UNIVERSAL HEALTH REALTY INCOME TRUST Form 10-Q August 08, 2014 Table of Contents

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM 10-Q

(MARK ONE)

X QUARTERLY REPORT PURSUANT TO SECTION 13 OR 15(d) OF THE SECURITIES EXCHANGE ACT OF 1934

For the quarterly period ended June 30, 2014

OR

TRANSITION REPORT PURSUANT TO SECTION 13 OR 15(d) OF THE SECURITIES EXCHANGE ACT OF 1934

For the transition period from ______ to _____

Commission file number 1-9321

UNIVERSAL HEALTH REALTY INCOME TRUST

(Exact name of registrant as specified in its charter)

MARYLAND (State or other jurisdiction of

23-6858580 (I. R. S. Employer

incorporation or organization)

Identification No.)

UNIVERSAL CORPORATE CENTER

367 SOUTH GULPH ROAD

KING OF PRUSSIA, PENNSYLVANIA

(Address of principal executive offices)

Registrant s telephone number, including area code (610) 265-0688

Indicate by check mark whether the registrant (1) has filed all reports required to be filed by Section 13 or 15(d) of the Securities Exchange Act of 1934 during the preceding 12 months (or for such shorter period that the registrant was required to file such reports), and (2) has been subject to such filing requirements for the past 90 days. Yes x No "

Indicate by check mark whether the registrant has submitted electronically and posted on its corporate Web site, if any, every Interactive Data File required to be submitted and posted pursuant to Rule 405 of Regulation S-T (§232.405 of this chapter) during the preceding 12 months (or for such shorter period that the registrant was required to submit and post such files). Yes x No "

Indicate by check mark whether the registrant is a large accelerated filer, an accelerated filer, a non-accelerated filer, or a smaller reporting company. See the definitions of large accelerated filer, accelerated filer and smaller reporting company in Rule 12b-2 of the Exchange Act.

Large accelerated filer " Accelerated Filer x
Non-accelerated filer " Smaller reporting company "
Indicate by check mark whether the registrant is a shell company (as defined in Rule 12b-2 of the Exchange
Act). Yes " No x

Number of common shares of beneficial interest outstanding at July 31, 2014 12,929,668

UNIVERSAL HEALTH REALTY INCOME TRUST

INDEX

		PAGE NO.
PART I.	FINANCIAL INFORMATION	
Item 1.	Financial Statements	
	Condensed Consolidated Statements of Income Three and Six Months Ended June 30, 2014	3
	and 2013	
	Condensed Consolidated Statements of Comprehensive Income Three and Six Months	4
	Ended June 30, 2014 and 2013	
	Condensed Consolidated Balance Sheets June 30, 2014 and December 31, 2013	5
	Condensed Consolidated Statements of Cash Flows Six Months Ended June 30, 2014 and	6
	<u>2013</u>	
	Notes to Condensed Consolidated Financial Statements	7 through 16
Item 2.	Management s Discussion and Analysis of Financial Condition and Results of Operations	16 through 28
Item 3.	Quantitative and Qualitative Disclosures About Market Risk	28
Item 4.	Controls and Procedures	28
PART II	I. Other Information	29
Item 6.	<u>Exhibits</u>	29
Signatur	<u>res</u>	30
EXHIBI'	T INDEX	31

This Quarterly Report on Form 10-Q is for the quarter ended June 30, 2014. In this Quarterly Report, we, us, our and the Trust refer to Universal Health Realty Income Trust and its subsidiaries.

As disclosed in this Quarterly Report, including in *Part I, Item 1. Relationship with Universal Health Services, Inc.* (*UHS*) and Related Party Transactions, a wholly-owned subsidiary of UHS (UHS of Delaware, Inc.) serves as our Advisor pursuant to the terms of an annually renewable Advisory Agreement dated December 24, 1986. Our officers are all employees of UHS through UHS of Delaware, Inc. In addition, four of our hospital facilities are leased to subsidiaries of UHS and twelve medical office buildings, including certain properties owned by limited liability companies in which we either hold 100% of the ownership interest or various non-controlling, majority ownership interests, include or will include tenants which are subsidiaries of UHS. Any reference to UHS or UHS facilities in this report is referring to Universal Health Services, Inc. s subsidiaries, including UHS of Delaware, Inc.

In this Quarterly Report, the term revenues does not include the revenues of the unconsolidated limited liability companies (LLCs) in which we have various non-controlling equity interests ranging from 33% to 95%. We currently account for our share of the income/loss from these investments by the equity method (see Note 5 to the Consolidated Financial Statements included herein).

Part I. Financial Information

Item I. Financial Statements

Universal Health Realty Income Trust

Condensed Consolidated Statements of Income

For the Three and Six Months Ended June 30, 2014 and 2013

(dollar amounts in thousands, except per share amounts)

(unaudited)

	Three Months Ended June 30, 2014 2013		Six Months Ended June 30 2014 201	
Revenues:				
Base rental - UHS facilities	\$ 3,916	\$ 3,804	\$ 7,830	\$ 7,594
Base rental - Non-related parties	7,045	7,028	14,271	14,074
Bonus rental - UHS facilities	1,222	1,041	2,372	2,139
Tenant reimbursements and other - Non-related parties	1,948	1,521	3,781	3,309
Tenant reimbursements and other - UHS facilities	186	108	351	271
	14,317	13,502	28,605	27,387
Expenses:				
Depreciation and amortization	4,782	4,722	9,608	9,536
Advisory fees to UHS	620	585	1,230	1,156
Other operating expenses	4,134	3,744	8,067	7,409
Transaction costs	41	49	103	131
	9,577	9,100	19,008	18,232
Income before equity in income of unconsolidated limited				
liability companies (LLCs), interest expense and gains	4,740	4,402	9,597	9,155
Equity in income of unconsolidated LLCs	679	461	1,272	1,030
Gains on fair value recognition resulting from the purchase of minority interests in majority-owned LLCs			316	
Interest expense, net	(2,011)	(1,922)	(4,003)	(3,817)
Net income	\$ 3,408	\$ 2,941	\$ 7,182	\$ 6,368

Edgar Filing: UNIVERSAL HEALTH REALTY INCOME TRUST - Form 10-Q

Basic earnings per share	\$ 0.26	\$ 0.23	\$ 0.56	\$ 0.50
Diluted earnings per share	\$ 0.26	\$ 0.23	\$ 0.56	\$ 0.50
Weighted average number of shares outstanding - Basic	12,902	12,675	12,875	12,673
Weighted average number of share equivalents	6	13	6	14
Weighted average number of shares and equivalents outstanding - Diluted	12,908	12,688	12,881	12,687

See the accompanying notes to these condensed consolidated financial statements.

Universal Health Realty Income Trust

Condensed Consolidated Statements of Comprehensive Income

For the Three and Six Months Ended June 30, 2014 and 2013

(dollar amounts in thousands)

(unaudited)

	Three Months Ended June 30, 2014 2013		Six M Ended J 2014	
Net Income	\$3,408	\$ 2,941	\$7,182	\$6,368
Other comprehensive loss:				
Unrealized derivative losses on interest rate caps	(95)	0	(92)	0
Amortization of interest rate cap fees	23	0	38	0
Total other comprehensive loss:	(72)	0	(54)	0
Total comprehensive income	\$3,336	\$ 2,941	\$7,128	\$6,368

See the accompanying notes to these condensed consolidated financial statements.

4

Universal Health Realty Income Trust

Condensed Consolidated Balance Sheets

(dollar amounts in thousands)

(unaudited)

	June 30, 2014	Dec	ember 31, 2013
Assets:			
Real Estate Investments:			
Buildings and improvements	\$ 393,804	\$	368,295
Accumulated depreciation	(104,655)		(97,921)
	289,149		270,374
Land	29,084		27,374
Net Real Estate Investments	318,233		297,748
Investments in and advances to limited liability companies (LLCs)	27,952		39,201
Other Assets:			
Cash and cash equivalents	3,860		3,337
Base and bonus rent receivable from UHS	2,230		2,053
Rent receivable - other	3,894		3,310
Intangible assets (net of accumulated amortization of \$16.4 million and \$13.7			
million at June 30, 2014 and December 31, 2013, respectively)	21,855		20,782
Deferred charges, goodwill and other assets, net	5,688		6,714
Total Assets	\$ 383,712	\$	373,145
Liabilities:			
Line of credit borrowings	\$ 102,350	\$	93,700
Mortgage and other notes payable, non-recourse to us (including net debt premium of \$604,000 and \$834,000 at June 30, 2014 and December 31, 2013, respectively)	115,239		106,287
Accrued interest	511		491
Accrued expenses and other liabilities	4,141		5,156
Tenant reserves, escrows, deposits and prepaid rents	2,242		1,881
Total Liabilities	224,483		207,515
Equity:			

Preferred shares of beneficial interest, \$.01 par value; 5,000,000 shares authorized; none issued and outstanding

none issued and outstanding		
Common shares, \$.01 par value; 95,000,000 shares authorized; issued and		
outstanding: 2014 - 12,929,400 2013 -12,858,643	129	128
Capital in excess of par value	223,356	220,691
Cumulative net income	487,226	480,044
Cumulative dividends	(551,371)	(535,176)
Accumulated other comprehensive loss	(111)	(57)
Total Equity	159,229	165,630
Total Liabilities and Equity	\$ 383,712	\$ 373,145

See the accompanying notes to these condensed consolidated financial statements.

Universal Health Realty Income Trust

Condensed Consolidated Statement of Cash Flows

(dollar amounts in thousands)

(unaudited)

		ths Ended e 30, 2013
Cash flows from operating activities:		
Net income	\$ 7,182	\$ 6,368
Adjustments to reconcile net income to net cash provided by operating activities:		
Depreciation and amortization	9,653	9,581
Amortization on debt premium	(191)	(218)
Restricted/stock-based compensation expense	197	185
Gains on purchase of minority interests in majority-owned LLCs before transaction costs	(316)	0
Changes in assets and liabilities:		
Rent receivable	(431)	(332)
Accrued expenses and other liabilities	(1,209)	(48)
Tenant reserves, escrows, deposits and prepaid rents	304	64
Accrued interest	(13)	(23)
Other, net	119	76
Net cash provided by operating activities	15,295	15,653
Cash flows from investing activities:		
Investments in LLCs	(887)	(1,816)
Repayments of advances made to LLCs	0	67
Advances made to LLCs	0	(4,082)
Cash distributions in excess of income from LLCs	741	1,282
Additions to real estate investments, net	(1,548)	(1,393)
Net cash paid for acquisition of medical office buildings	(7,050)	(625)
Cash paid to acquire minority interests in majority-owned LLCs	(170)	0
Net cash used in investing activities	(8,914)	(6,567)
Cash flows from financing activities:		
Net borrowings on line of credit	8,650	8,600
Proceeds from mortgages and other notes payable	0	11,150
Repayments of mortgages and other notes payable	(1,583)	(13,016)
Financing costs paid on mortgage and other notes payable	0	(95)
Dividends paid	(16,195)	(15,804)
Issuance of shares of beneficial interest, net	3,013	128

Edgar Filing: UNIVERSAL HEALTH REALTY INCOME TRUST - Form 10-Q

Net cash used in financing activities	(6,115)	(9,037)
Increase in cash and cash equivalents	266	49
Increase in cash due to recording of LLC on a consolidated basis	257	0
Cash and cash equivalents, beginning of period	3,337	3,048
Cash and cash equivalents, end of period	\$ 3,860	\$ 3,097
Supplemental disclosures of cash flow information:		
Interest paid	\$ 3,971	\$ 3,847
Supplemental disclosures of non-cash transactions:		
Consolidation of LLC:		
Net real estate investments	\$ 19,489	\$ 0
Cash and cash equivalents	257	0
Intangible assets	2,820	0
Rent receivable - other	330	0
Deferred charges, goodwill and other assets, net	46	0
Investment in LLCs	(11,392)	0
Mortgage and other notes payable, non-recourse to us	(10,726)	0
Accrued interest	(33)	0
Accrued expenses and other liabilities	(248)	0
Tenant reserves, escrows, deposits and prepaid rents	(57)	0
Gains on purchase of minority interests in majority-owned LLCs	(316)	0
Cash Paid for purchase of minority interests in majority-owned LLCs	\$ 170	\$ 0

See accompanying notes to these condensed consolidated financial statements.

UNIVERSAL HEALTH REALTY INCOME TRUST

NOTES TO CONDENSED CONSOLIDATED FINANCIAL STATEMENTS

June 30, 2014

(unaudited)

(1) General

This Quarterly Report on Form 10-Q is for the Quarterly Period ended June 30, 2014. In this Quarterly Report, we, us, our and the Trust refer to Universal Health Realty Income Trust.

You should carefully review all of the information contained in this Quarterly Report, and should particularly consider any risk factors that we set forth in this Quarterly Report and in other reports or documents that we file from time to time with the Securities and Exchange Commission (the SEC). In this Quarterly Report, we state our beliefs of future events and of our future financial performance. In some cases, you can identify those so-called forward-looking statements by words such as may, could, will, should, would, predicts, potential, expects, projects and similar expressions, as well as statements in future to intends, plans, believes, estimates, appears, should be aware that those statements are only our predictions. Actual events or results may differ materially. In evaluating those statements, you should specifically consider various factors, including the risks outlined herein and in our Annual Report on Form 10-K for the year ended December 31, 2013 in *Item 1A Risk Factors* and in *Item 7* Management s Discussion and Analysis of Financial Condition and Results of Operations Forward Looking Statements. Those factors may cause our actual results to differ materially from any of our forward-looking statements.

In certain of our markets, the general real estate market has been unfavorably impacted by increased competition/capacity and decreases in occupancy and rental rates which may adversely impact our operating results and the underlying value of our properties. In addition, although credit markets conditions and the instability in certain banking and financial institutions over the past several years has not had a material impact on us, there can be no assurance that unfavorable changes in credit market conditions, should they occur, will not materially increase our cost of borrowings and/or have a material adverse impact on our ability to finance our future growth through borrowed funds.

In this Quarterly Report on Form 10-Q, the term—revenues—does not include the revenues of the unconsolidated limited liability companies (LLCs) in which we have various non-controlling equity interests ranging from 33% to 95%. We currently account for our share of the income/loss from these investments by the equity method (see Note 5). As of June 30, 2014, we had investments in eleven jointly-owned LLCs, all of which are accounted for by the equity method as of June 30, 2014. Palmdale Medical Properties was consolidated in our financial statements through June 30, 2013 as a result of a master lease arrangement with a wholly-owned subsidiary of UHS. As previously disclosed, the master lease expired effective as of July 1, 2013 and, as of that date, we began accounting for Palmdale Medical Properties under the equity method through December 31, 2013. Effective January 1, 2014, we purchased the third-party minority ownership interests in Palmdale Medical Properties and Sparks Medical Properties in which we formerly held non-controlling majority ownership interests. As a result of our purchase of the minority ownership interests, we now hold 100% of the ownership interests in these LLCs which own MOBs and we began accounting for them on a consolidated basis effective January 1, 2014. Each of the property—s assets and liabilities are recorded at their fair values. (See Note 4 to the consolidated financial statements for additional disclosure).

The financial statements included herein have been prepared by us, without audit, pursuant to the rules and regulations of the SEC and reflect all normal and recurring adjustments which, in our opinion, are necessary to fairly present results for the interim periods. Certain information and footnote disclosures normally included in financial statements prepared in accordance with generally accepted accounting principles have been condensed or omitted pursuant to such rules and regulations, although we believe that the accompanying disclosures are adequate to make the information presented not misleading. It is suggested that these financial statements be read in conjunction with the financial statements, the notes thereto and accounting policies included in our Annual Report on Form 10-K for the year ended December 31, 2013.

(2) Relationship with Universal Health Services, Inc. (UHS) and Related Party Transactions

Leases: We commenced operations in 1986 by purchasing properties of certain subsidiaries from UHS and immediately leasing the properties back to the respective subsidiaries. Most of the leases were entered into at the time we commenced operations and provided for initial terms of 13 to 15 years with up to six additional 5-year renewal terms. The current base rentals and lease and rental terms for each facility are provided below. The base rents are paid monthly and each lease also provides for additional or bonus rents which are computed and paid on a quarterly basis based upon a computation that compares current quarter revenue to a corresponding quarter in the base year. The leases with subsidiaries of UHS are unconditionally guaranteed by UHS and are cross-defaulted with one another.

The combined revenues generated from the leases on the UHS hospital facilities comprised approximately 30% of our consolidated revenues for each of the three months ended June 30, 2014 and 2013, and approximately 29% and 30% of our consolidated revenues for the six months ended June 30, 2014 and 2013, respectively. Including 100% of the revenues generated at the unconsolidated LLCs in which we have various non-controlling equity interests ranging from 33% to 95%, the leases on the UHS hospital facilities accounted for approximately 22% of the combined consolidated and unconsolidated revenue for each of the three and six-month periods ended June 30, 2014 and 2013. In addition, twelve MOBs, that are either wholly or jointly-owned, include or will include tenants which are subsidiaries of UHS.

Pursuant to the Master Lease Document by and among us and certain subsidiaries of UHS, dated December 24, 1986 (the Master Lease), which governs the leases of all hospital properties with subsidiaries of UHS, UHS has the option to renew the leases at the lease terms described below by providing notice to us at least 90 days prior to the termination of the then current term. UHS also has the right to purchase the respective leased facilities at the end of the lease terms or any renewal terms at the appraised fair market value. In addition, UHS has rights of first refusal to: (i) purchase the respective leased facilities during and for 180 days after the lease terms at the same price, terms and conditions of any third-party offer, or; (ii) renew the lease on the respective leased facility at the end of, and for 180 days after, the lease term at the same terms and conditions pursuant to any third-party offer. In addition, the Master Lease, as amended during 2006, includes a change of control provision whereby UHS has the right, upon one month s notice should a change of control of the Trust occur, to purchase any or all of the four leased hospital properties listed below at their appraised fair market value.

Management cannot predict whether the leases with subsidiaries of UHS, which have renewal options at existing lease rates or fair market value lease rates (as indicated below), will be renewed at the end of their lease term. As indicated below, The Bridgeway s (Bridgeway) lease term is scheduled to expire in December, 2014 and we can provide no assurance that this lease will be renewed at the fair market value lease rate. Our revenues, net cash provided by operating activities and funds from operations include approximately \$1.1 million annually earned in connection with Bridgeway s lease. If UHS exercises its right to purchase the Bridgeway facility, or any of its other hospital facilities, at the end of the current lease terms at the appraised fair market value, we would consider, among other things, redeploying the sale proceeds generated from the divestiture to acquire other real estate property. If we are unable to redeploy the proceeds generated from the divesture, or if we were unable to generate the same rate of return on the redeployed proceeds, our revenues, cash provided by operating activities and funds from operations could be unfavorably impacted. In the event that The Bridgeway s lease, or the lease on any other hospital leased to a subsidiary of UHS, is not renewed, and UHS does not exercise its right to purchase the facility for the appraised fair market value at the end of the lease term, we will be required to find other operators for the property and/or enter into leases on terms potentially less favorable to us than the current lease.

The table below details the existing lease terms and renewal options for each of the UHS hospital facilities:

Hospital Name	Type of Facility	Annual Minimum Rent	End of Lease Term	Renewal Term (years)
-	Type of Facility			
McAllen Medical Center	Acute Care	\$ 5,485,000	December, 2016	15(a)
Wellington Regional Medical Center	Acute Care	\$3,030,000	December, 2016	15(b)
Southwest Healthcare System, Inland				
Valley Campus	Acute Care	\$ 2,648,000	December, 2016	15(b)
The Bridgeway	Behavioral Health	\$ 930,000	December, 2014	10(c)

- (a) UHS has three 5-year renewal options at existing lease rates (through 2031).
- (b) UHS has one 5-year renewal option at existing lease rates (through 2021) and two 5-year renewal options at fair market value lease rates (2022 through 2031).
- (c) UHS has two 5-year renewal options at fair market value lease rates (2015 through 2024).

As discussed above, Palmdale Medical Plaza, which is located in Palmdale, California, on the campus of a UHS hospital, had a master lease commitment by a wholly-owned subsidiary of UHS which expired effective as of July 1, 2013. This MOB, tenants of which include subsidiaries of UHS, was completed and opened during the third quarter of 2008 at which time the master lease commenced. The LLC that owns this MOB was deemed to be a variable interest entity during the term of the master lease and was therefore consolidated in our financial statements through June 30, 2013 since we were the primary beneficiary through that date. Effective July 1, 2013, this LLC was no longer be deemed a variable interest entity and is accounted for in our financial statements on an unconsolidated basis pursuant to the equity method from July 1, 2013 through December 31, 2013.

8

Effective January 1, 2014, we purchased the third-party minority ownership interests in two LLCs (Palmdale Medical Properties and Sparks Medical Properties) in which we formerly held non-controlling majority ownership interest. As a result of our purchase of the minority ownership interests, we now hold 100% of the ownership interests in these LLCs (which own MOBs) and began accounting for them on a consolidated basis.

We have funded \$2.3 million in equity as of June 30, 2014, and are committed to fund an additional \$2.1 million, in exchange for a 95% non-controlling equity interest in an LLC (Texoma Medical Properties) that developed, constructed, owns and operates the Texoma Medical Plaza located in Denison, Texas, which was completed and opened during the first quarter of 2010. This MOB is located on the campus of a UHS acute care hospital which is owned and operated by Texoma Medical Center (Texoma Hospital), a wholly-owned subsidiary of UHS. This MOB has tenants that include subsidiaries of UHS. This LLC has a third-party term loan of \$12.4 million, which is non-recourse to us, outstanding as of June 30, 2014. As this LLC is not considered to be a variable interest entity and does not meet the other criteria requiring consolidation of an investment, it is accounted for pursuant to the equity method.

Advisory Agreement: UHS of Delaware, Inc. (the Advisor), a wholly-owned subsidiary of UHS, serves as Advisor to us under an Advisory Agreement (the Advisory Agreement) dated December 24, 1986. Pursuant to the Advisory Agreement, the Advisor is obligated to present an investment program to us, to use its best efforts to obtain investments suitable for such program (although it is not obligated to present any particular investment opportunity to us), to provide administrative services to us and to conduct our day-to-day affairs. All transactions between us and UHS must be approved by the Trustees who are unaffiliated with UHS (the Independent Trustees). In performing its services under the Advisory Agreement, the Advisor may utilize independent professional services, including accounting, legal, tax and other services, for which the Advisor is reimbursed directly by us. The Advisory Agreement may be terminated for any reason upon sixty days written notice by us or the Advisor. The Advisory Agreement expires on December 31 of each year; however, it is renewable by us, subject to a determination by the Independent Trustees, that the Advisor s performance has been satisfactory. In December of 2013, based upon a review of our advisory fee and other general and administrative expenses, as compared to an industry peer group, the Advisory agreement was renewed for 2014 pursuant to the same terms as the Advisory Agreement in place during 2013.

The Advisory Agreement provides that the Advisor is entitled to receive an annual advisory fee equal to 0.70% of our average invested real estate assets, as derived from our condensed consolidated balance sheet. The average real estate assets for advisory fee calculation purposes exclude certain items from our condensed consolidated balance sheet such as, among other things, accumulated depreciation, cash and cash equivalents, base and bonus rent receivables, deferred charges and other assets. The advisory fee is payable quarterly, subject to adjustment at year-end based upon our audited financial statements. In addition, the Advisor is entitled to an annual incentive fee equal to 20% of the amount by which cash available for distribution to shareholders for each year, as defined in the Advisory Agreement, exceeds 15% of our equity as shown on our condensed consolidated balance sheet, determined in accordance with generally accepted accounting principles without reduction for return of capital dividends. The Advisory Agreement defines cash available for distribution to shareholders as net cash flow from operations less deductions for, among other things, amounts required to discharge our debt and liabilities and reserves for replacement and capital improvements to our properties and investments. No incentive fees were paid during the first six months of 2014 or 2013 since the incentive fee requirements were not achieved. Advisory fees incurred and paid (or payable) to UHS amounted to \$620,000 and \$585,000 for the three months ended June 30, 2014 and 2013, respectively, and were based upon average invested real estate assets of \$354 million and \$334 million for the three-month periods ended June 30, 2014 and 2013, respectively. Advisory fees incurred and paid (or payable) to UHS amounted to \$1.23 million and \$1.16 million for the six months ended June 30, 2014 and 2013, respectively, and were based upon average invested real estate assets of \$351 million and \$330 million for the six-month periods ended June 30, 2014 and 2013, respectively.

Officers and Employees: Our officers are all employees of a wholly-owned subsidiary of UHS and although as of June 30, 2014 we had no salaried employees, our officers do typically receive annual stock-based compensation awards in the form of restricted stock. In special circumstances, if warranted and deemed appropriate by the Compensation Committee of the Board of Trustees, our officers may also receive one-time special compensation awards in the form of restricted stock and/or cash bonuses.

Share Ownership: As of June 30, 2014 and December 31, 2013, UHS owned 6.1% of our outstanding shares of beneficial interest.

SEC reporting requirements of UHS: UHS is subject to the reporting requirements of the SEC and is required to file annual reports containing audited financial information and quarterly reports containing unaudited financial information. Since the leases on the hospital facilities leased to wholly-owned subsidiaries of UHS comprised 30% of our consolidated revenues during each of the three month periods ended June 30, 2014 and 2013, and comprised approximately 29% and 30% of our consolidated revenues during the six months ended June 30, 2014 and 2013, respectively, and since a subsidiary of UHS is our Advisor, you are encouraged to obtain the publicly available filings for Universal Health Services, Inc. from the SEC s website at www.sec.gov. These filings are the sole responsibility of UHS and are not incorporated by reference herein.

9

(3) Dividends and Equity Issuance Program

We declared and paid dividends of \$8.1 million, or \$.63 per share, during the second quarter of 2014 and \$7.9 million, or \$.625 per share, during the second quarter of 2013. We declared and paid dividends of \$16.2 million, or \$1.255 per share, during the six-month period ended June 30, 2014 and \$15.8 million, or \$1.245 per share, during the six-month period ended June 30, 2013.

During the fourth quarter of 2013, we entered into an ATM Equity Offering Sales Agreement (Sales Agreement) with Merrill Lynch, Pierce, Fenner and Smith Incorporated (Merrill Lynch), under which we may offer and sell our common shares of beneficial interest, up to an aggregate sales price of \$50 million. The common shares will be offered pursuant to the Registration Statement filed with the Securities and Exchange Commission, which became effective in November, 2012, under which we can offer up to \$50 million of our securities pursuant to supplemental prospectuses which we may file from time to time.

Pursuant to this ATM program, during the first six months of 2014, we issued 57,410 shares at an average price of \$42.67 per share (all issued during the first quarter of 2014). Including the shares issued at the end of the fourth quarter of 2013, which settled during the first quarter of 2014, the ATM program generated approximately \$2.9 million of net cash proceeds, (net of approximately \$182,000, consisting of compensation of approximately \$76,000 to Merrill Lynch, as well as approximately \$106,000 of other various fees and expenses) during the first six months of 2014. Approximately \$592,000 of net cash proceeds (net of approximately \$15,000 of compensation to Merrill Lynch) related to the shares issued late in the fourth quarter of 2013 were received by us during the first quarter of 2014. Since inception of this program, we have issued 212,123 shares at an average price of \$41.97 per share, which generated approximately \$8.4 million of cash proceeds or receivables (net of approximately \$537,000, consisting of compensation of approximately \$222,000 to Merrill Lynch, as well as approximately \$315,000 of other various fees and expenses).

(4) Acquisitions, Dispositions and New Construction

Six Months Ended June 30, 2014:

Acquisition:

We paid an aggregate of \$7.2 million to purchase the following in January, 2014 in a single transaction:

The Children s Clinic at Springdale a 9,800 square foot, single-tenant medical office building located in Springdale, Arkansas, and;

The Northwest Medical Center at Sugar Creek a 16,700 square foot, multi-tenant medical office building located in Bentonville, Arkansas.

The aggregate purchase price for these MOBs was allocated to the assets and liabilities acquired consisting of tangible property and identified intangible assets, based on their respective fair values at acquisition as detailed in the table below. Substantially all of the intangible assets include the value of the in-place leases at the MOBs at the time of acquisition which will be amortized over the average remaining lease term of approximately 9.7 years at the time of acquisition.

Land	\$ 1,710
Buildings and improvements	4,440
Intangible assets	1,050
Deposit paid in 2013	(150)
Net cash paid	\$ 7,050

The acquisition was preliminarily valued utilizing the income capitalization approach. The calculated fair value, utilizing the income capitalization approach, is based upon the basis of capitalization of the net estimated earnings expectancy of the property, assuming continued use similar to the existing use of the acquired property. The property s continued cash flow analysis were also utilized in estimating the fair value of the property, whereby cash flows from the various tenants are calculated based upon lease commencement and termination dates.

Additionally, effective January 1, 2014, we paid an aggregate of \$170,000 to purchase the 5% minority ownership interests held by third-party members in two LLCs in which we previously held noncontrolling, 95% majority ownership interests (Palmdale Medical Properties and Sparks Medical Properties). As a result of these minority ownership purchases, we now own 100% of each of these LLCs. Pursuant to current accounting standards, during the first quarter of 2014, we were required to record each property s assets and liabilities at their fair values which resulted in the recording of a \$316,000 non-cash gain, which is included in our Condensed Consolidated Statement of Income for the six months ended June 30, 2014, representing the difference between the fair values and the equity method carrying value of each investment. The calculated fair value, utilizing the income capitalization approach, is based upon the basis of capitalization of the net estimated earnings expectancy of the property, assuming continued use similar to the existing use of the acquired property. The property s continued cash flow analysis were also utilized in estimating the fair value of the property, whereby cash flows from the various tenants are calculated based upon lease commencement and termination dates.

We began accounting for each property on a consolidated basis effective January 1, 2014. The aggregate fair values of these MOBs was allocated to net tangible property (\$19.5 million), identified intangible assets (\$2.8 million), and long term debt (\$10.7 million). Substantially all of the intangible assets include the value of the in-place leases at these MOBs at the time of acquisition which will be amortized over the combined average remaining lease term of approximately 5.3 years at the time of acquisition. Other than the increased depreciation and amortization expense resulting from the amortization of the intangible assets recorded in connection with these transactions, there was no material impact on our net income as a result of the consolidation of these LLCs.

Additionally, effective August 1, 2014, we agreed to purchase the minority ownership interests held by third-party members in six LLCs, as listed below, in which we previously held noncontrolling majority ownership interests. As a result of these minority ownership purchases, we will own 100% of each of these LLCs and will begin accounting for each on a consolidated basis effective August 1, 2014. The aggregate purchase price in connection with the purchase of these minority ownership interests is approximately \$6.8 million, a portion of which is in the form of a note payable to the previous third-party member. Each of the property s assets and liabilities will be recorded at their estimated fair values during the third quarter of 2014. We expect to record a related aggregate gain during the third quarter of 2014.

Other than the increased depreciation and amortization expense resulting from the fair value recognition recorded in connection with these transactions, we do not anticipate a material impact on our net income or funds from operations as a result of the purchase of these minority ownership interests or related consolidation of these LLCs.

The following table represents the six LLCs in which we agreed to purchase the minority ownership interests and will begin to be accounted for on a consolidated basis effective August 1, 2014:

	Ownership prior to minority interest	
Name of LLC/LP	purchase	Property Owned by LLC
DVMC Properties	90%	Desert Valley Medical Center
Santa Fe Scottsdale	90%	Santa Fe Professional Plaza
PCH Medical Properties	85%	Rosenberg Children s Medical Plaza
Sierra Medical Properties	95%	Sierra San Antonio Medical Plaza
PCH Southern Properties		Phoenix Children s East Valley Care
	95%	Center
3811 Bell Medical Properties		3811 E. Bell Medical BuildingMedical
_	95%	Plaza

Divestitures:

There were no divestitures during the first six months of 2014.

Six Months Ended June 30, 2013:

Acquisition:

On June 6, 2013, we purchased the 5004 Poole Road medical office building (MOB), located in Denison, Texas, on the campus of Texoma Medical Center, a wholly-owned subsidiary of UHS. This single-tenant MOB, which was

purchased for approximately \$625,000, consists of approximately 4,400 rentable square feet and is located adjacent to our Texoma Medical Plaza MOB.

New Construction:

The newly constructed Forney Medical Plaza II located in Forney, Texas was completed and opened in April, 2013. This multi-tenant medical office building, consisting of 30,000 rentable square feet, is owned by a limited partnership in which we hold a 95% non-controlling ownership interest. As this LLC is not considered to be a variable interest entity, it is accounted for pursuant to the equity method.

Divestitures:

There were no divestitures during the first six months of 2013.

(5) Summarized Financial Information of Equity Affiliates

Our condensed consolidated financial statements include the consolidated accounts of our controlled investments and those investments that meet the criteria of a variable interest entity where we are or were the primary beneficiary. In accordance with the Financial Accounting Standards Board s (FASB) standards and guidance relating to accounting for investments and real estate ventures, we account for our unconsolidated investments in LLCs which we do not control using the equity method of accounting. The third-party members in these investments have equal voting rights with regards to issues such as, but not limited to: (i) divestiture of

11

property; (ii) annual budget approval, and; (iii) financing commitments. These investments, which represent 33% to 95% non-controlling ownership interests, are recorded initially at our cost and subsequently adjusted for our net equity in the net income, cash contributions to, and distributions from, the investments. Pursuant to certain agreements, allocations of sales proceeds and profits and losses of some of the LLC investments may be allocated disproportionately as compared to ownership interests after specified preferred return rate thresholds have been satisfied.

At June 30, 2014, we have non-controlling equity investments or commitments in eleven jointly-owned LLCs which own MOBs. As of June 30, 2014, we accounted for these LLCs on an unconsolidated basis pursuant to the equity method since they are not variable interest entities. The majority of these LLCs are joint-ventures between us and a non-related party that manages and holds minority ownership interests in the entities. Each LLC is generally self-sustained from a cash flow perspective and generates sufficient cash flow to meet its operating cash flow requirements and service the third-party debt (if applicable) that is non-recourse to us. Although there is typically no ongoing financial support required from us to these entities since they are cash-flow sufficient, we may, from time to time, provide funding for certain purposes such as, but not limited to, significant capital expenditures, leasehold improvements and debt financing. Although we are not obligated to do so, if approved by us at our sole discretion, additional cash fundings are typically advanced as equity or member loans.

Effective January 1, 2014, we purchased the 5% minority ownership interests held by third-party members in two LLCs in which we previously held noncontrolling majority ownership interests (Palmdale Medical Properties and Sparks Medical Properties). As a result of these minority ownership purchases, we now own 100% of each of these LLCs and account for them on a consolidated basis. Prior to January 1, 2014, these LLCs were accounted for on an unconsolidated basis pursuant to the equity method. Previously, Palmdale Medical Properties (Palmdale) was included in our financial statements on a consolidated basis through June 30, 2013 as a result of a master lease arrangement with a wholly-owned subsidiary of UHS, which expired on July 1, 2013.

At June 30, 2014, the LLCs in which we hold various non-controlling ownership interests are not variable interest entities and therefore are not subject to consolidation. As a result of master lease arrangements between UHS and various LLCs in which we hold majority non-controlling ownership interests, we have consolidated or deconsolidated these LLCs as required in accordance with the FASB s standards and guidance.

Effective August 1, 2014, we agreed to purchase the minority ownership interests held by third-party members in six LLCs, as mentioned above, in which we previously held noncontrolling majority ownership interests. The aggregate purchase price in connection with the purchase of these minority ownership interests is approximately \$6.8 million, a portion of which is in the form of a note payable to the previous third-party member. Please see *Note (4) Acquisitions, Dispositions and New Construction* for additional information.

Rental income is recorded by our consolidated and unconsolidated MOBs relating to leases in excess of one year in length using the straight-line method under which contractual rents are recognized evenly over the lease term regardless of when payments are due. The amount of rental revenue resulting from straight-line rent adjustments is dependent on many factors, including the nature and amount of any rental concessions granted to new tenants, scheduled rent increases under existing leases, as well as the acquisition and sales of properties that have existing in-place leases with terms in excess of one year. As a result, the straight-line adjustments to rental revenue may vary from period-to-period.

The following property table represents the eleven LLCs in which we own a noncontrolling interest and were accounted for under the equity method as of June 30, 2014:

Edgar Filing: UNIVERSAL HEALTH REALTY INCOME TRUST - Form 10-Q

Name of LLC/LP	Ownership	Property Owned by LLC
DVMC Properties (e.)	90%	Desert Valley Medical Center
Suburban Properties	33%	Suburban Medical Plaza II
Santa Fe Scottsdale (e.)	90%	Santa Fe Professional Plaza
Brunswick Associates	74%	Mid Coast Hospital MOB
PCH Medical Properties (e.)	85%	Rosenberg Children s Medical Plaza
Arlington Medical Properties (b.)		Saint Mary s Professional Office
	75%	Building
Sierra Medical Properties (e.)	95%	Sierra San Antonio Medical Plaza
PCH Southern Properties (e.)		Phoenix Children s East Valley Care
-	95%	Center
Grayson Properties (a.)(c.)	95%	Texoma Medical Plaza
3811 Bell Medical Properties (e.)		3811 E. Bell Medical BuildingMedical
•	95%	Plaza
FTX MOB Phase II (d.)	95%	Forney Medical Plaza II

(a.) Tenants of this medical office building include subsidiaries of UHS.

12

- (b.) We have funded \$5.2 million in equity as of June 30, 2014 and are committed to invest an additional \$1.2 million. This LLC has a third-party term loan of \$23.7 million, which is non-recourse to us, outstanding as of June 30, 2014.
- (c.) We have funded \$2.3 million in equity as of June 30, 2014, and are committed to fund an additional \$2.1 million. This building, which is on the campus of a UHS hospital and has tenants that include subsidiaries of UHS. This LLC has a third-party term loan of \$12.4 million, which is non-recourse to us, outstanding as of June 30, 2014.
- (d.) During the third quarter of 2012, this limited partnership entered into an agreement to develop, construct, own and operate the Forney Medical Plaza II, which opened on April 1, 2013. We have committed to invest up to \$2.5 million in equity and debt financing, of which \$1.2 million has been funded as of June 30, 2014. This LLC has a third-party construction loan of \$5.6 million, which is non-recourse to us, outstanding as of June 30, 2014.
- (e.) Effective August 1, 2014, we agreed to purchase the third-party minority ownership interest (ranging from 5% to 15%) in this LLC. As a result of our purchase of the minority ownership interest, as of August 1, 2014, we hold 100% of the ownership interest in the LLC and will being accounting for it on a consolidated basis effective August 1, 2014.

Below are the condensed combined statements of income (unaudited) for the LLCs accounted for under the equity method at June 30, 2014 and 2013.

	Three Months Ended June 30,		Six Months Ended June 30,	
	2014	2013 (b.)	2014	2013 (b.)
		(amounts in t	thousands)	
Revenues	\$5,014	\$ 5,206	\$ 9,923	\$ 10,246
Operating expenses	2,164	2,398	4,135	4,400
Depreciation and amortization	879	1,069	1,775	2,093
Interest, net	1,361	1,635	2,679	2,889
Net income	\$ 610	\$ 104	\$ 1,334	\$ 864
Our share of net income (a.)	\$ 679	\$ 461	\$ 1,272	\$ 1,030

- (a.) Our share of net income includes interest income earned by us on various advances made to LLCs of approximately \$360,000 and \$620,000 for the three months ended June 30, 2014 and 2013, respectively, and \$712,000 and \$877,000 for the six months ended June 30, 2014 and 2013, respectively.
- (b.) As mentioned above, we began to account for Sparks Medical Properties on a consolidated basis as of January 1, 2014. Prior to January 1, 2014, the financial results of this entity were accounted for under the equity method on an unconsolidated basis. These amounts include the financial results for Sparks Medical Properties for the three and six months ended June 30, 2013. As also mentioned above, we began to account for Palmdale Medical Properties on a consolidated basis as of January 1, 2014. Prior thereto, as a result of a master lease commitment with a wholly-owned subsidiary of UHS which expired effective as of July 1, 2013, Palmdale Medical Properties was accounted for on a consolidated basis during the three and six-month periods ended June 30, 2013 and are therefore not reflected in the table above.

Below are the condensed combined balance sheets (unaudited) for the LLCs accounted for under the equity method:

Edgar Filing: UNIVERSAL HEALTH REALTY INCOME TRUST - Form 10-Q

	June 30, 2014 (amounts	,	
Net property, including CIP	\$ 96,338	\$	119,547
Other assets	8,630		9,479
Total assets	\$ 104,968	\$	129,026
Liabilities	\$ 4,328	\$	5,336
Mortgage notes payable, non-recourse to us	68,538		80,112
Advances payable to us	15,504		22,911
Equity	16,598		20,667
Total liabilities and equity	\$ 104,968	\$	129,026
Our share of equity and advances to LLCs	\$ 27,952	\$	39,201

13

(a.) As mentioned above, we began to account for Palmdale Medical Properties and Sparks Medical Properties on a consolidated basis effective January 1, 2014. The amounts reflected for December 31, 2013, include the balance sheet amounts for each of these entities since they were accounted for on an unconsolidated basis pursuant to the equity method as of December 31, 2013.

As of June 30, 2014, aggregate principal amounts due on mortgage notes payable by unconsolidated LLCs, which are accounted for under the equity method and are non-recourse to us, are as follows (amounts in thousands):

2014	\$ 13,085
2015	35,353
2016	443
2017	11,689
2018	7,968
Total	\$ 68,538

	Mortgage/ Construction Loan Balance	
Name of LLC	(a.)	Maturity Date
Grayson Properties (b.)	\$ 12,381	2014
Brunswick Associates	7,863	2015
Arlington Medical Properties	23,674	2015
DVMC Properties	3,916	2015
FTX MOB Phase II (c.)	5,596	2017
PCH Southern Properties	6,551	2017
PCH Medical Properties	8,557	2018
-		

68,538

- (a.) All mortgage loans, other than construction loans, require monthly principal payments through maturity and include a balloon principal payment upon maturity.
- (b.) We believe the terms of this loan are within current market underwriting criteria. At this time, we expect to refinance this loan during 2014 (this loan was extended through October 1, 2014) for a three to ten year term at the then current market interest rate. In the unexpected event that we are unable to refinance this loan on reasonable terms, we will explore other financing alternatives, including, among other things, potentially increasing our equity investment in the property utilizing funds borrowed under our revolving credit facility.
- (c.) Construction loan.

Pursuant to the operating agreements of the LLCs, the third-party member and the Trust, at any time, have the right to make an offer (Offering Member) to the other member(s) (Non-Offering Member) in which it either agrees to: (i) sell

the entire ownership interest of the Offering Member to the Non-Offering Member (Offer to Sell) at a price as determined by the Offering Member (Transfer Price), or; (ii) purchase the entire ownership interest of the Non-Offering Member (Offer to Purchase) at the equivalent proportionate Transfer Price. The Non-Offering Member has 60 days to either: (i) purchase the entire ownership interest of the Offering Member at the Transfer Price, or; (ii) sell its entire ownership interest to the Offering Member at the equivalent proportionate Transfer Price. The closing of the transfer must occur within 60 days of the acceptance by the Non-Offering Member.

The LLCs in which we have invested maintain property insurance on all properties. Although we believe that generally our properties are adequately insured, two of the LLCs (one in which we own a non-controlling equity interest), own properties in California that are located in earthquake zones. These properties are not covered by earthquake insurance since earthquake insurance is no longer available at rates which are economical in relation to the risks covered.

(6) Recent Accounting Pronouncements

In April 2014, the Financial Accounting Standards Board updated the accounting guidance related to the definition of a discontinued operation and the related disclosures. The updated accounting guidance defines a discontinued operation as a disposal of a component or a group of components that is to be disposed of or is classified as held for sale and represents a strategic shift that has or will have a major effect on an entity s operations and financial results. The updated guidance is applicable to us effective January 1, 2015 with early adoption permitted. We do not expect the adoption of this update to have a material impact on our condensed consolidated financial statements.

14

(7) Debt and Financial Instruments

Debt:

In July, 2011, we entered into a \$150 million revolving credit agreement (Credit Agreement) which is scheduled to expire on July 24, 2015. The Credit Agreement includes a \$50 million sub limit for letters of credit and a \$20 million sub limit for swingline/short-term loans. The Credit Agreement also provides an option to increase the total facility borrowing capacity by an additional \$50 million, subject to lender agreement. Borrowings made pursuant to the Credit Agreement will bear interest, at our option, at one, two, three, or six month LIBOR plus an applicable margin ranging from 1.75% to 2.50% or at the Base Rate plus an applicable margin ranging from 0.75% to 1.50%. The Credit Agreement defines Base Rate as the greatest of: (a) the administrative agent s prime rate; (b) the federal funds effective rate plus 0.50%, and; (c) one month LIBOR plus 1%. A fee of 0.30% to 0.50% will be charged on the unused portion of the commitment. The margins over LIBOR, Base Rate and the commitment fee are based upon our ratio of debt to total capital. At June 30, 2014, the applicable margin over the LIBOR rate was 2.00%, the margin over the Base Rate was 1.00%, and the commitment fee was 0.35%.

At June 30, 2014, we had \$102.4 million of outstanding borrowings and \$8.1 million of letters of credit outstanding against our revolving credit agreement. We had \$39.6 million of available borrowing capacity, net of the outstanding borrowings and letters of credit outstanding as of June 30, 2014. There are no compensating balance requirements.

On July 1, 2014, we borrowed an additional \$9.1 million under our revolving credit agreement, which was utilized to repay the outstanding mortgage balance on the Summerlin Hospital Medical Office Building I. The mortgage loan on this property matured on July 1, 2014.

Covenants relating to the Agreement require the maintenance of a minimum tangible net worth and specified financial ratios, limit our ability to incur additional debt, limit the aggregate amount of mortgage receivables and limit our ability to increase dividends in excess of 95% of cash available for distribution, unless additional distributions are required to comply with the applicable section of the Internal Revenue Code of 1986 and related regulations governing real estate investment trusts. We are in compliance with all of the covenants at June 30, 2014. We also believe that we would remain in compliance if the full amount of our commitment was borrowed.

The following table includes a summary of the required compliance ratios, giving effect to the covenants contained in the Credit Agreement (dollar amounts in thousands):

		June 30,
	Covenant	2014
Tangible net worth	\$ 125,000	\$137,374
Debt to total capital	< 55%	39.1%
Debt service coverage ratio	> 3.00x	17.5x
Debt to cash flow ratio	< 3.50x	2.36x

We have fourteen mortgages, all of which are non-recourse to us, included on our condensed consolidated balance sheet as of June 30, 2014, with a combined outstanding balance of \$114.6 million (excluding net debt premium of \$604,000). The following table summarizes our outstanding mortgages, excluding net debt premium, at June 30, 2014 (amounts in thousands):

Edgar Filing: UNIVERSAL HEALTH REALTY INCOME TRUST - Form 10-Q

Outs	tanding		
Ba	lance	Interest	Maturity
(in tho	usands)(a)	Rate	Date
\$	9,081	6.55%	2014
	5,023	5.50%	2015
	6,084	3.69%	2015
	11,187	3.40%	2016
	21,465	5.64%	2017
	7,295	2.90%	2017
	4,842	6.00%	2017
	11,877	5.50%	2017
	Ba (in tho	5,023 6,084 11,187 21,465 7,295	Balance (in thousands)(a) Interest Rate \$ 9,081 6.55% 5,023 5.50% 6,084 3.69% 11,187 3.40% 21,465 5.64% 7,295 2.90% 4,842 6.00%

Facility Name	Outstanding Balance (in thousands)(a)	Interest Rate	Maturity Date
Centennial Hills Medical Office Building floating rate			
mortgage loan	10,791	3.40%	2018
Sparks Medical Building/Vista Medical Terrace			
floating rate mortgage loan	4,541	3.40%	2018
Vibra Hospital-Corpus Christi fixed rate mortgage			
loan	2,943	6.50%	2019
700 Shadow Lane and Goldring MOBs fixed rate mortgage loan	6,684	4.54%	2022
BRB Medical Office Building fixed rate mortgage	-,		
loan	6,757	4.27%	2022
Tuscan Professional Building fixed rate mortgage loan	6,065	5.56%	2025
Total	\$ 114,635		

- (a) Amortized principal payments are made on a monthly basis.
- (b) This loan was repaid in full on July 1, 2014, utilizing funds borrowed under our revolving credit facility. The mortgages are secured by the real property of the buildings as well as property leases and rents. The mortgages have a combined fair value of approximately \$116.2 million as of June 30, 2014. Changes in market rates on our fixed rate debt impacts the fair value of debt, but it has no impact on interest incurred or cash flow.

Financial Instruments:

During the third quarter of 2013, we entered into an interest rate cap on a total notional amount of \$10 million whereby we paid a premium of \$136,000. During the first quarter of 2014, we entered into two additional interest rate cap agreements on a total notional amount of \$20 million whereby we paid premiums of \$134,500. In exchange for the premium payments, the counterparties agreed to pay us the difference between 1.50% and one-month LIBOR if one-month LIBOR rises above 1.50% during the term of the cap. The caps expire on January 13, 2017.

(8) Segment Reporting

Our primary business is investing in and leasing healthcare and human service facilities through direct ownership or through joint ventures, which aggregate into a single reportable segment. We actively manage our portfolio of healthcare and human service facilities and may from time to time make decisions to sell lower performing properties not meeting our long-term investment objectives. The proceeds of sales are typically reinvested in new developments or acquisitions, which we believe will meet our planned rate of return. It is our intent that all healthcare and human service facilities will be owned or developed for investment purposes. Our revenue and net income are generated from the operation of our investment portfolio.

Our portfolio is located throughout the United States, however, we do not distinguish or group our operations on a geographical basis for purposes of allocating resources or measuring performance. We review operating and financial data for each property on an individual basis; therefore, we define an operating segment as our individual properties.

Individual properties have been aggregated into one reportable segment based upon their similarities with regard to both the nature and economics of the facilities, tenants and operational processes, as well as long-term average financial performance.

<u>Item 2.</u> <u>Management s Discussion and Analysis of Financial Condition and Results of Operations</u> Overview

We are a real estate investment trust (REIT) that commenced operations in 1986. We invest in healthcare and human service related facilities including acute care hospitals, behavioral healthcare facilities, rehabilitation hospitals, sub-acute facilities, surgery centers, childcare centers and medical office buildings (MOBs). As of June 30, 2014, we have fifty-eight real estate investments or commitments located in sixteen states consisting of:

seven hospital facilities consisting of three acute care, one behavioral healthcare, one rehabilitation and two sub-acute;

forty-seven medical office buildings, including eleven owned by unconsolidated limited liability companies (LLCs), and;

four pre-school and childcare centers.

Forward Looking Statements and Certain Risk Factors

This report contains forward-looking statements that reflect our current estimates, expectations and projections about our future results, performance, prospects and opportunities. Forward-looking statements include, among other things, the information concerning our possible future results of operations, business and growth strategies, financing plans, expectations that regulatory

16

developments or other matters will not have a material adverse effect on our business or financial condition, our competitive position and the effects of competition, the projected growth of the industry in which we operate, and the benefits and synergies to be obtained from our completed and any future acquisitions, and statements of our goals and objectives, and other similar expressions concerning matters that are not historical facts. Words such as may, should, could, would, predicts, potential, continue, expects, anticipates, future, intends, plans, projects and similar expressions, as well as statements in future tense, identify forward-looking statements. appears,

Forward-looking statements should not be read as a guarantee of future performance or results, and will not necessarily be accurate indications of the tim