

**YALE-NEW HAVEN HOSPITAL  
ANNUAL REPORTING  
FISCAL YEAR 2015  
REPORT 20 - REPORT OF EACH JOINT VENTURE, PARTNERSHIP  
AND CORPORATION RELATED TO THE HOSPITAL**

(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
<b>A.</b>	<b>AFFILIATE NAME</b>	<b>YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)</b>
		YNHHSC IS THE PARENT CORPORATION OF YALE-NEW HAVEN HOSPITAL, YNHHS MSO INC. WHICH ARE AFFILIATED WITH YALE-NEW HAVEN HOSP., BRIDGEPORT VERTICAL NETWORK, AND GREENWICH VERTICAL NETWORK.
1	Affiliate Description	
2	Affiliate type of service	Parent Corporation
3	Tax Status	Not for Profit
4	Street Address	789 Howard Avenue
5	Town	New Haven
6	State	Connecticut
7	Zip Code	06519 -
8	CEO Name	Marna P. Borgstrom
9	CEO Title	President
10	CT Agent Name	William J Aseltyne
11	CT Agent Company	Yale New Haven Hospital
12	CT Agent Company Street Address	20 York Street, CB230, Legal & Risk Services Dept
13	CT Agent Town	New Haven
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06510 -
<b>B.</b>	<b>AFFILIATE NAME</b>	<b>CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENTURY)</b>
		CENTURY OPERATES AN AGENCY SPECIALIZING IN HEALTHCARE PATIENT RECEIVABLE COLLECTIONS IN WHICH YORK ENTERPRISES OWNS A 47.6% INTEREST.
1	Affiliate Description	
2	Affiliate type of service	Collection Agency
3	Tax Status	For Profit
4	Street Address	23 Maiden Lane
5	Town	North Haven
6	State	Connecticut
7	Zip Code	06473 -
8	CEO Name	Eugene Colucci
9	CEO Title	CFO
10	CT Agent Name	Steven Markesich
11	CT Agent Company	Century Financial Services
12	CT Agent Company Street Address	23 Maiden Lane
13	CT Agent Town	North Haven
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06473 -
<b>C.</b>	<b>AFFILIATE NAME</b>	<b>MEDICAL CENTER PHARMACY AND HOME CARE CENTER, INC.</b>
		MEDICAL CENTER PHARMACY IS A WHOLLY OWNED SUBSIDIARY OF YORK ENTERPRISES, INC. IT OPERATES A RETAIL PHARMACY WITH MULTIPLE LOCATIONS. CURRENTLY INACTIVE IN PROVIDING HOME IV INFUSION SERVICES.
1	Affiliate Description	
2	Affiliate type of service	Pharmacy
3	Tax Status	For Profit
4	Street Address	50 York Street
5	Town	New Haven
6	State	Connecticut
7	Zip Code	06511 -
8	CEO Name	Vincent Tamaro
9	CEO Title	President
10	CT Agent Name	William J Aseltyne
11	CT Agent Company	Yale New Haven Hospital
12	CT Agent Company Street Address	20 York Street, CB-230
13	CT Agent Town	New Haven

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(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06505 -
<b>D. AFFILIATE NAME MEDICAL CENTER REALTY, INC.</b>		
1	Affiliate Description	MEDICAL CENTER REALTY, INC. IS A WHOLLY OWNED SUBSIDIARY OF YORK ENTERPRISES, INC.
2	Affiliate type of service	Real Estate
3	Tax Status	For Profit
4	Street Address	20 York Street
5	Town	New Haven
6	State	Connecticut
7	Zip Code	06510 -
8	CEO Name	Vincent Tammaro
9	CEO Title	President
10	CT Agent Name	William J Aseltyne
11	CT Agent Company	Yale-New Haven Health Services Corporation
12	CT Agent Company Street Address	789 Howard Ave, CB230, Legal & Risk Services Dept
13	CT Agent Town	New Haven
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06519 -
<b>E. AFFILIATE NAME NORTHEAST MEDICAL GROUP, INC.</b>		
1	Affiliate Description	Physician related services, such as patient care, medical education, and research and administration to YNHH, BH, GH and the community.
2	Affiliate type of service	Physicians Services
3	Tax Status	Not for Profit
4	Street Address	99 Hawley Lane, 3rd Floor
5	Town	Stratford
6	State	Connecticut
7	Zip Code	06614 -
8	CEO Name	James Staten
9	CEO Title	Treasurer/Exec VP
10	CT Agent Name	WILLIAM ASELTYN
11	CT Agent Company	YALE-NEW HAVEN HEALTH SERVICES CORPORATION
12	CT Agent Company Street Address	C/O LEGAL & RISK SERVICES , 789 HOWARD AVENUE, CB230
13	CT Agent Town	NEW HAVEN
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06611 -
<b>F. AFFILIATE NAME NORTHEAST PEDIATRIC SPECIALISTS, INC.</b>		
1	Affiliate Description	Affiliation between Y-NHH and Connecticut Childrens Hospital for Pediatric Specialty services.
2	Affiliate type of service	Affiliate Support Services
3	Tax Status	Not for Profit
4	Street Address	c/o Ct Children's Medical Cent, 282 Washington Street
5	Town	Hartford
6	State	Connecticut
7	Zip Code	06106 -
8	CEO Name	Martin Gavin
9	CEO Title	President
10	CT Agent Name	R&C Service Company
11	CT Agent Company	R & C Service Company

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(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
12	CT Agent Company Street Address	280 Trumbull Street
13	CT Agent Town	Hartford
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06103 - 3597
<b>G. AFFILIATE NAME SHORELINE SURGERY CENTER, LLC</b>		
1	Affiliate Description	SHORELINE SURGERY CENTER LLC IS A LIMITED LIABILITY COMPANY AND IS A PARTNERSHIP BETWEEN CGC ENDOSCOPY, LLC, UNRELATED THIRD PARTY AND YALE-NEW HAVEN AMBULATORY SERVICES CORP WHICH HAS A 51% INTEREST.
2	Affiliate type of service	Ambulatory/OP Surgery Center
3	Tax Status	Not for Profit
4	Street Address	111 Goose Lane
5	Town	Guilford
6	State	Connecticut
7	Zip Code	06437 -
8	CEO Name	Tucker Leary
9	CEO Title	President
10	CT Agent Name	Merton G. Gollaher, Jr
11	CT Agent Company	Wiggin & Dana LLP
12	CT Agent Company Street Address	1 Century Tower, 195 Church St
13	CT Agent Town	New Haven
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06508 -
<b>H. AFFILIATE NAME SSC II, LLC</b>		
1	Affiliate Description	SSC II, LLC IS A LIMITED LIABILITY COMPANY AND IS A SUBSIDIARY OF SHORELINE SURGERY CENTER, LLC. SSC II, LLC IS AN ENDOSCOPY SURGERY CENTER
2	Affiliate type of service	Ambulatory/OP Surgery Center
3	Tax Status	Not for Profit
4	Street Address	111 GOOSE LANE
5	Town	GUILFORD
6	State	Connecticut
7	Zip Code	06437 -
8	CEO Name	Yale-New Haven Ambulatory Services
9	CEO Title	Corp. Member
10	CT Agent Name	MERTONG. GOLLAHER, JR
11	CT Agent Company	WIGGIN & DANA LLP
12	CT Agent Company Street Address	1 CENTURY TOWER, 195 CHURCH STREET
13	CT Agent Town	NEW HAVEN
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06510 -
<b>I. AFFILIATE NAME THE NEW CLINICAL DEVELOPMENT PROGRAM CORPORATION (NCPD)</b>		
1	Affiliate Description	NCPD is a CT non-profit, non-stock corporation created to provide support for the development of clinical programs and services that will enhance the rendering of patient care at Yale University and Yale-New Haven Hospital.
2	Affiliate type of service	Other HealthCare Svcs(Specify)
3	Tax Status	Not for Profit
4	Street Address	789 Howard Avenue
5	Town	New Haven
6	State	Connecticut
7	Zip Code	06519 -
8	CEO Name	James M. Staten
9	CEO Title	Treasurer

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(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
10	CT Agent Name	D. Terence Jones
11	CT Agent Company	Wiggin and Dana
12	CT Agent Company Street Address	One Century Tower
13	CT Agent Town	New Haven
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06508 - 1832
<b>J. AFFILIATE NAME YALE-NEW HAVEN AMBULATORY SERVICES CORP.</b>		
1	Affiliate Description	YALE-NEW HAVEN AMBULATORY SERVICES CORP. IS A WHOLLY OWNED SUBSIDIARY OF YALE-NEW HAVEN HOSPITAL. IT OPERATES A RECOVERY CARE CENTER. IN FY04, IT ACQUIRED A 51% INTEREST IN YALE-NEW HAVEN SHORELINE SURGERY CENTER LLC.
2	Affiliate type of service	Ambulatory/OP Surgery Center
3	Tax Status	Not for Profit
4	Street Address	60 Temple Street
5	Town	New Haven
6	State	Connecticut
7	Zip Code	06510 -
8	CEO Name	Richard D`Aquila
9	CEO Title	President
10	CT Agent Name	William J Aseltyne
11	CT Agent Company	Yale New Haven Hospital
12	CT Agent Company Street Address	20 York Street, CB-230
13	CT Agent Town	New Haven
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06510 -
<b>K. AFFILIATE NAME YALE-NEW HAVEN CARE CONTINUUM</b>		
1	Affiliate Description	YNHCCC provides long-term care for those unable to live independently and short-term rehabilitation for patients who have experienced elective surgery, an injury or a traumatic major illness.
2	Affiliate type of service	Care for the Aged
3	Tax Status	Not for Profit
4	Street Address	789 HOWARD AVENUE
5	Town	New Haven
6	State	Connecticut
7	Zip Code	06519 -
8	CEO Name	GAYLE CAPOZZALO
9	CEO Title	PRESIDENT
10	CT Agent Name	William J. Aseltyne
11	CT Agent Company	Yale-New Haven Health Services Corporation
12	CT Agent Company Street Address	789 Howard Avenue, CB230, Legal & Risk Serv D
13	CT Agent Town	New Haven
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06519 -
<b>L. AFFILIATE NAME YALE-NEW HAVEN HOSPITAL, INC.</b>		
1	Affiliate Description	YALE-NEW HAVEN HOSPITAL, INC. IS THE PARENT CORPORATION TO YALE-NEW HAVEN AMBULATORY SERVICES CORP, YORK ENTERPRISES, INC, YALE-NEW HAVEN CARE CONTINUUM, CARITAS INSURANCE COMPANY LTD., AND LUKAN INDEMNITY COMPANY LTD.
2	Affiliate type of service	Hospital
3	Tax Status	Not for Profit
4	Street Address	20 YORK STREET
5	Town	NEW HAVEN
6	State	Connecticut
7	Zip Code	06510 -

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(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
8	CEO Name	MARNA BORGSTROM
9	CEO Title	PRESIDENT & CEO
10	CT Agent Name	WILLIAM ASELYTYNE
11	CT Agent Company	
12	CT Agent Company Street Address	20 YORK STREET, CB-230
13	CT Agent Town	NEW HAVEN
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06510 -
<b>M.</b>	<b>AFFILIATE NAME</b>	<b>YALE-NEW HAVEN MEDICAL CENTER, INC. (MEDICAL CENTER)</b>
1	Affiliate Description	A TAX-EXEMPT NONPROFIT ORGANIZATION WITH THE PRIMARY PURPOSE TO COORDINATE ACTIVITIES OF YALE-NEW HAVEN HOSPITAL, INC. AND YALE UNIVERSITY-SCHOOLS OF MEDICINE AND NURSING IN AREAS OF MUTUAL CONCERN AND TO CONDUCT LONG-RANGE PLANNING FOR
2	Affiliate type of service	Affiliate Support Services
3	Tax Status	Not for Profit
4	Street Address	20 York Street, Suite T-102
5	Town	New Haven
6	State	Connecticut
7	Zip Code	06504 -
8	CEO Name	Steve Merz
9	CEO Title	President
10	CT Agent Name	William J Aseltyne
11	CT Agent Company	Yale-New Haven Health Services Corporation
12	CT Agent Company Street Address	789 Howard Avenue, CB230, Legal & Risk Services Dept
13	CT Agent Town	New Haven
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06519 -
<b>N.</b>	<b>AFFILIATE NAME</b>	<b>YNH NETWORK CORPORATION</b>
1	Affiliate Description	YNH NETWORK CORP WAS THE PARENT CORPORATION TO YALE-NEW HAVEN HOSP., YALE-NEW HAVEN AMBULATORY SERVICES CORP., YORK ENTERPRISES, INC., COMMUNITY HEALTH CARE PHYSICIANS (CHCP), AND QUINNIPIAC MEDICAL PC. THIS ENTITY WAS MERGED INTO YNHH IN
2	Affiliate type of service	Parent Corporation
3	Tax Status	Not for Profit
4	Street Address	789 Howard Avenue, New Haven, Connecticut
5	Town	New Haven
6	State	Connecticut
7	Zip Code	06519 -
8	CEO Name	Marvin K. Lender
9	CEO Title	Director
10	CT Agent Name	William J. Aseltyne
11	CT Agent Company	Yale-New Haven Health Services Corporation
12	CT Agent Company Street Address	789 Howard Ave, CB 230, Legal and Risk Services Dept
13	CT Agent Town	New Haven
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06519 -
<b>O.</b>	<b>AFFILIATE NAME</b>	<b>YNHH-PHYSICIANS CORPORATION</b>
1	Affiliate Description	PHYSICIAN HOSPITAL ORGANIZATION IS A MANAGED CARE CONTRACTING ORGANIZATION. YNHH DOES NOT CONSIDER THE PHO AN AFFILIATE BECAUSE IT IS NOT CONTROLLED BY OR UNDER COMMON CONTROL OR OWNERSHIP WITH YNHH OR YNHH AFFILIATES.
2	Affiliate type of service	Physicians Hospital Org. (PHO)
3	Tax Status	For Profit
4	Street Address	789 Howard Avenue
5	Town	New Haven

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(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
6	State	Connecticut
7	Zip Code	06519 -
8	CEO Name	Dr. Michael Berman
9	CEO Title	President
10	CT Agent Name	Irving S. Schloss Esq.
11	CT Agent Company	Irving S. Schloss Esq.
12	CT Agent Company Street Address	205 Church St.
13	CT Agent Town	New Haven
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06509 -
<b>P.</b>	<b>AFFILIATE NAME</b>	<b>YNHHS-MSO, INC.</b>
1	Affiliate Description	YNNH-MSO, INC. WAS ORIGINALLY FORMED TO MANAGE PHYSICIAN PRACTICES AND PROVIDE THIRD PARTY ADMINISTRATIVE SERVICES ON CERTAIN MANAGED CARE CONTRACTS.
2	Affiliate type of service	Managed Services Org. (MSO)
3	Tax Status	For Profit
4	Street Address	789 Howard Avenue
5	Town	New Haven
6	State	Connecticut
7	Zip Code	06519 -
8	CEO Name	Gayle Capozzalo
9	CEO Title	President
10	CT Agent Name	Merton G. Gollaher, JR.
11	CT Agent Company	Wiggin & Dana LLP
12	CT Agent Company Street Address	1 Century Tower, 195 Church St
13	CT Agent Town	New Haven
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06508 - 1832
<b>Q.</b>	<b>AFFILIATE NAME</b>	<b>YORK ENTERPRISES, INC.</b>
1	Affiliate Description	YORK ENTERPRISES, INC. IS A WHOLLY OWNED SUBSIDIARY OF YALE-NEW HAVEN HOSPITAL. YORK ENTERPRISES INC IS THE PARENT CORPORATION OF MEDICAL CENTER REALTY INC AND MEDICAL CENTER PHARMACY AND HOME CARE CENTER INC.
2	Affiliate type of service	Affiliate Support Services
3	Tax Status	For Profit
4	Street Address	20 York Street
5	Town	New Haven
6	State	Connecticut
7	Zip Code	06510 -
8	CEO Name	Vincent Tamaro
9	CEO Title	President
10	CT Agent Name	William J Aseltyne
11	CT Agent Company	Yale New Haven Hospital
12	CT Agent Company Street Address	20 York Street, CB-230
13	CT Agent Town	New Haven
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06510 -

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

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

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME	FUND DESCRIPTION / FUND PURPOSE	BALANCE AS OF 9/30/2015
<b>A . YALE-NEW HAVEN HOSPITAL</b>			
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$0</b>
<b>B . YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHSC)</b>			
1		Unrestricted	\$155,894,000
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	(\$12,641,865)
		<b>Total:</b>	<b>\$143,252,135</b>
<b>C . CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENTURY)</b>			
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$0</b>
<b>D . MEDICAL CENTER PHARMACY AND HOME CARE CENTER, INC.</b>			
1		Unrestricted	\$3,968,993
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$3,968,993</b>
<b>E . MEDICAL CENTER REALTY, INC.</b>			
1		Unrestricted	(\$709,262)
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>(\$709,262)</b>
<b>F . NORTHEAST MEDICAL GROUP, INC.</b>			
1		Unrestricted	\$4,131,054
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$4,131,054</b>
<b>G . NORTHEAST PEDIATRIC SPECIALISTS, INC.</b>			
1		Unrestricted	\$0

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(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME	FUND DESCRIPTION / FUND PURPOSE	BALANCE AS OF 9/30/2015
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$0</b>
<b>H.</b>	<b>SHORELINE SURGERY CENTER, LLC</b>		
1		Unrestricted	\$2,036,861
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$2,036,861</b>
<b>I.</b>	<b>SSC II, LLC</b>		
1		Unrestricted	\$2,105,435
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$2,105,435</b>
<b>J.</b>	<b>THE NEW CLINICAL DEVELOPMENT PROGRAM CORPORATION (NCPD)</b>		
1		Unrestricted	\$7,292
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	(\$2,292)
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$5,000</b>
<b>K.</b>	<b>YALE-NEW HAVEN AMBULATORY SERVICES CORP.</b>		
1		Unrestricted	\$9,118,161
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$2,028,000
		<b>Total:</b>	<b>\$11,146,161</b>
<b>L.</b>	<b>YALE-NEW HAVEN CARE CONTINUUM</b>		
1		Unrestricted	(\$4,815,992)
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>(\$4,815,992)</b>
<b>M.</b>	<b>YALE-NEW HAVEN HOSPITAL, INC.</b>		
1		Unrestricted	\$1,102,351,000
2		Temporarily Restricted by Donor	\$70,941,000
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$46,886,000
5		Intercompany Eliminations	\$2,028,000

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(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME	FUND DESCRIPTION / FUND PURPOSE	BALANCE AS OF 9/30/2015
		<b>Total:</b>	<b>\$1,222,206,000</b>
<b>N .</b>	<b>YALE-NEW HAVEN MEDICAL CENTER, INC. (MEDICAL CENTER)</b>		
1		Unrestricted	\$2,564,719
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$2,564,719</b>
<b>O .</b>	<b>YNH NETWORK CORPORATION</b>		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$0</b>
<b>P .</b>	<b>YNHH-PHYSICIANS CORPORATION</b>		
1		Unrestricted	\$73,593
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$73,593</b>
<b>Q .</b>	<b>YNHHS-MSO, INC.</b>		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		<b>Total:</b>	<b>\$0</b>
<b>R .</b>	<b>YORK ENTERPRISES, INC.</b>		
1		Unrestricted	\$3,237,992
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	(\$52,262)
		<b>Total:</b>	<b>\$3,185,730</b>
	<b>Total of all Affiliates (before Intercompany Eliminations)</b>	<b>Fund Balance:</b>	<b>\$1,397,788,554</b>
	<b>Intercompany Eliminations</b>		<b>(\$8,638,127)</b>
	<b>Total of all Affiliates</b>	<b>Fund Balance:</b>	<b>\$1,389,150,427</b>

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

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
<b>A. YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)</b>				
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2014</b>	<b>(\$33,387,899)</b>
1		System Support Fee	09/30/2015	(\$29,760,442)
2		Information System Contract Fee	09/30/2015	(\$69,769,337)
3		System Business Office Contract Fee	09/30/2015	(\$65,421,254)
4		Professional General Liability Insurance	09/30/2015	(\$20,470,410)
5		Management and Business support	09/30/2015	(\$43,398,143)
6		Shared Capital Project Funding	09/30/2015	(\$11,482,754)
7		Yale Medical Group/Yale University	09/30/2015	(\$4,014,851)
8		Vendor Rebates/Trade Payables	09/30/2015	\$7,917,499
9		Pension	09/30/2015	\$5,325,341
10		Other-Salary, PTO, Fidelity, Misc	09/30/2015	\$4,414,407
11		Facilities Rental	09/30/2015	\$3,214,000
12		Net Payments	09/30/2015	\$227,119,520
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2015</b>	<b>(\$29,714,323)</b>
<b>B. CARITAS INSURANCE COMPANY LTD.</b>				
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2014</b>	<b>\$0</b>
		Nothing to Report		\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2015</b>	<b>\$0</b>
<b>C. CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENTURY)</b>				
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2014</b>	<b>\$0</b>
1		Collection Agency Fees Charged	09/30/2015	\$2,414,540
2		Net Payments	09/30/2015	(\$2,414,540)
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2015</b>	<b>\$0</b>
<b>D. LUKAN INDEMNITY COMPANY LTD.</b>				
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2014</b>	<b>\$173,855</b>
1		Payments to YNHH	09/30/2015	(\$173,855)
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2015</b>	<b>\$0</b>
<b>E. MEDICAL CENTER PHARMACY AND HOME CARE CENTER, INC.</b>				
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2014</b>	<b>\$3,556,120</b>

**YALE-NEW HAVEN HOSPITAL  
ANNUAL REPORTING  
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REPORT 6 - TRANSACTIONS BETWEEN THE HOSPITAL AND AFFILIATES OR RELATED CORPORATIONS**

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
1		Sales/Purchases of Services	09/30/2015	(\$2,652,175)
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2015</b>	<b>\$903,945</b>
<b>F.</b>	<b>MEDICAL CENTER REALTY, INC.</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2014</b>	<b>\$242,704</b>
1		Sales/Purchases of Services	09/30/2015	\$221,451
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2015</b>	<b>\$464,155</b>
<b>G.</b>	<b>NORTHEAST MEDICAL GROUP, INC.</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2014</b>	<b>(\$2,609,911)</b>
1		Sales/Purchases of Services	09/30/2015	(\$5,375,121)
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2015</b>	<b>(\$7,985,032)</b>
<b>H.</b>	<b>NORTHEAST PEDIATRIC SPECIALISTS, INC.</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2014</b>	<b>\$815,028</b>
1		Sales/Purchases of Services	09/30/2015	(\$318,980)
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2015</b>	<b>\$496,048</b>
<b>I.</b>	<b>SHORELINE SURGERY CENTER, LLC</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2014</b>	<b>\$0</b>
		Nothing to Report		\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2015</b>	<b>\$0</b>
<b>J.</b>	<b>SSC II, LLC</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2014</b>	<b>\$0</b>
		Nothing to Report		\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2015</b>	<b>\$0</b>
<b>K.</b>	<b>THE NEW CLINICAL DEVELOPMENT PROGRAM CORPORATION (NCPD)</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2014</b>	<b>\$0</b>
		Nothing to Report		\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2015</b>	<b>\$0</b>

**YALE-NEW HAVEN HOSPITAL  
ANNUAL REPORTING  
FISCAL YEAR 2015**

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

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
<b>L.</b>	<b>YALE-NEW HAVEN AMBULATORY SERVICES CORP.</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2014</b>	<b>\$4,635,595</b>
1		Sales/Purchases of Services	09/30/2015	(\$1,478,073)
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2015</b>	<b>\$3,157,522</b>
<b>M.</b>	<b>YALE-NEW HAVEN CARE CONTINUUM</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2014</b>	<b>\$8,081,565</b>
1		Sales/Purchases of Services	09/30/2015	(\$23,730)
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2015</b>	<b>\$8,057,835</b>
<b>N.</b>	<b>YALE-NEW HAVEN HOSPITAL, INC.</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2014</b>	<b>\$0</b>
		Nothing to Report		\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2015</b>	<b>\$0</b>
<b>O.</b>	<b>YALE-NEW HAVEN MEDICAL CENTER, INC. (MEDICAL CENTER)</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2014</b>	<b>(\$39,414)</b>
1		Sales/Purchases of Services	09/30/2015	\$13,790
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2015</b>	<b>(\$25,624)</b>
<b>P.</b>	<b>YNH NETWORK CORPORATION</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2014</b>	<b>\$0</b>
		Nothing to Report		\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2015</b>	<b>\$0</b>
<b>Q.</b>	<b>YNHH-PHYSICIANS CORPORATION</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2014</b>	<b>\$0</b>
		Nothing to Report		\$0
		<b>Ending Unconsolidated Intercompany Balance:</b>	<b>9/30/2015</b>	<b>\$0</b>
<b>R.</b>	<b>YNHHS-MSO, INC.</b>			
		<b>Beginning Unconsolidated Intercompany Balance:</b>	<b>9/30/2014</b>	<b>\$8</b>
1		Sales/Purchases of Services	09/30/2015	(\$8)

**YALE-NEW HAVEN HOSPITAL  
ANNUAL REPORTING  
FISCAL YEAR 2015  
REPORT 6 - TRANSACTIONS BETWEEN THE HOSPITAL AND AFFILIATES OR RELATED CORPORATIONS**

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
		Ending Unconsolidated Intercompany Balance:	9/30/2015	\$0
S.	YORK ENTERPRISES, INC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	(\$15,912)
1		Adjustment to Beginning Balance	09/30/2015	(\$17)
		Ending Unconsolidated Intercompany Balance:	9/30/2015	(\$15,929)
			<b>Grand Total:</b>	<b>(\$24,661,403)</b>

**YALE-NEW HAVEN HOSPITAL  
ANNUAL REPORTING  
FISCAL YEAR 2015  
REPORT 6A - TRANSACTIONS BETWEEN HOSPITAL AFFILIATES OR RELATED CORPORATIONS**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	AFFILIATE TRANSFERRING FUNDS	AFFILIATE RECEIVING FUNDS	DESCRIPTION OF TRANSFER	DATE	AMOUNT
			<b>Beginning Unconsolidated Intercompany Balance</b>	<b>10/01/2014</b>	<b>\$11,277,812</b>
<b>A.</b>	<b>YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)</b>				
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2015</b>	<b>\$0</b>
<b>B.</b>	<b>CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENTURY)</b>				
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2015</b>	<b>\$0</b>
<b>C.</b>	<b>MEDICAL CENTER PHARMACY AND HOME CARE CENTER, INC.</b>				
1		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	Payments/Adjustments	09/30/2015	(\$6)
			<b>Total:</b>	<b>9/30/2015</b>	<b>(\$6)</b>
<b>D.</b>	<b>MEDICAL CENTER REALTY, INC.</b>				
1		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	Management Services	09/30/2015	\$27,732
2		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	Payments/Adjustments	09/30/2015	\$103,040
			<b>Total:</b>	<b>9/30/2015</b>	<b>\$130,772</b>
<b>E.</b>	<b>NORTHEAST MEDICAL GROUP, INC.</b>				
1		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	System Support Fee	09/30/2015	\$2,727,122
2		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	Payments/Adjustments	09/30/2015	(\$1,048,652)
3		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	Management Services	09/30/2015	\$7,842,339
			<b>Total:</b>	<b>9/30/2015</b>	<b>\$9,520,809</b>
<b>F.</b>	<b>NORTHEAST PEDIATRIC SPECIALISTS, INC.</b>				
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2015</b>	<b>\$0</b>
<b>G.</b>	<b>SHORELINE SURGERY CENTER, LLC</b>				
1		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	Management Services	09/30/2015	\$25,418
2		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	Payments/Adjustments	09/30/2015	(\$17,299)
			<b>Total:</b>	<b>9/30/2015</b>	<b>\$8,119</b>
<b>H.</b>	<b>SSC II, LLC</b>				
1		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	Management Services	09/30/2015	\$24,430

**YALE-NEW HAVEN HOSPITAL  
ANNUAL REPORTING  
FISCAL YEAR 2015  
REPORT 6A - TRANSACTIONS BETWEEN HOSPITAL AFFILIATES OR RELATED CORPORATIONS**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	AFFILIATE TRANSFERRING FUNDS	AFFILIATE RECEIVING FUNDS	DESCRIPTION OF TRANSFER	DATE	AMOUNT
2		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	Payments/Adjustments	09/30/2015	(\$20,295)
			<b>Total:</b>	<b>9/30/2015</b>	<b>\$4,135</b>
<b>I. THE NEW CLINICAL DEVELOPMENT PROGRAM CORPORATION (NCPD)</b>					
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2015</b>	<b>\$0</b>
<b>J. YALE-NEW HAVEN AMBULATORY SERVICES CORP.</b>					
1		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	System Support Fee	09/30/2015	\$2,878
2		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	Management Services	09/30/2015	\$86,608
3		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	Payments/Adjustments	09/30/2015	(\$73,935)
			<b>Total:</b>	<b>9/30/2015</b>	<b>\$15,551</b>
<b>K. YALE-NEW HAVEN CARE CONTINUUM</b>					
1		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	System Support Fee	09/30/2015	\$169,658
2		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	Payments/Adjustments	09/30/2015	\$163,823
			<b>Total:</b>	<b>9/30/2015</b>	<b>\$333,481</b>
<b>L. YALE-NEW HAVEN HOSPITAL, INC.</b>					
			Nothing to Report		\$0
			<b>Total:</b>	<b>9/30/2015</b>	<b>\$0</b>
<b>M. YALE-NEW HAVEN MEDICAL CENTER, INC. (MEDICAL CENTER)</b>					
1		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	Management Services	09/30/2015	\$15,652
2		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	Payments/Adjustments	09/30/2015	(\$134,864)
			<b>Total:</b>	<b>9/30/2015</b>	<b>(\$119,212)</b>
<b>N. YNH NETWORK CORPORATION</b>					
1		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	Payments/Adjustments	09/30/2015	\$18,907
			<b>Total:</b>	<b>9/30/2015</b>	<b>\$18,907</b>
<b>O. YNHH-PHYSICIANS CORPORATION</b>					
1		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	Payments/Adjustments	09/30/2015	(\$26,534)
			<b>Total:</b>	<b>9/30/2015</b>	<b>(\$26,534)</b>

**YALE-NEW HAVEN HOSPITAL  
ANNUAL REPORTING  
FISCAL YEAR 2015  
REPORT 6A - TRANSACTIONS BETWEEN HOSPITAL AFFILIATES OR RELATED CORPORATIONS**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	AFFILIATE TRANSFERRING FUNDS	AFFILIATE RECEIVING FUNDS	DESCRIPTION OF TRANSFER	DATE	AMOUNT
	<b>P. YNHHS-MSO, INC.</b>				
1		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	Management Services	09/30/2015	\$3,425
2		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	Payments/Adjustments	09/30/2015	(\$1,415)
			<b>Total:</b>	<b>9/30/2015</b>	<b>\$2,010</b>
	<b>Q. YORK ENTERPRISES, INC.</b>				
1		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	System Support Fee	09/30/2015	\$73,630
2		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	Management Services	09/30/2015	\$157,498
3		YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)	Payments/Adjustments	09/30/2015	\$9,432
			<b>Total:</b>	<b>9/30/2015</b>	<b>\$240,560</b>
			<b>Ending Unconsolidated Intercompany Balance</b>	<b>9/30/2015</b>	<b>\$21,406,404</b>

**YALE-NEW HAVEN HOSPITAL  
ANNUAL REPORTING  
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**REPORT 7- EXPENDITURES BY AFFILIATES / RELATED CORPORATIONS FOR THE BENEFIT OF THE HOSPITAL**

(1) LINE	(2) AFFILIATE NAME & DESCRIPTION OF EXPENDITURE	(3) AMOUNT	(4) DATE
<b>A.</b>	<b>YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHC)</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2015</b>
<b>B.</b>	<b>CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENTURY)</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2015</b>
<b>C.</b>	<b>MEDICAL CENTER PHARMACY AND HOME CARE CENTER, INC.</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2015</b>
<b>D.</b>	<b>MEDICAL CENTER REALTY, INC.</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2015</b>
<b>E.</b>	<b>NORTHEAST MEDICAL GROUP, INC.</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2015</b>
<b>F.</b>	<b>NORTHEAST PEDIATRIC SPECIALISTS, INC.</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2015</b>
<b>G.</b>	<b>SHORELINE SURGERY CENTER, LLC</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2015</b>
<b>H.</b>	<b>SSC II, LLC</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2015</b>
<b>I.</b>	<b>THE NEW CLINICAL DEVELOPMENT PROGRAM CORPORATION (NCPD)</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2015</b>
<b>J.</b>	<b>YALE-NEW HAVEN AMBULATORY SERVICES CORP.</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2015</b>
<b>K.</b>	<b>YALE-NEW HAVEN CARE CONTINUUM</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2015</b>
<b>L.</b>	<b>YALE-NEW HAVEN HOSPITAL, INC.</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2015</b>
<b>M.</b>	<b>YALE-NEW HAVEN MEDICAL CENTER, INC. (MEDICAL CENTER)</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2015</b>
<b>N.</b>	<b>YNH NETWORK CORPORATION</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2015</b>
<b>O.</b>	<b>YNHH-PHYSICIANS CORPORATION</b>		

**YALE-NEW HAVEN HOSPITAL  
ANNUAL REPORTING  
FISCAL YEAR 2015**

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

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME & DESCRIPTION OF EXPENDITURE	AMOUNT	DATE
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2015</b>
<b>P.</b>	<b>YNHHS-MSO, INC.</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2015</b>
<b>Q.</b>	<b>YORK ENTERPRISES, INC.</b>		
0	Nothing to Report	\$0	
	<b>Total:</b>	<b>\$0</b>	<b>9/30/2015</b>
	<b>Grand Total:</b>	<b>\$0</b>	<b>9/30/2015</b>

**YALE-NEW HAVEN HOSPITAL  
ANNUAL REPORTING  
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REPORT 8 - HOSPITAL COMMITMENTS / ENDORSEMENTS FOR THE BENEFIT OF AFFILIATES / RELATED CORPORATIONS**

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME & DESCRIPTION OF THE COMMITMENT AND/OR ENDORSEMENT	AMOUNT	TERM IN YEARS
<b>A.</b>	<b>YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)</b>		
1	YNHH Series E debt service related to Series E obligated group (YNHH & BH) debt.	\$55,455,778	22
	<b>Total:</b>	<b>\$55,455,778</b>	
<b>B.</b>	<b>CARITAS INSURANCE COMPANY LTD.</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>C.</b>	<b>CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENTURY)</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>D.</b>	<b>LUKAN INDEMNITY COMPANY LTD.</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>E.</b>	<b>MEDICAL CENTER PHARMACY AND HOME CARE CENTER, INC.</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>F.</b>	<b>MEDICAL CENTER REALTY, INC.</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>G.</b>	<b>NORTHEAST MEDICAL GROUP, INC.</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>H.</b>	<b>NORTHEAST PEDIATRIC SPECIALISTS, INC.</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>I.</b>	<b>SHORELINE SURGERY CENTER, LLC</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>J.</b>	<b>SSC II, LLC</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>K.</b>	<b>THE NEW CLINICAL DEVELOPMENT PROGRAM CORPORATION (NCPD)</b>		
0	Nothing to Report	\$0	0

**YALE-NEW HAVEN HOSPITAL  
ANNUAL REPORTING  
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REPORT 8 - HOSPITAL COMMITMENTS / ENDORSEMENTS FOR THE BENEFIT OF AFFILIATES / RELATED CORPORATIONS**

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME & DESCRIPTION OF THE COMMITMENT AND/OR ENDORSEMENT	AMOUNT	TERM IN YEARS
	<b>Total:</b>	<b>\$0</b>	
<b>L.</b>	<b>YALE-NEW HAVEN AMBULATORY SERVICES CORP.</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>M.</b>	<b>YALE-NEW HAVEN CARE CONTINUUM</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>N.</b>	<b>YALE-NEW HAVEN HOSPITAL, INC.</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>O.</b>	<b>YALE-NEW HAVEN MEDICAL CENTER, INC. (MEDICAL CENTER)</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>P.</b>	<b>YNH NETWORK CORPORATION</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>Q.</b>	<b>YNHH-PHYSICIANS CORPORATION</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>R.</b>	<b>YNHHS-MSO, INC.</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
<b>S.</b>	<b>YORK ENTERPRISES, INC.</b>		
0	Nothing to Report	\$0	0
	<b>Total:</b>	<b>\$0</b>	
	<b>Grand Total:</b>	<b>\$55,455,778</b>	

**YALE-NEW HAVEN HOSPITAL  
ANNUAL REPORTING  
FISCAL YEAR 2015  
REPORT 16 - DONATIONS AND FUNDS RESTRICTED FOR  
INDIGENT CARE AND FREE BEDS**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A . Indigent Care</b>					
	<b>Beginning Balance</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>0%</b>
1	Donations	\$0.00	\$0.00	\$0.00	0%
2	Income	\$0.00	\$0.00	\$0.00	0%
3	Expenditures	\$0.00	\$0.00	\$0.00	0%
4	Unrealized Gains and Losses	\$0.00	\$0.00	\$0.00	0%
	<b>Ending Balance</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>0%</b>
5	Projected Interest Income	\$0.00	\$0.00	\$0.00	0%
<b>B . Free Beds</b>					
	<b>Beginning Balance</b>	<b>\$9,950,415.00</b>	<b>\$10,425,630.00</b>	<b>\$475,215.00</b>	<b>5%</b>
1	Donations	\$0.00	\$0.00	\$0.00	0%
2	Income	\$136,551.00	\$96,155.00	(\$40,396.00)	-30%
3	Expenditures	\$612,000.00	\$596,000.00	(\$16,000.00)	-3%
4	Unrealized Gains and Losses	\$950,664.00	\$316,124.00	(\$634,540.00)	-67%
	<b>Ending Balance</b>	<b>\$10,425,630.00</b>	<b>\$10,241,909.00</b>	<b>(\$183,721.00)</b>	<b>-2%</b>
5	Projected Interest Income	\$150,000.00	\$370,000.00	\$220,000.00	147%
<b>C . Other</b>					
	<b>Beginning Balance</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>0%</b>
1	Donations	\$0.00	\$0.00	\$0.00	0%
2	Income	\$0.00	\$0.00	\$0.00	0%
3	Expenditures	\$0.00	\$0.00	\$0.00	0%
4	Unrealized Gains and Losses	\$0.00	\$0.00	\$0.00	0%
	<b>Ending Balance</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>0%</b>
5	Projected Interest Income	\$0.00	\$0.00	\$0.00	0%

YALE-NEW HAVEN HOSPITAL		
ANNUAL REPORTING		
FISCAL YEAR 2015		
REPORT 17A - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY THE HOSPITAL		
A. Patient Activity		
(1)	(2)	(3)
Patient	Name of Hospital Bed Fund (FULL NAME)	Amount
1.	Number of Applications for Hospital Bed Funds	86
2. A.	Number of Patients receiving Hospital Bed Fund Grants	86
2. B.	The Actual Total Dollar Amount provided to all patients from Hospital Bed Funds:	\$596,000.01
1	Julia Alling	\$4,125.94
1	Charles Amos Baldwin	\$1,121.32
2	Charles Amos Baldwin	\$3,920.29
3	Charles Amos Baldwin	\$3,874.28
4	Charles Amos Baldwin	\$1,912.18
4	Deane	\$6,665.35
5	Deane	\$3,291.55
5	Ellen M. Gifford	\$5,332.36
5	Wyllys Atwater	\$5,073.74
6	Wyllys Atwater	\$2,601.65
7	Wyllys Atwater	\$3,007.36
7	Dwight Place Church	\$2,451.10
7	William Townsend Hayes	\$8,520.24
8	William Townsend Hayes	\$2,162.51
8	Dr. Thomas Wells	\$5,341.38
8	Armstrong	\$3,149.11
9	Armstrong	\$2,710.55
10	Armstrong	\$1,517.62
10	Frank Walter Benedict	\$10,664.78
10	Henry Walter Benedict	\$4,271.60
11	Henry Walter Benedict	\$5,044.55
12	Henry Walter Benedict	\$1,348.63
12	Helen & John T. Mason	\$5,971.48
13	Helen & John T. Mason	\$5,376.69
14	Helen & John T. Mason	\$3,935.75
14	Frank L. Hunt	\$4,747.42
15	Frank L. Hunt	\$6,424.06
16	Frank L. Hunt	\$16,328.00
17	Frank L. Hunt	\$8,518.57
18	Frank L. Hunt	\$10,485.25
19	Frank L. Hunt	\$91.89
20	Frank L. Hunt	\$10,774.43
21	Frank L. Hunt	\$3,583.67
22	Frank L. Hunt	\$7,129.99
22	Evelina J. Jones	\$5,572.87
22	Elizabeth Hotchkiss	\$5,572.87
22	Mary Lamb	\$270.77
22	Bassett Bed #2	\$6,943.02
23	Bassett Bed #2	\$4,214.02
23	Fannie Keyes	\$914.60
24	Fannie Keyes	\$3,339.84
25	Fannie Keyes	\$5,023.81
26	Fannie Keyes	\$1,955.94
26	Leete	\$16,874.14
26	George T. Newhall & Julia Leete	\$7,516.06
27	George T. Newhall & Julia Leete	\$5,814.59
28	George T. Newhall & Julia Leete	\$3,246.52
29	George T. Newhall & Julia Leete	\$2,521.74
29	Stiles	\$3,558.29
30	Stiles	\$31,200.33
31	Stiles	\$424.18
32	Stiles	\$770.00
33	Stiles	\$1,828.70
34	Stiles	\$3,851.01
35	Stiles	\$3,986.37
36	Stiles	\$9,677.57
37	Stiles	\$30,902.11
38	Stiles	\$735.00
39	Stiles	\$2,959.14
40	Stiles	\$8,511.84
41	Stiles	\$24,811.58
42	Stiles	\$820.00
43	Stiles	\$1,100.00

YALE-NEW HAVEN HOSPITAL		
ANNUAL REPORTING		
FISCAL YEAR 2015		
REPORT 17A - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY THE HOSPITAL		
A. Patient Activity		
(1)	(2)	(3)
Patient	Name of Hospital Bed Fund (FULL NAME)	Amount
1. Number of Applications for Hospital Bed Funds		86
2. A. Number of Patients receiving Hospital Bed Fund Grants		86
2. B. The Actual Total Dollar Amount provided to all patients from Hospital Bed Funds:		\$596,000.01
44	Stiles	\$6,008.29
45	Stiles	\$7,470.55
46	Stiles	\$9,485.16
47	Stiles	\$14,381.56
48	Stiles	\$6,459.11
49	Stiles	\$2,797.75
50	Stiles	\$5,230.31
51	Stiles	\$500.00
52	Stiles	\$8,057.19
53	Stiles	\$8,945.68
54	Stiles	\$17,636.13
55	Stiles	\$1,654.87
56	Stiles	\$4,888.77
57	Stiles	\$14,546.12
58	Stiles	\$38,139.67
59	Stiles	\$1,652.22
59	Rose Porter	\$4,663.86
60	Rose Porter	\$2,713.42
60	Lucy Hall Boardman	\$1,894.06
61	Lucy Hall Boardman	\$5,743.82
61	Ellen M. Gifford Executors	\$1,044.85
62	Ellen M. Gifford Executors	\$1,750.00
63	Ellen M. Gifford Executors	\$2,807.01
63	Nathan Howell Sanford	\$3,949.48
64	Nathan Howell Sanford	\$1,512.76
65	Nathan Howell Sanford	\$5,743.84
65	Arthur Herbert Trowbridge	\$5,968.49
65	Edwin Harrison Beebe	\$6,290.68
65	Julia A. Leete Newhall	\$14,771.39
66	Julia A. Leete Newhall	\$6,833.99
67	Julia A. Leete Newhall	\$3,733.05
68	Bassett Bed #1	\$1,902.55
69	New Haven Grays	\$150.00
70	New Haven Grays	\$150.00
71	New Haven Grays	\$349.20
72	New Haven Grays	\$259.15
73	Trinity Church	\$335.00
74	Trinity Church	\$1,260.00
75	Robert Dickerman	\$456.63
76	German Society	\$1,414.07
77	German Society	\$75.00
78	German Society	\$244.69
79	Walter Charles Goodrich	\$452.34
80	Walter Charles Goodrich	\$1,647.20
81	Alma DeBeust Streitlein	\$315.89
82	Alma DeBeust Streitlein	\$138.57
83	Alma DeBeust Streitlein	\$2,431.65
84	Mary Southgate Trowbridge	\$406.28
85	Ellen Treadway Yeckley	\$100.75
86	Ellen Treadway Yeckley	\$244.76
	<b>Grand Total</b>	<b>\$596,000.01</b>

YALE-NEW HAVEN HOSPITAL ANNUAL REPORTING FISCAL YEAR 2015 REPORT 17B - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY THE HOSPITAL					
<b>B. BED FUND ACTIVITY</b>					
(1)	(2)	(3)	(4)	(5)	(6)
Line	Name of Hospital Bed Fund	FMV of Principal	Actual Earnings	Earnings Reinvested	Earnings Available
(3)	Fair Market Value of the Principal of each individual Hospital Bed Fund, or the Principal attributable to each Hospital Bed				
(4)	Total Actual Earnings for each Hospital Bed Fund or the Earnings attributable to each Hospital Bed Fund.				
(5)	Actual Dollar Amount of Earnings reinvested as Principal, if any.				
(6)	Actual Dollar Amount of Earnings available for Patient Care.				
	New Haven Grays Hospital Bed Fund	\$296,991.00	\$2,661.00	\$0.00	\$2,661.00
	Thanksgiving Hospital Bed Fund	\$32,091.00	\$287.00	\$0.00	\$287.00
	Trinity Church Hospital Bed Fund	\$154,789.00	\$1,395.00	\$0.00	\$1,395.00
	Mary Wade Hospita Bed Fund	\$184,796.00	\$1,651.00	\$0.00	\$1,651.00
	Erika Banhan Hospital Bed Fund	\$67,009.00	\$599.00	\$0.00	\$599.00
	Womens Seamans Friend Society of Conn. Hospital Bed Fund	\$375,895.00	\$3,358.00	\$0.00	\$3,358.00
	Adelaide Bushnell Curtis Hospital Bed Fund	\$5,000.00	\$47.00	\$0.00	\$47.00
	Robert Dickerman Hospital Bed Fund	\$6,000.00	\$56.00	\$0.00	\$56.00
	German Society Hospital Bed Fund	\$21,269.00	\$199.00	\$0.00	\$199.00
	Walter Charles Goodrich Hospital Bed Fund	\$27,547.00	\$264.00	\$0.00	\$264.00
	Sarah Barney Harrison Hospital Bed Fund	\$9,712.00	\$90.00	\$0.00	\$90.00
	Elret Stone Hospital Bed Fund	\$500.00	\$5.00	\$0.00	\$5.00
	Alma DeBeust Streitein Hospital Bed Fund	\$35,984.00	\$336.00	\$0.00	\$336.00
	Mary Southgate Trowbridge Hospital Bed Fund	\$5,000.00	\$47.00	\$0.00	\$47.00
	Ellen Treadway Yeckley Hospital Bed Fund	\$5,000.00	\$47.00	\$0.00	\$47.00
	Marcellus B Wilcox Hospital Bed Fund	\$12,835.00	\$115.00	\$0.00	\$115.00
	Henry Baldwin Harrison Hospital Bed Fund	\$10,540.00	\$94.00	\$0.00	\$94.00
	Mrs. Henry Baldwin Harrison Hospital Bed Fund	\$10,540.00	\$94.00	\$0.00	\$94.00
	Home for the Friendliness Hospital Bed Fund	\$2,556.00	\$23.00	\$0.00	\$23.00
	John H. Hopson Hospital Bed Fund	\$5,426.00	\$48.00	\$0.00	\$48.00
	Henry Hotchkiss Hospital Bed Fund	\$5,111.00	\$47.00	\$0.00	\$47.00
	Timothy A. Hunt Hospital Bed Fund	\$9,927.00	\$89.00	\$0.00	\$89.00
	Abigail Bradley Hunt Hospital Bed Fund	\$9,927.00	\$89.00	\$0.00	\$89.00
	Hoadley B. Ives Hospital Bed Fund	\$5,426.00	\$48.00	\$0.00	\$48.00
	Mary E. Ives Hospital Bed Fund	\$5,426.00	\$48.00	\$0.00	\$48.00
	Robert E. Ives Hospital Bed Fund	\$10,853.00	\$97.00	\$0.00	\$97.00
	Walter Judson Hospital Bed Fund	\$1,085.00	\$10.00	\$0.00	\$10.00
	Charles Kohn Hospital Bed Fund	\$109.00	\$1.00	\$0.00	\$1.00
	Lenhardt Hospital Bed Fund	\$5,426.00	\$48.00	\$0.00	\$48.00

YALE-NEW HAVEN HOSPITAL ANNUAL REPORTING FISCAL YEAR 2015 REPORT 17B - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY THE HOSPITAL					
B. BED FUND ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
Line	Name of Hospital Bed Fund	FMV of Principal	Actual Earnings	Earnings Reinvested	Earnings Available
	George W. Mallory Hospital Bed Fund	\$5,426.00	\$48.00	\$0.00	\$48.00
	Mary B. Mallory Hospital Bed Fund	\$4,341.00	\$39.00	\$0.00	\$39.00
	John W. Mansfield Hospital Bed Fund	\$5,426.00	\$48.00	\$0.00	\$48.00
	Philip Marett Hospital Bed Fund	\$168,735.00	\$1,508.00	\$0.00	\$1,508.00
	Levy Morris Hospital Bed Fund	\$12,956.00	\$116.00	\$0.00	\$116.00
	Organized Charities Hospital Bed Fund	\$10,222.00	\$93.00	\$0.00	\$93.00
	Paul Hospital Bed Fund	\$5,426.00	\$48.00	\$0.00	\$48.00
	Maud Trowbridge Reynolds Hospital Bed Fund	\$50,473.00	\$451.00	\$0.00	\$451.00
	Leonard J.Sanford & Anna Cutter Hospital Bed Fund	\$10,549.00	\$94.00	\$0.00	\$94.00
	Julia Sanford Hospital Bed Fund	\$10,853.00	\$97.00	\$0.00	\$97.00
	Sargent Hospital Bed Fund	\$5,426.00	\$48.00	\$0.00	\$48.00
	Mark M. Selleck Hospital Bed Fund	\$10,853.00	\$97.00	\$0.00	\$97.00
	George Thomas Smith Hospital Bed Fund	\$5,426.00	\$48.00	\$0.00	\$48.00
	Chris Tanuis Hospital Bed Fund	\$33.00	\$0.00	\$0.00	\$0.00
	Margarette Elford Dean Trowbridge Hospital Bed Fund	\$16,279.00	\$145.00	\$0.00	\$145.00
	Morton Warner Hospital Bed Fund	\$13,023.00	\$116.00	\$0.00	\$116.00
	Hermanus M. Welch Hospital Bed Fund	\$5,426.00	\$48.00	\$0.00	\$48.00
	Cynthia Ann Tracy Wetmore Hospital Bed Fund	\$60,000.00	\$558.00	\$0.00	\$558.00
	Whitney Hospital Bed Fund	\$11,287.00	\$101.00	\$0.00	\$101.00
	Albert Aaron Williams Hospital Bed Fund	\$29,338.00	\$262.00	\$0.00	\$262.00
	Ann Phillips Wurtenberg Hospital Bed Fund	\$7,749.00	\$69.00	\$0.00	\$69.00
	Alfred Blakeslee Hospital Bed Fund	\$10,852.00	\$97.00	\$0.00	\$97.00
	Julia Alling Hospital Bed Fund	\$46,014.00	\$443.00	\$0.00	\$443.00
	Charles Amos Baldwin Hospital Bed Fund	\$117,611.00	\$1,135.00	\$0.00	\$1,135.00
	Deane Hospital Bed Fund	\$108,960.00	\$1,051.00	\$0.00	\$1,051.00
	Ellen M. Gifford Hospital Bed Fund	\$57,994.00	\$560.00	\$0.00	\$560.00
	Wyllys Atwater Hospital Bed Fund	\$116,168.00	\$1,121.00	\$0.00	\$1,121.00
	Dwight Place Church Hospital Bed Fund	\$29,382.00	\$282.00	\$0.00	\$282.00
	William Townsend Hayes Hospital Bed Fund	\$116,168.00	\$1,121.00	\$0.00	\$1,121.00
	Dr. Thomas Wells Hospital Bed Fund	\$58,084.00	\$560.00	\$0.00	\$560.00
	Armstrong Hospital Bed Fund	\$78,301.00	\$757.00	\$0.00	\$757.00
	Frank Walter Benedict Hospital Bed Fund	\$115,989.00	\$1,119.00	\$0.00	\$1,119.00
	Henry Walter Benedict Hospital Bed Fund	\$115,989.00	\$1,119.00	\$0.00	\$1,119.00
	Helen & John T. Mason Hospital Bed Fund	\$166,213.00	\$1,604.00	\$0.00	\$1,604.00
	Frank L. Hunt Hospital Bed Fund	\$757,749.00	\$7,299.00	\$0.00	\$7,299.00
	Evelina J. Jones Hospital Bed Fund	\$60,383.00	\$583.00	\$0.00	\$583.00

YALE-NEW HAVEN HOSPITAL ANNUAL REPORTING FISCAL YEAR 2015 REPORT 17B - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY THE HOSPITAL					
B. BED FUND ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
Line	Name of Hospital Bed Fund	FMV of Principal	Actual Earnings	Earnings Reinvested	Earnings Available
	Elizabeth Hotchkiss Hospital Bed Fund	\$60,383.00	\$583.00	\$0.00	\$583.00
	Mary Lamb Hospital Bed Fund	\$2,966.00	\$29.00	\$0.00	\$29.00
	Bassett Bed #2 Hospital Bed Fund	\$120,878.00	\$1,167.00	\$0.00	\$1,167.00
	Fannie Keyes Hospital Bed Fund	\$121,644.00	\$1,174.00	\$0.00	\$1,174.00
	Leete Hospital Bed Fund	\$182,693.00	\$1,763.00	\$0.00	\$1,763.00
	George T. Newhall & Julia Leete Hospital Bed Fund	\$207,218.00	\$2,000.00	\$0.00	\$2,000.00
	Stiles Hospital Bed Fund	\$2,825,155.00	\$27,362.00	\$0.00	\$27,362.00
	Rose Porter Hospital Bed Fund	\$78,301.00	\$757.00	\$0.00	\$757.00
	Lucy Hall Boardman Hospital Bed Fund	\$87,271.00	\$839.00	\$0.00	\$839.00
	Ellen M. Gifford Executors Hospital Bed Fund	\$60,671.00	\$586.00	\$0.00	\$586.00
	Nathan Howell Sanford Hospital Bed Fund	\$121,365.00	\$1,171.00	\$0.00	\$1,171.00
	Arthur Herbert Trowbridge Hospital Bed Fund	\$64,311.00	\$621.00	\$0.00	\$621.00
	Edwin Harrison Beebe Hospital Bed Fund	\$87,678.00	\$832.00	\$0.00	\$832.00
	Julia A. Leete Newhall Hospital Bed Fund	\$269,179.00	\$2,602.00	\$0.00	\$2,602.00
	Bassett Bed #1 Hospital Bed Fund	\$367,573.00	\$3,301.00	\$0.00	\$3,301.00
	Richard S Fellowes Hospital Bed Fund	\$42,704.00	\$382.00	\$0.00	\$382.00
	Isaphene Hillhouse Hospital Bed Fund	\$184,796.00	\$1,651.00	\$0.00	\$1,651.00
	Joseph T Mary L Hotchkiss Hospital Bed Fund	\$555,086.00	\$4,959.00	\$0.00	\$4,959.00
	"Anna" Hospital Bed Fund	\$15,455.00	\$138.00	\$0.00	\$138.00
	Anna F. Ardenghi Hospital Bed Fund	\$10,853.00	\$97.00	\$0.00	\$97.00
	Strouse Adler Hospital Bed Fund	\$6,403.00	\$57.00	\$0.00	\$57.00
	Loring W. Andrews Hospital bed Fund	\$10,853.00	\$97.00	\$0.00	\$97.00
	Harriet Atwater	\$10,853.00	\$97.00	\$0.00	\$97.00
	Mary E. Baldwin Hospital Bed Fund	\$24,334.00	\$217.00	\$0.00	\$217.00
	George Benedict Hospital Bed Fund	\$10,853.00	\$97.00	\$0.00	\$97.00
	Bennett Hospital Bed Fund	\$13,023.00	\$116.00	\$0.00	\$116.00
	Edwin B. Bowditch Hospital Bed Fund	\$10,853.00	\$97.00	\$0.00	\$97.00
	Henry Bronson Hospital Bed Fund	\$10,853.00	\$97.00	\$0.00	\$97.00
	Susan Ellen Brown Hospital Bed Fund	\$13,822.00	\$123.00	\$0.00	\$123.00
	Samuel Clifford Carlisle Hospital Bed Fund	\$10,853.00	\$97.00	\$0.00	\$97.00
	William & Laura Carmalt Hospital Bed Fund	\$27,131.00	\$242.00	\$0.00	\$242.00
	Joseph Cimerol, Jr. Hospital Bed Fund	\$4,341.00	\$39.00	\$0.00	\$39.00
	Charles Henry Collins Hospital Bed Fund	\$10,853.00	\$97.00	\$0.00	\$97.00
	Idalina Darrow Hospital Bed Fund	\$7,931.00	\$71.00	\$0.00	\$71.00
	Deane Hospital Bed Fund	\$10,047.00	\$90.00	\$0.00	\$90.00

YALE-NEW HAVEN HOSPITAL ANNUAL REPORTING FISCAL YEAR 2015 REPORT 17B - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY THE HOSPITAL					
B. BED FUND ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
Line	Name of Hospital Bed Fund	FMV of Principal	Actual Earnings	Earnings Reinvested	Earnings Available
	George B. Dines, Jr. Hospital Bed Fund	\$109.00	\$1.00	\$0.00	\$1.00
	Cora C.T. Dwight Hospital Bed Fund	\$5,426.00	\$48.00	\$0.00	\$48.00
	Dr. Jonathan Edwards Hospital Bed Fund	\$10,853.00	\$97.00	\$0.00	\$97.00
	Henry Eld Hospital Bed Fund	\$5,426.00	\$48.00	\$0.00	\$48.00
	Henry F. English Hospital Bed Fund	\$10,853.00	\$97.00	\$0.00	\$97.00
	James E. English Hospital Bed Fund	\$33,485.00	\$299.00	\$0.00	\$299.00
	Henry Farnum Hospital Bed Fund	\$5,426.00	\$48.00	\$0.00	\$48.00
	William Fitch Hospital Bed Fund	\$5,426.00	\$48.00	\$0.00	\$48.00
	Edwin Foote Hospital Bed Fund	\$663,288.00	\$5,926.00	\$0.00	\$5,926.00
	Grace Salisbury Foote Hospital Bed Fund	\$10,853.00	\$97.00	\$0.00	\$97.00
	Levi Goodell Fox Hospital Bed Fund	\$10,853.00	\$97.00	\$0.00	\$97.00
	Elizabeth Hamlin Fox Hospital Bed Fund	\$10,853.00	\$97.00	\$0.00	\$97.00
	Simeon & Arthur Ward Fox Hospital Bed Fund	\$35,561.00	\$318.00	\$0.00	\$318.00
	Charles D. Hall Hospital Bed Fund	\$15,857.00	\$142.00	\$0.00	\$142.00
	Sylvia C. Hall Hospital Bed Fund	\$29,736.00	\$266.00	\$0.00	\$266.00
	Jessie A. Harmon Hospital Bed Fund	\$10,853.00	\$97.00	\$0.00	\$97.00
	<b>Total Bed Funds :</b>	<b>\$10,241,915.00</b>	<b>\$96,152.00</b>	<b>\$0.00</b>	<b>\$96,152.00</b>

**YALE-NEW HAVEN HOSPITAL  
ANNUAL REPORTING  
FISCAL YEAR 2015**

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

(1)	(2)	(3)
LINE	DESCRIPTION	COLLECTION INFORMATION
<b>I. GENERAL COLLECTION PROCESSES AND PROCEDURES</b>		
A.	Hospital's processes and policies for assigning a debt to a Collection Agent	See Policies and Procedures associated with Credit and Collection files as part of Annual Reporting Section 19(a)-167g-91(b)(22)
B.	Hospital's processes and policies for compensating a Collection Agent for services rendered	Each collection agent is reimbursed for services and rendered based on separately negotiated performance related contracts.
C.	Total Recovery Rate on accounts assigned (excluding Medicare accounts) to Collection Agents	16.50%
<b>II. SPECIFIC COLLECTION AGENT INFORMATION</b>		
<b>A Collection Agent</b>		
1	Collection Agent Name	Tobin, Cerbery, OMallery, Riley, Sellinger PC
2	Collection Agent Type	Attorney
3	Related / Not Related Entity	Not Related
4	If the Hospital follows the same processes and policies described in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	See Policies and Procedures associated with Credit and Collection files as part of Annual Reporting Section 19(a)-167g-91(b)(22)
5	If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	Each collection agent is reimbursed for services and rendered based on separately negotiated performance related contracts.
6	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent.	26.50%
<b>B Collection Agent</b>		
1	Collection Agent Name	Century Attorney
2	Collection Agent Type	Attorney

**YALE-NEW HAVEN HOSPITAL  
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**REPORT 18 - HOSPITAL COLLECTION PLACEMENT POLICIES AND COLLECTION AGENT INFORMATION**

(1)	(2)	(3)
LINE	DESCRIPTION	COLLECTION INFORMATION
3	Related / Not Related Entity	Related
4	If the Hospital follows the same processes and policies described in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	See Policies and Procedures associated with Credit and Collection files as part of Annual Reporting Section 19(a)-167g-91(b)(22)
5	If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	Each collection agent is reimbursed for services and rendered based on separately negotiated performance related contracts.
6	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent.	27.80%
<b>C</b>	<b>Collection Agent</b>	
1	Collection Agent Name	Century Financial Services
2	Collection Agent Type	Collection Agency
3	Related / Not Related Entity	Related
4	If the Hospital follows the same processes and policies described in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	See Policies and Procedures associated with Credit and Collection files as part of Annual Reporting Section 19(a)-167g-91(b)(22)
5	If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	Each collection agent is reimbursed for services and rendered based on separately negotiated performance related contracts.
6	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent.	15.80%

**YALE-NEW HAVEN HOSPITAL  
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REPORT 19 - SALARIES AND FRINGE BENEFITS OF THE TEN HIGHEST PAID HOSPITAL EMPLOYEES**

<b>LINE</b>	<b>POSITION TITLE</b>	<b>EMPLOYEE NAME</b>	<b>SALARY</b>	<b>FRINGE BENEFITS</b>	<b>TOTAL</b>
1.	Chief Executive Officer	Marna Borgstrom	\$2,749,681	\$860,669	<b>\$3,610,350</b>
2.	President	Richard DAquila	\$1,800,904	\$447,095	<b>\$2,247,999</b>
3.	Sr. VP/Chief Medical Officer	Thomas Balcezak	\$785,264	\$215,770	<b>\$1,001,034</b>
4.	Sr. VP, OPS Cancer Hospital	Abe Lopman	\$750,912	\$243,702	<b>\$994,614</b>
5.	Sr. VP, OPS Childrens Hospital	Cynthia Sparer	\$767,195	\$123,482	<b>\$890,677</b>
6.	Sr. VP OPS & Chief Integr Officer	Michael Holmes	\$625,624	\$198,361	<b>\$823,985</b>
7.	Sr. VP, Patient Services	Patricia S. Fitzsimons	\$735,487	\$37,891	<b>\$773,378</b>
8.	VP, Development	Kevin Walsh	\$542,199	\$160,510	<b>\$702,709</b>
9.	VP, Human Resources	Paul Patton	\$514,696	\$187,790	<b>\$702,486</b>
10.	VP & Exec Director, Health & Vascular Service	Keith Churchwell	\$572,861	\$88,723	<b>\$661,584</b>
		<b>Grand Total:</b>	<b>\$9,844,823</b>	<b>\$2,563,993</b>	<b>\$12,408,816</b>

**YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)**  
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**REPORT 19B - SALARIES AND FRINGE BENEFITS OF THE TEN HIGHEST PAID HEALTH SYSTEM EMPLOYEES**

LINE	POSITION TITLE	EMPLOYEE NAME AND COMPANY	SALARY	FRINGE BENEFITS	TOTAL
1.	President & CEO	Marna Borgstrom - YNHH & YNHHSC	\$2,749,681	\$860,669	\$3,610,350
2.	Exec VP, YNHHSC; President, GH; COO, BH	Norman Roth - Greenwich & Bridgeport Hospitals & YNHHSC	\$2,716,866	\$136,478	\$2,853,344
3.	Exec VP, YNHHSC & President, YNHH	Richard D Aquila - YNHH & YNHHSC	\$1,800,904	\$447,095	\$2,247,999
4.	VP, Corporate Business Office	David Wurcel - YNHHSC	\$2,037,031	\$108,962	\$2,145,993
5.	Exec VP, Corporate & Financial Serv	James Staten - YNHH & YNHHSC	\$1,402,979	\$412,372	\$1,815,351
6.	Exec VP, COO	Christopher O Connor - YNHHSC	\$1,193,994	\$405,048	\$1,599,042
7.	Exec VP, YNHHSC & President, Bridgeport Hospital	William Jennings - Bridgeport Hospital & YNHHSC	\$1,067,175	\$337,633	\$1,404,808
8.	Exec VP, Strategy & System Development	Gayle Capozzalo - YNHHSC	\$1,184,276	\$83,476	\$1,267,752
9.	Sr. VP, Information Systems & CIO	Daniel Barchi - YNHHSC	\$864,218	\$301,075	\$1,165,293
10.	Sr. VP, General Counsel	William Asetyne - YNHH & YNHHSC	\$850,187	\$312,124	\$1,162,311
		<b>Grand Total:</b>	<b>\$15,867,311</b>	<b>\$3,404,932</b>	<b>\$19,272,243</b>

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

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	SALARIES (Directly or Indirectly) <sup>C</sup>	FRINGE BENEFITS <sup>A</sup> (Directl y or Indirectly) <sup>C</sup>	TOTAL
<b>A . YALE-NEW HAVEN HEALTH SERVICES CORP. (YNHHSC)</b>				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$1,815,632	\$539,268	\$2,354,900
2	Paid by the Hospital to Employees of the Entity Listed Above	\$124,796,876	\$35,553,458	\$160,350,334
<b>B . CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENTURY)</b>				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>C . MEDICAL CENTER PHARMACY AND HOME CARE CENTER, INC.</b>				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>D . MEDICAL CENTER REALTY, INC.</b>				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>E . NORTHEAST MEDICAL GROUP, INC.</b>				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>F . NORTHEAST PEDIATRIC SPECIALISTS, INC.</b>				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>G . SHORELINE SURGERY CENTER, LLC</b>				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>H . SSC II, LLC</b>				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>I . THE NEW CLINICAL DEVELOPMENT PROGRAM CORPORATION (NCPD)</b>				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>J . YALE-NEW HAVEN AMBULATORY SERVICES CORP.</b>				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>K . YALE-NEW HAVEN CARE CONTINUUM</b>				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>L . YALE-NEW HAVEN HOSPITAL, INC.</b>				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
<b>M . YALE-NEW HAVEN MEDICAL CENTER, INC. (MEDICAL CENTER)</b>				

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

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	SALARIES (Directly or Indirectly) <sup>C</sup>	FRINGE BENEFITS <sup>A</sup> (Directl y or Indirectly) <sup>C</sup>	TOTAL
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
N .	<b>YNH NETWORK CORPORATION</b>			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
O .	<b>YNHH-PHYSICIANS CORPORATION</b>			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
P .	<b>YNHHS-MSO, INC.</b>			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
Q .	<b>YORK ENTERPRISES, INC.</b>			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0

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

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

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

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

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

(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2015
<b>A</b>	<b>Transfer of Assets or Operations</b>	
1.	Name of the Person or Entity Organized or Operated For Profit involved in each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions.	N/A
2.	Description of each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions.	N/A
3.	Description of each Hospital Clinical or Nonclinical Service or Function transferred or involved in a change of control.	N/A
4.	Date that each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions occurred.	N/A
5.	Amount of each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions.	\$0

## YALE-NEW HAVEN HOSPITAL

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## REPORT 23 - CHARITY CARE AND REDUCED COST SERVICES PROVIDED BY THE HOSPITAL

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 AMOUNT	FY 2015 AMOUNT	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A. Hospital Charity Care (see Hospital Audited Financial Statement Notes)</b>					
1.	Number of Applicants	6,495	11,919	5,424	84%
2.	Number of Approved Applicants	5,558	8,699	3,141	57%
3.	Total Charges (A)	\$129,377,000	\$126,360,000	(\$3,017,000)	-2%
	<b>Average Charges</b>	<b>\$23,278</b>	<b>\$14,526</b>	<b>(\$8,752)</b>	<b>-38%</b>
4.	Ratio of Cost to Charges (RCC)	0.271233	0.270301	(0.000932)	0%
	<b>Total Cost</b>	<b>\$35,091,312</b>	<b>\$34,155,234</b>	<b>(\$936,077)</b>	<b>-3%</b>
	<b>Average Cost</b>	<b>\$6,314</b>	<b>\$3,926</b>	<b>(\$2,387)</b>	<b>-38%</b>
5.	Charity Care - Inpatient Charges	\$59,283,426	\$58,506,520	(\$776,906)	-1%
6.	Charity Care - Outpatient Emergency Department Charges	21,048,802	23,797,083	2,748,281	13%
7.	Charity Care - Outpatient Charges (Excludes ED Charges)	49,044,772	44,056,397	(4,988,375)	-10%
	<b>Total Charges (A)</b>	<b>\$129,377,000</b>	<b>\$126,360,000</b>	<b>(\$3,017,000)</b>	<b>-2%</b>
8.	Charity Care - Number of Patient Days	21,833	17,038	(4,795)	-22%
9.	Charity Care - Number of Discharges	3,699	3,406	(293)	-8%
10.	Charity Care - Number of Outpatient ED Visits	17,368	19,636	2,268	13%
11.	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	19,744	40,437	20,693	105%
<b>(A) The total amount must agree with the total amount listed in the Hospital Audited Financial Statement Notes.</b>					
<b>B. Hospital Bed Funds (see Hospital Reporting System - Report 17)</b>					
1.	Number of Applicants	91	86	(5)	-5%
2.	Number of Approved Applicants	91	86	(5)	-5%
3.	Total Charges (B)	\$612,000	\$596,000	(\$16,000)	-3%
	<b>Average Charges</b>	<b>\$6,725</b>	<b>\$6,930</b>	<b>\$205</b>	<b>3%</b>
4.	Ratio of Cost to Charges (RCC)	0.271233	0.270301	(0.000932)	0%
	<b>Total Cost</b>	<b>\$165,995</b>	<b>\$161,099</b>	<b>(\$4,895)</b>	<b>-3%</b>
	<b>Average Cost</b>	<b>\$1,824</b>	<b>\$1,873</b>	<b>\$49</b>	<b>3%</b>
5.	Bed Funds - Inpatient Charges	\$254,951	\$275,957	\$21,006	8%
6.	Bed Funds - Outpatient Emergency Department Charges	159,233	112,243	(46,990)	-30%
7.	Bed Funds - Outpatient Charges (Excludes ED Charges)	197,816	207,800	9,984	5%
	<b>Total Charges (B)</b>	<b>\$612,000</b>	<b>\$596,000</b>	<b>(\$16,000)</b>	<b>-3%</b>
8.	Bed Funds - Number of Patient Days	75	81	6	8%
9.	Bed Funds - Number of Discharges	15	16	1	7%
10.	Bed Funds - Number of Outpatient ED Visits	110	93	(17)	-15%
11.	Bed Funds - Number of Outpatient Visits(Excludes ED Visits)	182	192	10	5%
<b>(B) The total amount must agree with the total amount listed on Hospital Reporting System - Report 17.</b>					

## YALE-NEW HAVEN HOSPITAL

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## REPORT 23 - CHARITY CARE AND REDUCED COST SERVICES PROVIDED BY THE HOSPITAL

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2014	FY 2015	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>AMOUNT</u>	<u>AMOUNT</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>