Form **990**

Department of the Treasury
Internal Revenue Service(77)

Return of Organization Exempt From Income Tax

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.

OMB No. 1545-0047

2007

Open to Public Inspection

A For the 2007 calendar year, or tax year beginning 9/30 , 2007, and ending 9/27 , 2008

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Termination
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type. See specific instruc-tions.

C
Acadia Hospital Corporation
43 Whiting Hill Road
Brewer, ME 04412

D Employer Identification Number
01-0459837

E Telephone number
207-973-7064

F Accounting method: ☐ Cash ☒ Accrual ☐ Other (specify) ►

● **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**

G Web site: ► www.acadiahospital.org

H and **I** are not applicable to section 527 organizations.

H (a) Is this a group return for affiliates? ☐ Yes ☒ No

H (b) If 'Yes,' enter number of affiliates ►

H (c) Are all affiliates included? ☐ Yes ☐ No (If 'No,' attach a list. See instructions.)

H (d) Is this a separate return filed by an organization covered by a group ruling? ☒ Yes ☐ No

J Organization type (check only one) ► ☒ 501(c) 3 ◄ (insert no.) ☐ 4947(a)(1) or ☐ 527

I Group Exemption Number ► 5247

K Check here ► ☐ if the organization is not a 509(a)(3) supporting organization **and** its gross receipts are normally **not** more than $25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

M Check ► ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ► 45,339,771.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances *(See the instructions.)*

REVENUE	1	Contributions, gifts, grants, and similar amounts received:			
	a	Contributions to donor advised funds	1a		
	b	Direct public support (not included on line 1a)	1b	133,859.	
	c	Indirect public support (not included on line 1a)	1c	53,694.	
	d	Government contributions (grants) (not included on line 1a)	1d	6,500.	
	e	Total (add lines 1a through 1d) (cash $ 176,376. noncash $ 17,677.)			1e 194,053.
	2	Program service revenue including government fees and contracts (from Part VII, line 93)			2 44,578,113.
	3	Membership dues and assessments			3
	4	Interest on savings and temporary cash investments			4 135,250.
	5	Dividends and interest from securities			5
	6a	Gross rents	6a		
	b	Less: rental expenses	6b		
	c	Net rental income or (loss). Subtract line 6b from line 6a			6c
	7	Other investment income (describe ► See Statement 1)			7 385,671.
	8a	Gross amount from sales of assets other than inventory — (A) Securities:	8a	(B) Other: 2,600.	
	b	Less: cost or other basis and sales expenses — (A): 216,929.	8b	(B): 280.	
	c	Gain or (loss) (attach schedule) Statement 2 — (A): -216,929.	8c	(B): 2,320.	
	d	Net gain or (loss). Combine line 8c, columns (A) and (B)			8d -214,609.
	9	Special events and activities (attach schedule). If any amount is from **gaming**, check here ► ☐			
	a	Gross revenue (not including $ _____ of contributions reported on line 1b)	9a		
	b	Less: direct expenses other than fundraising expenses	9b		
	c	Net income or (loss) from special events. Subtract line 9b from line 9a			9c
	10a	Gross sales of inventory, less returns and allowances	10a	43,706.	
	b	Less: cost of goods sold	10b	28,127.	
	c	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a Statement 3			10c 15,579.
	11	Other revenue (from Part VII, line 103)			11 378.
	12	**Total revenue.** Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11			12 45,094,435.
EXPENSES	13	Program services (from line 44, column (B))			13 35,900,043.
	14	Management and general (from line 44, column (C))			14 7,720,777.
	15	Fundraising (from line 44, column (D))			15
	16	Payments to affiliates (attach schedule)			16
	17	**Total expenses.** Add lines 16 and 44, column (A)			17 43,620,820.
NET ASSETS	18	Excess or (deficit) for the year. Subtract line 17 from line 12			18 1,473,615.
	19	Net assets or fund balances at beginning of year (from line 73, column (A))			19 7,921,971.
	20	Other changes in net assets or fund balances (attach explanation) See Statement 4			20 -2,480,643.
	21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20			21 6,914,943.

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (*See instruct.*)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach sch) (cash $ ____ non-cash $ ____) If this amount includes foreign grants, check here ▶ ☐	22a				
22b Other grants and allocations (att sch) (cash $ ____ non-cash $ ____) If this amount includes foreign grants, check here ▶ ☐	22b				
23 Specific assistance to individuals (attach schedule)	23				
24 Benefits paid to or for members (attach schedule)	24				
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A	25a	1,800,505.	993,903.	806,602.	0.
b Compensation of former officers, directors, key employees, etc. listed in Part V-B	25b	23,121.	23,121.	0.	0.
c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	25c	0.	0.	0.	0.
26 Salaries and wages of employees not included on lines 25a, b, and c	26	21,648,584.	19,582,647.	2,065,937.	
27 Pension plan contributions not included on lines 25a, b, and c	27	985,170.	847,432.	137,738.	
28 Employee benefits not included on lines 25a - 27	28	3,609,557.	3,097,266.	512,291.	
29 Payroll taxes	29	1,598,150.	1,374,710.	223,440.	
30 Professional fundraising fees	30				
31 Accounting fees	31	31,766.		31,766.	
32 Legal fees	32	99,760.		99,760.	
33 Supplies	33	2,166,389.	1,990,293.	176,096.	
34 Telephone	34	159,701.	106,872.	52,829.	
35 Postage and shipping	35	72,864.	66,941.	5,923.	
36 Occupancy	36	672,159.	530,458.	141,701.	
37 Equipment rental and maintenance	37	319,473.	191,942.	127,531.	
38 Printing and publications	38	3,066.		3,066.	
39 Travel	39	107,869.	92,353.	15,516.	
40 Conferences, conventions, and meetings	40	80,169.	69,964.	10,205.	
41 Interest	41	771,983.	768,552.	3,431.	
42 Depreciation, depletion, etc (attach schedule)	42	1,045,962.	814,804.	231,158.	
43 Other expenses not covered above (itemize): a See Statement 5	43a	8,424,572.	5,348,785.	3,075,787.	
b	43b				
c	43c				
d	43d				
e	43e				
f	43f				
g	43g				
44 **Total functional expenses.** Add lines 22a through 43g. (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	44	43,620,820.	35,900,043.	7,720,777.	0.

Joint Costs. Check. ▶ ☐ if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in **(B)** Program services? ▶ ☐ **Yes** ☒ **No**

If 'Yes,' enter **(i)** the aggregate amount of these joint costs $ ____; **(ii)** the amount allocated to Program services $ ____; **(iii)** the amount allocated to Management and general $ ____; and **(iv)** the amount allocated to Fundraising $ ____.

Part III Statement of Program Service Accomplishments *(See the instructions.)*

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► To Provide Healthcare Services

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; but optional for others.)

a See Statement 6

(Grants and allocations $) If this amount includes foreign grants, check here .. ► ☐ 35,900,043.

b

(Grants and allocations $) If this amount includes foreign grants, check here .. ► ☐

c

(Grants and allocations $) If this amount includes foreign grants, check here .. ► ☐

d

(Grants and allocations $) If this amount includes foreign grants, check here .. ► ☐

e Other program services .....

(Grants and allocations $) If this amount includes foreign grants, check here .. ► ☐

f Total of Program Service Expenses (should equal line 44, column (B), Program services) ..... ► 35,900,043.

Part IV Balance Sheets *(See the instructions.)*

Note: *Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.*

				(A) Beginning of year		(B) End of year
ASSETS	45	Cash — non-interest-bearing		1,465.	45	1,465.
	46	Savings and temporary cash investments		3,298,605.	46	3,586,312.
	47a	Accounts receivable	47a 24,957,745.			
	b	Less: allowance for doubtful accounts	47b 4,889,815.	19,401,657.	47c	20,067,930.
	48a	Pledges receivable	48a			
	b	Less: allowance for doubtful accounts	48b		48c	
	49	Grants receivable		9,837.	49	9,561.
	50a	Receivables from current and former officers, directors, trustees, and key employees (attach schedule) See Stm 7		18,176.	50a	13,676.
	b	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)			50b	
	51a	Other notes and loans receivable (attach schedule) See St 8	51a 353,381.			
	b	Less: allowance for doubtful accounts	51b	318,983.	51c	353,381.
	52	Inventories for sale or use		181,791.	52	182,319.
	53	Prepaid expenses and deferred charges		388,302.	53	335,738.
	54a	Investments — publicly-traded securities ► ☐ Cost ☐ FMV			54a	
	b	Investments — other securities (attach sch) ► ☐ Cost ☐ FMV			54b	
	55a	Investments — land, buildings, & equipment: basis	55a			
	b	Less: accumulated depreciation (attach schedule)	55b		55c	
	56	Investments — other (attach schedule)			56	
	57a	Land, buildings, and equipment: basis	57a 25,973,281.			
	b	Less: accumulated depreciation (attach schedule) Statement 9	57b 17,088,325.	9,586,611.	57c	8,884,956.
	58	Other assets, including program-related investments (describe ► See Statement 10)		7,223,051.	58	10,185,841.
	59	**Total assets** (must equal line 74). Add lines 45 through 58		40,428,478.	59	43,621,179.
LIABILITIES	60	Accounts payable and accrued expenses		14,298,808.	60	16,603,932.
	61	Grants payable			61	
	62	Deferred revenue		1,084.	62	56,413.
	63	Loans from officers, directors, trustees, and key employees (attach schedule)			63	
	64a	Tax-exempt bond liabilities (attach schedule) See Statement 11		13,734,723.	64a	12,968,794.
	b	Mortgages and other notes payable (attach schedule)			64b	
	65	Other liabilities (describe ► See Statement 12)		4,471,892.	65	7,077,097.
	66	**Total liabilities.** Add lines 60 through 65		32,506,507.	66	36,706,236.
NET ASSETS OR FUND BALANCES		**Organizations that follow SFAS 117, check here** ► ☒ and complete lines 67 through 69 and lines 73 and 74.				
	67	Unrestricted		7,309,715.	67	6,177,019.
	68	Temporarily restricted		557,409.	68	675,462.
	69	Permanently restricted		54,847.	69	62,462.
		Organizations that do not follow SFAS 117, check here ► ☐ and complete lines 70 through 74.				
	70	Capital stock, trust principal, or current funds			70	
	71	Paid-in or capital surplus, or land, building, and equipment fund			71	
	72	Retained earnings, endowment, accumulated income, or other funds			72	
	73	**Total net assets or fund balances.** Add lines 67 through 69 **or** lines 70 through 72. (Column (A) **must** equal line 19 and column (B) **must** equal line 21)		7,921,971.	73	6,914,943.
	74	**Total liabilities and net assets/fund balances.** Add lines 66 and 73		40,428,478.	74	43,621,179.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return *(See the instructions.)*

a	Total revenue, gains, and other support per audited financial statements			a	45,020,799.
b	Amounts included on line a but not on Part I, line 12:				
	1 Net unrealized gains on investments	b1	-25,827.		
	2 Donated services and use of facilities	b2			
	3 Recoveries of prior year grants	b3			
	4 Other (specify): See Stm 13	b4	-4,564.		
	Add lines b1 through b4			b	-30,391.
c	Subtract line b from line a			c	45,051,190.
d	Amounts included on Part I, line 12, but not on line a:				
	1 Investment expenses not included on Part I, line 6b	d1			
	2 Other (specify): See Stm 14	d2	43,245.		
	Add lines d1 and d2			d	43,245.
e	**Total revenue** (Part I, line 12). Add lines c and d			e	45,094,435.

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements			a	43,609,603.
b	Amounts included on line a but not on Part I, line 17:				
	1 Donated services and use of facilities	b1			
	2 Prior year adjustments reported on Part I, line 20	b2			
	3 Losses reported on Part I, line 20	b3			
	4 Other (specify): See Stmt 15	b4	28,127.		
	Add lines b1 through b4			b	28,127.
c	Subtract line b from line a			c	43,581,476.
d	Amounts included on Part I, line 17, but not on line a:				
	1 Investment expenses not included on Part I, line 6b	d1			
	2 Other (specify): See Stmt 16	d2	39,344.		
	Add lines d1 and d2			d	39,344.
e	**Total expenses** (Part I, line 17). Add lines c and d			e	43,620,820.

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) *(See the instructions.)*

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances
See Statement 17		1,547,318.	253,187.	0.

Part V-A Current Officers, Directors, Trustees, and Key Employees *(continued)*

		Yes	No
75a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings ► 14			
b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If 'Yes,' attach a statement that identifies the individuals and explains the relationship(s) See Statement 18	75b	X	
c Do any officers, directors, trustees, or key employees listed in form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of 'related organization' ►	75c	X	
If 'Yes,' attach a statement that includes the information described in the instructions. See Statement 19			
d Does the organization have a written conflict of interest policy?	75d	X	

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances
Sheri G. Glazier 268 Stillwater Ave. Bangor, ME 04402-0422	0.	23,121.	0.	0.

Part VI Other Information *(See the instructions.)*

		Yes	No
76 Did the organization make a change in its activities or methods of conducting activities? If 'Yes,' attach a detailed statement of each change	76		X
77 Were any changes made in the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes.	77		X
78a Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	78a		X
b If 'Yes,' has it filed a tax return on **Form 990-T** for this year?	78b	N/A	
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement	79		X
80a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc, to any other exempt or nonexempt organization?	80a	X	
b If 'Yes,' enter the name of the organization ► See Statement 20 and check whether it is [X] exempt or [X] nonexempt.			
81a Enter direct and indirect political expenditures. (See line 81 instructions.) 81a 0.			
b Did the organization file **Form 1120-POL** for this year?	81b		X

Part VI Other Information *(continued)*

			Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X	
b	If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) 82b			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to *quid pro quo* contributions?	83b	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/A	
85a	*501(c)(4), (5), or (6).* Were substantially all dues nondeductible by members?	85a	N/A	
b	Did the organization make only in-house lobbying expenditures of $2,000 or less?	85b	N/A	
	If 'Yes' was answered to either 85a or 85b, **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.			
c	Dues, assessments, and similar amounts from members 85c N/A			
d	Section 162(e) lobbying and political expenditures 85d N/A			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A	
86	*501(c)(7) organizations.* Enter: **a** Initiation fees and capital contributions included on line 12 86a N/A			
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A			
87	*501(c)(12) organizations.* Enter: **a** Gross income from members or shareholders 87a N/A			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b N/A			
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX	88a		X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Part XI ►	88b	X	
89a	*501(c)(3) organizations.* Enter: Amount of tax imposed on the organization during the year under: section 4911 ► 0. ; section 4912 ► 0. ; section 4955 ► 0.			
b	*501(c)(3) and 501(c)(4) organizations.* Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction	89b		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ► 0.			
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization ► 0.			
e	*All organizations.* At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e		X
f	*All organizations.* Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f		X
g	*For supporting organizations and sponsoring organizations maintaining donor advised funds.* Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g		X

90a List the states with which a copy of this return is filed ► ME

b Number of employees employed in the pay period that includes March 12, 2007 (See instructions.) 90b 573

91a The books are in care of ► Scott Oxley Telephone number ► 207-973-5114

Located at ► 43 Whiting Hill Road Brewer ME ZIP + 4 ► 04412

			Yes	No
b	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)?	91b		X
	If 'Yes,' enter the name of the foreign country ►			
	See the instructions for exceptions and filing requirements for **Form TD F 90-22.1,** Report of Foreign Bank and Financial Accounts.			

Part VI Other Information *(continued)*

		Yes	No
c	At any time during the calendar year, did the organization maintain an office outside of the United States? 91c		X
	If 'Yes,' enter the name of the foreign country ►		
92	*Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of* ***Form 1041*** – Check here ► N/A ► ☐		
	and enter the amount of tax-exempt interest received or accrued during the tax year ► 92	N/A	

Part VII Analysis of Income-Producing Activities *(See the instructions.)*

Note: *Enter gross amounts unless otherwise indicated.*	Unrelated business income (A) Business code	Unrelated business income (B) Amount	Excluded by section 512, 513, or 514 (C) Exclusion code	Excluded by section 512, 513, or 514 (D) Amount	(E) Related or exempt function income
93 Program service revenue:					
a CAFETERIA/DIETARY			3	122,764.	
b PATIENT CARE SERVICES					44,455,349.
c					
d					
e					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings & temporary cash invmnts			14	135,250.	
96 Dividends & interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from pers prop					
99 Other investment income			14	385,671.	
100 Gain or (loss) from sales of assets other than inventory			18	-214,609.	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory			3	15,579.	
103 Other revenue: a					
b MISC			1	378.	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				445,033.	44,455,349.
105 **Total** (add line 104, columns (B), (D), and (E)) ►					44,900,382.

Note: *Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.*

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes *(See the instructions.)*

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93A	PROVISION OF HEALTHCARE FOR MENTAL HEALTH/SUBSTANCE ABUSE DISORDERS.
	See 990, Part III

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities *(See the instructions.)*

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts *(See the instructions.)*

a	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes	☒ No
b	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	☐ Yes	☒ No

Note: *If 'Yes' to* ***(b),*** *file Form 8870* ***and*** *Form 4720 (see instructions).*

Part XI Information Regarding Transfers To and From Controlled Entities. *Complete only if the organization is a controlling organization as defined in section 512(b)(13).*

		Yes	No
106	Did the reporting organization **make** any transfers **to** a controlled entity as defined in section 512(b)(13) of the Code? If 'Yes,' complete the schedule below for each controlled entity	X	

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	See Statement 21			
b				
c				
	Totals			8,863,315.

		Yes	No
107	Did the reporting organization **receive** any transfers **from** a controlled entity as defined in section 512(b)(13) of the Code? If 'Yes,' complete the schedule below for each controlled entity	X	

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	See Statement 22			
b				
c				
	Totals			1,137,955.

		Yes	No
108	Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?	X	

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

► Signature of officer — Date: 5-5-09

► Daniel B Coffey, Treasurer
Type or print name and title.

Paid Preparer's Use Only

Preparer's signature ► Self-Prepared	Date	Check if self-employed ►	Preparer's SSN or PTIN (See General Instruction X)
Firm's name (or yours if self-employed), address, and ZIP + 4 ►		EIN ►	
		Phone no. ►	

Form **8868**
(Rev April 2007)

Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box ► [X]
- If you are filing for an **Additional (not automatic) 3-Month Extension, complete only Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

Section 501(c) corporations required to file Form 990-T and requesting an automatic 6-month extension – check this box and complete Part I only ► [ ]

All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing *(e-file)*. Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for section 501(c) corporations required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit *www.irs.gov/efile* and click on *e-file for Charities & Nonprofits*.

Type or print

File by the due date for filing your return. See instructions.

Name of Exempt Organization	Employer identification number
Acadia Hospital Corporation	01-0459837
Number, street, and room or suite number. If a P.O. box, see instructions.	
43 Whiting Hill Road	
City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
Brewer, ME 04412	

Check type of return to be filed (file a separate application for each return):

[X] Form 990	[ ] Form 990-T (corporation)	[ ] Form 4720
[ ] Form 990-BL	[ ] Form 990-T (section 401(a) or 408(a) trust)	[ ] Form 5227
[ ] Form 990-EZ	[ ] Form 990-T (trust other than above)	[ ] Form 6069
[ ] Form 990-PF	[ ] Form 1041-A	[ ] Form 8870

- The books are in the care of ► Scott Oxley

Telephone No. ► 207-973-5114 FAX No. ► 207-973-7139

- If the organization does not have an office or place of business in the United States, check this box ► [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) 5247. If this is for the whole group, check this box. ► [ ]. If it is for part of the group, check this box ► [X] and attach a list with the names and EINs of all members the extension will cover. Acadia Hospital Corporation 01-0459837

1 I request an automatic 3-month (6 months for a section 501(c) corporation required to file Form 990-T) extension of time until 5/15, 20 09, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

► [ ] calendar year 20 ____ or

► [X] tax year beginning 9/30, 20 07, and ending 9/27, 20 08.

2 If this tax year is for less than 12 months, check reason: [ ] Initial return [ ] Final return [ ] Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	$ 0.
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	$ 0.
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	$ 0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Department of the Treasury
Internal Revenue Service
OGDEN UT 84201-0074

For assistance, call:
1-877-829-5500

Notice Number: CP211A
Date: March 23, 2009

Taxpayer Identification Number:
01-0459837
Tax Form: 990
Tax Period: September 30, 2008

123341.591519.0418.009 1 AB 0.351 370

EASTERN MAINE HEALTHCARE SYSTEMS
ACADIA HOSPITAL CORP
PO BOX 422
BANGOR ME 04402-0422228

123341

APPLICATION FOR EXTENSION OF TIME TO FILE AN EXEMPT ORGANIZATION RETURN - APPROVED

We have received your Form 8868, Application for Extension of Time to File an Exempt Organization Return, for the return (form) and tax period identified above.

We have approved your request and have extended the due date to file your return to May 15, 2009.

If you have any questions, please call us at the number shown above, or you may write us at the address shown at the top left of this letter.

Reminder - You May Be Required to File Electronically

Exempt organizations may be required to file certain returns electronically. For tax years ending on or after December 31, 2006, the electronic filing requirement applies to exempt organizations with $10 million or more in total assets if the organization files at least 250 returns in a calendar year, including income, excise, employment tax and information returns. Private foundations and charitable trusts will be required to file Forms 990-PF electronically regardless of their asset size, if they file at least 250 returns annually. For more information, go to www.irs.gov . Click "Charities and Non-Profits" and look for the "e-file for Charities and Non-Profits" tab.

For tax forms, instructions and information visit **www.irs.gov.** (Access to this site will not provide you with your specific taxpayer account information.)

Statement 1
Form 990, Part I, Line 7
Other Investment Income

Interest on BD Designated	$ 147,221.
Interest on Bond Trustee	96,841.
Interest on Fund Deprec	141,519.
Interest on Self Ins Fnds	90.
Total	$ 385,671.

Statement 2
Form 990, Part I, Line 8
Net Gain (Loss) from Noninventory Sales

Publicly Traded Securities

Gross Sales Price:	0.
Cost or Other Basis:	216,929.

Total Gain (Loss) Publicly Traded Securities $ -216,929.

Other Assets

Description:	1 1999 ECONOLINE VAN		
Date Acquired:	7/01/1999		
How Acquired:	Purchase		
Date Sold:	8/01/2008		
To Whom Sold:	JOE CYR		
Gross Sales Price:	2,600.		
Cost or Other Basis:	23,525.		
Basis Method:	Cost		
Depreciation:	23,525.		
		Gain (Loss)	2,600.

Description:	1 FOOSEBALL TABLE		
Date Acquired:	8/01/2000		
How Acquired:	Purchase		
Date Sold:	9/01/2008		
To Whom Sold:	Disposed/Retired		
Gross Sales Price:	0.		
Cost or Other Basis:	657.		
Basis Method:	Cost		
Depreciation:	531.		
		Gain (Loss)	-126.

Description:	1 FOOSEBALL TABLE		
Date Acquired:	6/01/2001		
How Acquired:	Purchase		
Date Sold:	9/01/2008		
To Whom Sold:	Disposal/Retired		
Gross Sales Price:	0.		
Cost or Other Basis:	559.		
Basis Method:	Cost		
Depreciation:	405.		
		Gain (Loss)	-154.

Total Gain (Loss) Other Assets $ 2,320.

Statement 2 (continued)
Form 990, Part I, Line 8
Net Gain (Loss) from Noninventory Sales

Total Net Gain (Loss) From Noninventory Sales	$ -214,609.

Statement 3
Form 990, Part I, Line 10
Gross Profit (Loss) From Sales Of Inventory

Gift Shop Revenue	$ 43,706.
Gross Sales	$ 43,706.
Less Returns & Allowances	0.
Net Sales	$ 43,706.
Less Cost Of Goods Sold	28,127.
Gross Profit From Sales Of Inventory	$ 15,579.

Statement 4
Form 990, Part I, Line 20
Other Changes in Net Assets or Fund Balances

Change in Unrealized Loss on Investment	$ -25,827.
Changes in the funded status of Post Ret. Benefit Plan	-2,273,607.
Equity Transfers To Eastern ME Healthcare Systems	-313,626.
Net Change in Funds Held at Affiliates	132,417.
Total	$ -2,480,643.

Statement 5
Form 990, Part II, Line 43
Other Expenses

	(A) Total	(B) Program Services	(C) Management & General	(D) Fundraising
Dues and Subscriptions	106,987.	46,918.	60,069.	
Employee Events and Recognitio	27,683.	4,197.	23,486.	
Insurance Expense	565,106.	486,098.	79,008.	
Marketing and Advertising	24,029.	1,604.	22,425.	
Miscellaneous	8,841.	874.	7,967.	
Provision for uncollectible ac	2,073,517.	2,073,517.		
Purchase Services	4,604,892.	1,785,555.	2,819,337.	
Taxes and Licensing	1,013,517.	950,022.	63,495.	
Total	$ 8,424,572.	$ 5,348,785.	$ 3,075,787.	$ 0.

Statement 6
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses
Charity Care provided(at cost). 1037 persons served. Includes Foreign Grants: No		4,810,220.
Medicare shortfalls(at cost). 3325 persons served. Includes Foreign Grants: No		1,455,121.
Provided mental health and substance abuse healthcare services regardless of ability to pay. Provided other uncompensated care (at cost) of $1,315,232. Includes Foreign Grants: No		29,634,702.

The Acadia Hospital is a nonprofit psychiatric and chemical dependency hospital that, along with Acadia Healthcare, a community mental health agency and emergency shelter services provider, serves the entire state of Maine. It currently has the largest psychiatric staff in Maine with a total of 20 psychiatrists, neurologists, addictionologist/ internest, and family practitioner. The facility opened sixteen years ago in response to an urgent need for more hospital and community based mental health and chemical dependency treatment programs.

In 2008, Acadia's Access Center received 16,081 calls requesting service. Total admissions amounted to 2,363 resulting in Acadia experiencing a 71% occupancy rate for the year.

Please see the following publication for details of community benefit projects at Eastern Maine Healthcare Systems entities.
Includes Foreign Grants: No

Collaboration is taken seriously at EMHS. Intra-organizational collaboration is a critical element in our efforts to optimize the resources within the system-shared deliberation, shared expertise, shared resources, and shared goals. In each of our pillars, we strive to identify collaborative partners from outside our organization. In a region and state with limited resources, collaboration helps us be efficient and avoid duplication of effort, while creating the kind of healthcare delivery system that is right for Maine.

As we continue our journey to be the best rural healthcare system in America by 2012, EMHS member organizations are working together to identify efficiencies and share expertise. For example, Inland Hospital and Sebasticook Valley Hospital are finding ways to maintain a practical level of specialist services in their contiguous, rural communities. Eastern Maine Medical Center and EMHS are working with Blue Hill Memorial Hospital as it redesigns clinical staff and business structures with an eye toward the future.

Statement 6 (continued)
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses

EMHS has also reached outside to embrace organizations that share our community health mission. Maine's geography is large, the population disbursed, and the levels of chronic disease are significant throughout central, eastern, and northern Maine. EMHS can not solve the major issues of prevention and chronic disease management, and produce meaningful, sustainable results without joining with others. By working together, we are able to create synergies and more effectively reach more people, or perhaps to paraphrase the poet John Heywood, "Many hands make lighter work."

The OneMaine Health collaborative brings EMHS together with two other major health systems, MaineHealth, based in Portland and MaineGeneral Health, based in Kennebec County. The OneMaine agenda is extensive and includes efforts to create a statewide community health needs assessment, and an initiative to improve diabetes prevention and management. We're also working on the technology that will allow hospital electronic medical records to interconnect so the quality of patient care is maintained as patients move from one system to another. A new workforce development initiative is bringing OneMaine human resource expertise together with Maine colleges and universities so together we can plan for the professional workforce that is critically needed now and in the future.

Another OneMaine committee has been working on joint purchasing, and our combined purchasing power has already saved millions of healthcare dollars. A myriad of other collaborations are focused on improving the health of Mainers and our communities. In brief, these include:
-Improving patient access to affordable prescription medications. This program was successfully trialed in Aroostook County with all of the county's hospitals, Healthy Maine Partnerships, United Way 2-1-1, and the Pharmaceutical Research and Manufacturers of America.
- Helping people in the Hancock County area manage their chronic disease brought together all of the county's hospitals and Healthy Maine Partnerships.
-Improving healthcare literacy so people are better able to comply with their physician's instructions and medication directions is currently focused in the Bangor region with The Acadia Hospital, Eastern Maine Medical Center, St. Joseph Hospital, and Penobscot Community Health Care, and will ultimately include additional hospitals in Maine.
-Changing cultural attitudes about childhood fitness and nutrition to prevent obesity over the long term is a statewide effort. Hospitals, Healthy Maine Partnerships and other community champions across a seven county area are working together to make Maine's future brighter and healthier.
-A statewide collaborative to eradicate healthcare acquired infections is underway.

Includes Foreign Grants: No

Statement 6 (continued)
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses

Other EMHS driven collaboratives are more academic. Our Maine Institute for Human Genetics and Health has a formal working relationship with The Jackson Laboratory and the University of Maine's Graduate School of Biomedical Sciences. Scientists and fundraisers are working to find solutions for cancer through a unique bench to bedside program. Other collaboratives are connecting centers of medical education to rural Maine to stimulate physician placement in areas of need.

The EMHS promise is access to quality healthcare, and I am proud to say that we are living up to that promise by knocking down barriers and diminishing once protected turf in favor of working together for the benefit of all of the people of our state. We remain committed to improving patient care, and improving the health status for all Maine communities. Together we're stronger.

M. Michelle Hood

Eastern Maine Medical Center
Location: Bangor
Employees: 3,675
Description: Eastern Maine Medical Center is the 411-bed regional referral center for the northern two thirds of Maine, offering specialty and sub-specialty surgical and medical services, as well as a full range of primary to intensive care services.

EMMC is the nation's single recipient of the 2008 Davies Organizational Award, given by the Health Information and Management Systems Society for improving patient safety and quality through information technology. EMMC also earned a spot on the nation's 100 Most Wired Hospitals list in 2008.

EMMC has committed to be 100 percent compliant with several national quality initiatives, including the Centers for Medicare and Medicaid Services (CMS) Core Indicators for Heart Attack, Heart Failure, Pneumonia, and the Surgical Care Improvement Project. Data is reported on 28 Core Measures. By August 2008, EMMC had achieved 100 percent on 52 percent of the measures; was 90 to 99 percent on 33 percent of the measures, and below 90 percent on only 15 percent of the measures.
The National Committee for Quality Assurance (NCQA) has recognized EMMC's Husson Internal Medicine as a Patient Centered Medical Home-it's highest honor for quality in primary care. Husson Internal Medicine is the only primary care practice in Maine and one of only a handful in the nation to receive this recognition.

EMMC offers the only comprehensive Blood Management and Conservation Program in the State of Maine, ensuring

Statement 6 (continued)
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses

patients receive a blood transfusion only when absolutely necessary. Since the program began in 2006, EMMC has reduced the number of blood transfusions by 50 percent.

In pursuit of its goal of Employer of Choice, EMMC continues to offer employees health improvement strategies through work based health programming. For the second year, EMMC is a Well-Workplace Gold Award winner, through Wellness Councils of America.

EMMC has been named, once again, an Overall Best Performer by Avatar International based on patient feedback. EMMC is the only hospital in the Avatar database of like hospitals to receive this recognition five years in a row. In addition, EMMC's inpatient service received a Five Star Award again this year, and EMMC primary care offices received an award for Exceeding Patient Expectations.

For the fourth year in a row, EMMC won a medal of honor from the U.S. Department of Health and Human Services for excellence in helping grieving families make the decision to give life through organ donation. EMMC is among very few non-transplant hospitals in the nation receiving this award.

In October, a state Certificate of Need was approved for a much needed expansion of inpatient care space, ultimately improving care space for women and infants, replacing thirty year old operating rooms, coordinating cardiac services, and increasing the number of beds-all in private rooms.

Includes Foreign Grants: No

Healthcare Charities
Location: Bangor
Employees: 17
Description: Healthcare Charities is the center of development and philanthropy support service for EMHS members. We remain dedicated to help ensure access to the highest quality healthcare. Together, our community leaders, donors, and volunteers bring important support to build the best rural healthcare delivery system in America.

Capital Campaigns
Champion the Cure capital campaign was launched to advance cancer care and research at Eastern Maine Medical Center and the Maine Institute for Human Genetics and Health. More than half of the campaign's goal of $9.5 million has been raised; the campaign continues with facility opening and dedication scheduled for fall 2009.

The Acadia Hospital successfully completed its first capital campaign, Keep the Promise which now exceeds $1.1 million; additional gifts will fund a new pediatric and family center.

Charles A. Dean Memorial Hospital and Nursing Home

Statement 6 (continued)
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses

celebrated success of Golden Opportunities capital campaign with dedication of the new Richard Brown Medical Building on the Greenville campus.

Annual Funds and Events
Annual fund campaigns at Blue Hill Memorial Hospital, Charles A. Dean Memorial Hospital & Nursing Home, and Eastern Maine HomeCare collectively exceeded more than $120,000.

Two of EMMC's annual fundraising events Run for Hope, and Beach to Beach combined raised nearly $50,000 more than any previous year!

Celebration of Life, in Patten, and Lights of Hope support cancer treatment; Lights of Life are new community events in support of patient care; Fall Pops, annual runs, auctions, golf tournaments, and concerts fill the calendar- with care and financial support-twelve months of the year!

The Children's Miracle Network
Maine's Champion Child is Ben Hatch from Cornville. Wal-Mart and Sam's Club continue to lead support for our children with incredible intensity. This year alone more than a hundred thousand dollars was raised by golf tournaments highlighted by the Log-A-Load for Kids at JATO Highland, in Lincoln, raising an amazing $46,209. Total giving for CMN of Healthcare Charities exceeded $670,000.

Planned Giving
For Walter and Sandra Rosen perpetuating the family legacy reflects their commitment to healthcare. Dialysis care is so important to the family that they recently supported creation of the medical center's outpatient DialysisCare of Maine - Boyd Center on Union Street. This year they stepped up to the plate yet again, funding a brand new water filtration system (the very heart of dialysis) at EMMC's State Street campus. This inpatient only facility is now called DialysisCare of Maine - Rosen Center.

The Acadia Hospital
Location: Bangor
Employees: 679
Description: The Acadia Hospital is Maine's comprehensive resource for information and treatment of mental illness and chemical dependency. Acadia is also the first psychiatric hospital in the nation awarded Magnet status for nursing excellence.

Dorothy Hill, RNC, retired as president and CEO of The Acadia Hospital in September. Hired in 1991 as vice president of patient care services, Hill became president and CEO ten years later. Her career highlights include being

Statement 6 (continued)
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses

named Psychiatric Nurse of the Year, and leading Acadia's successful effort to become the nation's first psychiatric Magnet Hospital.

David Proffitt, PhD, became Acadia's new president and CEO. During his tenure at Riverview Psychiatric Hospital in Augusta, Dr. Proffitt was recognized for leading significant improvements in care.

Acadia went from two adolescent units to one, using the free space on the first floor to house pediatric outpatient services. These changes allowed for growth of adult outpatient mental health services.

Includes Foreign Grants: No

Acadia began offering open access for adult outpatient services clients, allowing individuals to schedule an appointment for that day or the next day, a move that led to fewer missed appointments.

In its first full year of existence, 15 people successfully completed the Narcotics Treatment Program's Hepatitis C Clinic. The clinic is part of Acadia's strategic plan and continues to see new patients.

The Keep the Promise capital campaign was nearing the $1.1 million mark at the end of the fiscal year. The money raised will go towards building a new Pediatric and Family Center, upgrading the Acadia Recovery Community facilities, purchasing information technology, and enhancing the patient area in outpatient substance abuse treatment.

The Acadia Recovery Community (ARC), a homeless shelter, substance abuse treatment and transitional housing program, celebrated ten years in September. Formerly known as Hope House, ARC provides a range of services and programs for Bangor's homeless population, including emergency and extended shelter, and transitional housing through the Bridge and Homebase programs. The emergency shelter averaged 52 persons on a nightly basis in fiscal year '08.

The Aroostook Medical Center
Location: Presque Isle
Employees: 1,027
Description: A comprehensive healthcare organization offering a 161-licensed-bed medical center, a 16 practice primary and specialty care provider group, a kidney dialysis center, a long-term care facility, and a regional ambulance service.

The Aroostook Medical Center (TAMC) recruited six new physicians resulting in a total number of active medical staff members of 60.

Statement 6 (continued)
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses

20 new employees were inducted into Veterans-In-Partnership (VIP) club for staff who have served over 20 years, bringing the total membership to 173.

The sixth annual Survivor Aroostook Camp encouraged local youth to pursue healthcare careers.

Fifteen employees received the Fire Starters award, a program created to recognize employees who go above and beyond in providing excellent service.

The hospital received the "Exceeding Patient Expectations 2007" award from Avatar, a healthcare research company representing over 300 hospitals nationally. The hospital also received "Innovation Award 2008" for both Women's and Children's Health Unit and Outpatient Clinics from Avatar.

The Aroostook Medical Center participated in a collaborative with EMHS, the United Way of Aroostook, and 211 of Maine to focus on prescription drug assistance.

Family practice services were restructured to respond to the need for improved access to care and enhanced physician recruitment in central Aroostook County.

The hospital preserved Maine state licensing at Aroostook Health Center, long-term care division, as a result of a deficiency-free, unannounced survey in September 2008.

More than $20,000 was contributed to Children's Miracle Network of EMHS as a result of the 2008 The Aroostook Medical Center Golf Classic.

The hospital received nearly $300,000 in grant funds and donations to support the organization's capital and programmatic needs. Also, The Aroostook Medical Center collaborated with other non-profit agencies to assist them in securing over $498,000 in grant funds for projects focused on community health promotion.

Planning and development of the North Street Healthcare site was initiated, which will provide access to expanded primary care and walk-in care beginning in June 2009.

Affiliated Healthcare Systems
Location: Bangor, Portland and Rutland, Vermont
Employees: 562
Description: A taxable company whose primary mission is to enhance the clinical care delivery systems within EMHS by providing cost-effective, integrated support services for its member organizations and pursuing profitable, sustainable growth opportunities.

Affiliated Collections customers placed almost $33 million

Statement 6 (continued)
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses

dollars for collection, 23 percent higher than its volume in 2005 and more than doubling its volume since 2001.

Includes Foreign Grants: No

Affiliated Pharmacy in conjunction with EMMC, generated more than $650,000 in savings to the EMHS self-insured health plan through its management and operation of the EMMC 340b drug acquisition program.

Affiliated Healthcare Systems (AHS) provided $82,000 in donations to Healthcare Charities in support of EMHS hospitals and care providers as well as an additional $11,000 in charitable contributions to other organizations.

Affiliated Laboratory (ALI) formally installed its first CareEvolve, state-of-the-art internet-based lab order entry and reporting system in October. During fiscal year 2008, 26 sites were installed or are in progress.

In November, Affiliated Transcription formally began implementing Fusion, its new operating systems for all EMHS member hospitals.

In December, AHS acquired 100 percent interest in Capital Ambulance, which in May celebrated its tenth year as an AHS company.

In December, Affiliated Materiel Services acquired Groveland Medical Express, a medical distributor located in Haverhill, Massachusetts.

In January, AHS added a full time e-commerce developer to create www.mpsmedicalsupply.com and www.apswholesalerx.com, national websites for the sales of medical supplies/equipment and office based vaccines/injectibles.

ALI celebrated 25 years as an AHS company in February.

In March, ALI installed a new chemistry platform consolidating five instruments, which will result in annual savings of $110,000.

In April, with partners Dysart Realty Company and Cianbro Development Corporation, AHS created Penobscot Logistics Solutions LLC in order to purchase, renovate, and operate a warehouse facility in Bangor. AMS will move its distribution and logistics center to that facility.

In May, AMS' Bill Clifford won the "Spirit Award" from among the 260 members of National Distribution and Contracting. In addition, AMS earned 15 consecutive "Pacesetter" awards, which goes to the top 25 of all members and its first "Million Dollar Club" award, recognizing purchase volume.

Statement 6 (continued)
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses

Sebasticook Valley Hospital
Location: Pittsfield, Carmel, Clinton, Detroit, Newport
Employees: 316
Description: 25 bed, Joint Commission accredited, critical access hospital with a wide range of services including a Women's Health Center, Surgical, Special Care and Swing Bed Units, two Rehabilitation Centers, Diagnostics, Laboratory, Cardiopulmonary Service, Primary Care and Specialty Practices, Diabetes and Nutrition Clinic, Sleep Study Center, and Community Health Services including Dental Health Programs and Transportation.
SVH opened two new primary care practices-Newport and Carmel-for a total of four Sebasticook Regional Family Care practices in the region.

SVH opened four satellite Open Lab Services in Carmel, Clinton, Newport, and Pittsfield.

The hospital recruited primary care physicians Jennifer Diehl, MD, Julie Hicks, DO, and Cynthia Robertson, MD. Mid-level primary care provider recruitment included Helen Cox, PA-C, Jennifer Bagley, FNP, and Bunny Pounds, FNP. Jared Wilkinson, DPM, joined SVH Specialty Services, expanding podiatry care.

SVH continued to receive Three Blue Ribbon Rating (best) from Maine Health Management Coalition for Patient Satisfaction, Patient Safety, and Select Clinical Quality with performance compared to national and state averages and top 10 percent of U.S. hospitals.

The Avatar International Innovation Award for 2007 was awarded to SVH for the Courtesy Van Service, a program providing free transportation for hospital outpatient care. SVH also received Avatar International's Five-Star Service Award for Exceeding Patient Expectations for 2007.

During the year, swing bed admissions more than doubled, ambulance service increased by more than 29 percent, MRI appointments increased by 28 percent, sleep studies increased by 25 percent, rehabilitation services increased by more than 16 percent, mammography screenings increased by more than 14 percent, and lab tests increased by more than 13 percent.

Includes Foreign Grants: No

Total revenue grew from fiscal year 2007 to fiscal year 2008 by more than 16 percent.

SVH received more than $471,447 in grant funding.

More than $61,000 was raised at the annual SVH Benefit Golf Tournament and Auction with proceeds benefiting the Virtual Intensive Care Unit project and the Children's Miracle

Statement 6 (continued)
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses

Network of EMHS.

More than $13,000 was raised in the annual Breast Cancer Awareness Walk to fund breast care services for those without the ability to pay. More than $4,000 was raised by a local community group "Friends of the SVH Women's Health Center" to fund women's programs such as mammogram services.

Blue Hill Memorial Hospital
Location: Blue Hill, Bucksport, Castine, and Deer Isle / Stonington
Employees: 348
Description: Blue Hill Memorial Hospital, founded in 1924, is a critical access 25-bed rural hospital. Our mission is to provide primary and selected specialty healthcare of outstanding quality, care for our patients with respect and compassion, and improve the health of the communities we serve.

Erik Steele, DO assumed the position of interim CEO of Blue Hill Memorial Hospital in December of 2008.

Primary care remains the cornerstone of Blue Hill Memorial Hospital, with providers seeing patients in Blue Hill, Castine, Stonington, and Bucksport.

Blue Hill Memorial Hospital took important steps forward in its growth strategy.

The hospital added digital mammography to diagnostic imaging services.

Blue Hill Orthopedics and the office of James White, MD, opened as a center for orthopedic specialty and surgery care, specializing in minimally invasive total joint replacement.

Blue Hill Memorial Hospital introduced Ramandha Rao, MD, an expert in minimally invasive approaches to urologic treatments, and less invasive robotic prostate cancer surgery.

The hospital launched a cardiac rehabilitation program in March, with full capacity realized by October.

Cancer patients who live in the Blue Hill Peninsula benefit not only from an outstanding regional cancer center in Bangor, but can also rely on Blue Hill Memorial Hospital for diagnosis and treatment. Physicians from EMMC CancerCare of Maine see patients at Blue Hill Memorial Hospital. An Oncology nurse provides chemotherapy services and care is coordinated with other departments for issues such as chronic edema, which can be addressed through a manual lymph drainage technique with a certified practitioner in the

Statement 6 (continued)
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses

Rehabilitation Department. Local care is especially important for patients experiencing the side-effects, such as fatigue and nausea, of some infusion therapies.

Beginning in January 2008, Blue Hill Memorial Hospital (BHMH) and local community members offered an eight-week workshop for children and their families on healthy lifestyles and improving self esteem. Each two-hour program focused on the prevention and management of childhood obesity and was intended for children from ages 8 to 15.

Blue Hill Memorial Hospital patients and staff appreciate an emphasis on "Going Green." Staff members grow and harvest food from a small, organic garden on the hospital grounds and local, organic produce is served in the cafeteria. When possible, local farmers are acknowledged for their fresh fruits and vegetables.

Staff at Blue Hill Memorial Hospital continues to help needy local residents through their "Adopt A Family Fund." Employees donate cash to the fund, which is turned over to local residents for prescription drugs, food, gas, and other needs. The fund is administered through the hospital's social services department.

Rosscare
Location: Bangor, Orono, Dexter, Lincoln
Employees: 118 (includes Core Departments and Dirigo Pines Retirement Community)
Description: Every day Rosscare fulfills the wishes of Sylvia Ross by providing seniors in central, eastern, and northern Maine services, education, alternative care and living arrangements to support aging in place, and a healthy fulfilling life.

Includes Foreign Grants: No

Amy E Cotton, FNP, director of operations, was accepted into the Honor Society of Nursing, Sigma Theta Tau International's first National Geriatric Nursing Leadership Academy. Amy and mentor Marilyn R Gugliucci, PhD, of the University of New England, will work with EMHS long term providers to accomplish her project, Always/Never Care Model©: Improving Geriatric Health Care Outcomes Utilizing Gap Analysis.

Cynthia Smith was promoted to Communication and Lifeline program manager, and she received the Excellence in Volunteer Administration Award by the Maine Commission for Community Service for her work with the Telecare Program.

Lifeline and Telecare continued to touch the lives of more than 900 seniors each and every day.

The Center for Healthy Aging offered the Living Well:

Statement 6 (continued)
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses

Chronic Disease Self Management Workshop. The workshop concentrated on techniques to cope with chronic disease conditions.

The Sylvia Ross Home gardens were rejuvenated by local Girls Scouts Hillary Sivik and Taylor Smith. Improvements included raised gardening beds, an archway, and new benches.

Ross Manor was awarded the Best Nursing Facility in Bangor for the tenth year in a row.

Brian White, CNA, Stillwater Healthcare, received an Excellence in Caregiving award for his hard work and dedication.

Christy Tripp, RN, Ross Manor, received an Excellence in Caregiving award for providing excellent patient-centered care and positive interactions with both patients and staff.

Dirigo Pines Retirement Community
- The retirement community celebrated five years of gracious hospitality, outstanding resident care, gourmet dining, and numerous social activities and has become one of the premier retirement communities in Maine.
- The Dirigo Inn's independent living Penobscot Commons wing remained at 100 percent with a waiting list and three cottages sales and leases were finalized.
- Barbara Steller, executive director of Dirigo Pines, will retire in December 2008. Barbara's passion, integrity, and dedication will long be remembered, at Dirigo Pines.

Charles A. Dean Memorial
Hospital and Nursing Home
Location: Greenville, Guilford, Monson
Employees: 170
Description: Charles A Dean Memorial Hospital and Nursing Home provides access to quality healthcare to the residents and visitors to the Moosehead Lake region through our 14-bed critical access hospital, 24-bed nursing home, and three Northwoods Healthcare family practice clinics.

On February 9, the Charles A Dean Memorial Hospital and Nursing Home went live with the EMHS Together Project, a shared electronic medical records system allowing immediate access and collaboration of care among EMHS member hospitals. This standardization ensures patient information is available when and where it's needed no matter where the patient seeks care within EMHS.

Jody Wildes, CNA, was honored as a recipient of the 2008 Excellence in Long-Term Care Award during a conference sponsored by the Maine Long-Term Care Ombudsman Program, the

Statement 6 (continued)
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses

Maine Health Care Association, and First Atlantic Corporation. This is the third year in a row that a CA Dean staff member has earned the award.

In collaboration with Greenville fire and police, Department of Forestry, Mayo Regional Hospital EMS, LifeFlight, Charles A Dean Memorial Hospital hosted a mock-disaster training exercise in August, allowing participants to put their "paper plans" into action with a real life scenario.

Maine Institute for Human Genetics and Health
Location: Brewer, Bangor, Bar Harbor
Employees: 17
Description: The Institute has implemented a multidisciplinary, translational research program. In collaboration with The Jackson Laboratory, the Institute conducts bone research. Also, with the University of Maine, the Institute created and hosts the state-wide Maine Neurogenetics Consortium with more than 140 neuroscientists, neurologists, and physicians.

Includes Foreign Grants: No

The Institute implemented a research program to create niche areas of excellence in cancer and diseases of bone and brain. Also, initial steps were made to link a cancer tissue banking resource to a geographic information system (GIS) that has the potential to be the defining flagship program of the Institute.

The Institute received three Department of Defense awards from 2006 to 2008 to support the tissue banking-GIS effort.

Collaboration with programs throughout eastern Maine included CancerCare of Maine; Department of Veterans Affairs, Togus; Dahl-Chase Pathology Associates; Affiliated Laboratory Incorporated; and the James W. Sewall Company.

The Institute successfully sponsored the first Neurogenetics Research Conference in Maine, which included national leaders in neurosciences participating as keynote speakers.

The Institute moved into a state-of-the-art biomedical research facility equipped for genomics and proteomics research in Bangor.

Four expert PhD scientist-leaders were recruited to the new research programs in cancer, brain and bone.

The first patent application was submitted for the development of novel therapeutics for cancers and premature osteoporosis of Neurofibromatosis Type 1.

Statement 6 (continued)
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses

New leaders in cancer research were welcomed to the Institute's Scientific Advisory Board: Colonel CD Shriver, chief of Surgery and director of Clinical Breast Care Program, Walter Reed Army Medical Center and Breast Cancer Tissue Bank at Windber Research Institute; and Randall Harris, MD, PhD, Professor, Molecular Epidemiology, Ohio State University.

The Institute acquired expert cancer research consultants from the National Cancer Institute's Population Genetics and Epidemiology Program and the Breast Cancer Research Program at Dana Farber Cancer Center, in Boston, to advise on the cancer tissue banking initiative.

The Institute received a Canadian scientific meeting award (PB Laub et al) for poster assessing risk of cancer in Maine.

Eastern Maine HomeCare
Location: Bangor, Bar Harbor, Blue Hill, Caribou (headquarters), Fairfield, Fort Kent, Houlton
Employees: 286
Description: Eastern Maine HomeCare sites include Bangor Area Visiting Nurses, Hancock County HomeCare and Hospice, River Valley HomeCare, and Visiting Nurses of Aroostook.
Eastern Maine HomeCare

Eastern Maine HomeCare staff made 78,098 homecare, hospice, long term care and telehealth visits to 3,729 patients in central, eastern, and northern Maine.
Eastern Maine HomeCare received grants from the Agnes M. Lindsay Trust and the Stephen & Tabitha King Foundation totaling $35,000 to purchase pulse oximeters for every nurse and physical therapist for use in home healthcare services for its patients.

In addition to celebrating 95 years of service, Bangor Area Visiting Nurses and Hospice of Eastern Maine received the 2 Those Who Care Award for the 2008 Agency of Distinction.

Bangor Area Visiting Nurses was named a 2007 national best practice agency for patient satisfaction. Also, they met or exceeded the state and national average in ten out of twelve outcomes measured by Centers for Medicare and Medicaid Services (as of June 2008). Hospice of Eastern Maine's most recent patient satisfaction surveys resulted in patients rating Hospice of Eastern Maine 100 percent in overall satisfaction and likely to recommend to others.

Kathy Lirakis, director of Hancock County HomeCare and Hospice (HCHC) is serving a second term as president of the HomeCare and Hospice Alliance of Maine for 2008-2009. Also, Sue Davis, RN from HCHC received HomeCare & Hospice Alliance of Maine's 2008 Distinguished Service Caregiver Award.

Statement 6 (continued)
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses

Hancock County HomeCare & Hospice received a 100 percent patient satisfaction rating the last quarter of fiscal year 2008 in overall satisfaction, likely to recommend, and likely to choose again.

Includes Foreign Grants: No

River Valley HomeCare (formerly Sebasticook Valley HomeCare and Inland HomeCare) moved into its new office in Fairfield. River Valley HomeCare achieved 95.7 percent patient satisfaction, surpassing the 94 percent national data base benchmark; it has earned an average 1.33 Medicare reimbursement for patient care-above the national average of 1.11. In addition, River Valley met or exceeded nine of twelve national and ten of twelve state outcomes measured by Centers for Medicare and Medicaid Services (as of June 2008).

Visiting Nurses of Aroostook was named a 2007 national best practice agency for patient satisfaction. Also, Visiting Nurses of Aroostook's 95.3 percent patient satisfaction rating exceeded the national average and met or exceeded ten out of twelve outcomes measured by Centers for Medicare and Medicaid Services (as of June 2008).

Inland Hospital
Location: Waterville
Employees: 642
Description: A 48-bed community hospital with Lakewood, a 105-bed continuing care center offering long-term/skilled nursing/Alzheimer's-dementia care; and physician offices in Fairfield, Unity, Madison/Skowhegan, N. Anson, Waterville and Oakland.

Inland was named as the Mid-Maine Chamber of Commerce Business of the Year.

A $2 million expansion of the Emergency Department was completed.

Inland developed a new Cardiac Rehab program; collaborated with Champions Fitness Center to deliver on-site physical therapy services; and by partnering with EMMC, created new vascular care and pediatric orthopedics specialty clinics. Also established Boot Camp for New Dads and Living Well, a chronic disease self-management program.

Inland welcomed Waterville Cardiology Associates and cardiologist Kevin White, MD, and acquired CV Diagnostics, a cardiovascular diagnostics service. Rhonda Kroll, MD and Nadeem Siddiqui, MD joined Inland Medical Associates, and New Horizons Health Care welcomed James Douglas, DO and Susan Stevens, DO.

Statement 6 (continued)
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses

With a goal to have zero preventable errors in our care by 2012, Inland successfully implemented changes to eliminate errors in 10 of the 33 nationally recognized areas, with more improvements underway.

Inland received three Blue Ribbons (best) from the Maine Health Management Coalition for Patient Satisfaction, Safety, and Select Clinical Quality.

Avatar International recognized Inland with awards for Exceeding Patient Expectations; Exemplary Service-Overall Best Performer and 5 Star Service in Outpatient Care.

Inland honored two staff members for their clinical excellence: Susan Palumbo, RN, with Clinic Services and Tina Marlowe, BS, RT, with Imaging Services.

The World of Women's Wellness, Men's Maintenance, and Maine's Biggest Baby Shower wellness events attracted nearly 700 people. Inland also offered free Safe Care Toolkits to help people get more involved in their healthcare.

Inland experienced a 20 percent growth in total revenues in 2008. o Inland's Fall Pops Concert raised $45,000 for the hospital's new Cardiac Rehab program.

EMHS (Home Office)
Location: Brewer
Employees: 423
Description: The Home Office of EMHS works in support of the nearly 8,000 employees throughout the system, including seven hospitals, emergency transport companies, home health agencies, and numerous long term care and assisted living facilities. EMHS offers access to high quality healthcare, while striving for efficiencies to control cost.

In 2008, the EMHS Home Office received the distinction of being both a Best Place to Work in Maine and a Best Place to Work in Healthcare. Although these recognitions are separate from one another, both were awarded within a month of each other.

The Total Health Action Committee, led by the Home Office and involving representatives from each member organization, is helping employees become more informed healthcare consumers.

Includes Foreign Grants: No

EMHS Move and Improve experienced the highest level completion rate in its history, with more than 54 percent of the registered participants completing the program. There were more than 7,600 participants representing 360 Maine towns.

Statement 6 (continued)
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses

EMHS began officially tracking community benefits-the screenings, professional and community education, and charity care programs we make available to communities free of charge. EMHS members invest in these resources so that the people of Maine can benefit from the best medical practices and healthcare services available regardless of their ability to pay.

EMHS Information Services (IS) earned several prestigious awards on behalf of the work they do for member organizations, including the Davies Award and Most Wired Hospital Award on behalf of EMMC. Information Services also facilitated many electronic upgrades and computerized initiatives.

As part of the OneMaine Health Collaborative, EMHS Information Services also worked on the HealthInfoNet pilot. HealthInfoNet is a nonprofit organization that is building a statewide electronic healthcare exchange.

The EMHS Internal Audit and Corporate Compliance Department's Third Party Audit activities resulted in nearly $700,000 staying at our member organizations where it can be used to improve local healthcare. In addition, training and education on proper documentation through the Audit and Compliance Department resulted in another approximately $400,000 in savings.

EMHS is the proud recipient of the Irv Marsters Wellness Champion Leadership Award for Business from the Wellness Council of Maine. The Home Office is the first business to receive this award.

EMHS launched a five-year youth healthy lifestyle project to decrease the rising trend of childhood obesity in rural Maine. EMHS is working with collaborators in a seven county area, as well as "Let's Go" in Portland, to promote healthy habits related to fitness and nutrition. companies, home health agencies, and numerous long term care and assisted living facilities.

EMHS Benefit to the Communities We Serve
FY 2008, October 2007-September 2008

EMHS is proud to share the contributions of our members to the strength, vitality, and health of the communities throughout Maine that we collectively serve. While together EMHS member organizations have demonstrated benefits totaling more than one hundred million dollars, individually we are most proud that we're able to help a woman who loves gardening return to her beloved petunias and vegetables; of the helping hand to a school following a traumatic event that left students with questions; of fostering teambuilding

Statement 6 (continued)
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses

and higher self esteems for middle school students; of the baby who lived despite her parents lack of health insurance. There are countless stories and thousands of lives represented on these pages. We salute each of the EMHS members and the enormous community benefit they provide.

EMHS system-wide total benefit: $106,874,852
Community Health Improvement Services: $637,706
Health Professions Education: $2,079,236
Subsidized Health Services: $24,808
Research: $3,784,435
Financial Contributions: $185,739
Community-Building Activities: $164,251
Community Benefit Operations $228,705
Charity Care: $15,906,235
Unpaid Cost of Public Programs: Medicare: $44,990,594
Medicaid: $31,275,615
Other Public Programs: $58,674
Unrecoverable interest cost on funds used to subsidize state Mainecare/Medicaid underpayments of $123M: $7,538,854
$1,509,409 is the total amount of donor funds used for community benefit through Healthcare Charities of EMHS.
Includes Foreign Grants: No

Member contributions to our communities:

The Acadia Hospital
Total Community Benefit: $7,382,126
Community Health Improvement Services: $15,370
Health Professions Education: $3,993
Community-Building Activities: $3,685
Community Benefit Operations: $860
Charity Care: $4,810,220
Unpaid Cost of Public Programs: Medicare: $1,455,121
Unrecoverable interest cost on funds used to subsidize state Mainecare/Medicaid underpayments of $16.7M: $1,092,877
$53,695 is the total amount of donor funds used for community benefit at The Acadia Hospital through Acadia Hospital Healthcare Charities.

The Aroostook Medical Center
Total Community Benefit: $16,135,561
Community Health Improvement Services: $38,024
Health Professions Education: $4,802
Financial Contributions: $67,173
Community-Building Activities: $723
Charity Care: $973,570
Unpaid Cost of Public Programs: Medicare: $11,093,713
Medicaid: $2,784,559
Unrecoverable interest cost on funds used to subsidize state Mainecare/Medicaid underpayments of $17.8M: $1,172,997
$188,483 is the total amount of donor funds used for community benefit at The Aroostook Medical Center through The Aroostook Medical Center Healthcare Charities.

Statement 6 (continued)
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses

Blue Hill Memorial Hospital
Total Community Benefit: $1,888,901
Community Health Improvement Services: $18,893
Charity Care: $756,320
Unpaid Cost of Public Programs: Medicare: $906,550
Unrecoverable interest cost on funds used to subsidize state Mainecare/Medicaid underpayments of $3.8M: $207,138
No donor funds used for community benefit at the Blue Hill Memorial Hospital through Blue Hill Memorial Hospital Healthcare Charities so far this year.

Charles A Dean Hospital and Nursing Home
Total Community Benefit: $659,532
Community Health Improvement Services: $2,012
Financial Contributions: $8,945
Community-Building Activities: $428
Charity Care: $215,405
Unpaid Cost of Public Programs: Medicare: $51,749 Medicaid: $309,008
Unrecoverable interest cost on funds used to subsidize state Mainecare/Medicaid underpayments of $1.2M: $71,985
$10,609 is the total amount of donor funds used for community benefit at CA Dean through CA Dean Memorial Hospital and Nursing Home Healthcare Charities.

EMHS (data below reflects Home Office activity only)
Total Community Benefit: $419,665
Community Health Improvement Services: $9,891
Financial Contributions: $97,556
Community-Building Activities: $102,034
Community Benefit Operations: $210,184
A partnership with Central Maine Healthcare operates the only air ambulance program in Maine, LifeFlight of Maine. The capital investment in this project approximates $6.5 million. $8,752 is the total amount of donor funds used for the EMHS Move and Improve program and the AwesomeBody Project.

Eastern Maine Homecare
Total Community Benefit: $398,682
Community Health Improvement Services: $8,679
Unpaid Cost of Public Programs: Medicaid: $390,003
$188,441 is the total amount of donor funds used for community benefit at Eastern Maine Homecare through Eastern Maine Homecare Healthcare Charities.

Eastern Maine Medical Center
Total Community Benefit: $71,792,769
Community Health Improvement Services: $303,965
Health Professions Education: $2,038,434
Subsidized Health Services: $15,824
Research: $3,784,435
Financial Contributions: $915
Community-Building Activities: $845

Statement 6 (continued)
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses

Community Benefit Operations: $1,607
Charity Care: $7,687,278
Unpaid Cost of Public Programs: Medicare: $28,116,161
Medicaid: $25,397,637
Unrecoverable interest cost on funds used to subsidize state Mainecare/Medicaid underpayments of $73.6M: $4,445,668
$1,029,627 is the total amount of donor funds used for community benefit at Eastern Maine Medical Center through Eastern Maine Medical Center Healthcare Charities.
Includes Foreign Grants: No

Inland Hospital
Total Community Benefit: $6,004,098
Community Health Improvement Services: $116,156
Health Professions Education: $259
Financial Contributions: $11,150
Community-Building Activities: $53,174
Community Benefit Operations: $16,054
Charity Care: $584,277
Unpaid Cost of Public Programs: Medicare: $2,549,856
Medicaid: $2,394,408
Unrecoverable interest cost on funds used to subsidize state Mainecare/Medicaid underpayments of $4.8M: $278,764
$26,462 is the total amount of donor funds used for community benefit at Inland Hospital through The Inland Foundation.

Rosscare
Total Community Benefit: $2,046
Community Health Improvement Services: $1,092
Health Professions Education: $624
Community-Building Activities: $330
$3,340 is the total amount of donor funds used for community benefit for Rosscare services through Rosscare Healthcare Charities this quarter.

Sebasticook Valley Hospital
Total Community Benefit: $2,191,472
Community Health Improvement Services: $123,624
Health Professions Education: $31,124
Subsidized Health Services: $8,984
Community-Building Activities: $3,032
Charity Care: $879,165
Unpaid Cost of Public Programs: Medicare: $817,444 Other: $58,674
Unrecoverable interest cost on funds used to subsidize state Mainecare/Medicaid underpayments of $5.5M: $269,425
No donor funds used for community benefit at Sebasticook Valley Hospital through Sebasticook Valley Hospital Healthcare Charities so far this year.

EMHS Financial Services Division
Fiscal Year 2008 Report
Through the hard work and dedication of its many employees,

Statement 6 (continued)
Form 990, Part III, Line a
Statement of Program Service Accomplishments

Description	Grants and Allocations	Program Service Expenses
the EMHS Financial Services Division leveraged the use of technology in the workplace in order to achieve significant operating efficiencies. Automated Time and Attendance The implementation of an automated time and attendance system at several EMHS affiliates was completed in March. The goal of this initiative was to automate 100 percent of employee time recording for payroll purposes. The project was a great success and was recognized by software company, API Software, in current marketing brochures as a case study in excellence. Implementation of automated time and attendance, coupled with process redesign, led to a 25 percent reduction in staff in the Home Office Payroll department. EMHS worked with displaced employees to find them positions elsewhere in the Division. This experience clearly demonstrates that operating costs can be reduced through leveraging technology and by re-engineering processes. Supply Chain EMHS continues to work extensively with supply vendors to automate orders. The results of these efforts have led to improved quality (reduced orders for incorrect products) and lower transaction processing costs. EMHS is currently recognized by VHA, a national group purchasing organization, as "best in class" across its membership in the arena of automated purchasing. Patient Accounting Services The Patient Accounting Services department (PAS) continues to broaden its customer base. This year, the Home Office PAS department began the transition of integrating Blue Hill Memorial Hospital's patient accounting functions into its central business office. In addition, members of our PAS department served key roles in implementing new billing software for Blue Hill. Lastly, the Patient Accounting Services department continues to maximize cash collections from payers. During 2008, more than $450,000 in lost revenue was recaptured from payers as part of a special project with help from third-party business partners. Includes Foreign Grants: No		
	$ 0.	$ 35900043.

Statement 7
Form 990, Part IV, Line 50a
Receivables Due from Officers, Directors, Trustees, and Key Employees

Receivables Reported Separately		Balance Due
Borrower's Name:	William M. Wypyski, Jr.	
Borrower's Title:	VP of Clinical Services	
Date of Note:	6/01/2005	
Repayment Terms:	$1500 write off per yr of work	
Interest Rate:	5.39%	
Security Provided:	Employment	
Purpose of Loan:	Education	
Consideration:	N/A	
Original Amount:	$ 18,176.	
Balance Due:		$ 13,676.
	Total Receivables Reported Separately	$ 13,676.

Statement 8
Form 990, Part IV, Line 51
Other Notes and Loans Receivable

Other Notes and Loans	Balance Due	Doubtful Accounts Allowance
Physician Note Receivable	$ 15,186.	$ 0.
Education Loans- Current	104,508.	0.
Education Loans- Long Term	233,687.	0.
Total Other Notes and Loans	$ 353,381.	$ 0.
Total Net Receivables		$ 353,381.

Statement 9
Form 990, Part IV, Line 57
Land, Buildings, and Equipment

Category	Basis	Accum. Deprec.	Book Value
Furniture and Fixtures	$ 7,412,431.	$ 5,636,816.	$ 1,775,615.
Machinery and Equipment	3,955,765.	3,451,514.	504,251.
Buildings	11,884,591.	6,416,782.	5,467,809.
Improvements	2,191,479.	1,583,213.	608,266.
Land	447,123.		447,123.
Miscellaneous	81,892.	0.	81,892.
Total	$ 25,973,281.	$ 17,088,325.	$ 8,884,956.

Statement 10
Form 990, Part IV, Line 58
Other Assets

Board Designated Funds-Other	$ 3,543,582.
Funded Depreciation	5,437,411.
Funds Held by Bond Trustee	440,296.
Investment in Net Assets held @ HC	737,926.
Self Insurance Funds held by Trustee	26,626.
Total	$ 10,185,841.

Statement 11
Form 990, Part IV, Line 64a
Tax-Exempt Bond Liabilities

		Balance Due
Purpose of Issue:	Refunding of EMH 1991 Issue	
Issue Date:	7/01/1998	
Original Issue Amount:	21,545,000.	
Type of Form 8038 Filed:	Form 8038	
Form 8038 Filing Date:	7/09/1998	
Outstanding Issue Amount:		$ 12,968,794.
	Total	$ 12,968,794.

Statement 12
Form 990, Part IV, Line 65
Other Liabilities

Court Settlement Payable	$ 10,000.
Deferred Liab-Post Retirement Benefits	6,998,242.
Liability Under Cap Lease Obligation	50,663.
Reserve for Self-Insurance Program	18,192.
Total	$ 7,077,097.

Statement 13
Form 990, Part IV-A, Line b(4)
Other Amounts

Reimbursement of exp reclass to expense	$ -4,564.
Total	$ -4,564.

Statement 14
Form 990, Part IV-A, Line d(2)
Other Amounts

COGS reported on Line 10b	$ -28,127.
Restricted Gifts Reported to Fund Balanc	71,372.
Total	$ 43,245.

Statement 15
Form 990, Part IV-B, Line b(4)
Other Amounts

COGS reported on Line 10b	$ 28,127.
Total	$ 28,127.

Statement 16
Form 990, Part IV-B, Line d(2)
Other Amounts

Reimbursement of exp reclass from revenu	$ 4,564.
Restricted exp reported to fund balance	34,780.
Total	$ 39,344.

Statement 17
Form 990, Part V-A
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours Per Week Devoted	Compen-sation	Contri-bution to EBP & DC	Expense Account/ Other
John W Bragg NH Bragg & Sons, PO Box 927 Bangor, ME 04402-0927	Chairman 0.50	$ 0.	$ 0.	$ 0.
James Breece 16 Central St, Univ of Maine Bangor, ME 04401	Board Member 0.50	0.	0.	0.
Daniel B Coffey 43 Whiting Hill, Suite 500 Brewer, ME 04412	Treasurer 0.50	0.	0.	0.
G. Clifton Eames 17 Fairmount Park West Bangor, ME 04401	Board Member 0.50	0.	0.	0.
Leonard Giambalvo 43 Whiting Hill Road Brewer, ME 04401	Secretary 1.00	0.	0.	0.
Dorothy E. Hill Acadia Hosp, 268 Stillwater Av Bangor, ME 04401	President & CEO 60.00	284,142.	35,423.	0.
Judith Horan WLBZ, 329 Mt. Hope Ave Bangor, ME 04401	Board Member 0.50	0.	0.	0.

Statement 17 (continued)
Form 990, Part V-A
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours Per Week Devoted	Compen-sation	Contri-bution to EBP & DC	Expense Account/ Other
Mary M. Hood, President & CEO EMHS, 43 Whiting Hill Road Brewer, ME 04412	Ex-Officio 0.50	$ 0.	$ 0.	$ 0.
Richard A. Lyons, Jr MSAD 22, 24 Main Rd North Hamdpen, ME 04444	Vice Chair 0.50	0.	0.	0.
Charles T. McHugh, MD PO Box 699 Baileyville, ME 04694	Board Member 0.50	0.	0.	0.
Paul X. Paradis 407 4th Street Old Town, ME 04468	Board Member 0.50	0.	0.	0.
Sandra L. Rothera, Esq. 587 Dow Rd Orrington, ME 04474	Board Member 0.50	0.	0.	0.
Mary Rumpho-Kennedy 5760 Pres. House, UMO Orono, ME 04469	Board Member 0.50	0.	0.	0.
Michael Shea PO Box 929 Bangor, ME 04402	Board Member 0.50	0.	0.	0.
Therese B. Shipps 5724 Dunn Hall, Rm 210 Orono, ME 04469	Board Member 0.50	0.	0.	0.
Leslie S. Stewart 173 W. Broadway Bangor, ME 04401	Board Member 0.50	0.	0.	0.
Sally Baughman 268 Stillwater Ave Bangor, ME 04402	VP Human Resour 50.00	110,222.	14,847.	0.
Nancy Barrows 268 Stillwater Ave Bangor, ME 04402	VP Support Svc 50.00	82,320.	9,084.	0.
Eileen Byram, MSB 268 Stillwater Ave Bangor, ME 04402	VP Business Sup 50.00	93,704.	18,750.	0.

Statement 17 (continued)
Form 990, Part V-A
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours Per Week Devoted	Compensation	Contribution to EBP & DC	Expense Account/ Other
Marilyn Dennis, RNC, MS, CNA 268 Stillwater Ave Bangor, ME 04402	VP Pat Care/CNO 50.00	$ 126,715.	$ 15,277.	$ 0.
Marie K. Suitter 268 Stillwater Ave Bangor, ME 04402	VP Finance/CFO 50.00	135,657.	22,453.	0.
Paul Tisher, Jr., MD 268 Stillwater Ave Bangor, ME 04402	VP Medical Dir 50.00	283,371.	35,728.	0.
William Wypyskie, LCSW, MPA 268 Stillwater Ave Bangor, ME 04402	VP Clinical Ser 50.00	120,497.	26,343.	0.
Eric Kuntz, MD 268 Stillwater Ave Bangor, ME 04402	Assoc Med Dir 50.00	209,516.	33,528.	0.
Sally Arata 1290 State St Bangor, ME 04401	Chair (part yr) 0.50	0.	0.	0.
April D Giard 268 Stillwater Ave Bangor, ME 04402	VP/CNO 50.00	101,174.	41,754.	0.
	Total	$ 1,547,318.	$ 253,187.	$ 0.

Statement 18
Form 990, Part V-A, Line 75b
Compensation Paid to Related Individuals

Name and Relationship

Leonard Giambalvo, Esq.
Employee of Eastern Maine Healthcare Systems,the parent organization of Acadia Hospital.

Daniel B. Coffey, CFO
Employee of Eastern Maine Healthcare Systems,the parent organization of Acadia Hospital.

Mary M. Hood
Employee of Eastern Maine Healthcare Systems,the parent organization of Acadia Hospital

Marie K. Suitter, VP, CFO

Statement 18 (continued)
Form 990, Part V-A, Line 75b
Compensation Paid to Related Individuals

Employee of Eastern Maine Healthcare Systems,the parent organization of Acadia Hospital.

Note:

Compensation for employees of Acadia Hospital listed in Part V-A are for administrative services. Board members are not compensated for the time devoted to serving on the board.

Statement 19
Form 990, Part V-A, Line 75c
Individuals Compensation By Related Organizations

Leonard Giambalvo, Esq.

Related Organization:	Eastern ME Healthcare Systems
FEIN:	01-0527066
Relationship Explanation:	Employee of Eastern Maine Healthcare Systems,the parent organization of Acadia Hospital.
Compensation Paid:	$ 282,303.
Benefit Plan Contributions:	$ 41,339.
Expense Account:	$ 1,980.
Compensation Arrangement:	This officer of Acadia Hospital is employed by the system parent organization and is responsible for system-wide operations of seven hospitals and other related health care activities, including Acadia Hospital.

Daniel B. Coffey, CFO

Related Organization:	Eastern ME Healthcare Systems
FEIN:	01-0527066
Relationship Explanation:	Employee of Eastern Maine Healthcare Systems,the parent organization of Acadia Hospital.
Compensation Paid:	$ 455,158.
Benefit Plan Contributions:	$ 187,808.
Expense Account:	$ 9,082.
Compensation Arrangement:	This officer of Acadia Hospital is employed by the system parent organization and is resonsible for system-wide operations of seven hospitals and other related health care activities, including Acadia Hospital. A pension obligation satisfied in combination through a tax-qualified and supplemental non-qualified retirement plan is equal in value to approximately 50% of the final three year average base pay. Benefit plan contributions includes $150,909 accrued in the current year related to the future pension benefit as determined by an independent actuary. The supplemental non-qualified retirement plan is subject to a substantial risk of forfeiture (whereby the employee may not receive the future benefit).

Statement 19 (continued)
Form 990, Part V-A, Line 75c
Individuals Compensation By Related Organizations

Mary M. Hood

Related Organization:	Eastern ME Healthcare Systems
FEIN:	01-0527066
Relationship Explanation:	Employee of Eastern Maine Healthcare Systems,the parent organization of Acadia Hospital
Compensation Paid:	$ 659,180.
Benefit Plan Contributions:	$ 21,986.
Expense Account:	$ 0.
Compensation Arrangement:	This officer of Acadia Hospital is employed by the system parent organization and is responsible for system-wide operations of seven hospitals and other related health care activities, including Acadia Hospital.

Marie K. Suitter, VP, CFO

Related Organization:	Eastern ME Healthcare Systems
FEIN:	01-0527066
Relationship Explanation:	Employee of Eastern Maine Healthcare Systems,the parent organization of Acadia Hospital.
Compensation Paid:	$ 0.
Benefit Plan Contributions:	$ 0.
Expense Account:	$ 0.
Compensation Arrangement:	This individual is employed by the parent company, Eastern Maine Healthcare Systems. 100% of her time is dedicated to Acadia Hospital. As a result her compensation is reported in Part V-A as opposed to here.

Paul Tisher, Jr., MD

Related Organization:	Eastern Maine Medical Center
FEIN:	01-0211501
Relationship Explanation:	Eastern Maine Medical Center is an affiliate of Acadia Hospital.
Compensation Paid:	$ 50,000.
Benefit Plan Contributions:	$ 0.
Expense Account:	$ 0.
Compensation Arrangement:	Compensation is for Chief of Psychiatry Service stipend.

Statement 20
Form 990, Part VI, Line 80b
Related Organizations

Name of Organization	Exempt	Nonexempt
Acadia Healthcare, Inc.	X	
Acadia Hospital Corp	X	
Affiliated Healthcare Management		X
Affiliated Healthcare Systems		X
Affiliated Laboratory, Inc.		X
Affiliated Materiel Services		X
Affiliated Pharmacy Services		X
Blue Hill Memorial Hospital	X	
CA Dean Memorial Hospital & Nursing Home	X	
Commercial Laundry Systems, LLC		X
Dirigo Funding, LLC		X
Dirigo Pines Development Company, LLC		X
Dirigo Pines Inn, LLC		X
Dirigo Pines Retirement Community, LLC		X
Downeast Collections D/B/A ACI		X
Eastern Maine Healthcare Real Estate	X	
Eastern Maine Healthcare Systems (*)	X	
Eastern Maine Home Care	X	
Eastern Maine Medical Center	X	
Eastern Maine Medical Center Auxiliary	X	
Healthcare Charities	X	
Horizons Health Services	X	
Inland Foundation	X	
Inland Hospital	X	
Lakewood	X	
Maine Network for Health		X
ME Institute for Human Genetics & Health	X	
Meridian Mobile Health, LLC		X
Norumbega Medical Specialists, LTD	X	
Rosscare	X	
Rosscare Nursing Homes, Inc.	X	
Sebasticook Valley Hospital Associates	X	
TAMC Title Corp.	X	
The Aroostook Medical Center	X	
x *EMHS is the parent of all corp listed	X	

Statement 21
Form 990, Part XI, Line 106
Transfers to Controlled Entity

Controlled Entity Name and Address	Federal EIN	Description of Transfer	Amount of Transfer
Eastern Maine Medical Center 43 Whiting Hill Brewer, ME 04412	01-0211501	Phone, laundry & support services	406,437.
Healthcare Charities 43 Whiting Hill Brewer, ME 04412	22-2514163	Support services	116,000.
Acadia Healthcare, Inc 43 Whiting Hill Brewer, ME 04412	22-3183888	Administrative and support services	28,848.

Statement 21 (continued)
Form 990, Part XI, Line 106
Transfers to Controlled Entity

Controlled Entity Name and Address	Federal EIN	Description of Transfer	Amount of Transfer
Eastern Maine Healthcare Systems 43 Whiting Hill Brewer, ME 04412	01-0527066	Healthcare insurance funding, administrative and support services	7,054,741.
Sebasticook Valley Hospital Associa 99 Grove St Pittsfield, ME 04967	01-0263628	Rent and telephone charges	9,343.
Affiliated Healthcare Management 925 Union St Bangor, ME 04401	01-0349339	Transcription Services and Employee Assistance Program	911,913.
Affiliated Laboratory Inc 925 Union St Bangor, ME 04401	01-0381283	Laboratory Services	50,582.
Affiliated Materiel Services 925 Union St Bangor, ME 04401	01-0381189	Healthcare and dietary supplies	237,681.
Affiliated Collections, Inc. 925 Union St. Bangor, ME 04401	01-0366209	Patient account collections service	30,016.
Meridian Mobile Health 925 Union St Bangor, ME 04401	01-0512673	Ambulance and Patient Transport service	8,134.
Maine Network for Health 925 Union St Bangor, ME 04401	01-0496352	Employee Credentialing and Licensing	1,435.
Affiliated Pharmacy Services 925 Union St Bangor, ME 04401	01-0587230	Pharmaceutical supplies	4,689.
Blue Hill Memorial Hospital 43 Whiting Hill Rd Brewer, ME 04412	01-0227195	Rent for Clinic space	3,496.
		Total	$ 8,863,315.

Statement 22
Form 990, Part XI, Line 107
Transfers From Controlled Entity

Controlled Entity Name and Address	Federal EIN	Description of Transfer	Amount of Transfer
Eastern Maine Medical Center 43 Whiting Hill Brewer, ME 04412	01-0211501	Psychiatric contract services	908,313.
Acadia Healthcare Inc. 43 Whiting Hill Brewer, ME 04412	22-3183888	Administrative support, facilities and housekeeping services	172,040.
Eastern Maine Healthcare Systems 43 Whiting Hill Brewer, ME 04412	01-0527066	Financial support services	3,908.
Healthcare Charities 43 Whiting Hill Rd Brewer, ME 04412	22-2514163	Equity transfer	53,694.
		Total	$ 1,137,955.