 and \$18,000,000 of funds during the years ended June 30, 2011 and 2010, respectively, to support future Emergency Department capital projects at Maryland General, which is included in contributions and change in economic and beneficial interest in net assets of related organizations in the accompanying consolidated statement of changes in net assets. The contribution made during the year ended June 30, 2011 constituted all of Maryland General Foundation's remaining assets.

Shore Health maintains a beneficial interest in the net assets of Dorchester Foundation, a nonprofit corporation organized to raise funds on behalf of Dorchester Hospital. Shore Health does not have control over the policies or decisions of the Dorchester Foundation.

Notes to Consolidated Financial Statements
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A summary of the combined unaudited condensed financial information of the financially interrelated organizations in which the Corporation holds an economic or beneficial interest as of June 30 is as follows (in thousands):

	 2011	2010
Current assets Noncurrent assets	\$ 3,753 39,061	3,017 37,047
Total assets	\$ 42,814	40,064
Current liabilities Noncurrent liabilities Net assets	\$ 374 638 41,802	419 1,206 38,439
Total liabilities and net assets	\$ 42,814	40,064
Total operating revenue Total operating expense Other changes in net assets	\$ 7,125 (3,066) (696)	286 (220) (14,967)
Total increase (decrease) in net assets	\$ 3,363	(14,901)

### (13) State Support

The Corporation received \$3,200,000 in support for the Shock Trauma Center operations from the State of Maryland in each of the years ended June 30, 2011 and 2010.

The State of Maryland appropriates funds for specific construction costs incurred and equipment purchases made. The Corporation recognizes this support as the funds are expended for the intended projects. The Corporation expended and recorded \$20,815,000 and \$7,215,000 during the years ended June 30, 2011 and 2010, respectively.

For the year ended June 30, 2011 and 2010, the Corporation received \$750,000 of capital support from the State of Maryland for Kernan.

### (14) Functional Expenses

The Corporation provides general healthcare services to residents within its geographic location. Expenses related to providing these services, based on management's estimates of expense allocations, are as follows for the years ended June 30 (in thousands):

	 2011	2010
Healthcare services General and administrative	\$ 1,915,587 328,336	1,839,257 297,266
	\$ 2,243,923	2,136,523

Notes to Consolidated Financial Statements
June 30, 2011 and 2010

### (15) Insurance

The Corporation and its affiliates are self-insured for professional and general liability claims up to the limits of \$1.0 million on individual claims and \$3.0 million in the aggregate on an annual basis. For amounts in excess of these limits, the risk of loss has been transferred to the Terrapin Insurance Company (Terrapin), an unconsolidated joint venture. Terrapin provides insurance for claims in excess of \$1 million individually and \$3 million in the aggregate up to \$75 million individually and \$75 million in the aggregate under claims made policies between the Corporation and Terrapin. For claims in excess of Terrapin's coverage limits, if any, the Corporation retains the risk of loss.

As discussed in note 4, Terrapin is a joint venture corporation in which a 50% equity interest is owned by the Corporation and a 50% equity interest is owned by University Physicians, Inc.

Based upon estimates made by independent actuaries, the Corporation provides for and funds the present value of the costs for professional and general liability claims and insurance coverage related to the projected liability from asserted and unasserted incidents, which the Corporation believes may ultimately result in a loss, risk management expenses and the projected costs to adjudicate claims. These accrued malpractice losses are discounted using a discount rate of 2.5% and, in management's opinion, provide an adequate and appropriate loss reserve.

Claims asserted based upon occurrences prior to the inception of the current insurance programs and those prior to certain of the Corporation's component hospitals becoming participants in the insurance programs are covered by other insurance arrangements.

Total malpractice insurance expense for the Corporation during the years ended June 30, 2011 and 2010 was approximately \$32,581,000 and \$30,107,000, respectively.

The Corporation is involved in claims and litigation on malpractice matters, which arise in the normal course of business, none of which, in the opinion of management, is expected to result in losses in excess of insurance limits or have a materially adverse effect on the Corporation's financial position.

The Corporation, and substantially all of its subsidiaries, are self-insured for workers' compensation and employee health claims.

### (16) Business and Credit Concentrations

The Corporation provides healthcare services through its inpatient and outpatient care facilities located in the State of Maryland. The Corporation generally does not require collateral or other security in extending credit; however, it routinely obtains assignment of (or is otherwise entitled to receive) patients' benefits receivable under their health insurance programs, plans or policies (e.g., Medicare, Medicaid, Blue Cross, workers' compensation, health maintenance organizations (HMOs) and commercial insurance policies).

Notes to Consolidated Financial Statements

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The Corporation had gross receivables from patients and third-party payors as follows at June 30:

		2010
Medicare	20%	20%
Medicaid	33	37
Commercial insurance and HMOs	16	16
Blue Cross	12	12
Self-pay and others	19	15
	100%	100%

The Corporation recorded gross revenues from patients and third-party payors for the years ended June 30 as follows:

	2011	2010
Medicare	33%	34%
Medicaid	26	24
Commercial insurance and HMOs	16	17
Blue Cross	14	15
Self-pay and others	11	10
	100%	100%

### (17) Certain Significant Risks and Uncertainties

The Corporation provides general acute healthcare services in the State of Maryland. The Corporation and other healthcare providers in Maryland are subject to certain inherent risks, including the following:

- Dependence on revenues derived from reimbursement by the Federal Medicare and state Medicaid programs;
- Regulation of hospital rates by the State of Maryland Health Services Cost Review Commission;
- Government regulation, government budgetary constraints and proposed legislative and regulatory changes; and
- Lawsuits alleging malpractice and related claims.

Such inherent risks require the use of certain management estimates in the preparation of the Corporation's consolidated financial statements and it is reasonably possible that a change in such estimates may occur.

The Medicare and state Medicaid reimbursement programs represent a substantial portion of the Corporation's revenues, and the Corporation's operations are subject to a variety of other federal, state and local regulatory requirements. Failure to maintain required regulatory approvals and licenses and/or changes in such regulatory requirements could have a significant adverse effect on the Corporation.

Notes to Consolidated Financial Statements
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Changes in federal and state reimbursement funding mechanisms and related government budgetary constraints could have a significant adverse effect on the Corporation.

The healthcare industry is subject to numerous laws and regulations from federal, state and local governments. The Corporation's compliance with these laws and regulations can be subject to periodic governmental review and interpretation, which can result in regulatory action unknown or unasserted at this time. Management is aware of certain asserted and unasserted legal claims and regulatory matters arising in the ordinary course of business, none of which, in the opinion of management, are expected to result in losses in excess of insurance limits or have a materially adverse effect on the Corporation's financial position.

The federal government and many states have aggressively increased enforcement under Medicare and Medicaid anti-fraud and abuse laws and physician self-referral laws (STARK law and regulation). Recent federal initiatives have prompted a national review of federally funded healthcare programs. In addition, the federal government and many states have implemented programs to audit and recover potential overpayments to providers from the Medicare and Medicaid programs. The Corporation has implemented a compliance program to monitor conformance with applicable laws and regulations, but the possibility of future government review and enforcement action exists.

As a result of recently enacted and pending federal healthcare reform legislation, substantial changes are anticipated in the U.S. healthcare system. Such legislation includes numerous provisions affecting the delivery of healthcare services, the financing of healthcare costs, reimbursement to healthcare providers and the legal obligations of health insurers, providers and employers. These provisions are currently slated to take effect at specified times over the next decade. This federal healthcare reform legislation does not affect the consolidated financial statements for the year ended June 30, 2011.

### (18) Maryland Health Services Cost Review Commission (HSCRC)

Patient service revenue for hospital services is regulated by the HSCRC and recorded at rates established by the HSCRC. The Medical Center, Kernan, Maryland General, and Baltimore Washington have Charge Per Case (CPC) agreements with the HSCRC. The CPC agreements establish a prospectively approved average charge per inpatient case (inpatient cases are defined as hospital admissions plus births) and an estimated case mix index. These approved CPC targets are adjusted during the rate year for actual changes in case mix. The CPC agreements allow the hospital to adjust approved unit rates, within certain limits, to achieve the average charge per case targets for each rate year ending June 30. In 2011, the HSCRC implemented a charge per visit (CPV) methodology for hospital based outpatient services, which is similar in nature to the CPC inpatient methodology discussed above. The CPV methodology establishes prospectively approved average charges per outpatient visit for the majority of outpatient services provided. The remaining outpatient services are charged using the established HSCRC unit rates.

Shore Health and Chester River have Total Patient Revenue (TPR) agreements with the HSCRC. The TPR agreements establish an approved aggregate inpatient and outpatient revenue for regulated services to provide care for the patient population in the geographic region without regard for patient acuity or volumes.

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Notes to Consolidated Financial Statements

June 30, 2011 and 2010

The HSCRC utilizes a bad debt pool into which each of the regulated hospitals in Maryland participates. The funds in the bad debt pool are distributed to the hospitals that exceed the state average based upon the amount of uncompensated care delivered to patients during the year. For the years ended June 30, 2011 and 2010, the Corporation recognized a net distribution from the pool of \$47,558,000 and \$47,642,000, respectively, which is recorded as net patient service revenue.

### (19) Fair Value of Financial Instruments

The Corporation has implemented the provisions of recent accounting guidance on fair value measurements of financial assets and financial liabilities and for fair value measurements of nonfinancial items that are recognized or disclosed at fair value in the consolidated financial statements on a recurring basis. This guidance established a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted market prices in active markets for identical assets or liabilities (Level 1 measurement) and the lowest priority to measurements involving significant unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy are as follows:

- Level 1 inputs are quoted market prices (unadjusted) in active markets for identical assets or liabilities that the Corporation has the ability to access at the measurement date.
- Level 2 inputs are inputs other than quoted market prices including within Level 1 that are observable for the asset or liability, either directly or indirectly. If the asset or liability has a specified (contractual) term, a Level 2 input must be observable for substantially the full term of the asset or liability.
- Level 3 inputs are unobservable inputs for the asset or liability.

Assets and liabilities classified as Level 1 are valued using unadjusted quoted market prices for identical assets or liabilities in active markets. The Corporation uses techniques consistent with the market approach and the income approach for measuring fair value of its Level 2 and Level 3 assets and liabilities. The market approach is a valuation technique that uses prices and other relevant information generated by market transactions involving identical or comparable assets or liabilities. The income approach generally converts future amounts (cash flows or earnings) to a single present value amount (discounted).

The level in the fair value hierarchy within which a fair measurement in its entirety falls is based on the lowest level input that is significant to the fair value measurement in its entirety.

As of June 30, 2011 and 2010, the Level 2 assets and liabilities listed in the fair value hierarchy tables below utilize the following valuation techniques and inputs:

### (a) U.S. Government and Agency Securities

The fair value of investments in U.S. government, state, and municipal obligations is primarily determined using techniques consistent with the income approach. Significant observable inputs to the income approach include data points for benchmark constant maturity curves and spreads.

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Notes to Consolidated Financial Statements

June 30, 2011 and 2010

### (b) Corporate Bonds

The fair value of investments in U.S. and international corporate bonds, including commingled funds that invest primarily in such bonds, and foreign government bonds is primarily determined using techniques that are consistent with the market approach. Significant observable inputs include benchmark yields, reported trades, observable broker/dealer quotes, issuer spreads, and security specific characteristics, such as early redemption options.

### (c) Collateralized Corporate Obligations

The fair value of collateralized corporate obligations is primarily determined using techniques consistent with the income approach, such as a discounted cash flow model. Significant observable inputs include prepayment speeds and spreads, benchmark yield curves, volatility measures, and quotes.

### (d) Derivative Liabilities

The fair value of derivative contracts is primarily determined using techniques consistent with the market approach. Derivative contracts include interest rate, credit default, and total return swaps. Significant observable inputs to valuation models include interest rates, Treasury yields, volatilities, credit spreads, maturity and recovery rates.

(Continued)

Notes to Consolidated Financial Statements

June 30, 2011 and 2010

The following table presents assets and liabilities that are measured at fair value on a recurring basis at June 30, 2011 (in thousands):

	_	Level 1	Level 2	Level 3	Total
Assets:					
Investments:					
Cash and cash equivalents	\$	37,789			37,789
Corporate bonds		10,604	17,943		28,547
Collateralized corporate					
obligations			16,403		16,403
U.S. government and agency securities		10.560	17.050		
Common and preferred		10,568	17,853	Fire-sea	28,421
stocks, including					
mutual funds		147,483	484		147,967
		206,444	52,683		259,127
			32,003		237,127
Assets limited as to use:					
Cash and cash equivalents		88,869	36,093		124,962
Corporate bonds Collateralized corporate		7,162	4,094		11,256
obligations			3,601		2 (01
U.S. government and agency		*****	3,001	<del></del>	3,601
securities		2,668	119,521		122,189
Common and preferred		-,	113,521		122,107
stocks, including					
mutual funds		77,209	1,142		78,351
Investments held by other					
organizations	Party.		96,426		96,426
		175,908	260,877		436,785
	\$	382,352	313,560		695,912
Tinkilisian.	==				
Liabilities: Interest rate swap liabilities	\$		105,400		105 400
morest tate swap natimites	Φ==		103,400		105,400

Notes to Consolidated Financial Statements
June 30, 2011 and 2010

The following table presents assets and liabilities that are measured at fair value on a recurring basis at June 30, 2010 (in thousands):

	_	Level 1	Level 2	Level 3	Total
Assets:					
Investments:					
Cash and cash equivalents	\$	7,705	_		7,705
Corporate bonds		16,260	24,158	**************************************	40,418
Collateralized corporate obligations		_	16,130		16,130
U.S. government and agency securities		13,924	12,951	_	26,875
Common and preferred					
stocks, including mutual funds		97,569			97,569
	_	135,458	53,239		188,697
Assets limited as to use:					
Cash and cash equivalents		89,186			89,186
Corporate bonds		13,691	18,994		32,685
Collateralized corporate		,	,		·
obligations			4,332		4,332
U.S. government and agency					
securities		91,510	85,052		176,562
Common and preferred					
stocks, including					# C # C D
mutual funds		55,555	1,007		56,562
Investments held by other organizations	_		81,780		81,780
		249,942	191,165		441,107
	\$	385,400	244,404		629,804
	* =				
Liabilities: Interest rate swap liabilities	\$_		128,575		128,575
_	=		8. Turn		

Changes to Level 1 and Level 2 inputs between June 30, 2010 and June 30, 2011 were the result of strategic investments and reinvestments, interest income earnings, and changes in the fair value of investments.

### (20) Related Party Agreements

The Corporation has certain agreements with various departments of the University of Maryland School of Medicine concerning the provision of professional and administrative services to the Corporation and its

Notes to Consolidated Financial Statements

June 30, 2011 and 2010

patients. Total expense under these agreements in the years ended June 30, 2011 and 2010 was approximately \$97,160,000 and \$98,144,000, respectively.

### (21) Subsequent Events

The corporation evaluated all events and transactions that occurred after June 30, 2011 and through October 27, 2011. Other than described below, the Corporation did not have any material recognizable subsequent events during the period.

Effective July 1, 2011, the Corporation entered into an affiliation agreement with Civista Health, Inc. and Subsidiaries (Civista), a healthcare system located in Southern Maryland, whereby the Corporation became the sole corporate member of Civista. The Civista Medical Center, the largest component of Civista, has been operated by the Corporation under a management agreement that began in 2009. In accordance with the affiliation agreement, the Corporation paid Civista \$4 million on July 1, 2011 to fund the purchase of the land on which Civista Medical Center is located. The Corporation has also transferred \$2.5 million to Civista to support operational and capital initiatives, and has committed an additional \$10 million for similar investments over the next five years.

The transaction will be accounted for under the guidance of ASU 2010-07, and accordingly, the Corporation will consolidate Civista at its fair value as of July 1, 2011. Such amounts are currently being determined. The Corporation does not expect the fair value adjustment recorded during the year ended June 30, 2012 to have a material impact on the Corporation's consolidated financial statements.

### Notes to Consolidated Financial Statements June 30, 2011 and 2010

Summarized pro forma unaudited historical cost basis combined balance sheet and statement of operations information for the Corporation, its subsidiaries and Civista for the year ended June 30, 2011 is as follows (in thousands):

UMMS       \$ 2,344,204         Civista       108,613         Combined       \$ 2,452,817         Operating expenses:       \$ 2,243,923         UMMS       \$ 2,243,923         Civista       106,423         Net nonoperating revenues:       \$ 102,853         Civista       1,672         Combined       \$ 104,525         Change in total net assets:       \$ 268,654         Civista       6,256         Combined       \$ 274,910         Total net assets:       UMMS         Civista       \$ 1,251,034         Civista       24,362         Combined       \$ 1,275,396	Operating re	venues:		
Combined       \$ 2,452,817         Operating expenses:       \$ 2,243,923         UMMS       \$ 2,243,923         Civista       \$ 106,423         Net nonoperating revenues:       \$ 102,853         Civista       \$ 1,672         Combined       \$ 104,525         Change in total net assets:       \$ 268,654         Civista       6,256         Combined       \$ 274,910         Total net assets:       \$ 1,251,034         UMMS       \$ 1,251,034         Civista       \$ 24,362			\$	2,344,204
Operating expenses:       UMMS       \$ 2,243,923         Civista       106,423         Combined       \$ 2,350,346         Net nonoperating revenues:       UMMS         UMMS       \$ 102,853         Civista       1,672         Combined       \$ 104,525         Change in total net assets:       UMMS         Civista       6,256         Combined       \$ 274,910         Total net assets:       UMMS         UMMS       \$ 1,251,034         Civista       24,362	Civista			108,613
UMMS       \$ 2,243,923         Civista       106,423         Combined       \$ 2,350,346         Net nonoperating revenues:       UMMS         UMMS       \$ 102,853         Civista       1,672         Combined       \$ 104,525         Change in total net assets:       UMMS         Civista       6,256         Combined       \$ 274,910         Total net assets:       UMMS         UMMS       \$ 1,251,034         Civista       24,362		Combined	\$ _	2,452,817
UMMS       \$ 2,243,923         Civista       106,423         Combined       \$ 2,350,346         Net nonoperating revenues:       UMMS         UMMS       \$ 102,853         Civista       1,672         Combined       \$ 104,525         Change in total net assets:       UMMS         Civista       6,256         Combined       \$ 274,910         Total net assets:       UMMS         UMMS       \$ 1,251,034         Civista       24,362	Operating ex	rpenses:		
Civista       106,423         Combined       \$ 2,350,346         Net nonoperating revenues:       UMMS         UMMS       \$ 102,853         Civista       1,672         Combined       \$ 104,525         Change in total net assets:       UMMS         Civista       6,256         Combined       \$ 274,910         Total net assets:       UMMS         UMMS       \$ 1,251,034         Civista       24,362		1	\$	2,243,923
Net nonoperating revenues:       UMMS       \$ 102,853         Civista       1,672         Combined       \$ 104,525         Change in total net assets:       UMMS       \$ 268,654         Civista       6,256         Combined       \$ 274,910         Total net assets:       UMMS       \$ 1,251,034         Civista       24,362	Civista		_	, ,
UMMS       \$ 102,853         Civista       1,672         Combined       \$ 104,525         Change in total net assets:       UMMS         Civista       6,256         Combined       \$ 274,910         Total net assets:       UMMS         UMMS       \$ 1,251,034         Civista       24,362		Combined	\$ _	2,350,346
UMMS       \$ 102,853         Civista       1,672         Combined       \$ 104,525         Change in total net assets:       UMMS         Civista       6,256         Combined       \$ 274,910         Total net assets:       UMMS         UMMS       \$ 1,251,034         Civista       24,362	Net nonoper	ating revenues:		
Civista       1,672         Combined       \$ 104,525         Change in total net assets:       \$ 268,654         Civista       6,256         Combined       \$ 274,910         Total net assets:       UMMS         UMMS       \$ 1,251,034         Civista       24,362		8	\$	102,853
Change in total net assets:       UMMS       \$ 268,654         Civista       6,256         Combined       \$ 274,910         Total net assets:       UMMS         UMMS       \$ 1,251,034         Civista       24,362	Civista		·	
UMMS       \$ 268,654         Civista       6,256         Combined       \$ 274,910         Total net assets:       UMMS         UMMS       \$ 1,251,034         Civista       24,362		Combined	\$	104,525
UMMS       \$ 268,654         Civista       6,256         Combined       \$ 274,910         Total net assets:       UMMS         UMMS       \$ 1,251,034         Civista       24,362	Change in to	otal net assets:	_	_
Civista       6,256         Combined       \$ 274,910         Total net assets:       UMMS         UMMS       \$ 1,251,034         Civista       24,362			\$	268.654
Total net assets: UMMS \$ 1,251,034 Civista 24,362	Civista			,
UMMS \$ 1,251,034 Civista 24,362		Combined	\$	274,910
UMMS \$ 1,251,034 Civista 24,362	Total net ass	sets:	<del></del>	
Civista <u>24,362</u>			\$	1.251.034
Combined \$ 1,275,396			· ·	·
		Combined	\$_	1,275,396

## UNIVERSITY OF MARYLAND MEDICAL SYSTEM CORPORATION AND SUBSIDIARIES Consolidating Balance Sheet Information by Division June 30, 2011 (In thousands)

Schedule 1

Consolidated Total	217,517 40,114	262,421 24,579 32,181 51,871	628,683	406,850		41,770	180,825	/05,/6	94,46	49,010	41,802	505,466	1,298,650	371 071	CE4(2) 4	3,026,341
Eliminations	11	(19,827)	(20,073)	ı		1	!	I	I	l	(59,613)	(59,613)	I	(66, 93)	(30,444)	(137,908)
36 South Paca	965	1811	650	I		ı	l	I		I		1			1	ı,
Shipley's	144	3,469	3,613	ŀ		i			i		I	1	6,336	1	1	676'6
UMMS Foundation	1 [	(2,672)	(1,172)	1		I	ŀ	32,211	1	21,536		53,747	1,807	1 3	5,515	59,697
Chester River	4,356 355	9,421 22 586 682	15,422	5,140		1	1	2,000	1,524	1,704	1	8,228	24,493	1 ;	2,501	55,784
Shore Health	14,466 471	30,081 3,469 3,774 1,150	53,411	30,162		1	3,086	960'09	11,916	22,231	2,552	99,881	119,120	1	1,193	303,767
Baltimore Washington	25,382 833	39,571 1,234 6,014 8,954	81,988	48,420		1	19,874	I	16,495	1	5,896	42,265	269,170	1	7,895	449,738
Maryland General	14,664 986	13,523 677 2,043 300	32,193	ı		I	6,867	1	25,326	3,545	735	39,473	93,667	I	15,720	181,053
University Specialty	2,947	5,606 323 616 24	9,516	5,303		I	ì	ł	1	I	407	407	20,025	ŀ	i	35,251
Kernan	14,416	12,026 951 990 105	28,488	13,154		I	1.997	1	I	í	34,982	36,979	36,592	I		115,213
University CARE	157	163 132 39	502	ı		1	I	I	l	1	I		l	ı	I	502
University of Maryland Medical Center	S 140,420 37,469	152,030 36,716 18,119 39,391	424,145	304,671		41 770	146.001	1	39.485	1	56.843	284,099	717,512	7,547	201,466	\$ 1,939,440
Assets	Current assots: Cash and cash equivalents Assets littled as to use, current portion Accounts receivable:	Patient accounts receivable, less allowance for doubtful accounts of \$161,124 Others Inventories Prepaid expenses and other current assets	Total current assets	Investments	Assets limited as to use, less	current portion: Dabt carries finds	Construction finds	Board designated and escrow funds	Self-insurance trust finds	Funds restricted by donor	Economic and beneficial interests in the		Property and equipment, net	Deferred financing costs, net	Investments in joint ventures and other assets	Total assets

### UNIVERSITY OF MARYLAND MEDICAL SYSTEM CORPORATION AND SUBSIDIARIES Consolidating Balance Sheet Information by Division June 39, 2011

(In thousands)

																a a
Consolidated Total	154,995	128,420	210,012	87,643	166 765	24,242		712,677	869,372	87,838	105,400	1,775,307	1,142,835	32,543	1,251,034	3,026,341
Eliminations	1	(228)	I	(19.711)		(133)		(20,072)	l	ļ		(20,072)	(58,223) (59,613)	1	(117,836)	(137,908)
36 South Paca	310	1	ı	2.207	•			2,517	1	I		2,517	11,338		11,338	13,855
Shipley's	57	I						57	I	I		57	9,892		9,892	9,949
UMMS Foundation	8	I	ŀ	1 1		ļ i		84	I	I		84	34,925 6,122	18,566	59,613	59,697
Chester River	2,339	2,886	1,008	1,616		1,710	7,44	11,775	3,025	8,015		22,815	31,266	1,380	32,969	55,784
Shore Health	5,772	14,142	5,287	120%		1 88 1	7,000	31,055	85,845	086'9	1	123,880	155,506 12,197	12,184	179,887	303,767
Baltimore Washington	23,073	20,497	8,112	- 207	Carta	157	410'4	865,85	202,112	15,370	J	276,080	167,762 5,896		173,658	449,738
Maryland General	9.732	12,252	6,468	15	e e e	18	000,1	34,158	41,524	24,594	1	100,276	76,497		80,777	181,053
University Specialty	3.347	2,909	4,697	1 57	11,000	١٤	SWS	22,906	956'9	186		30,048	4,796		5,203	35,251
Kernan	5 763	4,243	3,596	18	000,1	8	0/7	15,472	12,319	4	I	28,232	51,866	I	86.981	115,213
University CARE	808	77	ı	1 5	9	l	l	1,031	I	1	1	1,031	(529)	i	(529)	502
University of Maryland Medical Center	\$ 103 712	71.642	66,844	54,600	761,6/	164,055	15,051	555,096	517.591	32,272	105,400	1,210,359	657,739	413	729.081	\$ 1,939,440
Liabilities and Net Assets	Current liabilities:	Accused navroll and benefits	Advances from third-party payors	Lines of credit	Other current habilities Long-term debt subject to short-term	remarketing arrangements	Current portion of long-term debt	Total current liabilities	Long-term debt less current portion	Other lone-turn liabilities	Interest rate swap liabilities	Total liabilities	Net assets: Unrestricted Tannormity mentioned	Permanently restricted	Total net accert	Total liabilities and net assets

See accompanying independent auditors' report.

Consolidating Balance Sheet Information by Division - Maryland General Health Systems (MGHS)

June 30, 2011

(In thousands)

and MGHS ral Consolidated Typ. Eliminations Total	62 — 14,664 — 986	719 — 13,523 (774) — 677 — 2,043 — 30103		
Maryland General General Clin. Prac. Hospital Group	14,551 986	12,804 1,403 2,043 300	9,867 25,326 3,545 735	39,473 91,492 149
Maryland General Mealth Systems, Inc.	\$ 51	- 48 		2,175
Assets	Current assets:  Cash and cash equivalents  Assets limited as to use, current portion  Accounts receivable:	Patient accounts receivable, less allowance for doubtful accounts of \$12,908 Other Inventories Prepaid expenses and other current assets Total current assets	Investments Assets limited as to use, less current portion: Debt service funds Construction funds Board designated and escrow funds Self-insurance trust funds Funds restricted by donor Economic interests in the net assets of related organizations	Property and equipment, net Deferred financing costs, net Investments in joint ventures and other assets

(Continued)

UNIVERSITY OF MARYLAND MEDICAL SYSTEM CORPORATION AND SUBSIDIARIES

Consolidating Balance Sheet Information by Division – Maryland General Health Systems (MGHS)

June 30, 2011

(In thousands)

MGHS Consolidated Total	9,732 12,252 6,468 — 4,670 1,036	34,158	41,524 24,594 100,276	76,497	80,777
Eliminations		ŀ			
Maryland General Clin. Prac. Group		1		7	
Maryland General Hospital	9,720 12,252 6,468 4,670 884	33,994	40,220 24,593 98,807	60,114 4,280	64,394
Maryland General Health Systems, Inc.	\$ 12 	164	1,304 1,469	16,376	16,376
Liabilities and Net Assets	Current liabilities: Trade accounts payable Accrued payroll and benefits Advances from third-party payors Lines of credit Other current liabilities Current portion of long-term debt	Total current liabilities	Long-term debt, less current portion Other long-term liabilities Total liabilities	Net assets: Unrestricted Temporarily restricted Permanently restricted	Total net assets  Total liabilities and net assets

See accompanying independent auditors' report.

Schedule 1-b

Consolidating Balance Sheet Information by Division – Baltimore Washington Medical System (BWMS)

June 30, 2011

Assets	Baltimore Washington Medical System, Inc.	Baltimore Washington Medical Center	Baltimore Washington Healthcare Services	Baltimore Washington Health Enterprises	North County Corporation	Eliminations	BWMS Consolidated Total
Current assets: Cash and cash equivalents Assets limited as to use, current portion Accounts receivable:	8	24,561 833	710	Ξ Ι	11		25,382 833
Patient accounts receivable, less allowance for doubtful accounts of \$15,415 Other Inventories	30,476	35,324 1,234 6,014 8,759	2,001 3,939	2,246	(1,789) — 80	(32,626)	39,571 1,234 6,014 8,954
Topala expenses and ourse entering assets  Total current assets	30,476	76,725	6,650	2,472	(1,709)	(32,626)	81,988
Investments A seats limited as to use less current nortion:		48,420	I	1	I		48,420
Construction and secretary funds  Roard designated and secretary funds					111		19,874
Self-insurance trust funds Funds restricted by donor	1 1	16,495		11		11	16,495
Economic interests in the net assets of related organizations		5,896					5,896
	l	42,265	1	- 17	— 700 41		42,265
Property and equipment, net Deferred financing costs, net Investments in joint ventures and other assets	144,541	630		2,296		(139,572)	7,895
Total assets	\$ 175,017	411,913	6,650	16,038	12,318	(172,198)	449,738

UNIVERSITY OF MARYLAND MEDICAL SYSTEM CORPORATION AND SUBSIDIARIES

Consolidating Balance Sheet Information by Division - Baltimore Washington Medical System (BWMS)

June 30, 2011

Liabilities and Net Assets	Baltimore Washington Medical System, Inc.	Baltimore Nashington Medical Center	Baltimore Washington Healthcare Services	Baltimore Washington Health Enterprises	North County Corporation	Eliminations	BWMS Consolidated Total
Current liabilities: Trade accounts payable Accrued payroll and benefits Advances from third-party payors Lines of credit Other current liabilities Current portion of long-term debt	s 1,357	20,766 17,924 8,112 24,434 4,120	1,134 136 1 1	1,050 1,049 — — 10,520 274	90 31	31 — — — (32,657)	23,073 20,497 8,112  2,297 4,619
Total current liabilities	1,359	75,356	1,270	12,893	346	(32,626)	58,598
Long-term debt, less current portion Other long-term liabilities		187,521 14,987		10,635	3,956		202,112 15,370
Total liabilities	1,359	277,864	1,270	23,911	4,302	(32,626)	276,080
Net assets: Unrestricted Temporarily restricted Permanently restricted	173,658	5,896	5,380	(7,873)	8,016	(139,572)	167,762 5,896
Total net assets	173,658	3 134,049	5,380	(7,873)	8,016	(139,572)	173,658
Total liabilities and net assets	\$ 175,017	411,913	6,650	16,038	12,318	(172,198)	449,738

See accompanying independent auditors' report.

Schedule 1-c

June 30, 2011

Consolidating Balance Sheet Information by Division — Shore Health System (SHS)

SHS Consolidated Total	14,466 471	30,081 3,469 3,774	1,150	30,162		3,086	60,096	11,916	2,552	99,881	119,120	1 103	1,123	303,767
Eliminations	11	(4,419) —	(4,419)	I	I	1	1		(56,720)	(56,720)	1	(7.630)	(000,1)	(68,769)
Chesapeake Neurological Surgery, LLC	11	1   1		I	I	-	ı				1	I		
Chesapeake Ear, Nose, Throat, Sinus, and Hearing Center, LLC	11	111			!	1	1	1 1	I	1	1		ı	
Shore Clinical Foundation, Inc.	556	2,815 529 —	169	1	!	I	1	•	I	ļ	1,354	1		5,423
Shore Health Enterprises, Inc. and Subsidiary	36	111	36	1	!	1	1		[	I	714			750
Care Health Services, Inc.	789	876 2,882	13 4,060		ļ	.	l	[	l I		438			4,498
Memorial Hospital Foundation, Inc. and Subsidiary	11	201	27		ĺ		35,096	1000	-	53,475	3,778	3	24	57,505
Shore Health System, Inc.	\$ 13,585 471	26,390 4,276 3,774	941	30,162		3.086	25,000	11,916	5,832	103,126	112,836	;	8,799	\$ 304,360
Assets	Current assets: Cash and cash equivalents Assets limited as to use, current portion Accounts receivable:	Patient accounts receivable, less allowance for doubtful accounts of \$9,403 Other Inventories	Prepaid expenses and other current assets  Total current assets	Investments	Assets limited as to use, less current portion:	Construction funds	Board designated and escrow funds	Self-insurance trust funds	runds restricted by donor  Economic and beneficial interests  in the net assets of related organizations		Property and equipment, net	Deferred financing costs, net	Investments in joint ventures and other assets	Total assets

UNIVERSITY OF MARYLAND MEDICAL SYSTEM CORPORATION AND SUBSIDIARIES

Consolidating Balance Sheet Information by Division - Shore Health System (SHS)

June 30, 2011 (In thousands)

SHS Consolidated Total	5,772 14,142 5,287	3,971	31,055 85,845	6,980	155,506 12,197 12,184	179,887 303,767
Eliminations	111	(4,419)	(4,419)	(4,419)	(46,412) (8,674) (9,264)	(64,350)
Chesapeake Neurological Surgery, LLC			1 1			
Chesapeake Ear, Nose, Throat, Sinus, and Hearing Center, LLC						
Shore Clinical Foundation, Inc.	257 875		1,132	114	4,177	4,177 5,423
Shore Health Enterprises, Inc. and Subsidiary	111	1,450	1,450	1,450	(700)	(700)
Care Health Services, Inc.	105	2	34	344	4,154	4,154
Memorial Hospital Foundation, Inc. and Subsidiary	4 11	741	756	785	38,782 8,674 9,264	56,720
Shore Health System, Inc.	\$ 5,406	6,197 1,883	31,792	6,837	155,505 12,197 12,184	179,886 \$ 304,360
Liabilities and Net Assets	Current liabilities:  Trade accounts payable  Accrued payroll and benefits	Advances from info-party payors Lines of credit Other current liabilities Current portion of long-term debt	Total current liabilities Tong-ferm debt less current nortion	Other long-term liabilities  Total liabilities	Net assets: Unrestricted Temporarily restricted Pernanently restricted	Total net assets  Total liabilities and net assets

See accompanying independent auditors' report.

Schedule 1-d

June 30, 2011

Consolidating Balance Sheet Information by Division - Chester River Health System, Inc. (CRHS)

CRHS Consolidated Total	4,356 355	9,421 22 586 682	5,140	5,000 1,524 1,704	8,228 24,493 
Eliminations	[ ]	(195)	——————————————————————————————————————		(5,395)
Chester River Health Foundation	1,182		230	1,609	1,609
Chester River Home Care and Hospice	376	270 5	1,246	73	490 331 — — 2,718
Chester River Manor	748	581 16 4 4 58	1,40/	19	2,155 ———————————————————————————————————
Chester River Hospital Center	2,050	8,570 196 582 624	3,664	5,000 1,524 22 4,962	11,508 22,007 ———————————————————————————————————
Assets	Current assets: Cash and cash equivalents Assets limited as to use, current portion Accounts receivable:	Patient accounts receivable, less allowance for doubtful accounts of \$6,598 Other Inventories Prepaid expenses and other current assets	Total current assets Investments	Assets limited as to use, less current portion: Debt service funds Construction funds Board designated and escrow funds Self-insurance trust funds Funds restricted by donor Economic interests in the net assets of related organizations	Property and equipment, net Deferred financing costs, net Investments in joint ventures and other assets  Total assets

UNIVERSITY OF MARYLAND MEDICAL SYSTEM CORPORATION AND SUBSIDIARIES

Consolidating Balance Sheet Information by Division - Chester River Health System, Inc. (CRHS)

June 30, 2011

(In thousands)

CRHS Consolidated ns Total	- 2,339	- 2,886	- 1,008	1	1,616		- 2,710	1,216	11,775	3,025	8,015	22,815		31,266		1,380	32,969	55,784
Eliminations	I	1	1	1	(195)		I		(195)	I		(195)		(3,786)	(24	(1,363)	(5,395)	(5,590)
Chester River Health Foundation	e,	l	1		16		1		19	1	43	62		3,851	246	1,363	5,460	5,522
Chester River Home Care and Hospice	24	141	1		78		1		243	I		243		2,403	55	17	2,475	2,718
Chester River Manor	382	219	4		122		1	30	757	325	09	1,142		2,436			2,436	3,578
Chester River Hospital Center	\$ 1.930	2,526	1,004		1,595		2,710	1,186	10,951	2,700	7,912	21,563		26,362	268	1,363	27,993	\$ 49,556
Liabilities and Net Assets	Current liabilities: Trade accounts pavable	Accrued payroll and benefits	Advances from third-party payors	Lines of credit	Other current liabilities	Long-term debt subject to short-term	remarketing arrangements	Current portion of long-term debt	Total current liabilities	Long-term debt. less current portion	Other long-term liabilities	Total liabilities	Net assets:	Unrestricted	Temporarily restricted	Permanently restricted	Total net assets	Total liabilities and net assets

See accompanying independent auditors' report.

## UNIVERSITY OF MARYLAND MEDICAL SYSTEM CORPORATION AND SUBSIDIARIES Consolidating Balance Sheet Information by Division June 30, 2010 (In thousands)

Schedule 2

į	ĒZ^`	University of Maryland Medical	University	V	University	Maryland	Baltimore	Shore	Chester	UMMS	Shipley's	36 South	Eliminations	Consolidated Total
Assets		Center	CARE	Vet man	Specially	2000	T ASSIGNATION ASSI							
Cash and cash equivalents Assets limited as to use, current portion	S	175,378 36,570	124	9,161	2,219	11,635 986	16,493 846	17,903 471	5,029 355	1-1	81	196	1-1	238,548 39,228
Accounts receivable: Patient accounts receivable less allowance														
for doubtful accounts of \$136,278		137,783	120	14,025	2,733	18,291	40,544	26,728	8,903	I	1 5	4	(057.50)	249,127
Other Inventories		40,926 17,014	227 39	1,631 987	193 556	1,703	306 5,456	3,785	512 690	11	- 10°5	6	(52,,03)	30,230
Prepaid expenses and other current assets		55.070	I	15	17	965	000'6	889	594	1,500		I	١	67,681
Total current assets		462,741	510	25,819	5,718	33,733	72,705	52,235	16,083	1,500	3,129	565	(25,769)	648,969
Investments		184,626		11,252	15,330	1	42,121	21,950	5,829	1	I	I	I	281,108
Assets limited as to use, less														
current portion: Daht caraice finds		39.553	ı	I	1	I	I	I	j	ı	ı	1	I	39,553
Construction funds		160,185	!	1	1	8,602	28,315	6,987	ı	1	1	1	İ	204,089
Board designated and escrow funds		. 1	1	1	1	1	l	54,464	2,000	27,202	I	I	I	86,666
Self-insurance trust funds		38,393	ı	I	1	22,738	11,529	7,351	288	1	I	1	l	80,299
Funds restricted by donor		1	I	l	•	958	l	18,297	1,44,	20,371	1	l	I	41,0/3
Economic and beneficial interests in the				000	000	,	300 3	035.0			1	ļ	(54.828)	38 430
net assets of related organizations		52,158		757.67	390	2,44	2,092	4,500					10000	
		290,289	1	29,232	390	35,540	45,739	89,449	6,735	47,573	1	I	(54,828)	490,119
Property and equipment, net		668,500	1	36,016	18,974	95,785	259,324	119,996	23,395	1,800	6,394	9,930	I	1,240,114
Deferred financing costs, net		8,661	1	ı	I	l	1	I	I		I	1	1	8,001
Investments in joint ventures and other assets		146,393		1	I	13,350	. 6,967	361	2,506	4,057	1	3,277	(60,731)	116,180
Total assets	S	1,761,210	510	102,319	40,412	178,408	426,856	283,991	54,548		9,523	13,772	(141,328)	2,785,151

## UNIVERSITY OF MARYLAND MEDICAL SYSTEM CORPORATION AND SUBSIDIARIES Consolidating Balance Sheet Information by Division June 30, 2010 (In thousands)

Consolidated Total	146,149 121,683	87,558	856,58	70,069 36,442	609,159	959,243 105,794	128,575	1,802,771	894,949 56,184 31,247	982,380	2,785,151
Eliminations	(110)	į l	(25,097)	1	(25,207)	(562)		(25,769)	(60,731) (54,828)	(115,559)	(141,328)
36 South Paca	287	1	1,889	1	2,176	11		2,176	11,596	11,596	13,772
Shipley's	35	I	1 1	1 1	35	11		35	9,488	9,488	9,523
UMMS Foundation	102	i	1 1		102	1.1		102	31,324 5,124 18,380	54,828	54,930
Chester River	2,830	1,101	1,130	1,362	10,508	6,951 9,247	. 1	26,706	26,396 75 1,371	27.842	54,548
Shore Health	10,390	5,090	3,840	1,808	34,422	88,158	-	128,873	134,814 9,221 11.083	155,118	283,991
Baltimore Washington	16,034	6,010	5,076	44   44	50,682	206,725	-	276,807	144,154 5,895	150,049	426,856
Maryland General	9,180	6,630	12,024	1,107	40,049	42,547	1	116,538	57,670 4,200	61,870	178,408
University Specialty	3,031	4,294	13,943	300	24,394	7,256	1	32,007	8,015 390 1	8,405	40,412
Kernan	5,598	2,445	853	259	13,104	12,590	1	26,135	46,819 29,365 —	76,184	102,319
University CARE	706	<del>!</del>	1 %	11	1,286	ll	1	1,286	(776)	(922)	510
University of Maryland Medical Center	S 97,956	61,988	63,300 69,794	70,069	457,608	595,578	128,575	1,217,875	486,180 56,742 413	543,335	\$ 1,761,210
Liabilities and Net Assets	Current liabilities: Trade accounts payable	Accrued payroll and benefits Advances from third-party payors	Lines of credit Other current liabilities	Long-term debt subject to short-term remarketing arrangements	Total current liabilities	Long-term debt, less current portion	Therest rate swan liabilities	Total liabilities	Net assets: Unrestricted Temporally restricted Domanously 1	Total net assets	Total liabilities and net assets

See accompanying independent auditors' report.

Consolidating Balance Sheet Information by Division - Maryland General Health Systems (MGHS)

June 30, 2010

(In thousands)

	Z	Maryland General Health	Maryland General	Maryland General		MGHS
Assets	Sys	Systems, Inc.	Hospital	Group	Eliminations	Consolidated Total
Current assets:						
Cash and cash equivalents Assets limited as to use, current portion Accounts received les	€9	40	11,538 986	57	11	11,635 986
Patient accounts receivable, less allowance for doubtful						
accounts of \$11,118		1	17.485	908	1	18 201
Other		140	1,215	(833)		10,231
Inventories			1,703		ſ	1 703
Prepaid expenses and other current assets			596	1	1	596
Total current assets		180	33,523	30		33.733
Investments						
Assets limited as to use less missions						
nsocs minica as to use, less cultent portion: Dast carrios finds						
Contraction 6 1			ļ	1	İ	ļ
Construction funds			8,602	- Landanian	1	8,602
Doald designated and escrow funds			J	1	İ	1
Self-insurance trust funds		1	22,738	1	1	22.738
runds restricted by donor		l	958	1	1	95%
Economic interests in the net assets of related organizations			3,242	1	1	3,242
			35,540			35,540
Property and equipment, net		2,248	93,537	1	1	95,785
Terrorical mancing costs, net			J	-	ſ	
investments in joint ventures and other assets		13,187	163	1	1	13,350
Total assets	S	15,615	162,763	30		178,408

(Continued)

Consolidating Balance Sheet Information by Division - Maryland General Health Systems (MGHS)

June 30, 2010

(In thousands)

MGHS Consolidated Total	9,180 11,108 6,630  12,024 1,107	40,049 42,547 33,942 116,538	57,670 4,200 — 61,870 178,408
Eliminations			
Maryland General Clin. Prac. Group	23	23	7 7 7 30
Maryland General Hospital	9,150 11,108 6,630 — 12,024 965	39,877 41,090 33,941 114,908	43,655 4,200 — 47,855 162,763
Maryland General Health Systems, Inc.	\$ 7 7 142	1,457 1,607	14,008
Liabilities and Net Assets	Current liabilities:    Trade accounts payable    Accrued payroll and benefits    Advances from third-party payors    Lines of credit    Other current liabilities    Current portion of long-term debt	Total current liabilities  Long-term debt, less current portion Other long-term liabilities  Total liabilities	Net assets: Unrestricted Temporarily restricted Permanently restricted Total net assets Total liabilities and net assets

See accompanying independent auditors' report.

Schedule 2-b

June 30, 2010

Consolidating Balance Sheet Information by Division - Baltimore Washington Medical System (BWMS)

BWMS Consolidated Total	16,493 846	40,544 366 5,456 9,000	72,705	42,121	28,315	11,529	5,895	45,739	259,324	6,967	426,856
Eliminations		(28,648)	(28,648)	I	[ ]	1 1	1 1	I	1	(117,997)	(146,645)
North County Corporation	70	(2,043) ————————————————————————————————————	(1,959)		[ ]	1 1		I	14,315		12,356
Baltimore Washington Health Enterprises	381	1,951 — — 63	2,395	I				-	12,044	2,102	16,541
Baltimore Washington Healthcare Services	620	2,969 2,359 —	5,948	I		il		l	1		5,948
Baltimore Washington Medical Center	15,472 846	35,624 366 5,456 8,775	66,539	42,121	28,315	11,529	5,895	45,739	232,965	86	387,450
Baltimore Washington Medical System, Inc.	ب د	28,332 	28,430		11				I	122,776	\$ 151,206
Assets	Current assets: Cash and cash equivalents Assets limited as to use, current portion Accounts receivable:	Patient accounts receivable, less allowance for doubtful accounts of \$10,570 Other Inventories Premaid expenses and other current assets	Total current assets	Investments	Assets limited as to use, less current portion: Debt service funds Construction funds	Board designated and escrow funds Self-insurance trust funds	Funds restricted by donor Economic interests in the net assets of related organizations		Property and equipment, net	Deferred financing costs, net Investments in joint ventures and other assets	Total assets

UNIVERSITY OF MARYLAND MEDICAL SYSTEM CORPORATION AND SUBSIDIARIES

AND SUBSIDIARIES

Consolidating Balance Sheet Information by Division – Baltimore Washington Medical System (BWMS)

June 30, 2010

BWMS Consolidated Total	16,034 19,118 6,010  5,076 4,444	50,682 206,725 19,400	276,807	144,154 5,895	150,049
Eliminations		(28,648)	(28,648)	(117,997)	(117,997)
North County Corporation	48 24 — — — 225	297	4,478	7,878	7,878
Baltimore Washington Health Enterprises	1,004 1,016 1,016 — 6,804 258	9,082 10,909 587	20,578	(4,037)	(4,037) 16,541
Baltimore Washington Healthcare Services	985 215 — — — — — — — — — — — — — — — — — — —	1,200	1,200	4,748	4,748
Baltimore Washington Medical Center	13,980 16,723 6,010 — 26,920 3,961	67,594 191,635 18,813	278,042	103,513 5,895	109,408 387,450
Baltimore Washington Medical System, Inc.	\$ 1,140	1,157	1,157	150,049	150,049
Liabilities and Net Assets	Current liabilities: Trade accounts payable Accrued payroll and benefits Advances from third-party payors Lines of credit Other current liabilities Current portion of long-term debt	Total current liabilities  Long-term debt, less current portion  Other long-term liabilities	Total liabilities	Net assets: Unrestricted Temporarily restricted Permanently restricted	Total net assets Total liabilities and net assets

See accompanying independent auditors' report.

Schedule 2-c

Consolidating Balance Sheet Information by Division - Shore Health System (SHS)

June 30, 2010 (In thousands)

SHS Consolidated Total	17,903 471	26,728 2,459 3,785	889	52,235	21,950	I	6,987	54,464	7,351	18,297	2,350	89,449	119,996		361	283,991
Eliminations		(8,826)		(8,826)	1	I	I	1	1	l	(40,905)	(40,905)	l		(8,061)	(57,792)
Chesapeake Neurological Surgery, LLC	7	342		374	I	ļ	1	ſ	l	1		1	17	1		391
Chesapeake Ear, Nose, Throat, Sinus, and Hearing Center, LLC	33	97	4	154	I	I	I	I	1			l	84			238
Shore Clinical Foundation, Inc.	383	1,464 139 —	170	2,156	I		I	ı	1		1	1	803		-	2,959
Shore Health Enterprises, Inc. and Subsidiary	51			51	1	I		1	ı	l	١	l	726	l		777
Care Health Services, Inc.	463	947 2,873 —	15	4,298	1	Ī	1	I	I	1		1	432		ı	4,730
Memorial Hospital Foundation, Inc. and Subsidiary	11	125	24	149	1	I	1	29,464		15,012		44,476	3,873		26	48,524
Shore Health System, Inc.	\$ 16,946 471	24,196 7,806 3.785	675	53,879	21,950	I	6,987	25,000	7,351	3,285	43,255	85,878	114,061	1	8,396	\$ 284,164
Assets	Current assets: Cash and cash equivalents Assets limited as to use, current portion Accounts receivable. Patient accounts receivable less allowance	for doubtful accounts of \$7,503 Other Inventories	Prepaid expenses and other current assets	Total current assets	Investments	Assets limited as to use, less current portion: Debt service funds	Construction funds	Board designated and escrow funds	Self-insurance trust funds	Funds restricted by donor Economic and beneficial interests	in the net assets of related organizations		Property and equipment, net	Deferred financing costs, net	Investments in joint ventures and other assets	Total assets

UNIVERSITY OF MARYLAND MEDICAL SYSTEM CORPORATION AND SUBSIDIARIES

Consolidating Balance Sheet Information by Division – Shore Health System (SHS)

June 30, 2010 (In thousands)

Liabilities and Net Assets	Shore Health System, Inc.	Memorial Hospital Foundation, Inc. and Subsidiary	Care Health Services, Inc.	Shore Health Enterprises, Inc. and Subsidiary	Shore Clinical Foundation, Inc.	Chesapeake Ear, Nose, Throat, Sinus, and Hearing Center, LLC	Chesapeake Neurological Surgery, LLC	Eliminations	SHS Consolidated Total
Current liabilities: Trade accounts payable	\$ 9,674	2 0	133		250	20	311	1 1	10,390
Advances from third-party payors	5,090	Çī			8		1	1	5,090
Lines of credit Other current liabilities	6.038	100	~	1,440		1.592	2.885	(8.826)	3.840
Current portion of long-term debt	1,808		-		1				1,808
Total current liabilities	34,678	730	453	1,440	1,006	1,743	3,198	(8,826)	34,422
Long-term debt, less current portion Other long-term liabilities	88,158 6,210	 26	11		57	11			88,158 6,293
Total liabilities	129,046	756	453	1,440	1,063	1,743	3,198	(8,826)	128,873
Net assets: Unrestricted Temnorarily rectricted	134,814	33,103 6.463	4,277	(993)	1,896	(1,505)	(2,807)	(34,301)	134,814
Permanently restricted	11,083	8,202						(8,202)	11,083
Total net assets	155,118	47,768	4,277	(663)	1,896	(1,505)	(2,807)	(48,966)	155,118
Total liabilities and net assets	\$ 284,164	48,524	4,730	777	2,959	238	391	(57,792)	283,991

See accompanying independent auditors' report.

Schedule 2-d

Consolidating Balance Sheet Information by Division - Chester River Health System, Inc. (CRHS)

June 30, 2010

CRHS Consolidated Total	5,029 355	8,903 512 690 594	5,829	5,000 288 1,447	6,735 23,395 — 2,506 54,548
Eliminations	11	(748)	(/48)		(5,181)
Chester River Health Foundation	1,179		203	1,348	1,348
Chester River Home Care and Hospice	504	267 22	1,232	73	495 205 — — 2,738
Chester River Manor	700	625	1,438	=	11 2,106 
Chester River Hospital Center	\$ 2,646	8,011 1,235 686 474	13,407	5,000 288 4,748	10,062 21,084 ————————————————————————————————————
	0,				
Assets	Current assets: Cash and cash equivalents Assets limited as to use, current portion Accounts receivable:	Patient accounts receivable, less allowance for doubtful accounts of \$6,123 Other Inventories Prepaid expenses and other current assets	Total current assets Investments	Assets limited as to use, less current portion: Debt service funds Construction funds Board designated and escrow funds Self-insurance trust funds Funds restricted by donor Economic interests in the net assets of related organizations	Property and equipment, net Deferred financing costs, net Investments in joint ventures and other assets Total assets

UNIVERSITY OF MARYLAND MEDICAL SYSTEM CORPORATION AND SUBSIDIARIES

Consolidating Balance Sheet Information by Division - Chester River Health System, Inc. (CRHS)

June 30, 2010

(In thousands)

Liabilities and Net Assets	ļ	Chester River Hospital Center	Chester River Manor	Chester River Home Care and Hospice	Chester River Health Foundation	Eliminations	CRHS Consolidated Total
Current liabilities:	ø	2 483	340	4	"		2.830
Accried payroll and benefits	•	3,637	315	133	,	1	4,085
Advances from third-party payors		1,056	45	1	-	1	1,101
Lines of credit		1	I	l	1	l	-
Other current liabilities		1,094	489	257	38	(748)	1,130
Current portion of long-term debt		1,335	27				1,362
Total current liabilities		9,605	1,216	394	41	(748)	10,508
I ong-term debt less current nortion		6.596	355	ļ	1		6,951
Other long-term liabilities		9,122	09		99		9,247
Total liabilities		25,323	1,631	394	106	(748)	26,706
Net assets: Investricted		22.274	1.924	2,272	3,759	(3,833)	26,396
Temporarily restricted		20		55	(9)	9	75
Permanently restricted		1,354		17	1,354	(1,354)	1,371
Total net assets		23,648	1,924	2,344	5,107	(5,181)	27,842
Total liabilities and net assets	S	48,971	3,555	2,738	5,213	(5,929)	54,548

UNIVERSITY OF MARYLAND MEDICAL SYSTEM CORPORATION AND SUBSIDIARIES

Consolidating Operations Information by Division

Year ended June 30, 2011

(In thousands)

Consolidated Total 203,134 2,270,416 2,344,204 (4.068) 5.951 6,738 182 56 775 107 107 (258) 1 \$ (4,883) 591 -638 752 (404) 66.721 5.602 237,464 13.014 370,348 6.867 4.400 290 152 (550) Maryland General 185,387 University Specialty 52.512 7007 1,975 Kernan 2.612 1,035 (3.821) 278 1,068 1.276.194 81.096 171.559 1.249.074 Total unrestricted revenue, gains and other support Excess (deficiency) of revenues over expenses Increase (decrease) in unrestricted net assets Total other nonoperating gains and losses Net assets released from restrictions used for purchase of property and edupment Change in unrealized gains on investments. Change in economic and beneficial interests in the net assets of related organizations. Change in worstelpi interest of citian ventures Capital transfers (on) from affiliate Change in hir value of designated interest change in hir value of designated interest create swares. Change in funded status of defined benefit perceion plans. Unrestricted revenues, gains and other support:
Net patient service revenue
Other operating revenue:
State support
Other revenue Equity in not income of joint ventures brestment income Change in fair value of investments Other nonoperating gains and losses Nonoperating income and expenses, net: Loss on early extinguishment of debt Other nonoperating gains and losses: Contributions Change in fair value of undesignated interest rate swaps Total operating expenses Operating income (loss) Operating expenses:
Salarites, wayes and benefits
Expendable supplies
Expendable supplies
Contracted services
Contracted services
Depreciation and amortization
Interest expense
Provision for bad debts

See accompanying independent auditors' report.

Consolidating Operations Information by Division for Maryland General Health Systems (MGHS)

Year ended June 30, 2011

(In thousands)

MGHS Consolidated Total	183,146	2,241	185,387	85,855	16,304	24,063	22,770	11,149	1,698	19,697	181,536	3,851
Eliminations	(7,257)		(7,257)	I	1		(7,257)	1		1	(7,257)	
Maryland General Clin. Prac. Group	9,445	5	9,450	I	1	6	7,257		1	2,184	9,450	
Maryland General Hospital	180,958	1,347	182,305	85,855	16,304	23,307	22,770	10,694	1,595	17,513	178,038	4,267
Maryland General Health Systems, Inc.	8	688	688	I		747		455	103		1,305	(416)
	Unrestricted revenues, gains and other support:  Net patient service revenue Other operating revenue:	State support Other revenue	Total unrestricted revenue, gains and other support	Operating expenses: Salaries, wages and benefits	Expendable supplies	Purchased services	Contracted services	Depreciation and amortization	Interest expense	Provision for bad debts	Total operating expenses	Operating income (loss)

(Continued)

Consolidating Operations Information by Division for Maryland General Health Systems (MGHS)

Year ended June 30, 2011

(In thousands)

MGHS Consolidated Total		4,400 290 152 (550)	4,292	885 	
Eliminations	1 1				
Maryland General Clin. Prac. Group	1 1			1   1   1   1   1	
Maryland General Hospital	1 1		(108)	885 — — 1,647 — 9,752 16	
Maryland General Health Systems, Inc.	<b> </b>	4,400	3,984	(1,600) (1,600) (16) (16)	
	Nonoperating income and expenses, net: Loss on early extinguishment of debt Change in fair value of undesignated interest rate swaps	Other nonoperating gains and losses: Contributions Equity in net income of joint ventures Investment income Change in fair value of investments Other nonoperating gains and losses	Total other nonoperating gains and losses Excess of revenues over expenses	Net assets released from restrictions used for purchase of property and equipment Change in unrealized gains on investments Change in economic and beneficial interests in the net assets of related organizations Change in ownership interest of joint ventures Capital transfers (to) from affiliate Change in fair value of designated interest rate swaps Change in funded status of defined benefit pension plans Other Increase in unrestricted net assets	

Consolidating Operations Information by Division for Baltimore Washington Medical System (BWMS)

Year ended June 30, 2011

(In thousands)

BWMS Consolidated Total	363,481	6,867	370,348	169,139 61.228	51,520	9,725	6.663	34,520	356,301	14,047
Eliminations	(2,423)	(4,823)	(7,246)	Ιİ	(7,246)				(7,246)	
North County Corporation	I	2,101	2,101	11	1,303	13	246 114		1,963	138
Baltimore Washington Health Enterprises	10,958	2,891	13,849	7,319	3,738	1,895	959 736		15,476	(1,627)
Baltimore Washington Healthcare Services	28,730		28,730	10,577	4,448	l		.13,073	28,098	632
Baltimore Washington Medical Center	326,216	3,292	329,508	147,837	49,277	7,830	22,001 5.813	21,447	314,604	14,904
Baltimore Washington Medical System, Inc.	\ \$	3,406	3,406	3,406	l	1			3,406	ı
	Unrestricted revenues, gains and other support: Net patient service revenue Other operating revenue.	State support Other revenue	Total unrestricted revenue, gains and other support	Operating expenses: Salaries, wages and benefits Frandable emplies	Purchased services	Contracted services	Depreciation and amortization	Provision for bad debts	Total operating expenses	Operating income (loss)

(Continued)

UNIVERSITY OF MARYLAND MEDICAL SYSTEM CORPORATION AND SUBSIDIARIES

Consolidating Operations Information by Division for Baltimore Washington Medical System (BWMS)

Year ended June 30, 2011

(In thousands)

	Baltimore Washington Medical System, Inc.	Baltimore Washington Medical Center	Baltimore Washington Healthcare Services	Baltimore Washington Health Enterprises	North County Corporation	Eliminations	BUMS Consolidated Total
Nonoperating income and expenses, net: Loss on early extinguishment of debt Change in fair value of undesignated interest rate swaps	8		1 1	1 1		1 1	1 1
Other nonoperating gains and losses: Contributions Equity in net income of joint ventures Investment income Change in fair value of investments Other nonoperating gains and losses	202 17,920	4,232 2,836 (2,821)		(384)			(182) 4,241 2,836 (2,821)
Total other nonoperating gains and losses	18,122	4,247		(378)		(17,917)	4,074
Excess (deficiency) of revenues over expenses	18,122	19,151	632	(2,005)	138	(17,917)	18,121
Net assets released from restrictions used for purchase of property and equipment Change in unrealized gains on investments Change in economic and beneficial interests in the net	750	750	11		1 1	(750)	750
assets of related organizations	1	I		I		!	1
Change in ownership interest of joint ventures Capital transfers (to) from affiliate	11			(1,831)		1,831	
Change in fair value of designated interest rate swaps Change in funded status of defined benefit pension plans	4,736	4,736		`     ;	1 1	(4,736)	4,736
Other Increase (decrease) in unrestricted		3		- (928 2)	138	(3)	23 608
net assets	\$ 72,009	74,040	052	(3,630)	130	(5/5/2)	23,000

UNIVERSITY OF MARXLAND MEDICAL SYSTEM CORPORATION AND SUBSIDIARIES

Consolidating Operations Information by Division for Shore Health System (SHS)

Year ended June 30, 2011

(In thousands)

SHS Consolidated Total	231,862	5,602	237,464	121,828 33,060	40,448 8,558	14,785 3,260 8,595	230,534	6,930	I		206	1,707	12,915 (1,814)	13,014	19,944	764	1	1		1	ŀ	(16)	20,692	
Eliminations	(604)	(1,471)	(2,075)	(580)	(1,638)	l (ē1)	(2,279)	204	I	1	1	(e1)	(143)	(204)	I	Í		(5,680)	(0,431)	l	1		(12,111)	
Chesapeake Neurological Surgery, LLC	729		729	887	155 540	19   3	1,613	(884)	I	l	ı				(884)	I	1	1	3.691	1	1	11	2.807	
Chesapeake Ear, Nose, Throat, Sinus, and Hearing Center, LLC	766	1 -	792	1,021	191	25   <sub>4</sub>	1,265	(498)	I	1	ļ	11			(498)	I	I	1	2.002		I	۱ -	1.505	
Shore Clinical Foundation, Inc.	7,756	627	8,383	9,925 455	3,091 1,010	211 —	14,759	(6,376)	I	l	1	<b>I</b> I			(6,376)	I		1	8.657	Ī	1		2.281	
Shore Health Enterprises, Inc. and Subsidiary	ı	57	57		21	12 61	94	(37)	ĺ	I	l		1		(37)	I	I	1		I	1		(37)	
Care Health Services, Inc.	5,511	87	5,598	4,005 269	1,311	\$   8 8	5,724	(126)			2	Ι		3	(123)	1	l	ı	1 1	1	1		(123)	()
Memorial Hospital Foundation, Inc. and Subsidiary	I			11	1 1	111			ı		121	346	5,594 (382)	5,679	5,679	I	I	I		1	1		\$ 679	
Shore Health System, Inc.	\$ 217,704	6,301	224,005	106,570 32,302	37,317 6,990	14,484 3,260 8,435	209,358	14,647	I	1	83	1,421	7,321 (1,289)	7,536	22,183	764	ı	2,680	6,431	(2004)	I	15	\$ 20.691	
	Unrestricted revenues, gains and other support:  Net patient service revenue Other onesering revenue	State upport State support Other revenue	Total unrestricted revenue, gains and other support	Operating expenses: Salaries, wages and benefits Expendable supplies	Purchased services Contracted services	Depreciation and amortization Interest expansion Provision for had alebra	Total operating expenses	Operating income (loss)	Nonoperating income and expenses, ner. Loss on carly extinguishment of debt	Change in fair value of undesignated interest rate swaps	Other nonoperating gains and losses:	Equity in net income of joint ventures Investment income (loss)	Change in fair value of investments Other nonoperating gains and losses	Total other nonoperating gains and losses	Excess (deficiency) of revenues over expenses	Net assets released from restrictions used for purchase of property and equipment	Change in unrealized gains on investments	Change in economic and ocherical interests in the net assets of relative organizations	Change in ownership interest of joint ventures Canital transfers (10) from affiliate	Capital hamsels (w) from animals.  Change in fair value of designated interest rate swaps	Change in funded status of defined benefit pension plans	Net losses from nonconsolidated subsidiaries	Increase (decrease) in unrestricted net assets	

Schedule 3-d

AND SUBSIDIARIES
Consolidating Operations Information by Division for Chester River Health System, Inc. (CRHS)

Year ended June 30, 2011

(In thousands)

	I	Chester River Hospital Center	Chester River Manor	Chester River Home Care and Hospice	Chester River Health Foundation	Eliminations	CRHS Consolidated Total
prestricted revenues, gains and other support:  Net patient service revenue  Other operating revenue:	↔	55,065	8,494	2,574	1	1	66,133
State support Other revenue	ļ	498	26	64			288
Total unrestricted revenue, gains and other support	1	55,563	8,520	2,638			66,721
perating expenses:							
Salaries, wages and benefits		29,568	3,949	1,843		1	35,360
Expendable supplies		8,109	843	99	I	I	9,018
Purchased services		9,859	2,939	492	I	I	13,290
Contracted services		1,497	1	1	1	1	1,497
Depreciation and amortization		3,594	219	42	I	I	3,855
Interest expense		385	10	I	I	I	395
Provision for bad debts	l	2,020	103	73		1	2,196
Total operating expenses	l	55,032	8,063	2,516			65,611
Operating income	ı	531	457	122			1,110

Consolidating Operations Information by Division for Chester River Health System, Inc. (CRHS)

Year ended June 30, 2011

(In thousands)

CRHS Consolidated Total	1	591 — 638 752 (404)	1,577		1	1,834 349 4,870
Eliminations	l		(217)	11		264
Chester River Health Foundation	l	591 	217	11		(125)
Chester River Home Care and Hospice	l	14	131	1 1		131
Chester River Manor	ļ	%	462	11		50
Chester River Hospital Center	I		1,563		1 1 1	1,834 160 4,088
	Nonoperating income and expenses, net: Loss on early extinguishment of debt	Other nonoperating gains and losses: Contributions Equity in net income of joint ventures Investment income Change in fair value of investments Other nonoperating gains and losses	Total other nonoperating gains and losses  Excess of revenues over expenses	Net assets released from restrictions used for purchase of property and equipment Change in unrealized gains on investments Change in economic and beneficial interests in the net assets of	related organizations Change in ownership interest of joint ventures Conited transfers (12) from affiliate	Change in fair value of designated interest rate swaps Change in funded status of defined benefit pension plans Other Increase in unrestricted net assets

See accompanying independent auditors' report.

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UNIVERSITY OF MARYIAND MEDICAL SYSTEM CORPORATION
AND SUBSDIBLIARES
Consolidating Operations Information by Division
Year ended June 30, 2010
(In thousands)

Consolidated Total	2,129,662	3.200 66,106	2,198,968	988,399	312,381	117,766	40,051 179,289	2,136,523	62.445	(816)	(33,700)	8,137	3,514 136	45,592 (13,798)	43,581	71.510	32,612	I	3,478	t	(7,410)	(4.766)	06 304	1000
Ciminations	(1.080)	(1.958)	(3.038)	11	(3.846)		1 1	(3.846)	808	I	I	I	3.750	370	4,120	4.928	1	l	1 1	(5.746)	ı	١ξ	(20)	(140)
36 South	I	1.147	1.147	172	742	303	19	1,331	(184)	1	1	1	Į I	1 1		(184)	1	I		l	1	1.	1 (6);	(cel)
Shipley's	I	1 88	886	1-	455	159	1 1	615	373	I	I	I	11		1	373	1	I	11	I	1	ı		5/5
UMMS Foundation	1			1 1	. 1		1 1			ı	I	6,927	1065	1,888	6,616	6,616	(4,127)	1		1	I	1.		2.490
Chester River	65,324	099	65.984	36.442	12.878	1.160 3,336	3,335	67,447	(1.463)	I	I	651	17.	65 (169)	819	(644)	I	ĺ	1 1	1.977	i	(575)	7	09/
Shore Health	216,774	3,393	220,167	115,155	38.851	9,590 14,256	2,451 9,363	219.295	872	ı	ı	559	150	13,043	9,224	10.096	1.090	I	1 3	1	(3)	1	(1)	11,173
Baltimore Washington	343,289	7,063	350,352	165,344	53,745	9,157 22,601	5,754 31,308	343,038	7.314	I	I	I	186	5,862 (4,763)	1,498	3,812	1,000	I	l	1 1	ı	(361)	(2)	9.449
Maryland General	178.611	2.174	180.785	86.133	26.162	22,793 9,888	1.205	178,347	2,438	1	I	I	3,367	3.255	4.195	6,633	26.563	I	l		I	(3.830)	18	29,384
University Specialty	54,088	221	54,309	28.482	14,331	2.068	885 5.742	57.519	(3.210)	I	i	Ī	8	1.721	1,793	(1.417)	1	I	1	!		1	ì	(1.417)
Kernan	97,532	2.488	100,020	46,161	18,279	7,636	536 9.057	100.154	(134)	1	I	I	8	1,259	1,309	1,175	750	I	I	] [	1	1		1,925
University CARE	2,666	2,144	4,810	3,500	4,419	П	328	8.510	(3,700)	l	l	I	I	111	1	(3,700)	I	1	1	3,769	ı	1	(29)	40
University of Maryland Medical Center	\$ 1.172.458	3.200	1.223,444	507,010	146,365	90,508	28.748	1.164.113	59.331	(816)	(33.700)	١	(3.789)	18,502	14.007	38.822	7,336	1	1 9	5.4/8	(7.408)	Į	13	\$ 42.241
	and other support:	Other operating revenue: State support Other revenue	Total unrestricted revenue, gains and other support	Operating expenses: Salaries, wages and benefits	Expendable supplies Purchased services	Contracted services Demecration and amortization	Interest expense Provision for bad debts	Total operating expenses	Operating income (loss)	Nonoperating income and expenses, net: Loss on early extinguishment of debt	Change in fair value of undesignated interest rate swaps	Other nonoperating gains and losses:	Equity in net income of joint ventures	Investment income (loss) Change in fair value of investments Other accommending region and locase	Total other nonoperating gains and losses	Excess (deficiency) of revenues over expenses	Net assets released from restrictions used for purchase of property and equipment	Change in unrealized gains on investments Change in contouring and handfeits interests in	the net assets of related organizations	Change in ownership interest of joint ventures Capital transfers (10) from affiliate	Change in fair value of designated interest rate swaps	Change in funded status of defined benefit pension plans	Other	Increase (decrease) in unrestricted net assets

Schedule 4-a

Consolidating Operations Information by Division for Maryland General Health Systems (MGHS)

Year ended June 30, 2010

(In thousands)

	Maryland General Health Systems, Inc.	Maryland General Hospital	Maryland General Clin. Prac. Group	Eliminations	MGHS Consolidated Total
restricted revenues, gains and other support: Net patient service revenue Other operating revenue:	8	175,997	9,492	(6,878)	178,611
State support Other revenue	868	1,275	-		2,174
Total unrestricted revenue, gains and other support	868	177,272	9,493	(6,878)	180,785
perating expenses: Salaries wages and henefits	l	86.133	1	Í	86,133
Expendable supplies	I	15,551	<b>,</b>		15,551
Purchased services	826	25,323	13		26,162
Contracted services		22,793	6,878	(6,878)	22,793
Depreciation and amortization	448	9,440			9,888
Interest expense	113	1,092			1,205
Provision for bad debts		14,013	2,602		16,615
Total operating expenses	1,387	174,345	9,493	(6,878)	178,347
Operating income (loss)	(489)	2,927			2,438

Consolidating Operations Information by Division for Maryland General Health Systems (MGHS)

Year ended June 30, 2010

(In thousands)

MGHS Consolidated Total		3,367 (428) 3,255 (1,999)	4,195	26,563 ————————————————————————————————————	7,364
Eliminations					
Maryland General Clin. Prac. Group	1 1				
Maryland General Hospital	1 1	— (428) 3,255 (1,999)	3,755	26,563 ————————————————————————————————————	76,286
Maryland General Health Systems, Inc.	 ₩	3,367	3,367		3,098
	Nonoperating income and expenses, net: Loss on early extinguishment of debt Change in fair value of undesignated interest rate swaps	Other nonoperating gains and losses: Contributions Equity in net income of joint ventures Investment loss Change in fair value of investments Other nonoperating gains and losses	Total other nonoperating gains and losses Excess of revenues over expenses	Net assets released from restrictions used for purchase of property and equipment Change in unrealized gains on investments Change in economic and beneficial interests in the net assets of related organizations Change in ownership interest of joint ventures Capital transfers (to) from affiliate Change in fair value of designated interest rate swaps Change in funded status of defined benefit pension plans Other	Increase in unrestricted net assets

Year ended June 30, 2010

Consolidating Operations Information by Division for Baltimore Washington Medical System (BWMS)

(In thousands)

BWMS Consolidated Total	343,289	7,063	350,352	165,344	55,129	53,745 9.157	22,601	5,754	31,308	343,038	7,314
Eliminations	(2,203)	(4,106)	(6,309)	I	1 8	(6,309)		I	1	(6,309)	
North County Corporation	1	2,216	2,216	I	6	1,245	534	88		1,867	349
Baltimore Washington Health Enterprises	8,753	2,464	11,217	5,201	704	3,287	943	762		11,597	(380)
Baltimore Washington Healthcare Services	27,298		27,298	9,917		5,230		I	11,801	26,948	350
Baltimore Washington Medical Center	309,441	3,251	312,692	146,988	54,425	50,292	8,437 21.124	4,904	19,507	305,697	6,995
Baltimore Washington Medical System, Inc.	·>	3,238	3,238	3,238	. 1	1		I		3,238	
	Unrestricted revenues, gains and other support:  Net patient service revenue Other partient revenue	State support Other revenue	Total unrestricted revenue, gains and other support	Operating expenses: Salaries, wages and benefits	Expendable supplies	Purchased services	Contracted services Denreciation and amortization	Interest expense	Provision for bad debts	Total operating expenses	Operating income (loss)

(Continued)

UNIVERSITY OF MARYLAND MEDICAL SYSTEM CORPORATION AND SUBSIDIARIES

Consolidating Operations Information by Division for Baltimore Washington Medical System (BWMS)

Year ended June 30, 2010

(In thousands)

BWMS Consolidated Eliminations	I I	(8,621)	(8,621)	(1,000) 	(6,262)
North County Corporation			349		349
Baltimore Washington Health Enterprises		(82) (207)	(289)	(1,908)	(2,579)
Baltimore Washington Healthcare Services	1 1	11111	350		350
Baltimore Washington Medical Center	1 1		1,598	1,000	9,231
Baltimore Washington Medical System, Inc.	 %	186 8,624 —	8,810	1,000 (1,089) (1,089) (1,089)	\$ 8,360
	Nonoperating income and expenses, net: Loss on early extinguishment of debt Change in fair value of undesignated interest rate swaps	Other nonoperating gains and losses: Contributions Equity in net income of joint ventures Investment income Change in fair value of investments Other nonoperating gains and losses	Total other nonoperating gains and losses Excess (deficiency) of revenues over expenses	Net assets released from restrictions used for purchase of property and equipment Change in unrealized gains on investments Change in economic and beneficial interests in the net assets of related organizations Change in ownership interest of joint ventures Capital transfers (to) from affiliate Change in fair value of designated interest rate swaps Change in funded status of defined benefit pension plans Other	Increase in unrestricted net assets

UNIVERSITY OF MARYLAND MEDICAL SYSTEM CORPORATION AND SUBSIDIARIES

Consolidating Operations Information by Division for Shore Health System (SHS)

Year ended June 30, 2010

(In thousands)

SHS Consolidated Total	216,774	220,167	115,155 29,629 38,831 9,590 14,256 2,451 9,363	219,295	872		559 — (2,577) 13,043 (1,801)	9,224	10,096	1,090	1   1	(2)	118	11,173
Eliminations	(554)	(1,990)	(530) ————————————————————————————————————	(2,112)	122	11	(240) (84) 202	(122)	1	11	(4,332)			(4,332)
Chesapeake Neurological Surgery, LLC	347	347	52 1 234 606 19 19	976	(629)	11			(629)	11	1		115	(628)
Chesapeake Ear, Nose, Throat, Sinus, and Hearing Center, LLC	792	834	913 40 199 199 29	1,210	(376)	il			(376)	11	11			(376)
Shore Clinical Foundation, Inc.	8,692	8,951	7,398 441 2,567 3,059 141 1725	14,331	(5,380)	I 1	1     1		(5,380)	11	%	7,28,5		447
Shore Health Enterprises, Inc. and Subsidiary	8	57	33       84   12	119	(62)	1 1	11111		(62)	11	11	11	115	(61)
Care Health Services, Inc.	5,780	5,796	3,948 290 1,214 18 36 	2,600	196		"	1	197	11	11	11	1	197
Memorial Hospital Foundation, Inc. and Subsidiary	1 1		111111		١	11	559 — (1,278) 5,986 (515)	4,752	4,752		1 [		"	4,753
Shore Health System, Inc.	\$ 201,717	206,172	103,374 28,857 36,112 5,907 14,019 2,451 8,451	199,171	7,001	1	240 — (1,216) 7,057 (1,488)	4,593	11,594	1,090	4,332	(5,827) (2)	118	\$ 11,173
	s, gains and other support: e revenue evenue:	Other revenue Total unrestricted revenue, gains and other support	Operating expenses: Salaries, wages and benefits Expendable supplies Purchased services Contracted services Depreciation and amortization Interest expense Provision for bad debts	Total operating expenses	Operating income (loss)	Nonoperating income and expenses, net: Loss on early extinguishment of debt Change in fair value of undesignated interest rate swaps	Other nonoperating gains and losses: Contributions Equity in net income of joint ventures Investment income (loss) Change in fair value of investments Other nonoperating gains and losses	Total other nonoperating gains and losses	Excess (deficiency) of revenues over expenses	Net assets released from restrictions used for purchase of property and equipment Change in unrealized gains on investments Change in conomic and beneficial interests in the net assets of related Change in economic and beneficial interests in the net assets of related	organizations Change in ownership interest of joint ventures	Capital transfers (to) from affiliate Change in fair value of designated interest rate swaps	Change in funded status of defined benefit pension plans Net losses from nonconsolidated subsidiaries	Increase (decrease) in unrestricted net assets

Schedule 4-d

Consolidating Operations Information by Division for Chester River Health System, Inc. (CRHS)

Year ended June 30, 2010

(In thousands)

CRHS Consolidated Total	65,324	099	65,984		36,442	9,891	12,878	1,160	3,336	405	3,335	67,447	(1,463)
Eliminations	I				165		l	1	I	(2)		163	(163)
Chester River Health Foundation	ļ				I	1		l	1				
Chester River Home Care and Hospice	2,462	83	2,545		1,706	57	545		<b>∞</b>		108	2,424	121
Chester River Manor	7,839		7,841		4,306	793	2,220		198	14	57	7,588	253
Chester River Hospital Center	\$ 55,023	575	55,598		30,265	9,041	10,113	1,160	3,130	393	3,170	57,272	(1,674)
	Unrestricted revenues, gains and other support:  Net patient service revenue Other operating revenue:	State support Other revenue	Total unrestricted revenue, gains and other support	Operating expenses:	Salaries, wages and benefits	Expendable supplies	Purchased services	Contracted services	Depreciation and amortization	Interest expense	Provision for bad debts	Total operating expenses	Operating income (loss)

UNIVERSITY OF MARYLAND MEDICAL SYSTEM CORPORATION AND SUBSIDIARIES

Consolidating Operations Information by Division for Chester River Health System, Inc. (CRHS)

Year ended June 30, 2010

(In thousands)

CRHS Consolidated Total	1	651 — 275 62 (169)	819 (644)	
Eliminations	1		(349)	
Chester River Health Foundation	I	651 — 32 — (334)	349	(205)
Chester River Home Care and Hospice	I		124	(1)
Chester River Manor	l		7 260	2 262
Chester River Hospital Center		220 62 364	(1,028)	205 ————————————————————————————————————
	€9			· •
	Nonoperating income and expenses, net: Loss on early extinguishment of debt	Other nonoperating gains and losses: Contributions Equity in net income of joint ventures Investment income Change in fair value of investments Other nonoperating gains and losses	Total other nonoperating gains and losses Excess (deficiency) of revenues over expenses	Net assets released from restrictions used for purchase of property and equipment Change in unrealized gains on investments Change in economic and beneficial interests in the net assets of related organizations Change in ownership interest of joint ventures Change in ownership interest of joint ventures Capital transfers (to) from affiliate Change in fair value of designated interest rate swaps Change in funded status of defined benefit pension plans Other Increase in unrestricted net assets

Combining Balance Sheet Information – Obligated Group
June 30, 2011
(In thousands)

	University of Maryland Medical	Kernan Hospital.	University Specialty	Maryland General	Baltimore Washington Medical	Shore Health	Chester River Health	UMMS		Obligated Group
Assets	Center	Inc.	Hospital, Inc.	Hospital, Inc.	Center, Inc.	System, Inc.	System, Inc.	Foundation	Eliminations	Total
Current assets:										
Cash and cash equivalents	\$ 140,420	14,416	2,947	14,551	24,561	13,585	1	I	1	210,480
Assets limited as to use, current portion	37,469		I	986	833	471	•	I	ı	39,759
Accounts receivable:  Dationt accounts receivable less allowers										
for doubtful accounts of \$151.402	152.030	12.026	5.606	12.804	35.324	26.390	I	I	1	244.180
Other	36,716	6,314	323	1,403	1,234	4,276	1	(2,672)	(9,428)	38,166
Inventories	18,119	066	616	2,043	6,014	3,774	I	`   :	`   ;	31,556
Prepaid expenses and other current assets	39,391	105	24	300	8,759	941	!	1,500	1.	51,020
Total current assets	424,145	33,851	9,516	32,087	76,725	49,437		(1,172)	(9,428)	615,161
Investments	304,671	13,154	5,303	1	48,420	30,162	1	I	1	401,710
Assets limited as to use, less current portion:										
Debt service funds	41,770	I	I	I	l	1	1	I	ı	41,770
Construction funds	146,001	1,997	l	6,867	19,874	3,086	I	I		180,825
Board designated and escrow funds	ı	1	I	1	I	25,000	I	32,211	I	57,211
Self-insurance trust funds	39,485	I	Ì	25,326	16,495	11,916	1	1	ı	93,222
Funds restricted by donor	1		I	3,545	ı	3,852	1	21,536	I	28,933
Economic interests in the net assets of related										
organizations	56,843	34,982	407	735	5,896	59,272		1	(59,613)	98,522
	284,099	36,979	407	39,473	42,265	103,126	I	53,747	(59,613)	500,483
Property and equipment, net	717,512	36,569	20,025	91,492	243,873	112,836	1	1,807	1	1,224,114
Deferred financing costs, net	7.547	1	1	ı	l	!	ı	I	l	7,547
Investments in joint ventures and other assets	201,466	1	1	149	630	8,799	32,969	5,315	(34,733)	214,595
Total assets	\$ 1,939,440	120,553	35,251	163,201	411,913	304,360	32,969	59,697	(103,774)	2,963,610

(Continued)

UNIVERSITY OF MARYLAND MEDICAL SYSTEM CORPORATION
AND SUBSIDIARIES
Combining Balance Sheet Information – Obligated Group
June 30, 2011
(In thousands)

Obligated Group Total	148,798 121,656 95,004 54,600 118,741	164,055 22,375 725,229	850,452 79,316 105,400 1,760,397	1,095,147 75,523 32,543 1,203,213 2,963,610
Eliminations	(228)	(133)		(34,795) (59,613) — (94,408) (103,774)
UMMS Foundation	8	%	84	34,925 6,122 18,566 59,613
Chester River Health System, Inc.	11111	1 1		31,266 323 1,380 32,969 32,969
Shore Health System, Inc.	5,406 13,019 5,287 — 6,197	1,883	85,845 6,837 — 124,474	155,505 12,197 12,184 179,886 304,360
Baltimore Washington Medical Center, Inc.	20,766 17,924 8,112 — 24,434	4,120	187,521 14,987 ————————————————————————————————————	128,153 5,896 — — — — — — — — — — 134,049 411,913
Maryland General Hospital, Inc.	9,720 12,252 6,468 — 4,670	884	40,220 24,593 — 98,807	60,114 4,280 — 64,394 163,201
University Specialty Hospital, Inc.	3,347 2,909 4,697 — 11,653	300	6,956 186 — 30,048	4,796 407 — 5,203 35,251
Kernan Hospital, Inc.	5,763 4,138 3,596 - 1,600	270	12,319 441 — 28,127	57,444 34,982 — 92,426 120,553
University of Maryland Medical Center	\$ 103,712 71,642 66,844 54,600 79,192	164,055 15,051 555,096	517,591 32,272 105,400 1,210,359	657,739 70,929 413 729,081 \$ 1,939,440
Liabilities and Net Assets	Current liabilities: Trade accounts payable Accrued payroll and benefits Advances from third-party payors Lines of credit United The current liabilities of the current liabilities of the current liabilities to short from semadosing	Long-ream took support to stoot-ream remarketing arrangements Current portion of long-term debt Total current liabilities	Long-term debt, less current portion Other long-term liabilities Interest rate swap liabilities Total liabilities	Net assets: Unrestricted Unrestricted Temporarily restricted Permanently restricted Total net assets Total liabilities and net assets

Schedule 6

Combining Balance Sheet Information -- Obligated Group June 30, 2010 (In thousands)

Obligated Group Total	230,704 38,873	231,702 46,825 29,501 66,648	644,253	39,553 204,089 52,202	80,011 24,614 79,344	479,813 1,165,808 8,661 148,922 2,722,736	
Eliminations	1.1	(10,567)	(10,567)	111		(54,828) — — (38,015) (103,410)	
UMMS Foundation	1.1		1,500	 	20,371	47,573 1,800 4,057 54,930	
Chester River Health System, Inc.	1-1		1 1			27,842	
Shore Health System, Inc.	16,946 471	24,196 7,806 3,785 675	53,879	6,987	7,351 3,285 43,255	85,878 114,061 — 8,396 284,164	
Baltimore Washington Medical Center, Inc.	15,472 846	35,624 366 5,456 8,775	66,539	28,315	11,529	45,739 232,965 — 86 387,450	
Maryland General Hospital, Inc.	11,538	17,485 1,215 1,703 596	33,523	8,602	22,738 958 3,242	35,540 93,537 — 163 162,763	
University Specialty Hospital, Inc.	2,219	2,733 193 556 17	5,718	00. (-)	. 390	390	
Kernan Hospital, Inc.	9,151	13,881 6,886 987 15	30,920	4C411		29,232 35,971 — — 107,375	
University of Maryland Medical Center	\$ 175,378 36,570	137,783 40,926 17,014 55,070	462,741	39,553 160,185	38,393	290,289 668,500 8,661 146,393	2011
Assets	Current assets: Cash and cash equivalents Assets limited as to use, current portion Accounts receivable:	Patient accounts receivable, less allowance for doubtful accounts of \$128,261 Other Inventories Prepaid expenses and other current assets	Total current assets	Assets limited as to use, less current portion: Debt service finds Construction funds Roard designated and escrew finds	Soft-insurance trust finds Finds restricted by donor Economic interests in the net assets of related organizations	Property and equipment, net Deferred financing costs, net Investments in joint ventures and other assets Total assets	The state of the s

UNIVERSITY OF MARYLAND MEDICAL SYSTEM CORPORATION
AND SUBSIDIARIES
Combining Balance Sheet Information – Obligated Group
June 30, 2010
(In thousands)

Obligated Group Total	138,908 113,797 86,457 63,300 119,669	70,069 34,455 626,655	935,745 95,876 128,575 1,786,851	848,587 56,051 31,247 935,885	2,722,736
Eliminations	(110) — — — (9,895)	(10,005)	(562)	(38,015) (54,828) ———————————————————————————————————	(103,410)
UMMS Foundation	102	102	102	31,324 5,124 18,380 54,828	54,930
Chester River Health System, Inc.	11111	1 1 1		26,396 75 1,371 27,842	27,842
Shore Health System, Inc.	9,674 12,068 5,090 — 6,038	1,808	88,158 6,210 — — 129,046	134,814 9,221 11,083 155,118	284,164
Baltimore Washington Medical Center, Inc.	13,980 16,723 6,010 — 26,920	3,961	191,635 18,813 — — 278,042	103,513 5,895 — — 109,408	387,450
Maryland General Hospital, Inc.	9,150 11,108 6,630 — 12,024	965	41,090 33,941 — — 114,908	43,655 4,200 — 47,855	162,763
University Specialty Hospital, Inc.	3,031 2,826 4,294 13,943	300	7,256 357 — 32,007	8,015 390 ———————————————————————————————————	40,412
Kernan Hospital, Inc.	5,015 3,843 2,445 1- 845	259	12,590 441 — 25,438	52,705 29,232 — — 81,937	107,375
University of Maryland Medical Center	\$ 97,956 67,339 61,988 63,300 63,794	70,069 27,162 457,608	595,578 36,114 128,575 1,217,875	486,180 56,742 413 543,335	\$ 1,761,210
Liabilities and Net Assets	Current liabilities: Trade accounts payable Accrued payroll and benefits Advances from third-party payors Lines of credit Other current liabilities	Long-term two support to smort-count tennancing arrangements  Current portion of long-term debt  Total current liabilities	Long-term debt, less current portion Other long-term liabilities Interest rate swap liabilities Total liabilities	Net assets: Unrestricted Temporarily restricted Permanently restricted Total net assets	Total liabilities and net assets

See accompanying independent auditors' report.

UNIVERSITY OF MARYLAND MEDICAL SYSTEM CORPORATION
AND SUBSIDIARIES
Combining Operations Information - Obligated Group
Year ended June 50, 2011
(In thousands)

UNIVERSITY OF MARYLAND MEDICAL SYSTEM CORPORATION
AND SUBSTIDIABLES
Combining Operation, Information – Obligated Group
Year ended June 30, 2010
(In thousands)

		University of Maryland Medical Center	ind Medical Center				Maryland	Baltimore Washington	- 1	Shore Health System		Chester			Obligated
	University Hospital	Shock Trauma Center	Cancer	Subtotal	Kernan Hospital	University Specialty	General	Medical	Memorial	Dorchester	Subtotal	River Health System, Inc.	UMMS Foundation	Eliminations	Group
Unrestricted revenues, gains and other support: Net patient service revenue	\$ 940,075	175,990	56,393	1,172,458	95,846	54,088	175,997	309,441	154,346	47,371	201,717	1	ı	(452)	2,009,095
Other operating revenue: State support Other revenue	47.607	3,200	179	3.200	2,424	221	272,1	3,251	3,426	1,029	4,455	1 1	11	(159)	3,200
Total unrestricted revenue, gains and other support	987.682	179.190	56.572	1,223,444	98.270	54,309	177,272	312,692	157,772	48,400	206,172	1	I	(1,083)	2,071.076
Operating expenses: Salaries, wages, and benefits	438,885	50,628	17,497	507,010	44,887	28,482	86,133	146.988	78,414	24,960	103,374	1 1	1 1	1.1	916,874
Expendable supplies Purchased services	89,905	40,370	16,090	146.365	16,930	14,331	25,323	50.292	26,847	9,265	36,112	1	1	(1,083)	288.270
Contracted services Depreciation and amortization	77,651 55,132	9,147	3,710 2,446	90,508	7,636 2,990	2,068	9,440	8.457 21.124	11,339	2,680	14.019	11	П	11	111,438
Interest expense Provision for bad debts	28,721	37,459	27 5,414	28,748	556 8.990	885 5.742	1,092	19.507	2,186	265	2,451 8,451			1	38,636
Total operating expenses	935,122	165,836	63,155	1,164,113	97,093	57,519	174,345	305.697	152,400	46,771	171,661	1		(1,083)	1,996,855
Operating income (loss)	52,560	13,354	(6,583)	59,331	1,177	(3,210)	2,927	6.995	5,372	1,629	7,001	ı	1	I	74,221
Nonoperating income and expenses, ner. Loss on early extinguishment of debt Change in fair value of undesignated interest rate swaps	(816) (33,700)	11	i i	(816)	1.1	1.1	1.1	11	H	11	1.1	11	11	11	(816)
Other nonoperating gains and losses: Contributions	I	I	1	ı	I	ı	ı	l	240	i	240	I	6,927	1	7,167
Equity in net income of joint ventures	(3.789)	1 98	Ιš	(3.789)	٦٦	۱۶	169	۱۶	1351)	%	01210	1.1	1.065	1,417	(2,372)
Livesuiten involve (1958) Chapte in fair value of investments Other honoperating rains and losses	18,502	311	}   <b> </b>	18,502	1,038	1,721	3,255 (1,999)	5,862 (4,556)	7.052	, vo a	7,057	1 1	(3,264)	1 1	39,323
Total other nonoperating gains and losses	11,235	1.966	806	14,007	1,329	1,793	828	1.598	4,540	53	4,593		6,616	1,417	32,181
Excess (deficiency) of revenues over expenses	29,279	15,320	(5,777)	38,822	2,506	(1,417)	3,755	8.593	9,912	1,682	11,594	ļ	919'9	1,417	71,886
Net assets released from restrictions used for purchase of property and equipment	7,336	1	ı	7,336	750	I.	26,563	1,090	1,090	ı	1,090	I	(4,127)	1	32,612
Change in unrealized gains on investments Change in according and handfield interests in the net	ı	I	I	I	I	I	I	l	l	I	l	I	I	I	11
assets of related organizations	1	l	I	13	I	I	ı	I	4,332	I	4,332	I	1	1	4.332
Change in ownership interest of joint ventures	3,478	1	1 1	3,478	H	11	1000	1 1	(5.87)	H	(5.827)	1 1		1 1	(6,947)
Change in fair value of designated interest rate swaps	(7,408)	l <b>I</b>		(7,408)	1	ŀ	ļ	1	0	I	6	ı	1	1	(7,410)
Change in funded status of defined benefit pension plans	1	I	ı	ı	1	I	(3,830)	(361)	1	I	1	١٤	1	1	(4,191)
Net gains (losses) from nonconsolidated subsidiaries Other	=	<b> </b>	1 1	l۳	11	11	l <sup>∞</sup>	18	1 🖹	11	1 (5)	ē I	ı <sup>–</sup>	I	17
Increase (decrease) in unrestricted net assets	\$ 32.698	15,320	(5,777)	42,241	3,256	(1.417)	26.286	9,231	9,491	1,682	11,173	760	2,490	1,417	95,437