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DLN: 93493234007042

Department of the Treasury

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)

OMB No 1545-0047

Open to Public Inspection

The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service A For the 2010 calendar year, or tax year beginning 10-01-2010 and ending 09-30-2011 D Employer identification number Name of organization CENTRAL GEORGIA HEALTH SYSTEMS INC B Check if applicable 58-2149127 Address change Doing Business As ☐ Name change E Telephone number Initial return Number and street (or P O box if mail is not delivered to street address) 691 CHERRY STREET (478)633-1407 Terminated **G** Gross receipts \$ 41,099,886 City or town, state or country, and ZIP + 4 MACON, GA 31201 Amended return Application pending Name and address of principal officer H(a) Is this a group return for affiliates? A DONALD FAULK JR 691 CHERRY STREET SUITE 400 **H(b)** Are all affiliates included? MACON, GA 31201 If "No," attach a list (see instructions) H(c) Group exemption number ▶ Tax-exempt status **▽** 501(c)(3) **□** Website: ► WWW MCCG ORG K Form of organization
✓ Corporation
☐ Trust
☐ Association
☐ Other ► L Year of formation 1994 **M** State of legal domicile GA Part I Summary Briefly describe the organization's mission or most significant activities CENTRAL GEORGIA HEALTH SYSTEMS, INC IS A NONPROFIT CORPORATION WHOSE PRIMARY PURPOSE IS TO SERVE AS A PARENT CORPORATION PROVIDING STRATEGIC DIRECTION TO THE MEDICAL CENTER OF CENTRAL GEORGIA, INC AND OTHER AFFILIATES IN SUPPORT OF THEIR MISSION OF PROVIDING A COMPREHENSIVE RANGE OF HIGH-Activities & Governance QUALITY, REASONABLY PRICED HEALTH CARE SERVICES TO THE CENTRAL GEORGIA COMMUNITY 2 Check this box 🛏 if the organization discontinued its operations or disposed of more than 25% of its net assets ${f 3}$ Number of voting members of the governing body (Part VI, line 1a) . . 4 Number of independent voting members of the governing body (Part VI, line 1b) . 5 Total number of individuals employed in calendar year 2010 (Part V, line 2a) . 5 423 6 0 Total number of volunteers (estimate if necessary) . 7a 7a Total unrelated business revenue from Part VIII, column (C), line 12 160.315 **b** Net unrelated business taxable income from Form 990-T, line 34 **7**b 0 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . 0 0 30,313,999 36,232,984 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 5.709.690 -2,396 -2,442,689 4,864,423 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 33,581,000 41,095,011 13 10,500,221 62,400 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . 14 Benefits paid to or for members (Part IX, column (A), line 4) . . 0 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 15 23,670,135 27,690,138 5-10) 0 16a Professional fundraising fees (Part IX, column (A), line 11e) . . b Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright 0$ 10,268,904 7,848,863 **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . . 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 42,019,219 38,021,442 19 Revenue less expenses Subtract line 18 from line 12 . -8,438,219 3,073,569 Net Assets or Fund Balances **Beginning of Current End of Year** 20 Total assets (Part X, line 16) . 39,722,867 42,029,443 21 Total liabilities (Part X, line 26) . . . 1,166,997 854.516 22 Net assets or fund balances Subtract line 21 from line 20 38,555,870 41,174,927 Part II Signature Block 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. 2012-08-14 Signature of officer Date Sign Here RHONDA S PERRY CFO Type or print name and title

W Edward Phillips

May the IRS discuss this return with the preparer shown above? (see instructions) .

Firm's address FIVE CONCOURSE PARKWAY SUITE 1250

ATLANTA, GA 30328

Firm's name | DRAFFIN & TUCKER LLP

preparer's name

Paid

Preparer

Use Only

Preparer's signature

Date

W Edward Phillips

Check if self-

employed 🕨

PTIN

Firm's EIN

✓ Yes

Phone no 🕨 (404) 220-

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FOIII	1990 (2010)				Page 2
Par	Statement of Progra Check if Schedule O conta				
1	Briefly describe the organization	ı's mission			
MED HEA	TRAL GEORGIA HEALTH SYSTE ICAL CENTER OF CENTRAL GEO LTH, INC AND MEDCEN COMMU SION TO PROVIDE HEALTHCAR	ORGIA, INC , HEALTH S UNITY HEALTH FOUND	ERVICES OF CENTRA ATION, INC AND OTH	L GEORGIA, INC, CENTRAL	GEORGIA SENIOR
2	Did the organization undertake a the prior Form 990 or 990-EZ?		= :		_ Yes
	If "Yes," describe these new serv	rices on Schedule O			
3	Did the organization cease conduservices?		nt changes in how it con	nducts, any program	Yes V No
4	Describe the exempt purpose ac Section 501(c)(3) and 501(c)(4 allocations to others, the total ex) organızatıons and sectı	on 4947(a)(1) trusts ar	re required to report the amou	
4a	(Code) (Expe	nses \$ 13,985,127	including grants of \$	62,400) (Revenue \$	19,902,726)
	CENTRAL GEORGIA HEALTH SYSTEMS, INC , HEALTH SERVICES OF CENTRAL OF AFFILIATED ENTITIES AND TO PROVIDE THE PROVISION OF HEALTHCARE SERV	GEORGIA, INC , CENTRAL GEO E STRATEGIC DIRECTION, FIN	RGIA SENIOR HEALTH, INC ANCIAL MANAGEMENT, RESO	AND MEDCEN COMMUNITY HEALTH	FOUNDATION, INC AND OTHER
4b	(Code) (Exper	nses \$ 12,796,147	ıncludıng grants of \$) (Revenue \$	16,397,353)
	CENTRAL GEORGIA HEALTH SYSTEMS, CENTRAL GEORGIA AND ONE OF TWO PHYSICAL REHABILITATION SERVICES (FREE-STANDING REHABILITAT	ION HOSPITALS IN THE STAT	E THE REHABILITATION HOSPITAL F	
4c	(Code) (Exper	nses \$	ıncludıng grants of \$) (Revenue \$)
	·				
	Oth an ana ana a /D	miha in Cahadiile O)			
4d	Other program services (Desci (Expenses \$	ribe in Schedule O) including grants o	f\$) (Revenue \$)
 4е	Total program service expenses		<u> </u>	, , т	,
		. , -1			

Part IV	Checklist of	f Rea	uired	Sche	dules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If</i> "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c	Yes	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170 (b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> " <i>Yes,"</i> complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV.	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	Yes	
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	Yes	

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		Νo
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	i
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Yes	
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note, All Form 990 filers are required to complete Schedule O	38	Yes	

Form 990 (2010)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V \cdot . \cdot . \cdot . $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. $$. [
			Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	165	
a	Did the organization have unrelated business gross income of \$1,000 or more during the		V	
h	year?	3a 3b	Yes Yes	
a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country •CJ			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	F-		
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	5c 6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νo
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club 10b			
-	facilities			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
	In which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand			
•	13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
L	If "Vac " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	1/h		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax			
Lu	year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Does the organization have members or stockholders?	6		Νο
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	_		
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νo
	ection B. Policies (This Section B requests information about policies not required by the Internal evenue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?			
		11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	Yes	
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		No
Se	ection C. Disclosure	100		INO
17	List the States with which a copy of this Form 990 is required to be filed▶GA			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request			

- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization FRHONDA S PERRY

777 HEMLOCK STREET MACON, GA 31201 (478) 633-1452

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

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

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

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

(A) Name and Title	(B) Average hours	rage Position (check all that apply)				(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other		
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(1) KIM W JOHNSTON MD DIR/VICE CHAIR	1	Х						0	0	0
(2) CONNIE CATER DIRECTOR	1	Х						0	0	0
(3) HENRY KOPLIN DIRECTOR	1	Х						0	0	0
(4) JAMES TIMOTHY JACKSON DIRECTOR	1	Х						0	0	0
(5) JOAN WALTON DIRECTOR	1	Х						0	0	0
(6) RUTH KNOX DIRECTOR	1	Х						0	0	0
(7) STARR PURDUE DIRECTOR	1	Х						0	0	0
(8) A DONALD FAULK JR PRESIDENT/CEO	40			Х				7,940,312	0	61,400
(9) KENNETH B BANKS GEN COUNSEL/SEC	40			Х				404,251	0	411,427
(10) RHONDA S PERRY SR VP/TREASURER	40			Х				552,478	0	1,681,095
(11) ELBERT T MCQUEEN PRESIDENT/CEO	40				Х			276,123	0	28,316
(12) HARRIS BRYAN FORLINES DIR REIMBURSEMENT	40					Х		142,180	0	16,035
(13) KAREN M FARR AVP FINANCIAL SERVICES	40					Х		181,727	0	28,091
(14) KATHERINE L BOWEN AVP FIN PLANNING BUDGET	40					Х		174,749	0	24,432
(15) TRACY GRAY DIR APPLICATION SYSTEMS	40					Х		168,350	0	14,771
(16) LORI W CASSIDY AVP HUMAN RESOURCES	40					х		211,734	0	31,224
										

Part VIII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) Average hours per		tion (II		Rep comp	(D) ortable ensation m the	(E) Reportable compensatio from related	ion amou		ited f other
		week (describe	호돌	in s		주 (9	Highest compensated employee		organiz	zation (W- 9-MISC)	organizations (W- 2/1099-	,	from t	:he
		hours	울	II	_	9	15 g				MISC)		relate	
		for related	Individual trustee or director	Institutional Truste	Office	employee	ŏ	Former					organıza	tions
		organizations in	l de	=	<u>"</u>	9(0	Pes	Ψ						
		Schedule	<u></u>	ಚಿಕ್ಕ		Φ.	S Bit e							
		0)			 		<u> </u>					_		
1b	Sub-Total				٠.	•	'	<u> </u>						
С	Total from continuation sheets	to Part VII, Sec	tion A				۲							
d	Total (add lines 1b and 1c) .							Þ		10,051,904		0	2,2	296,792
2	Total number of individuals (inc \$100,000 in reportable compe						above) who	receive	ed more tha	n	•		
													Yes	No
3	Did the organization list any fo					ey e	mploy	ee, c	r highes	t compens	ated employee			
	on line 1a? If "Yes," complete Sc					•	•	•				3		No
4	For any individual listed on line organization and related organization and related organizations.											_		
5	Did any person listed on line 1a	receive or accr	ie comi	nenc:	• ation	fro	m anv	· unre	lated ord	anization o	or individual for	4	Yes	
•	services rendered to the organi										, marviadar ioi	5		No
													1	
1	ection B. Independent Cor Complete this table for your five		nsated	ınden	end	ent (contra	ctors	that red	ceived more	e than			
	\$100,000 of compensation from			чер	. ciru		_ onera							
	Na	(A) me and business ad	dress							Desci	(B)		(C) Compen	

(A)	(B)	(C)
Name and business address	Description of services	Compensation
KING AND SPALDING P O BOX 116133 ATLANTA, GA 303686133	LEGAL SERVICES	788,743
KAUFMAN HALL 5202 OLD ORCHARD RD ST N700 SKOKIE, IL 60077	CONSULTING SERVICES	240,000
480 PIERCE ST	INVESTMENT MANAGEMENT SERVICE	186,076
DIXON HUGHES PLLC P O BOX 3049 ASHEVILLE, NC 288023049	AUDIT SERVICES	157,820
DAVITA 5200 VIRGINIA WAY BRENTWOOD, TN 37024	DIALYSIS SERVICES	150,456
2 Total number of independent contractors (including but not limited to those listed above) \$1,00,000 in compensation from the organization \$1,1	who received more than	

Form 99		2010) Statement of Reveni	ıe				Pa	ge 9
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants similar amounts not included above Noncash contributions included in litteration. Total. Add lines 1a-1f	. 1c . 1d . 1e . and 1f . nes 1a-1f \$	Business Code	0			
Program Serwce Revenue	c d e f	MEDICARE MEDICAID REVENUE PATIENT REVENUE REBATE REVENUE CAFETERIA SALES SUPPORT REVENUE All other program service revenue. Total. Add lines 2a-2f		Business Code 621990 621990 621990 621990 541200	1,050,666 431,367 37,831	37,831 19,243,837 17,885	152,027	
	4 5 6a b	Investment income (including and other similar amounts) Income from investment of tax-extractions. Royalties	empt bond proceeds	(II) Personal	1,536 0 0			1,536
	7a b c d	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss) Gross income from fundraising	(ı) Securities 0	(II) O ther 943 4,875 -3,932	-3,932			-3,932
Other Revenue	c 9a b c		a b Indicate the state of the	a b	0			
	11a b		NTS	Business Code	4,864,423	67,095		4,797,328
	e	Total. Add lines 11a-11d. Total revenue. See Instruction	· · · · · · · · · · · · · · · · · · ·		4,864,423 41,095,011		160,315	4,794,932

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

Α	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).									
Do no	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C)	(D) Fundraising expenses					
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21 $$	62,400	62,400		<u> </u>					
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0								
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	0								
4	Benefits paid to or for members	0								
5	Compensation of current officers, directors, trustees, and key employees	2,322,548		2,322,548						
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0								
7	Other salaries and wages	19,520,303	16,512,927	3,007,376	_					
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	947,342	947,342							
9	Other employee benefits	3,265,463	2,514,065	751,398						
10	Payroll taxes	1,634,482	1,208,242	426,240						
а	Fees for services (non-employees) Management	0								
b	Legal	1,661,914		1,661,914						
c	Accounting	460,177		460,177						
d	Lobbying	230		230						
e	Professional fundraising services See Part IV, line 17	0								
f	Investment management fees	736,660		736,660						
g	Other	1,955,761	1,202,436	753,325						
12	Advertising and promotion	103,630	103,574	56						
13	Office expenses	1,236,353	1,192,661	43,692						
14	Information technology	8,521	6,425	2,096						
15	Royalties	0								
16	Occupancy	490,238	407,544	82,694						
17	Travel	176,828	128,381	48,447						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0								
19	Conferences, conventions, and meetings	674	215	459						
20	Interest	0								
21	Payments to affiliates	0								
22	Depreciation, depletion, and amortization	90,961	77,264	13,697						
23 24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of	791,874	206,795	585,079						
а	line 25, column (A) amount, list line 24f expenses on Schedule O) EQUIPMENT RENTAL & MAINT	1,791,326	1,778,948	12,378						
a b	TAXES & LICENSES	297,070	64,898	232,172						
c	BAD DEBTS	191,855	191,855	232,172						
d	GIFTS/ENTERTAINMENT & AWARDS	61,905	61,465	440						
e	DUES & SUBSCRIPTIONS	41,064	5,481	35,583	_					
f	All other expenses	171,863	108,356	63,507	0					
25	Total functional expenses. Add lines 1 through 24f	38,021,442	26,781,274	11,240,168	0					
26	Joint costs. Check here ► ☐ If following	30,021,442	20,701,274	11,240,100						
⊸ •	SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a									
	combined educational campaign and fundraising solicitation	0								

Pa	art X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			1,030,485	1	3,372,305
	2	Savings and temporary cash investments			2		
	3	Pledges and grants receivable, net			3		
	4	Accounts receivable, net			2,031,261	4	2,236,745
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of	employees, and				
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under sepersons described in section $4958(c)(3)(B)$, and contributing er sponsoring organizations of section $501(c)(9)$ voluntary employ organizations (see instructions)	ers, and				
S		Schedule L				6	
Assets	7	Notes and loans receivable, net				7	
⋖	8	Inventories for sale or use			93,934	8	93,770
	9	Prepaid expenses and deferred charges			668,718	9	129,198
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	1,933,197			
	ь	Less accumulated depreciation	10b	1,517,307	463,467	10c	415,890
	11	Investments—publicly traded securities		11			
	12	Investments—other securities See Part IV, line 11	0	12	0		
	13	Investments—program-related See Part IV, line 11			26,362,402	13	26,425,270
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			9,072,600	15	9,356,265
	16	Total assets. Add lines 1 through 15 (must equal line 34)			39,722,867	16	42,029,443
	17	Accounts payable and accrued expenses .			1,166,997	17	854,516
	18	Grants payable				18	
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities				20	
es	21	Escrow or custodial account liability Complete Part IV of Schedule	eD.			21	
bilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
E.i.		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	_
	25	Other liabilities Complete Part X of Schedule D			0	25	0
	26	Total liabilities. Add lines 17 through 25			1,166,997	26	854,516
~		Organizations that follow SFAS 117, check here ▶ 🔽 and comp	lete li	nes 27			
Ð		through 29, and lines 33 and 34.					
Balance	27	Unrestricted net assets			38,555,870	27	41,174,927
8	28	Temporarily restricted net assets				28	
돧	29	Permanently restricted net assets				29	
Fund		Organizations that do not follow SFAS 117, check here ► ┌ an	d com	plete			
ŏ		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .				31	
	32	Retained earnings, endowment, accumulated income, or other fu	nds			32	
Net	33	Total net assets or fund balances			38,555,870	33	41,174,927
	34	Total liabilities and net assets/fund balances			39,722,867	34	42,029,443

Pa	Check if Schedule O contains a response to any question in this Part XI			. [~	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		41 (95,01
2	Total expenses (must equal Part IX, column (A), line 25)	2			21,44
3	Revenue less expenses Subtract line 2 from line 1	3			73,56
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		38,5	555,87
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-2	54,51
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		41,1	174,92
Pai	TEXII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			T	No
1	Accounting method used to prepare the Form 990			res	NO
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? \cdot .		2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	[2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	ssued			
	Separate basis Consolidated basis 🔽 Both consolidated and separated basis				1
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a		Νo
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

CENTRAL GEORGIA HEALTH SYSTEMS INC

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

Inspection

58-2149127 Reason for Public Charity Status (All organizations must complete this part.) See instructions Part I The organization is not a private foundation because it is $\,$ (For lines 1 through 11, check only one box)A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h Type I b ┌ Type II Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (III) below, the governing body of the the supported organization? 11g(i) Νo (ii) a family member of a person described in (i) above? 11g(ii) Νo (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Νo h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1 - 9 above or IRC section (see	(iv) Is the organizati col (i) list your govei documei	on in ed in rning	(v) Did you not organizati col (i) of	on in your	(vi) Is the organizati col (i) orga in the U	on in inized	(vii) A mount of support
		instructions))	Yes	Yes No Yes		No	Yes	No	
(A) MEDICAL CENTER OF CENTRAL GEORGIA	582149128	3	Yes		Yes		Yes		0
-									
Total									0

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1) (A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

S	ection A. Public Support		and to quanty t			out complete	
	endar year (or fiscal year beginning						
Care	in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
_	behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
_	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included on line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public Support. Subtract line 5 from						
Ū	line 4						
S	ection B. Total Support		<u> </u>	I I.			
	endar year (or fiscal year beginning						
	ın) >	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	A mounts from line 4						
8	Gross income from interest,						
Ū	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support (Add lines 7						
	through 10)					<u> </u>	
12	Gross receipts from related activiti	es, etc (See inst	ructions)			12	
13	First Five Years If the Form 990 is t	for the organizati	on's first, second	, thırd, fourth, or	fifth tax year as a	501(c)(3) organı	
	check this box and stop here						►
	-tiC Ct-ti	L'a Carana at B					
<u> </u>	ection C. Computation of Pub Public Support Percentage for 2010			11 column (f))			
	· ·		•	II Column (1))		14	
15	Public Support Percentage for 2009	Schedule A, Pa	rt II, line 14			15	
16a	33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box						
_	and stop here. The organization qualifies as a publicly supported organization 33 1/3% support test—2009. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this						
b					5a, and line 15 is 3	33 1/3% or more,	- -
	box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, or 16b and line 14						
1/a							
	is 10% or more, and if the organization made						rt a d
	in Part IV how the organization mee	ts the "racts and	circumstances"	test ine organiz	ration qualifies as	a publicly suppo	
L	organization	_2000 If+ba a	anization did not	chack a hay an l	no 12 165 166 -	r 17a and line	► □
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ						
	Explain in Part IV how the organization						V
	supported organization	aon meets the 10	acts and circuilis	tances test file	z organizacion qual	mes as a publici	y ▶[¯
18	• • •	on did not check	a box on line 13	. 16a. 16b. 17a o	r 17b, check this	box and see	- 1
	instructions	rivate Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see					

organization

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total in) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f)) 15 16 Public support percentage from 2009 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage Investment income percentage for **2010** (line 10c column (f) divided by line 13 column (f)) 17 **17** Investment income percentage from 2009 Schedule A, Part III, line 17 18 18 19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported

33 1/3% support tests-2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

▶□

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

Explanation

AMOUNT OF SUPPORT, SCHEDULE A, PART IH(VII), CENTRAL GEORGIA HEALTH SYSTEMS, INC IS THE FUNCTIONALLY INTERGRATED PARENT ENTITY OF THE MEDICAL CENTER OF CENTRAL GEORGIA, INC CGHS IS RESPONSIBLE FOR STRATEGIC PLANNING, FINANCIAL MANAGEMENT AND RESOURCE ALLOCATION FOR MCCG AND ITS AFFILIATED ENTITIES,

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OMB No 1545-0047

Open to Public Inspection

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

Political Campaign and Lobbying Activities

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

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

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

• Se	ction 527 organizations Complete	Part I-A only		ı		
		s," to Form 990, Part IV, Line 4, or	Form 990-EZ, Pa	rt VI, line 47 (Lobb	vina A	Activities), then
		: have filed Form 5768 (election under				
Se	ction 501(c)(3) organizations that	: have NOT filed Form 5768 (election ui	nder section 501(I	n)) [.] Complete Part Il-E	3 Don	ot complete Part Il-A
	-	s," to Form 990, Part IV, Line 5 (Pro	oxy Tax) or Form	n 990-EZ, Part V, lin	e 35a	(Proxy Tax), then
	ction 501(c)(4), (5), or (6) organi	zations Complete Part III				
	me of the organization NTRAL GEORGIA HEALTH SYSTEMS INC			Employe	rıden	tification number
CLI	TRAE GEORGIA HEAETH STSTEMS INC			58-214	9127	
Par	t I-A Complete if the or	ganization is exempt under s	section 501(c			organization.
1	Provide a description of the org	ganızatıon's dırect and ındırect politic	al campaign activ	vities in Part IV		
2	Political expenditures			1	-	\$
3	V olunteer hours					
		ganization is exempt under s)(3).		
1		e tax incurred by the organization und				\$
2	Enter the amount of any excise	e tax incurred by organization manage	ers under section	4955	•	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 472	O for this year?			☐ Yes ☐ No
4a	Was a correction made?					┌ Yes ┌ No
ь	If "Yes," describe in Part IV					
Par	t I-C Complete if the or	ganization is exempt under s	section 501(c) except section	า 501	L(c)(3).
1	Enter the amount directly expe	ended by the filing organization for sec	ction 527 exempt	function activities	•	\$
2	Enter the amount of the filing o	rganization's funds contributed to oth	ner organizations	for section 527		
	exempt funtion activities				-	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	ind on Form 1120)-POL, line 17b	F	\$
4	Did the filing organization file F	Form 1120-POL for this year?				☐ Yes ☐ No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.					
	(a) Name	(b) Address	(c) EIN	(d) A mount paid filing organization funds If none, ente	n's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0 -
			ĺ	1		

			funds If none, enter -0-	directly delivered to a separate political organization If none, enter - 0 -
or Paperwork Reduction Act Notice, se	e the Instructions for Form 990 or 990-	· F7	t No E00945 Schodule C /	orm 000 or 000 E7\ 2010

Р	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3)	and filed Form 5768	(election
	Check If the filing organization belongs to a Check If the filing organization checked bo	n affiliated group x A and "limited control" provisions apply		
	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing O rganization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lobbyıng)		
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)		
C	Total lobbying expenditures (add lines 1a and 1	o)		
d	O ther exempt purpose expenditures			
е	Total exempt purpose expenditures (add lines 1	c and 1d)		
f	Lobbying nontaxable amount Enter the amount to columns	rom the following table in both		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
	Grassroots nontaxable amount (enter 25% of lir	e 1f)		
h	Subtract line 1g from line 1a If zero or less, ent	er -0 -		
i	Subtract line 1f from line 1c If zero or less, ente	r-0-		
j	If there is an amount other than zero on either lii section 4911 tax for this year?	ne 1h or line 1i, did the organization file Form	4720 reporting	┌ Yes ┌ No

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expendit	ures During 4	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots non-taxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

		· •	
Part II-B	Complete if the organizat	on is exempt under section 501(c)(3) and has NOT filed Form 5768	
	(election under section 50	01(h)).	

	(ciconon unuci section sez(n)).	(a	1)	(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	
C	Media advertisements?		No	
d	Mailings to members, legislators, or the public?		No	
е	Publications, or published or broadcast statements?		Νo	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Νo	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities? If "Yes," describe in Part IV	Yes		230
j	Total lines 1c through 1i			230
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		ľ	
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b	Carryover from last year	2b	
C	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Identifier	Return Reference	Explanation
Description of other lobbying	Schedule C, Part II-B, Line 1:	LOBBYING EXPENSES FOR DUES PAID TO THE GEORGIA
activities		CHAMBER OF COMMERCE

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OMB No 1545-0047

Open to Public

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Inspection

	the organization GEORGIA HEALTH SYSTEMS INC		Emp	oloyer identific	cation number	er
			58-	2149127		
rt I			Funds	or Account	s. Comple	te ıf th
	organization answered "Yes" to Form 99	l .		(L)	- 4 1	
T - L -		(a) Donor advised funds		(b) Funds and	otner accou	Ints
	I number at end of year					
	egate contributions to (during year)					
	egate grants from (during year)					
	egate value at end of year					
fund	the organization inform all donors and donor adves are the organization's property, subject to the	organization's exclusive legal control?			☐ Yes	┌ No
used	the organization inform all grantees, donors, and I only for charitable purposes and not for the ber erring impermissible private benefit				┌ Yes	┌ No
t II	Conservation Easements. Complete	ıf the organization answered "Yes'	' to Forr	n 990, Part I	V, line 7.	
┌ ┌ Com	ose(s) of conservation easements held by the o Preservation of land for public use (e g , recreat Protection of natural habitat Preservation of open space plete lines 2a-2d if the organization held a qual	on or pleasure)	a certifie	d historic stru	•	a
ease	ement on the last day of the tax year			1		
				Held at th	e End of the	Year
	I number of conservation easements		2a			
	I acreage restricted by conservation easements		2b			
	ber of conservation easements on a certified his	, ,	2c			
Num	ber of conservation easements included in (c) a	cquired after 8/17/06	2d			
	ber of conservation easements modified, transferaces	errea, releasea, extinguisnea, or termina	ited by ti	ie organization	n during	
Num	ber of states where property subject to conserv	ation easement is located 🗠				
	s the organization have a written policy regarding reement of the conservation easements it holds		andling o	f violations, an	rd ┌ Yes	┌ No
Staff	fand volunteer hours devoted to monitoring, insp	pecting and enforcing conservation ease	ements d	uring the year	<u> </u>	
A mo	unt of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easeme	nts durın	g the year ► \$		
	s each conservation easement reported on line 2 (h)(4)(B)(i) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of s	ection		┌ Yes	┌ No
bala	art XIV, describe how the organization reports c nce sheet, and include, if applicable, the text of grganization's accounting for conservation easer	the footnote to the organization's financ	•			
•	Organizations Maintaining Collection Complete if the organization answered		, or Ot	her Similar	Assets.	
art, I	e organization elected, as permitted under SFAS historical treasures, or other similar assets held ide, in Part XIV, the text of the footnote to its fir	for public exhibition, education or resea	arch in fu			e,
histo	e organization elected, as permitted under SFAS orical treasures, or other similar assets held for ide the following amounts relating to these items	public exhibition, education, or research				
(i) _R	evenues included in Form 990, Part VIII, line 1			► \$		
(ii) _A	Assets included in Form 990, Part X			F \$		
If th	e organization received or held works of art, hist wing amounts required to be reported under SFA		for finar	-		
Reve	enues included in Form 990, Part VIII, line 1			► \$		
	ets included in Form 990, Part X			-		

Part	311 Organizations Maintaining Co	llections of Art	t, His	tori	<u>cal Ti</u>	<u>reasu</u>	res, or C	the	<u>r Similar As</u>	sets (c	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	he fol	owing	that are	e a signific	ant us	se of its collect	ion	
а	Public exhibition		d	\vdash	Loan	or excl	nange prog	rams			
b	Scholarly research		e	\vdash	Othe	r					
С	Preservation for future generations										
4	Provide a description of the organization's co	allections and expla	ain hoi	w the	v furthe	erthe o	rnanization	ı's ex	emnt nurnose i	n	
	Part XIV						_			.,	
5	During the year, did the organization solicition assets to be sold to raise funds rather than t									Yes	□ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an	ements. Compl	ete ıf	the	organ	ızatıor					
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?						or other ass	ets r		Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	/ and complete the	follov	vıng t	able		-				
							-		An	nount	
С	Beginning balance							1c			
d	Additions during the year							1d			
е	Distributions during the year							1e			
f	Ending balance							1 f			
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	ne 21?	•					I	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	1									
Pa	rt V Endowment Funds. Complete										
_		(a)Current Year	(b) Prior	Year	(c) Tw	o Years Back	(d)⊺	Three Years Back	(e) Four `	Years Back
1a	Beginning of year balance										
Ь	Contributions							+			
С	Investment earnings or losses							1			
d	Grants or scholarships							+			
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the yea	r end balance held	as								_
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment 🕨										
С	Term endowment ▶										
За	Are there endowment funds not in the posse	ssion of the organiz	zation	that	are hel	d and a	dmınıstere	d for	the		
	organization by									Yes	No
	(i) unrelated organizations		•					•	3a(
	(ii) related organizations								3a(<u> </u>
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the							•	3b	<u> </u>	<u> </u>
	t VI Investments—Land, Buildings					aan Da	rt Y line	10			
F.C.I	Tilvestillents—Land, Building	s, and Equipme	:II L . 3			•			(-)	.	
	Description of investment				Cost o		(b) Cost or basis (oth		(c) Accumulated depreciation	d (d) i	Book value
1a	Land										0
b I	Buildings										0
c l	Leasehold improvements										0
d I	Equipment						1,93	3,197	1,517,3	07	415,890
e	Other	<u></u>									0
	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>), line	10(c).,)					415,890
									Schedule D	(Form	990) 2010

Part VII Investments—Other Securities. See	Form 990, Part X, line 12		
(a) Description of security or category (including name of security)	(b)Book value		d of valuation -year market value
(1)Financial derivatives		Cost of ella of	year market value
(2)Closely-held equity interests			
Other			
			_
			_
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See		1 13	
			d of valuation
(a) Description of investment type	(b) Book value		-year market value
(1) INVESTMENTS IN SUBSIDIARIES	23,318,784		С
(2) INVESTMENT IN AMERICAN EAGLE	1,519,469		С
(3) INVESTMENT IN SECURE HEALTH PLAN OF			
CENTRAL GA	1,587,017		C
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	, ,		
Part IX Other Assets. See Form 990, Part X, lin			
(a) Descrip	tion		(b) Book value
(1) MISCELLANEOUS RECEIVABLE			155,820
(2) THIRD PARTY MEDICARE SETTLEMENT			385,983
(3) DUE FROM AFFILIATES			8,814,462
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1			9,356,265
Part X Other Liabilities. See Form 990, Part X	, line 25.		
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes	0		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	0		

Par'	XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	41,095,011
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	38,021,442
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	3,073,569
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-453,569
9	Total adjustments (net) Add lines 4 - 8	9	-453,569
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	2,620,000
Part	XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Re	turn
1	Total revenue, gains, and other support per audited financial statements	1	16,261,000
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d 0		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	16,261,000
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 736,660		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	24,834,011
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	41,095,011
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per F	Return
1	Total expenses and losses per audited financial statements	1 1	17,888,000
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	┢┋╅	
a	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV) 2d 0	1	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	17,888,000
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a 736,660		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	20,133,442
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	38,021,442
Par	XIV Supplemental Information		·

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
FIN 48 (ASC 740) footnote		CGHS AND ITS AFFILIATES HAVE EVALUATED THEIR TAX POSITIONS AND HAVE DETERMINED THAT THEY DO NOT HAVE ANY MATERIAL UNRECOGNIZED TAX BENEFITS OR OBLIGATIONS AS OF SEPTEMBER 30, 2011 FISCAL YEARS ENDING ON OR AFTER SEPTEMBER 30, 2008 REMAIN SUBJECT TO EXAMINATION BY FEDERAL AND STATE TAX AUTHORITIES

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OMB No 1545-0047

Open to Public Inspection

SCHEDULE H (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization CENTRAL GEORGIA HEALTH SYSTEMS INC

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

Hospitals

Employer identification number

Pa	Tite Financial Assista	ance and C	ertain Oth	er Community Be		2149127				
	i mariciai 7.0010tt	<u> </u>	ortain our	ici community be	1101110 41 0001			Yes	No	
1a	Did the organization have a fi	nnancıal assı	stance policy	y during the tax year? I	f "No," skip to questio	n 6a .	1a	Yes		
b	If "Yes," is it a written policy	?				[1b	Yes		
2	If the organization has multip assistance policy to its vario				describes application (of the financial				
	Applied uniformly to all hospitals Generally tailored to individual hospitals Applied uniformly to most hospitals									
3	Answer the following based o organization's patients during			nce eligibility criteria t	hat applied to the large	est number of the				
а	Does the organization use Fe income individuals? If "Yes,"						3a	Yes		
		F 20	00% F	Other	1.25 %					
b	Does the organization use FP "Yes," indicate which of the fo	G to determin	ne eligibility f	for providing <i>discounted</i>	d care to low income in	dividuals? If	3b	Yes		
	▽ 200% □ 250%	□ 30	no% –	350% Г 40	0% Cother	0/0		103		
 ✓ 200% ✓ 250% ✓ 300% ✓ 350% ✓ 400% ✓ Other 6 C If the organization does not use FPG to determine eligibility, describe in Part VI the income based criteria for determining eligibility for free or discounted care. Include in the description whether the organization uses an asset test or other threshold, regardless of income, to determine eligibility for free or discounted care. 										
4	Did the organization's financi		•	- '		uring the tax year	4	Yes		
•	provide for free or discounted	care to the "	medically ind	digent"?			•	1 1		
5a	Did the organization budget amount					-	5a	Yes		
b	If "Yes," did the organization		•				5b		No	
	If "Yes" to line 5b, as a resul care to a patient who was elig	gibile for free o	or discounted	d care?	•	r alscounted	5c			
6a Does the organization prepare a community benefit report during the tax year?								Yes		
6b	6b If "Yes," did the organization make it available to the public?									
	Complete the following table worksheets with the Schedule		ksheets prov	rided in the Schedule H	instructions Do not s	ubmit these				
7	Financial Assistance and C	Certain Other	Community I	Benefits at Cost		•				
	Financial Assistance and Means-Tested Government Programs	(a) Number of activities or programs (optional)	(b) Persons served (optional)	(c) Total community benefit expense	(d) Direct offsetting revenue	(e) Net community be expense	enefit	(f) Perc total ex		
а	Financial Assistance at cost (from Worksheets 1 and 2)			494,147	0	494	1,147	1	300 %	
b	Unreimbursed Medicaid (from			205,384	0		5,384		540 %	
с	Worksheet 3, column a) Unreimbursed costs—other means-tested government programs (from Worksheet 3,					20.	,	0		
d	Means-Tested Government								0 % 840 %	
e	Other Benefits Community health improvement services and community benefit operations (from								0 %	
f	(Worksheet 4)			0	0		0			
g	(from Worksheet 5) Subsidized health services			0	0		0		0 %	
h	(from Worksheet 6) Research (from Worksheet 7)			0	0		0		0 %	
i	Cash and in-kind contributions to community groups (from Worksheet 8)			0	0		0		0 %	
-	Total Other Benefits	0	0	0	0		0		0 %	
k '	Total. Add lines 7d and 7j	0	0	699,531	0	699	9,531	1	840 %	

Part II Community Building Activities during the tax year, and describe in Part VI how its community building activities during the tax year, and describe in Part VI how its community building activities promoted the health of the communities it serves. (b) Persons (c) Total community (a) Number of (d) Direct offsetting (e) Net community (f) Percent of served (optional) activities or building expense revenue building expense total expense programs (optional) 0 0 % Physical improvements and housing 0 Economic development 0 % Community support 0 % Environmental improvements 0 % Leadership development and training for community members 0 % 6 Coalition building 0 0 % Community health improvement advocacy 0 % Workforce development 0 0 % 9 Other 0 0 % 10 Total 0 0 0 % **Bad Debt, Medicare, & Collection Practices** Part III Section A. Bad Debt Expense Yes No Did the organization report bad debt expense in accordance with Heathcare Financial Management Association 1 Enter the amount of the organization's bad debt expense (at cost) 91,745 Enter the estimated amount of the organization's bad debt expense (at cost) 3 attributable to patients eligible under the organization's financial assistance policy Provide in Part VI the text of the footnote to the organization's financial statements that describes bad debt expense In addition, describe the costing methodology used in determining the amounts reported on lines 2 and 3, and rationale for including a portion of bad debt amounts as community benefit Section B. Medicare Enter total revenue received from Medicare (including DSH and IME) 12,741,260 5 Enter Medicare allowable costs of care relating to payments on line 5 10.111.123 6 Subtract line 6 from line 5 This is the surplus or (shortfall) 2.630.137 7 Describe in Part VI the extent to which any shortfall reported in line 7 should be treated as community benefit Also describe in Part VI the costing methodology or source used to determine the amount reported on line 6 Check the box that describes the method used Cother Cost to charge ratio Cost accounting system **Section C. Collection Practices** Does the organization have a written debt collection policy? . 9a Yes If "Yes," does the organization's collection policy contain provisions on the collection practices to be followed for Yes patients who are known to qualify for charity care or financial assistance? Describe in Part VI Part IV Management Companies and Joint Ventures (a) Name of entity (b) Description of primary (c) Organization's (d) Officers, directors, (e) Physicians' trustees, or key employees' profit % profit % or stock activity of entity profit % or stock ownership % ownership % or stock ownership% 1 2 3 4 5 6 8 9 10 11 12 13

Part	V Facility Information									
(list in larges	on A. Hospital Facilities order of size, measured by total revenue per facility, from t to smallest)	Licensed hospital	General medical &	Children's hos	Teaching hospital	Critical access hospital	Research facility	ER-24 hours	ER-other	
	nany hospital facilities did the organization operate during x year? 1	ortal	oal & surgical	hospital	ontal	s hospital	ity			
Name	and address									Other (Describe)
1	CENTRAL GA REHABILITATION HOSPITAL INC 3351 NORTHSIDE DRIVE MACON, GA 31210	×								REHABILITATION
		-								
		-								
	1	1						1		

ow many non-nospital facilities did the organization	on operate during the tax year?
ame and address	Type of Facility (Describe)
-	
0	Schedule H (Form 99

Part V Facility Information (continued)

Schedule H (Form 990) 2010 Page 8

Part VI Supplemental Information

Complete this part to provide the following information

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

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

Identifier	ReturnReference	Explanation
Community benefit report prepared by related organization	Schedule H, Part I, Line 6a	MEDICAL CENTER OF CENTRAL GEORGIA

Identifier	ReturnReference	Explanation
Bad Debt Expense excluded from financial assistance calculation	Schedule H, Part I, Line 7, column(f)	0

Identifier	ReturnReference	Explanation
Costing Methodology used to calculate financial assistance	Schedule H, Part I, Line 7	COST TO CHARGE RATIO FROM WORKSHEET 2 LOSS ON MEDICAID IS ACTUAL HOSPITAL TAXES PAID FROM GENERAL LEDGER HOSPITAL NOT ELIGIBLE TO PARTICIPATE IN GEORGIA MEDICAID PROGRAM DUE TO CURRENT RULES RELATED TO REHABILITATION HOSPITAL PARTICIPATION

Identifier	ReturnReference	Explanation
Bad debt expense - financial statement footnote	Schedule H, Part III, Line 4	THE COSTING METHODOLOGY USED IN DETERMINING THE AMOUNT REPORTED ON LINE 7 IS THE COST TO CHARGE RATIO CALCULATED PURSUANT TO THE IRS FORM 990 SCHEDULE H WORKSHEET 2 INSTRUCTIONS FOR THE SINGLE MEMBER LIMITED LIABILITY COMPANY THAT OPERATES THE REHAB FACILITY

Identifier	ReturnReference	Explanation
Collection practices for patients eligible for financial assistance	Schedule H, Part III, Line 9b	ONCE A PATIENT IS DETERMINED TO QUALIFY FOR CHARITY CARE, IT IS NOTED IN THE PATIENT'S FINANCIAL CHART AND ANY COLLECTION EFFORTS CEASE THE CONTROLLER OF THE ORGANIZATION REVIEWS THE FINANCIAL ACTIVITY ON OTHER ACCOUNTS TO DETERMINE IF THE ACCOUNT SHOULD BE TURNED OVER TO OUTSIDE COLLECTIONS IF A PATIENT ACCOUNT TURNED OVER TO COLLECTIONS IS LATER DETERMINED TO QUALIFY AS CHARITY CARE, THE ACCOUNT IS BROUGHT BACK FROM COLLECTIONS AND THE ACCOUNT WRITTEN OFF

Identifier	ReturnReference	Explanation
Needs assessment	Schedule H, Part VI, Line 2	WE HAVE NOT YET PERFORMED A COMMUNITY HEALTH ASSESSMENT WE DO WORK WITH COMMUNITY HEALTH WORKS (A REGIONAL HEALTH PROMOTION ORGANIZATION) TO IMPROVE THE HEALTH IN THE REGION

Identifier	ReturnReference	Explanation
Patient education of eligibility for assistance	Schedule H, Part VI, Line 3	PATIENTS ARE INFORMED OF AVAILABLE ASSISTANCE BY THE FOLLOWING METHOD THE CGRH BUSINESS OFFICE LIAISON OR DESIGNATED PATIENT ACCOUNT REPRESENTATIVE (PAR) WILL INTERVIEW PATIENTS WHO HAVE LITTLE OR NO THIRD PARTY COVERAGE AND WILL REQUEST DOCUMENTS TO SUPPORT THEIR NEED VIA A FINANCIAL DISCLOSURE FORM THE FINANCIAL DISCLOSURE FORM THE FINANCIAL AND ASSETS IN THE DETERMINATION OF PATIENT ABILITY TO PAY

		4
Identifier	ReturnReference	Explanation
Community information	Schedule H, Part VI, Line 4	THE PRIMARY SERVICE AREA IS BIBB, CRAWFORD, HOUSTON, JONES, MONROE, PEACH AND TWIGGS COUNTIES THERE ARE TWENTY-ONE COUNTIES IN THE SECONDARY SERVICE AREA THE CURRENT POPULATION IN THE PRIMARY SERVICE AREA IS 406,725 AND THE SECONDARY SERVICE AREA HAS A POPULATION OF 389,460

Identifier	ReturnReference	Explanation
Promotion of community health	Schedule H, Part VI, Line 5	THE ORGANIZATION IS PART OF A MULTI ENTITY HOSPITAL SYSTEM THAT PROVIDES MEDICAL SERVICES TO THE COMMUNITY THE ORGANIZATION HAS A BOARD COMPRISED OF MEMBERS OF THE COMMUNITY ANY SURPLUS FUNDS ARE USED FOR PROGRAM SERVICES AN EMERGENCY ROOM OPEN 24/7/365 IS AVAILABLE AT OUR SISTER ORGANIZATION, THE MEDICAL CENTER OF CENTRAL GEORGIA, ONE OF 5 LEVEL 1 TRAUMA CENTER'S IN THE STATE OF GEORGIA

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Identifier	ReturnReference	Explanation
Affiliated health care system	Schedule II, Part VI, Line O	PART VI, LINE 7 THE ORGANIZATION IS PART OF CENTRAL GEORGIA HEALTH SYSTEMS, INC , A MULTI- ENTITY HEALTHCARE SYSTEM OTHER ORGANIZATIONS IN THE SYSTEM INCLUDE MEDICAL CENTER OF CENTRAL GEORGIA, INC - A 637 BED HOSPITAL FACILITY THAT IS DESIGNATED AS A LEVEL 1 TRAUMA CENTER AND MAGNET HOSPITAL FOR NURSING HEALTH SERVICES OF CENTRAL GEORGIA, INC - PROVIDES FACULTY PHYSICIANS TO THE RESIDENCY TRAINING PROGRAMS OF THE MEDICAL CENTER OF CENTRAL GEORGIA AS WELL AS OTHER PHYSICIANS, NURSE PRACTITIONERS, AND PHYSICIAN ASSISTANTS CENTRAL GEORGIA SENIOR HEALTH, INC - A CONTINUING CARE RETIREMENT COMMUNITY (CCRC) OFFERS INDEPENDENT LIVING, ASSISTED LIVING, MEMORY SUPPORT AND SKILLED NURSING MEDCEN FOUNDATION, INC -PROVIDES FUNDRAISING AND SUPPORT FOR CENTRAL GEORGIA HEALTH SYSTEMS, INC AND ITS AFFILIATES

Identifier	ReturnReference	Explanation
	Schedule H, Part VI, Line 7	GA
report		

Identifier	ReturnReference	Explanation
FEDERAL POVERTY GUIDELINES	PART I, LINE 3C	TOTAL GROSS INCOME FOR THE PREVIOUS THREE MONTHS WILL BE USED TO DETERMINE ANNUAL INCOME PATIENT CLASSIFICATIONS WILL BE DETERMINED IN ACCORDANCE WITH THE MCCG SLIDING SCALE FOR INDIGENT/CHARITY PATIENTS THIS SCALE HAS BEEN ADOPTED BY CGRH AND WAS BASED ON THE MOST RECENTLY PUBLISHED FEDERAL POVERTY GUIDELINES

Identifier	ReturnReference	Explanation
RELATED ORGANIZATION	PART I, LINE 6A	THE COMMUNITY BENEFIT INFORMATION FOR CENTRAL GEORGIA REHABILIATION HOSPITAL, INC IS INCLUDED IN THE MEDICAL CENTER OF CENTRAL GEORGIA'S ANNUAL REPORT TO THE COMMUNITY

Identifier	ReturnReference	Explanation
COST TO CHARGE RATIO	PART I, LINE /	THE COSTING METHODOLOGY USED IN DETERMINING THE AMOUNT REPORTED ON LINE 7 IS THE COST TO CHARGE RATIO CALCULATED PURSUANT TO THE IRS FORM 990 SCHEDULE H WORKSHEET 2 INSTRUCTIONS

Identifier	ReturnReference	Explanation
BAD DEBT	PARI I, LINE / F	BAD DEBT EXPENSE IN THE AMOUNT OF \$96,427 HAS BEEN REMOVED FROM TOTAL EXPENSE

Schedule H (Form 990) 2010

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Part I General Information on Grants and Assistance

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

► Attach to Form 990

OMB No 1545-0047

DLN: 93493234007042

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization CENTRAL GEORGIA HEALTH SYSTEMS INC Employer identification number

58-2149127

Form 990, Part I	V, line 21 for any	o Governments and recipient that received eded	d more than \$5,000.	Check this box if no	one recipient rec	ceived more than \$5,0	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
1) AMERICAN CANCER SOCIETYPO BOX 4406 MACON,GA 31208	58-0659875	501(C)(3)	6,400				TO PROMOTE CANCER AWARENESS
2) EDUCATION FIRST577 MULBERRY ST SUITE 1030 MACON,GA 31201	31-1815650	501(C)(3)	6,000				CHILDREN EDUCATION AND RECOGNITION
3) SUSAN G KOMEN BREAST CANCER INC248 TOM HILL SR BLVD MACON,GA 31210	75-2881536	501(C)(3)	10,000				RACE FOR THE CURE- BREAST CANCER AWARENESS
4) COMMUNITY HEALTH WORKS300 MULBERRY ST STE 603 MACON,GA 31201	58-2624455	501 (C)(3)	40,000				CONTINUING ED , CHILDHOOD OBESITY & TRAINING

Part III	Grants and Other Assistance to Individuals in the United States. Com	nlete if the organization answered	"Yes" to Form 990	Part IV line 22
dic 111	Use Schedule I-1 (Form 990) if additional space is needed.	nete ii the organization answered	163 (6) (6)	1 are 14, mie 22.

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
Procedures for monitoring	Schedule I, Part I, Line 2	CGHS REQUIRES ALL ORGANIZATIONS THAT RECEIVE SPONSORSHIPS TO PROVIDE PROOF OF THEIR NON
use of grant funds		PROFIT STATUS

Compensation Information

DLN: 93493234007042

OMB No 1545-0047

Open to Public Inspection

Schedule J

(Form 990)

Department of the Treasury Internal Revenue Service

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

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Name of the organization **Employer identification number** CENTRAL GEORGIA HEALTH SYSTEMS INC 58-2149127 Part Ouestions Regarding Compensation

				Yes	Νο
1 a	Check the appropriate box(es) if the organization provided any of 990, Part VII, Section A, line 1a Complete Part III to provide a				
	First-class or charter travel	using allowance or residence for personal use			
		ments for business use of personal residence			
	<u>. </u>	alth or social club dues or initiation fees			
	Discretionary spending account Per	rsonal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization for reimbursement orprovision of all the expenses described above?		1b		
2	Did the organization require substantiation prior to reimbursing officers, directors, trustees, and the CEO/Executive Director, re	<u> </u>	2		
3	Indicate which, if any, of the following the organization uses to exorganization's CEO/Executive Director Check all that apply	stablish the compensation of the			
		tten employment contract			
		mpensation survey or study			
	Form 990 of other organizations	proval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Seor a related organization	ction A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control payment fro	m the organization or a related organization?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?				
C	Participate in, or receive payment from, an equity-based compet	nsation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the ap	plicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete	lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did compensation contingent on the revenues of	the organization pay or accrue any			
a	The organization?		5a		Νo
b	Any related organization?		5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in form 990, Part VII, Section A, line 1a, did compensation contingent on the net earnings of	the organization pay or accrue any			
а	The organization?		6a		No
b	Any related organization?		6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A, line 1a, did payments not described in lines 5 and 6? If "Yes," describe in P		7	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or accur subject to the initial contract exception described in Regs secti in Part III		8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable section 53 $4958\text{-}6(c)\mbox{?}$	presumption procedure described in Regulations	9		

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

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

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

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form 990 or Form 990-EZ	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)		
(1) A DONALD FAULK JR	(I) (II)	705,046 0	210,066 0	7,025,200 0	50,716 0	10,684 0	8,001,712 0		
(2) KENNETH B BANKS	(I) (II)	300,047 0	62,041 0	42,163 0	397,030 0	14,397 0	815,678 0		
(3) RHONDA S PERRY	(ı) (ıı)	413,105 0	111,218 0	28,155 0	1,676,164 0	4,931 0	2,233,573		
(4) ELBERT T MCQUEEN	(ı) (ıı)	206,284 0	48,800 0	21,039 0	20,196 0	8,120 0	304,439 0		
(5) HARRIS BRYAN FORLINES	(I) (II)	121,659 0	15,245 0	5,276 0	7,673 0	8,362 0	158,215		
(6) KAREN M FARR	(I) (II)	158,833 0	22,463 0	431 0	27,509 0	582 0	209,818		
(7) KATHERINE L BOWEN	(I) (II)	153,173 0	21,539 0	37 0	13,191 0	11,241 0	199,181 0		
(8) TRACY GRAY	(ı) (ıı)	142,233 0	17,771 0	8,346 0	11,403 0	3,368 0	183,121		
(9) LORI W CASSIDY	(I) (II)	180,176 0	22,735 0	8,823 0	22,862 0	8,362 0	242,958		
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
	Part I, Line 4b	EMPLOYER PAYMENT FROM 457(F) EXECUTIVE SUPPLEMENTAL RETIREMENT PLAN DON FAULK \$6,945,614 MCCG HAD A SUPPLEMENTAL EXECUTIVE BENEFIT PROGRAM ("SEBP") FOR CERTAIN EXECUTIVES THAT WAS DESIGNED AS A LOAN REGIME SPLIT DOLLAR LIFE INSURANCE PROGRAM THIS PROGRAM WAS EXPECTED TO PROVIDE DEATH AND OTHER BENEFITS TO EXECUTIVES AND TO PROVIDE REPAYMENT OF LIFE INSURANCE PREMIUMS TO THE ORGANIZATION AS A RESULT OF ECONOMIC CONDITIONS, THE LIFE INSURANCE POLICIES DID NOT PERFORM AS ANTICIPATED DURING 2009 MCCG DETERMINED THAT IT WOULD SUSPEND ALL PREMIUM PAYMENTS AND REEVALUATE THE EFFECTIVENESS OF THE PROGRAM FOR ALL CURRENT PARTICIPANTS DURING CALENDAR YEAR 2009 THE MCCG BOARD OF DIRECTORS, AFTER CONSULTATION WITH COMPENSATION AND LEGAL ADVISERS, ADOPTED A RESOLUTION TO MAKE PAYMENTS TO THE RETIRED PARTICIPANTS IN THE SEBP IN WITH COMPENSATION FOR THE RECEIPT OF SUCH PAYMENT, THE RETIRED EXECUTIVES SURRENDERED SUBSTANTIALLY ALL RIGHTS AND BENEFITS (OTHER THAN A SMALL DEATH BENEFIT) UNDER THE SEBP TO THE ORGANIZATION SUBSEQUENTLY, A SIMILAR DECISION WAS MADE FOR THE CURRENT (EMPLOYED) PARTICIPANTS WITH ANY PAYMENTS TO BE MADE DEPENDENT ON THE INDIVIDUAL CONTINUING TO PROVIDE SUBSTANTIAL SERVICES TO A SPECIFIED FUTURE DATE IN ADDITION, MCCG AND ITS AFFILIATED ORGANIZATIONS ADOPTED A SERP PROGRAM FOR CERTAIN EXECUTIVES EFFECTIVE FOR SERVICES RENDERED ON OR AFTER JANUARY 1, 2010 THIS PROGRAM PROVIDES FOR ANNUAL ACCOUNT VESTING IF THE PARTICIPANT IS EMPLOYED ON DECEMBER 31 OF THE THIRD YEAR AFTER THE ACCOUNT IS CREATED THE BENEFIT EQUALS THE ANNUAL INCREASE IN THE PRESENT VALUE OF A LIFETIME ANNUITY PAYABLE COMMENCING AT A SPECIFIED TARGETED FUTURE DATE THE ANNUAL IS EQUAL TO 60% OF FINAL AVERAGE EARNINGS LESS (1) THE EXPECTED ANNUAL SEBP PAYMENT USED IN CALCULATING THE SEBP LUMP SAYMENT, (2) THE ANNUAL BENEFIT PROVIDED UNDER THE DEFINED BENEFIT PLAN, AND (3) 100% OF THE PARTICIPANT'S SOCIAL SECURITY BENEFIT AN ACTUARIAL CACULATION HAS NOT YET BEEN MADE FOR THESE BENEFITS
	Part I, Line 7	THIS PROGRAM IS ADMINISTERED BY THE CEO A BUDGET FOR THE PROGRAM IS ESTABLISHED FOR REWARD AND RECOGNITION OF EXECUTIVES AND ORGANIZATIONAL LEADERS WHO GO ABOVE AND BEYOND THE SCOPE OF THEIR RESPONSIBILITIES FOR EXAMPLE, THEY MAY COMPLETE A PROJECT, LEAD AN ORGANIZATIONAL INITIATIVE, OR EXCELLENCE, OUR PEOPLE, GROWTH, FINANCIAL PERFORMANCE NEAR THE END OF THE FISCAL ORGANIZATIONAL PILLARS - QUALITY, SERVICE EXCELLENCE, OUR PEOPLE, GROWTH, FINANCIAL PERFORMANCE NEAR THE END OF THE FISCAL YEAR, NOMINATIONS ARE SOLICITED FROM THE LEADERSHIP TEAM A PROPOSED FOR ALLOCATION OF THE AWARD IS DEVELOPED AND PRESENTED TO THE HR COMMITTEE OF THE BOARD FOR REVIEW, DISCUSSION, AND APPROVAL (PRIOR TO DISTRIBUTION) IN ADDITION, A MANAGMENT INCENTIVE PLAN IS OFFERED TO CERTAIN KEY MEMBERS OF MANAGEMENT TO REWARD QUALITY PATIENT CARE AND OPTIMUM UTILIZATION OF FINANCIAL RESOURCES ELIGIBILITY TO PARTICIPATE IN THE PLAN IS DEPENDENT ON RECOMMENDATIONS BY THE ASSISTANT VICE PRESIDENT OF HUMAN RESOURCES AND THE CEO OF CENTRAL GEORGIA HEALTH SYSTEMS AN INCENTIVE COMMITTEE SELECTS THE PARTICIPANTS WHO MUST HOLD DIRECTOR OR ASSISTANT VICE PRESIDENT POSITIONS THESHOLD PERFORMANCE LEVELS FOR THE SYSTEM AND INDIVIDUAL PERFORMANCE GOALS MUST BE MET TO RECEIVE AN INCENTIVE NET OPERATING MARGIN IS USED AS A CIRCUIT BREAKER TO PREVENT ANY PAYMENTS IF FINANCIAL PERFORMANCE IS BELOW AN ESTABLISHED THRESHOLD IN ORDER TO PROTECT THE FINANCIAL INTEGRITY OF THE SYSTEM FINALLY, AN INCENTIVE OF UP TO \$500 IS OFFERED TO OTHER PERMANENT AND PART TIME EMPLOYESS NOT ELIGIBLE FOR THE MANAGEMENT INCENTIVE PLAN (WITH CERTAIN OTHER PARTICIPATION RESTRICTIONS RELATED PRIMARILY TO ACTIVE STATUS, PROBATIONARY STATUS, ETC.)

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SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

Form 990 or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Name of the organization CENTRAL GEORGIA HEALTH SYSTEMS INC **Employer identification number**

58-2149127

ldentifier	Return Reference	Explanation
Review of form 990 by governing body	VI, Section B,	THE FORM 990 WAS PREPARED BY HOSPITAL PERSONNEL FROM INFORMATION PROVIDED BY MANAGEMENT AND FROM AUDITED FINANCIAL STATEMENTS (AUDITED BY AN INDEPENDENT ACCOUNTANT) IT IS REVIEWED BY OUR OUTSIDE TAX ADVISOR (ANOTHER INDEPENDENT CPA) AND BY MANAGEMENT OF CENTRAL GEORGIA HEALTH SYSTEMS A COPY OF THE FORM 990 WAS PROVIDED TO EACH BOARD MEMBER PRIOR TO FILING THE RETURN WITH THE INTERNAL REVENUE SERVICE

ldentifier	Return Reference	Explanation
Conflict of interest policy	Form 990, Part VI, Section B, Line 12c	THE DEPARTMENT OF AUDIT AND COMPLIANCE ISSUES COL DISCLOSURE FORMS ANNUALLY TO OUR BOARD MEMBERS, ADMINISTRATION AND DIRECTORS AUDIT AND COMPLIANCE RECEIVES, REVIEWS AND DOCUMENTS ALL POTENTIAL CONFLICTS (PERCEIVED AND REAL) THE RESULTS ARE TAKEN TO THE COMPLIANCE COMMITTEE WHERE THE REAL CONFLICTS OF INTEREST ARE DISCUSSED AND A PLAN FOR CORRECTIVE ACTION IS DEVELOPED THE CORRECTIVE ACTION RECOMMENDATIONS ARE TAKE TO THE VARIOUS BOARDS AND ADMINISTRATION FOR IMPLEMENTATION ANY TIME A CHANGE IN A RELATIONSHIP OR NEW POTENTIAL CONFLICT EVOLVES, THE INDIVIDUAL MUST AMEND THEIR COI DISCLOSURE FORM

ldentifier	Return Reference	Explanation
Process used to establish compensation of top management official	Form 990, Part VI, Section B, Line 15a	THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS ENGAGES AN EXECUTIVE CONSULTING FIRM EVERY 2-3 YEARS TO REVIEW AND PROVIDE RECOMMENDATIONS REGARDING TOTAL COMPENSATION AND BENEFITS FOR THE EXECUTIVE LEADERSHIP TEAM BASE COMPENSATION, INCENTIVE COMPENSATION, AND BENEFITS ARE INCLUDED IN THE REVIEW THE EXECUTIVE CONSULTANTS REVIEW ORGANIZATION STRUCTURE, INDIVIDUAL JOB DESCRIPTIONS, AND DISCUSS SCOPE OF LEADERSHIP AND SPAN OF CONTROL WITH HR, THE COO, AND THE CEO AS A PART OF THE PROCESS TO DETERMINE PROPER PLACEMENT OF THE PAY GRADE AND LEVEL OF PARTICIPATION IN INCENTIVE AND BENEFITS PROGRAMS THE COMPENSATION COMMITTEE PERIODICALLY REAFFIRMS THE TOTAL COMPENSATION PHILOSOPHY WHICH CURRENTLY TARGETS THE 75TH PERCENTILE OF TOTAL COMPENSATION FOR OUR LEADERSHIP TEAM THE PEER GROUP USED IS NATIONAL HOSPITALS AND HEALTH SYSTEMS OF SIMILAR SIZE AND SCOPE KEY EMPLOYEES AND OTHERS OUTSIDE OF THE EXECUTIVE LEADERSHIP TEAM HAVE COMPENSATION SET BY HR GUIDELINES AND/OR MARKET COMPENSATION STUDIES

ldentifier	Return Reference	Explanation
Process used to establish compensation of other officers/key employees	Form 990, Part VI, Section B, Line 15b	THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS ENGAGES AN EXECUTIVE CONSULTING FIRM EVERY 2-3 YEARS TO REVIEW AND PROVIDE RECOMMENDATIONS REGARDING TOTAL COMPENSATION AND BENEFITS FOR THE EXECUTIVE LEADERSHIP TEAM BASE COMPENSATION, INCENTIVE COMPENSATION, AND BENEFITS ARE INCLUDED IN THE REVIEW THE EXECUTIVE CONSULTANTS REVIEW ORGANIZATION STRUCTURE, INDIVIDUAL JOB DESCRIPTIONS, AND DISCUSS SCOPE OF LEADERSHIP AND SPAN OF CONTROL WITH HR, THE COO, AND THE CEO AS A PART OF THE PROCESS TO DETERMINE PROPER PLACEMENT OF THE PAY GRADE AND LEVEL OF PARTICIPATION IN INCENTIVE AND BENEFITS PROGRAMS THE COMPENSATION COMMITTEE PERIODICALLY REAFFIRMS THE TOTAL COMPENSATION PHILOSOPHY WHICH CURRENTLY TARGETS THE 75TH PERCENTILE OF TOTAL COMPENSATION FOR OUR LEADERSHIP TEAM THE PEER GROUP USED IS NATIONAL HOSPITALS AND HEALTH SYSTEMS OF SIMILAR SIZE AND SCOPE KEY EMPLOYEES AND OTHERS OUTSIDE OF THE EXECUTIVE LEADERSHIP TEAM HAVE COMPENSATION SET BY HR GUIDELINES AND/OR MARKET COMPENSATION STUDIES

ldentifier	Return Reference	Explanation
Public Disclosure	Form 990, Part VI, Section C, Line 19	CGHS PROVIDES COPIES OF ITS GOVERNING AND OTHER CORPORATE DOCUMENTS UPON REQUEST

ldentifier	Return Reference	Explanation
Other changes in net assets or fund balances	Form 990, Part XI, Line 5	EQUITY FROM THE MEDICAL CENTER OF CENTRAL GEORGIA - 4246618, ROUNDING5, TAX OVER BOOK PARTNERSHIP INCOME4701125,

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

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Schedule R (Form 990) 2010

DLN: 93493234007042

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization
CENTRAL GEORGIA HEALTH SYSTEMS INC

58-2149127

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (sta	(d) ate Total income	(e) End-of-year asset:		Direct controlling		
		or foreign country	′'		entity			
(1) CENTRAL GA REHAB HOSPITAL LLC 3351 NORTHSIDE DRIVE MACON, GA 31210 30-0371539	REHABILITATION SERVICES	GA GA	16,394,81	9 14,095,	, ₂₂₅ NA			
Part II Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during		f the organization	answered "Yes" o	n Form 990, Part	IV, line 34 becaus	e it had	one	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 conti organ	rolled lization	
(1) CENTRAL GEORGIA SENIOR HEALTH INC						Yes	No	
691 CHERRY STREET SUTIE 400	RETIREMENT COMMUNITY	GA	501(C)(3)	11 - Type II	CENTRAL GEORGIA HEALTH SYSTEMS	Yes		
MACON, GA 31201 58-2345439	KETKEHENT COMMONITY	GA .	301(0)(3)	т турсп	THEALTH STSTEMS			
(2) HEALTH SERVICES OF CENTRAL GEORGIA INC					CENTRAL CEORGIA			
691 CHERRY STREET SUTIE 400 MACON, GA 31201	HEALTHCARE SERVICES	GA	501(C)(3)	3	CENTRAL GEORGIA HEALTH SYSTEMS	Yes		
58-2307485 (3) MEDCEN COMMUNITY HEALTH FOUNDATION INC							 	
858 HIGH STREET				_	NA NA			
MACON, GA 31201 23-7363555	FUNDRAISING	GA GA	501(C)(3)	7			No	
(4) MEDICAL CENTER OF GEORGIA INC						+	1	
691 CHERRY STREET SUTIE 400	HOSPITAL	GA	501(C)(3)	3	CENTRAL GEORGIA HEALTH SYSTEMS	Yes		
MACON, GA 31201 58-2149128			(), (

Cat No 50135Y

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 3
	because it had one or more related organizations treated as a partnership during the tax year.)

_												
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h Disprop allocat	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gene mana parti	ral or aging	(k) Percentage ownership
							Yes	No		Yes	No	
(1) CENTRAL GEORGIA PET LLC 1650 HARDEMAN AVENUE MACON, GA31201 37-1464470	MEDICAL IMAGING CENTER		MEDICAL CENTER OF CENTRAL GEORGIA INC	RELATED				No			No	
(2) SECURE HEALTH PLANS OF GEORGIA INC 577 MULBERRY STREET SUITE 1000 MACON, GA31201 58-2306549	MANAGED CARE	GA	NA	RELATED	236,380	3,231,845		No			No	50 388 %
Part IV Identif	fication of Relat	ted Ord	anizations Tay	able as a Corno	ration or Trust	Complete if the i	organi	ızatıon	answered "Yes"	on Fo	rm 9	90 Part IV

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

(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
MANAGEMENT	GA	NA	C CORPORATION	4,161,889	8,403,935	1 00 %
MED EQUP SALE	GA	NA	C CORPORATION	1,191,097	0	1 00 %
RISK MGMT	VT	NA	C CORPORATION	0	0	95 %
INSURANCE	СЈ	NA	C CORPORATION	9,868,209	94,712,191	1 00 %
	Primary activity MANAGEMENT MED EQUP SALE RISK MGMT	Primary activity Legal domicile (state or foreign country) MANAGEMENT GA MED EQUP SALE GA RISK MGMT VT	Primary activity Legal domicile (state or foreign country) MANAGEMENT GA NA MED EQUP SALE GA NA NA NA NA NA	Primary activity Legal domicile (state or foreign country) MANAGEMENT GA NA C CORPORATION MED EQUP SALE GA NA C CORPORATION NA C CORPORATION NA C CORPORATION NA RISK MGMT VT NA C CORPORATION	Primary activity Legal domicile (state or foreign country) MANAGEMENT GA NA C CORPORATION 1,191,097 RISK MGMT VT Direct controlling entity (C corp, S corp, or trust) Share of total income C CORPORATION 4,161,889 C CORPORATION 1,191,097	Primary activity Legal domicile (state or foreign country) MANAGEMENT GA NA C CORPORATION 1,191,097 NA RISK MGMT VT NA Direct controlling entity (C corp, S corp, or trust) Type of entity (C corp, S corp, or trust) Share of total income end-of-year assets Share of total income end-of-year assets Share of total income end-of-year assets C CORPORATION 4,161,889 8,403,935

(6)

Par	5 V	ransactions with Related Organizations (Complete ii the organization answered Tes	on Form 990, Par	t iv, line 34, 35, 3	5A, OF 36.)		
	Note.	Complete line 1 if any entity is listed in Parts II, III or IV				Yes	No
1 Du	ring th	e tax year, did the orgranization engage in any of the following transactions with one or more related organi	zations listed in Parts	s II-IV?			
а	Receip	ot of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1a		No
b	Gıft, g	rant, or capital contribution to other organization(s)			1b		No
C	Gıft, gı	rant, or capital contribution from other organization(s)			1 c	Yes	
d	Loans	or loan guarantees to or for other organization(s)			1d	Yes	
е	Loans	or loan guarantees by other organization(s)			1e	Yes	
f :	Sale o	fassets to other organization(s)			1f		No
g	Purch	ase of assets from other organization(s)			1 g		No
h	Excha	nge of assets			1h		No
i l	.ease	of facilities, equipment, or other assets to other organization(s)			1 i		No
j l	ease	of facilities, equipment, or other assets from other organization(s)			1 j		
k	Perfor	mance of services or membership or fundraising solicitations for other organization(s)			1k		No
I F	erforr	nance of services or membership or fundraising solicitations by other organization(s)			11		No
m :	Sharın	g of facilities, equipment, mailing lists, or other assets			1n	1 Yes	
n	Sharın	g of paid employees			1n	Yes	
0	Reımb	ursement paid to other organization for expenses			10	Yes	
р	Reımb	ursement paid by other organization for expenses			1p	Yes	<u> </u>
q	O ther	transfer of cash or property to other organization(s)			1q		
r (Other	transfer of cash or property from other organization(s)			1r	Yes	
2	fthea	answer to any of the above is "Yes," see the instructions for information on who must complete this line, inc	cluding covered relati	onships and transact	ion thresholds		
		(a)	(b) Transaction	(c)	(d) Method of determi	nına əm	ount
		Name of other organization	type(a-r)	Amount involved	involve		<u></u>
(1)							
	ıtıonal [Data Table					
(2)							
(2)							
(3)							
(4)							
(4)							
(5)					<u> </u>		
(5)							

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

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

(a) Name, address, and EIN of entity	(b) Primary activity Legal domicile (state or foreign partners end-of-year section sold) country) section assets 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproprtionate allocations? (g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)			(h) Genera manag partne			
			Yes	No		Yes	No		Yes	No
			+						+	-
			-				\vdash		+	╁
									+	-
										+
										┢
			+							
			<u> </u>							

Part VII Supplemental Information

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

Identifier	Return Reference	Explanation
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Schedule R (Form 990) 2010

Software ID: 10000128 **Software Version:** v2010.1.0 **EIN:** 58-2149127

Name: CENTRAL GEORGIA HEALTH SYSTEMS INC

	990, Schedule R, Part V - Transactions With Related Organizations (a) Name of other organization	(b) Transaction type(a-r)	(c) A mount Involved (\$)	(d) Method of determining amount involved
(1)	MEDICAL CENTER OF CENTRAL GEORGIA INC	0	15,220,091	
(2)	MEDICAL CENTER OF CENTRAL GEORGIA INC	С	4,285,770	
(3)	MEDICAL CENTER OF CENTRAL GEORGIA INC	J	1,300,000	·
(4)	MEDICAL CENTER OF CENTRAL GEORGIA INC	Р	90,780	-
(5)	CENTRAL GEORGIA HOME CARE SERVICES	P	135,712	·
(6)	MEDICAL CENTER OF CENTRAL GEORGIA INC	P	18,204,295	
(7)	CENTRA PROFESSIONAL INDEMNITY	R	7,450,010	
(8)	MEDICAL CENTER OF CENTRAL GEORGIA	R	8,520,432	
(9)	CENTRA PROFESSIONAL INDEMNITY	Q	8,520,432	
(10)	CENTRAL GEORGIA HEALTH SYSTEMS INC	R	76,659	
(11)	CENTRAL GEORGIA SENIOR HEALTH INC	R	180,606	
(12)	CENTRA PROFESSIONAL INDEMNITY	Q	180,606	
(13)	HEALTH SERVICES OF CENTRAL GEORGIA INC	R	1,367,445	
(14)	CENTRA PROFESSIONAL INDEMNITY	Q	1,367,445	·
(15)	CENTRAL GEORGIA REHABILITATION SERVICES	R	122,652	
(16)	CENTRA PROFESSIONAL INDEMNITY	Q	122,652	
(17)	MEDICAL CENTER OF CENTRAL GEORGIA INC	J	57,756	
(18)	CENTRAL GEORGIA PET LLC	I	57,756	·
(19)	MEDICAL CENTER OF CENTRAL GEORGIA INC	Q	964,000	
(20)	CENTRAL GEORGIA PET LLC	R	964,000	
(21)	MEDICAL CENTER OF CENTRAL GEORGIA INC	0	342,666	
(22)	CENTRAL GEORGIA PET LLC	P	342,666	
(23)	MEDICAL CENTER OF CENTRAL GEORGIA INC	R	102,020	
(24)	SECURE HEALTH	Q	102,020	
(25)	CENTRA PROFESSIONAL INDEMNITY	P	1,505,341	
(26)	MEDICAL CENTER OF CENTRAL GEORGIA INC	0	1,505,341	
(27)	HEALTH SERVICES OF CENTRAL GEORGIA INC	P	17,752,533	
(28)	MEDICAL CENTER OF CENTRAL GEORGIA INC	0	17,752,533	
(29)	HEALTH SERVICES OF CENTRAL GEORGIA INC	P	630,218	
(30)	MEDICAL CENTER OF CENTRAL GEORGIA INC	0	630,218	
4			1	

Form 990, Schedule R, Part V - Transactions With Related Organizations

Form 9	90, Schedule R, Part V - Transactions With Related Organizations			
	(a) Name of other organization	(b) Transaction type(a-r)	(c) A mount Involved (\$)	(d) Method of determining amount involved
(31)	HEALTH SERVICES OF CENTRAL GEORGIA INC	0	31,238,580	
(32)	MEDICAL CENTER OF CENTRAL GEORGIA INC	Р	31,238,580	
(33)	HEALTH SERVICES OF CENTRAL GEORGIA INC	0	2,887,503	
(34)	MEDICAL CENTER OF CENTRAL GEORGIA INC	Р	2,887,503	
(35)	MEDICAL CENTER OF CENTRAL GEORGIA INC	С	16,535,613	
(36)	HEALTH SERVICES OF CENTRAL GEORGIA INC	В	16,535,613	
(37)	MEDICAL CENTER OF CENTRAL GEORGIA INC	J	630,909	
(38)	HEALTH SERVICES OF CENTRAL GEORGIA INC	I	630,909	
(39)	MEDICAL CENTER OF CENTRAL GEORGIA INC	F	99,935	
(40)	HEALTH SERVICES OF CENTRAL GEORGIA INC	G	99,935	
(41)	MEDICAL CENTER OF CENTRAL GEORGIA INC	I	62,127	
(42)	HEALTH SERVICES OF CENTRAL GEORGIA INC	J	62,127	
(43)	MEDCEN FOUNDATION INC	Р	1,276,683	
(44)	MEDICAL CENTER OF CENTRAL GEORGIA INC	0	1,276,683	
(45)	MEDCEN FOUNDATION INC	I	53,872	
(46)	MEDICAL CENTER OF CENTRAL GEORGIA INC	J	53,872	
(47)	MEDCEN FOUNDATION INC	В	1,330,555	
(48)	MEDICAL CENTER OF CENTRAL GEORGIA INC	С	1,330,555	
(49)	CENTRAL GEORGIA SENIOR HEALTH INC	0	531,724	
(50)	MEDICAL CENTER OF CENTRAL GEORGIA INC	Р	531,724	
(51)	CENTRAL GEORGIA SENIOR HEALTH INC	Р	515,294	
(52)	MEDICAL CENTER OF CENTRAL GEORGIA INC	0	515,294	
(53)	CENTRAL GEORGIA HEALTH VENTURES INC	0	167,978	
(54)	MEDICAL CENTER OF CENTRAL GEORGIA INC	Р	167,978	
(55)	CENTRAL GEORGIA HOME CARE SERVICES INC	Р	2,593,357	
(56)	MEDICAL CENTER OF CENTRAL GEROGIA INC	0	2,593,357	
(57)	MEDICAL CENTER OF CENTRAL GEROGIA INC	J	88,246	
(58)	CENTRAL GEORGIA HOME CARE SERVICES INC	I	88,246	
(59)	CENTRAL GEORGIA HOME CARE SERVICES INC	N	256,836	
(60)	MEDICAL CENTER OF CENTRAL GEROGIA INC	N	256,836	

Form 990, Schedule R, Part V - Transactions With Related Organizations

	(a) Name of other organization	(b) Transaction type(a-r)	(c) A mount Involved (\$)	(d) Method of determining amount involved
(61)	CENTRAL GEORGIA HOME CARE SERVICES INC	0	2,823,283	
(62)	MEDICAL CENTER OF CENTRAL GEROGIA INC	Р	2,823,283	

CENTRAL GEORGIA HEALTH SYSTEMS, INC. AND AFFILIATES

Consolidated Financial Statements and Supplemental Information

for the

Years Ended September 30, 2011 and 2010

(with Independent Auditors' Report thereon)

CENTRAL GEORGIA HEALTH SYSTEMS, INC. AND AFFILIATES

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September 30, 2011 and 2010

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Independent Auditors' Report

The Board of Directors Central Georgia Health Systems. Inc. and Affiliates Macon, Georgia

We have audited the accompanying consolidated balance sheets of Central Georgia Health Systems. Inc (dba Central Georgia Health System) and Affiliates ("CGHS") as of September 30, 2011 and 2010, and the related consolidated statements of operations, changes in net assets, and cash flows for the years then ended. These consolidated financial statements are the responsibility of CGHS's management. Our responsibility is to express an opinion on these consolidated financial statements based on our audits. We did not audit the financial statements of Medcen Community. Health Foundation. Inc. ("Medcen") or Centra Professional Indemnity. Ltd. ("CPI"), which are consolidated affiliates. Medcen and CPI had total assets of approximately \$60,935,000 and \$94,712,000, respectively, as of September 30, 2011, and total revenues of \$3,099,000 and \$9,868,000, respectively, for the year ended September 30, 2010. Medcen and CPI had total assets of approximately \$59,670,000 and \$97,286,000, respectively, as of September 30, 2010. Those statements were audited by other auditors whose reports have been furnished to us. Our opinion, insofar as it relates to data included for MedCen and CPI, consolidated affiliates, is based solely on the reports of other auditors.

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

In our opinion, based on our audits and the reports of other auditors, the consolidated financial statements referred to above present fairly, in all material respects, the consolidated financial position of Central Georgia Health Systems. Inc. and Affiliates at September 30, 2011 and 2010, and the consolidated results of their operations, changes in their net assets, and their cash flows for the years then ended, in conformity with accounting principles generally accepted in the United States.

As discussed in note 2 to the consolidated financial statements. Central Georgia Health Systems, Inc. adopted a new accounting principle generally accepted in the United States for noncontrolling interest in its subsidiaries during the year ended September 30, 2011

Dixon Hughes Goodman LLP

Atlanta, Georgia January 27, 2012



Consolidated Balance Sheets (dollars in thousands)

September 30, 2011 and 2010

<u>Assets</u>	<u>2011</u>			<u>2010</u>		
Current assets						
Cash and cash equivalents	\$	62,089	\$	63,279		
Short-term investments		564,602		558,495		
Patient accounts receivable, less allowance for						
uncollectible accounts of \$33,198 and \$38,192						
in 2011 and 2010, respectively		131,600		121,468		
Third-party settlements		386		7,473		
Other accounts and notes receivable		9,503		15,020		
Prepaid expenses and other current assets		10,572		11,326		
Total current assets		778,752		777,061		
Assets limited as to use		158,413		161,510		
Long-term investments		15,229		9,745		
Property and equipment, net		393,288		387,904		
Cash surrender value of insurance policies		18,521		19,565		
Other		5,794		5,360		
Total assets	\$	1,369,997	\$	1,361,145		

Liabilities and Net Assets		<u>2011</u>	<u>2010</u>		
Current liabilities					
Accounts payable and accrued expenses	\$	25,208	\$	28,400	
Accrued compensation and withholdings		31,720		37,206	
Entrance fee deposits and refunds payable		1,128		390	
Estimated third-party settlements		5,164		-	
Other current liabilities		14,762		28,019	
Current portion of long-term debt		4,695		10,090	
Total current liabilities		82,677		104,105	
Long-term debt, excluding current portion		186,547		191,223	
Reserve for self-insured losses		51,817		44,590	
Accrued pension benefit liability		106,442		72,453	
Deferred revenue from entrance fees		36,398		36,938	
Other long-term liabilities		41,550		36,781	
Asset retirement obligation		3,716		4,218	
Total liabilities		509,147		490,308	
Net assets					
Unrestricted		802,086		813,344	
Temporarily restricted		54,400		53,203	
Total net assets excluding noncontrolling interest		856,486		866,547	
Noncontrolling interest in subsidiaries		4,364		4.290	
Total net assets		860,850		870,837	
Total liabilities and net assets	\$	1,369,997	\$	1,361,145	

Consolidated Statements of Operations (dollars in thousands)

For the Years Ended September 30, 2011 and 2010

	<u>2011</u>	<u>2010</u>		
Unrestricted revenues, gains, and other support				
Net patient service revenue	\$ 692,751	\$	698,166	
Other revenue	42,611		40,356	
Total unrestricted revenues, gains, and other support	735,362		738,522	
Expenses				
Labor and employee benefits	364,694		350,581	
Supplies and other expenses	261,968		239,972	
Depreciation and amortization	40,119		39,578	
Provision for uncollectible accounts	37,539		54,340	
Interest	7,269		7,676	
Total expenses	711,589		692,147	
Income from operations	23,773		46,375	
Other income (loss)				
Investment income	36,839		29,040	
Change in fair value of interest rate swap	(3.018)		(4,330)	
Other	(3.630)		(1.543)	
Total other income	30,191		23,167	
Excess of unrestricted revenues, gains, and other support over expenses	53,964		69,542	
Excess of unrestricted revenues, gains, and other support over expenses attributable to noncontrolling interest	(637)		(1,022)	
Excess of unrestricted revenues, gains, and other support over expenses attributable to controlling interest	\$ 53,327	\$	68,520	

Consolidated Statements of Changes in Net Assets (dollars in thousands)

For the Years Ended September 30, 2011 and 2010

	<u>2011</u>			<u>2010</u>		
Unrestricted net assets, controlling interest						
Excess of unrestricted revenues, gains, and other						
support over expenses	\$	53,327	\$	68,520		
Net unrealized (losses) gains on investments		(26,601)		18,562		
Change in pension plan and post retirement						
health care plan funded status		(40,415)		(17,226)		
Contribution		424		677		
Net assets released from restriction and other		2,007		1.304		
(Decrease) increase in unrestricted net assets.						
controlling interest		(11,258)		71,837		
Unrestricted net assets, noncontrolling interest						
Excess of unrestricted revenues, gains, and other						
support over expenses		637		1,022		
Distribution to noncontrolling interest		(563)		(610)		
Increase in unrestricted net assets.						
noncontrolling interest		74		412		
Temporarily restricted net assets						
Contributions		2,729		2,753		
Investment gain		475		4.068		
Net assets released from restrictions		(2.007)		(1,304)		
Increase in temporarily restricted net assets		1,197		5,517		
(Decrease) increase in net assets		(9,987)		77.766		
Net assets at beginning of year		870,837		793,071		
Net assets at end of year	\$	860,850	\$	870,837		

Consolidated Statements of Cash Flows (dollars in thousands)

For the Years Ended September 30, 2011 and 2010

	<u>2011</u>	<u>2010</u>		
Operating activities				
(Decrease) increase in net assets	\$ (9.987)	\$	77,766	
Adjustments to reconcile (decrease) increase in net assets to				
net cash provided by operating activities				
Net realized and unrealized losses (gains) on investments	1.478		(31,778)	
Net restricted contributions and investment (income) loss	(2.254)		(6.821)	
Change in pension plan and post retirement				
health care plan funded status	40.415		17.226	
Change in fair value of interest rate swap	3.018		4,330	
Depreciation and amortization	40,119		39.578	
Loss on disposal of property and equipment	2.758		1.271	
Provision for uncollectible accounts	37,539		54,340	
Amortization of deferred revenues	(2.171)		(1.793)	
Proceeds from non-refundable entrance fees	727		3,044	
Changes in operating assets and liabilities				
Patient accounts receivable, net	(47.671)		(47.325)	
Other assets, prepaid expenses, and supplies	4,405		(1.886)	
Accounts payable and accrued expenses	(3.192)		4.285	
Accrued compensation and withholdings	(5.486)		10,044	
Estimated third-party payor settlements	12.251		(11.670)	
Entrance fee deposits	1.599		(538)	
Other current liabilities	(13.257)		(11.031)	
Supplemental benefit plan	1.044		(2,000)	
Other long-term liabilities	(1.931)		(433)	
Reserve for self-insured losses	7.227		(6.214)	
Accrued pension benefit liability	 (3.246)		(2.538)	
Net cash provided by operating activities	63,385		87.857	
Investing activities				
Purchase of property and equipment, net of retirements	(46,810)		(47,446)	
Purchases of investments, net	(13.069)		(30,958)	
Change in assets limited as to use, net	3.097		(8.295)	
Net cash used in investing activities	(56,782)		(86,699)	
Financing activities				
Principal payments on long-term debt	(10,090)		(9.950)	
Net restricted contributions and investment income (loss)	2.254		6.821	
Refund of entrance fees	(4.150)		(3,146)	
Proceeds from refundable entrance fees	 4.193		3,784	
Net cash used in financing activities	 (7,793)		(2,491)	
Net change in cash and cash equivalents	(1.190)		(1.333)	
Cash and cash equivalents at beginning of year	 63.279		64,612	
Cash and cash equivalents at end of year	\$ 62,089	\$	63,279	

The accompanying notes are an integral part of these consolidated financial statements

CENTRAL GEORGIA HEALTH SYSTEMS, INC. AND AFFILIATES

Notes to Consolidated Financial Statements

For the Years Ended September 30, 2011 and 2010 (All tabular amounts in thousands)

1 Organization and General

Central Georgia Health Systems, Inc (dba Central Georgia Health System) was incorporated on November 17, 1994, as a nonprofit corporation whose primary purpose is to serve as a controlling body for the Medical Center of Central Georgia, Inc ("MCCG") and other affiliated entities, in supporting their mission of coordinating the functions of individual corporate providers of a comprehensive range of high quality, reasonably priced health care services to the central Georgia community. These entities described below are consolidated to form Central Georgia Health Systems. Inc. and Affiliates ("CGHS")

Medical Center of Central Georgia, Inc. - MCCG is a nonprofit medical center whose primary purpose is to provide inpatient, outpatient, physician care, home care, emergency and other health care related services to the central Georgia community MCCG operates the Doctors Office Building. Central Georgia Pet, LLC and the Hospice of Central Georgia MCCG is a controlled affiliate of CGHS

MCCG leases certain assets from the Macon-Bibb County Hospital Authority (the "Authority") for a term of 30 years Pursuant to the lease agreement dated February 14, 1995, effective October 1, 1995, substantially all assets of the Authority were transferred to MCCG and substantially all liabilities and operating responsibilities of the Authority were assumed by MCCG Pursuant to the new lease agreement dated July 1, 2005, the lease term has been extended to July 1, 2045. In addition, MCCG pays bond indebtedness, the related interest thereon, and certain other expenses of the Authority. At the expiration or termination of the agreement, all assets of MCCG and certain interests of affiliated entities shall be distributed, subject to such debt or other liabilities as may be applicable, to the Authority

<u>Central Georgia Health Ventures, Inc. ("CGHV")</u> – CGHV was incorporated on February 14, 1995 and is a taxable corporation whose primary purpose is to operate Central Georgia Home Care Services, Inc ("CGHC")

Health Services of Central Georgia, Inc. ("HSCG") - HSCG, incorporated on February 24, 1997, is a nonprofit corporation whose primary purpose is to employ healthcare providers such as physicians, nurse practitioners and physician assistants that are in short supply in private practice and to provide medical education

<u>Central Georgia Senior Health, Inc. d/b/a Carlyle Place ("CGSH")</u> - CGSH, incorporated on May 2, 1997, is a nonprofit corporation whose primary purpose is to construct, own, and operate a continuing care retirement community in Macon, Georgia

Medcen Community Health Foundation, Inc. ("Medcen") - Medcen, incorporated on July 13, 1973, is a nonprofit corporation whose primary purpose is to raise funds of any kind or character to be used exclusively for charitable, medical, educational, and scientific purposes at or in connection with CGHS

<u>Centra Professional Indemnity, Ltd. ("CPI")</u> - CPI, incorporated on November 14, 1995, is a controlled foreign corporation whose primary purpose is to provide certain professional and workers' compensation insurance coverage for CGHS

American Eagle Insurance Company Risk Retention Group ("American Eagle") - American Eagle, incorporated on August 1, 2003, under the laws of the state of Vermont, insures and reinsures medical malpractice risk for physicians and physician groups - American Eagle ceased operations as of July 1, 2011

Central Georgia Rehabilitation Hospital, LLC ("CGRH") - CGRH is a Georgia limited liability company whose sole member is Central Georgia Health System. Inc The Limited Liability Company operating agreement was made effective as of June 28, 2006, by Central Georgia Health Systems. Inc CGRH is operated with the sole mission to provide rehabilitation services to the central Georgia community

Central Georgia PET, LLC ("PET") - PET was incorporated on December 5, 2001, for the purpose of operating an outpatient radiology imaging center MCCG has a 66 7% ownership interest in PET whose operations are consolidated within MCCG's consolidated financial statements. Included in unrestricted net assets at September 30, 2011 and 2010, are approximately \$429,000 and \$477,000, respectively, representing the noncontrolling interest in PET.

Secure Health Plans of Georgia, LLC ("SHPG") - SHPG, incorporated on November 6, 1996, is a limited liability company whose primary purpose is to provide certain health care services through the establishment, operation, and maintenance of a diversified portfolio of insurance products CGHS provided 50 4% of the capital of SHPG Included in unrestricted net assets at September 30, 2011 and 2010, are \$3,935,000 and \$3,813,000, respectively, representing the noncontrolling interest in SHPG

2 Significant Accounting and Reporting Policies

A summary of the significant accounting and reporting policies followed by CGHS in the preparation of its consolidated financial statements is presented below

Accounting Standards – CGHS follows accounting standards set by the Financial Accounting Standards Board, commonly referred to as the "FASB" The FASB sets accounting principles generally accepted in the United States of America ("GAAP") that CGHS follows to ensure consistent reporting of its financial condition, results of operations, and cash flows References to GAAP issued by the FASB in these footnotes are to the FASB Accounting Standards Codification, sometimes referred to as the "Codification" or "ASC" Updates to the Codification are referred to as Accounting Standard Updates ("ASU")

<u>Principles of Consolidation</u> - The consolidated financial statements include the accounts of CGHS and all affiliated entities. All significant intercompany transactions and accounts have been eliminated in consolidation.

Noncontrolling Interest in Subsidiary - During 2011. CGHS adopted new GAAP guidance for noncontrolling interest in subsidiaries. As required by the guidance, presentation and disclosure has been applied retrospectively and are included in the consolidated balance sheets and the consolidated statements of operations and changes in net assets. In addition, the adoption had the effect of increasing beginning unrestricted net assets by \$4,290,000 and \$3,878,000 at October 1, 2010 and October 1, 2009, respectively, due to the retrospective application of this new guidance.

<u>Fair Value Measurements</u> – GAAP defines fair value as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date GAAP requires entities to maximize the use of observable inputs and minimize the use of unobservable inputs in measuring fair value, and GAAP establishes a three level hierarchy that prioritizes the inputs used to measure fair value. The three levels of inputs used to measure fair value are as follows

- Level 1 Quoted prices in active markets for identical assets or liabilities such as debt and equity securities, mutual funds, and money market accounts that are traded in an active market, and other cash equivalents. Level one investments include common stocks, equity mutual funds and money market funds that are traded in an active market.
- Level 2 Observable inputs other than level 1 prices, such as quoted prices for similar assets or liabilities, quoted prices in markets that are not active, or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities. CGHS's level two investments include corporate bonds. U S government obligations, and asset and mortgage backed securities. CGHS utilizes a third party pricing service to determine the fair value of each of these investment securities. Because quoted prices in active markets for identical assets are not available, these prices are determined using observable market information such as quotes from less active markets and/or quoted prices of securities with similar characteristics.
- Level 3 Unobservable inputs that are supported by little or no market activity and that are significant to the fair value of the assets or liabilities. Level 3 assets and liabilities include financial instruments whose value is determined using pricing models, discounted cash flow methodologies, or similar techniques, as well as instruments for which the determination of fair value requires significant management judgment or estimation CGHS's level three investments include limited liability partnerships and limited liability companies. The fair value for these investments are determined by applying CGHS's ownership percentage to the net asset value of the investment fund. Underlying investments of the funds include hedge funds, real estate funds, mortgage back securities, asset backed securities and global equity fund of funds.

<u>Cash and Cash Equivalents</u> - Cash and cash equivalents consist of cash on hand, deposits with banks, overnight sweep repurchase agreements and investments in highly liquid debt instruments with maturities of three months or less when purchased, excluding assets limited as to use From time to time CGHS deposits at banks exceed the Federal Deposit Insurance Corporation insurance limit By policy, the amount of credit exposure to any one institution is limited, and such investments are generally not collateralized

<u>Investments</u> - Investments in marketable equity securities and all investments in debt securities are stated at fair value in the consolidated balance sheets. All investments have been designated by management to be other than trading securities. Investment income or loss (including realized gains and losses on investments, interest, dividends and other-than-temporary impairment in investments) is

included in the excess of unrestricted revenues, gains, and other support over expenses unless the income or loss is restricted by donor or law. Unrealized gains and losses on investments are excluded from the excess of unrestricted revenues, gains, and other support over expenses.

Management evaluates individual securities to ascertain whether other-than-temporary impairment ("OTTI") has occurred. Management considers several factors including when the security might recover in value, declines in market value below 80% of the original cost for a period in excess of a year, and whether or not management intends to hold the respective security until the anticipated recovery in value occurs. Based on this evaluation, CGHS recognized approximately \$2,086,000 of OTTI for the year ended September 30, 2010. This amount is included as a reduction of investment income in the accompanying consolidated statements of operations and changes in net assets. No OTTI was recognized during 2011. During 2011 and 2010, approximately \$262,000 and \$3,163,000, respectively, of OTTI losses recognized in previous years were realized when the corresponding investments were sold.

Assets Limited as to Use - Assets limited as to use include assets held by trustees under bond indenture agreements, held for use for Medcen activities and by donor restrictions, set aside for the self-insurance reserve fund, or set aside by the Board of Directors ("Board") for future capital improvements, over which the Board retains control and may at its discretion subsequently use for other purposes

Interest Rate Swap - CGHS utilizes an interest rate swap to manage the variability in interest rates on certain of its variable rate debt. Derivative instruments are required to be reported at fair value as either assets or liabilities in the balance sheet. The accounting for changes in the fair value (i.e., gains or losses) of a derivative instrument depends on whether it has been designated and qualifies as part of a hedging relationship and, further, on the type of hedging relationship. For those derivative instruments that are designated and qualify as hedging instruments, an entity must designate the hedging instrument, based upon the exposure being hedged. For derivative instruments not designated as hedging instruments, the changes in fair value are recognized in the performance indicator.

The performance indicator (excess of unrestricted revenues, gains, and other support over expenses) reported by not-for-profit healthcare organizations is analogous to income from continuing operations of a for-profit enterprise CGHS does not account for the interest rate swap under hedge accounting, and, accordingly, changes in the value of the swap are recorded above the performance indicator. Due to the uncertainty inherent in the valuation process, such estimates of fair value may differ significantly from the values that would have been used had a ready market for the securities existed.

Net Patient Service Revenue and Patient Accounts Receivable - CGHS has agreements with third-party payors that provide for payments at amounts different from their established rates. Payment arrangements include prospectively determined rates per discharge, reimbursed costs, discounted charges, and per diem payments. Net patient service revenue is reported at the estimated net realizable amounts from patients, third-party payors, and others for services rendered and include estimated retroactive revenue adjustments under reimbursement agreements with third-party payors due to future audits, reviews, and investigations. Retroactive adjustments are considered in the recognition of revenue on an estimated basis in the period the related services are rendered, and such amounts are adjusted in future periods as adjustments become known or as years are no longer subject to such audits, reviews, and investigations.

Allowance for Uncollectible Accounts - The allowance for uncollectible accounts is based upon management's assessment of historical and expected net collections, considering business and economic conditions, trends in health care coverage and other collection indicators. Periodically, management assesses the adequacy of the allowance for uncollectible accounts based upon historical write-off experience by payor category. The results of this review are then used to make any modifications to the provision for bad debts to establish an appropriate allowance for uncollectible accounts.

<u>Inventory</u> – Inventory is included as a component of other current assets on the consolidated balance sheets, and consists primarily of medical supplies stated principally at the lower of average cost or market

<u>Property and Equipment</u> - Property and equipment acquisitions are recorded on the basis of cost Expenditures for maintenance and repairs are charged to expense Expenditures that materially increase the value of property and equipment or extend useful lives are capitalized as a cost of the applicable property and equipment CGHS removes the costs and related allowances from the accounts for properties sold or retired

Property and equipment are depreciated using straight-line methods over their estimated economic lives. Useful lives range from 5 to 25 years for land improvements, 20 to 40 years for buildings, and 5 to 15 years for equipment.

<u>Long-Lived Assets</u> – Periodically, reviews are performed of long-lived assets, such as property and equipment and goodwill, to determine whether any impairment exists. Management believes that the long-lived assets in the accompanying consolidated balance sheets are appropriately valued at September 30, 2011 and 2010.

<u>Vacation Policy</u> - Employee vacation pay is accrued when earned by the employee and is recorded within accrued compensation and withholdings on the consolidated balance sheets

<u>Entrance Fee Deposits</u> - Deposits received from future residents (10% of the entrance fee) of the continuing care retirement community are held in an escrow account, earning interest, until the residents move into the continuing care retirement community. These deposits are recorded as a current liability

<u>Refundable and Nonrefundable Entrance Fees</u> - Refundable and nonrefundable entrance fees are received from residents upon admission to the continuing care retirement community

Certain contracts with residents stipulate that entrance fees are refundable on a vacated unit when the entrance fee on a comparable unit has been collected. Refundable entrance fees are recorded as deferred revenue and amortized on a straight-line basis over the remaining useful life of the facility.

Certain contracts with residents stipulate that entrance fees are not refundable forty-eight months after the original contract date. Nonrefundable entrance fees are recorded as deferred revenue and amortized on a straight-line basis over the life expectancy of the resident on the date of occupancy. Unamortized deferred revenue from nonrefundable entrance fees is recorded as revenue upon a resident's death or the termination of the contract.

<u>Temporarily Restricted Net Assets</u> - Temporarily restricted net assets are those whose use is restricted by the donor for a specific time period or purpose

Reserve for Self-Insured Losses – CGHS is insured by CPI for certain professional and workers' compensation insurance. CPI determines its provision for known cases on the basis of the losses reported to it by a claims handler. CPI has engaged the services of independent consulting actuaries to advise on the required level of total outstanding loss reserves. The provision for outstanding loss reserves is therefore based upon the advice of these actuaries and management's best estimate for the ultimate development of losses reported.

Changes in estimates of outstanding claims reserves resulting from the continuous review process and differences between estimates and payments are recognized in income in the period in which they are determined

CPI records its estimated liabilities gross of any amounts recoverable under its own reinsurance, which amounts, if any, are recorded separately in the consolidated balance sheets. In the event that CPI reinsurers are unable to meet their obligations under the reinsurance agreements. CPI would be liable to pay all losses under the reinsurance assumed but would only receive reimbursement to the extent that the reinsurers can meet their obligations

Operating and Nonoperating Activities - CGHS's primary purpose is to provide diversified health care services to the community. As such, activities related to the ongoing operations of CGHS are classified as operating activities. Operating revenues include those generated from direct patient care, related support services, and sundry revenues related to the operation of CGHS. Activities not directly related to the ongoing operations of CGHS, or that occur infrequently, are reported as other revenue included in other revenue are activities related to cafeteria, parking, grant, and other miscellaneous revenues. In addition, gains or losses from disposition of operating properties, earnings on interest bearing deposits, change in fair values of interest rate swaps, interest on nonoperating investments, and marketable securities that are used to support health related activities are reported as other income

<u>Charity Care</u> - CGHS provides care to patients who meet certain criteria under its charity care policy without charge or at amounts less than its established rates CGHS accepts all patients regardless of their ability to pay Because CGHS does not pursue collection of amounts determined to qualify as charity care, such amounts are excluded from net patient service revenue. Partial payments to which CGHS is entitled from public assistance programs on behalf of patients that meet CGHS's charity care criteria are reported as net patient service revenue.

Excess of Unrestricted Revenues, Gains, and Other Support Over Expenses - The consolidated statements of operations include excess of unrestricted revenues, gains, and other support over expenses. Changes in unrestricted net assets which are excluded from excess of unrestricted revenues, gains, and other support over expenses, consistent with industry practice, include unrealized gains and losses on investments other than trading securities, permanent transfers of assets to and from affiliates for other than goods and services, changes in unfunded pension and postretirement plan gains and losses, and contributions of long-lived assets (including assets acquired using contributions which by donor restriction were to be used for the purposes of acquiring such assets)

<u>Gifts, Contributions, and Grants</u> - Gifts, contributions, and grants are recorded at market value as of the date of receipt Noncash items are recorded at market value on the date of the gift Contributions restricted by the donor are recorded in restricted net assets at market value on the date of the contribution

<u>Donor-Restricted Gifts</u> - Unconditional promises to give cash and other assets are reported at fair value at the date the promise is received. Conditional promises to give and indications of intentions to give are reported at fair value at the date the gift is received. The gifts are reported as either temporarily or permanently restricted support if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reported in the consolidated statement of operations as net assets released from restrictions. Donor-restricted contributions whose restrictions are met within the same year as received are reported as unrestricted contributions in the accompanying consolidated financial statements.

<u>Income Tax</u> – Central Georgia Health Systems, Inc. MCCG, HSCG, CGSH, and Medcen are organizations exempt from federal income tax, pursuant to Section 501(a) as organizations described in Section 501(c)(3) of the Internal Revenue Code of 1986, as amended CPI is a foreign corporation not subject to tax in the United States PET, CGRH and SHPG are organized under Georgia law and the Internal Revenue Code as limited liability companies ("LLC") The members of an LLC report taxable income or loss on their corporate or individual tax returns CGHS's share of income from PET, CGRH and SHPG operations is not considered unrelated business income ("UBI") and is therefore not subject to tax

CGHV and American Eagle are subject to income tax. With respect to its for-profit subsidiaries, CGHS accounts for income taxes in accordance with the liability method under which deferred tax assets and liabilities are determined based on the differences between the financial accounting and tax bases of assets and liabilities. Deferred tax assets or liabilities at the end of each period are determined using the currently enacted tax rate expected to apply to taxable income in the periods that the deferred tax asset or liability is expected to be realized or settled

CGHS and its affiliates have evaluated their tax positions and have determined that they do not have any material unrecognized tax benefits or obligations as of September 30, 2011 Fiscal years ending on and after September 30, 2008 remain subject to examination by federal and state tax authorities

<u>Use of Estimates</u> - The preparation of consolidated financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the consolidated financial statements Estimates also affect the reported amounts of revenues and expenses during the reporting period Actual results could differ from those estimates

Asset Retirement Obligations – A conditional asset retirement obligation is an unconditional legal obligation to perform an asset retirement activity in which the timing and (or) method of settlement are conditional on a future event that may or may not be within the control of the entity CGHS recognizes a liability for the fair value of a conditional asset retirement obligation if the fair value of the liability can be reasonably estimated

<u>Cash Surrender Value of Insurance Policies</u> – CGHS previously had a supplemental executive benefit program ("SEBP") for current and retired executives ("Executive" or "Executives") that was designed to protect against the loss of key employees CGHS paid premiums on insurance policies for each Executive in the plan CGHS anticipated that the cash surrender value of the policies would grow to amounts sufficient for the Executives to take withdrawals from, or borrow against, the value to supplement the Executives' retirement income During 2009, CGHS suspended the SEBP program and stopped making further premium payments on the insurance policies

CGHS continues to retain an assigned interest in the life insurance policies. As such, CGHS records the cash surrender value of the policies, which is included as a long-term asset

Pension Plan and Postretirement Health Care Benefits - CGHS sponsors a defined benefit pension plan and a postretirement health care plan CGHS recognizes the overfunded and underfunded status of the defined benefit pension and postretirement plans in its balance sheets. Changes in the funded status are recorded in the year in which the changes occurred through changes in unrestricted net assets. Plan assets and benefit obligations are measured as of the date of the fiscal year-end balance sheet.

<u>Subsequent Events</u> – CGHS evaluated the effect subsequent events would have on the consolidated financial statements from October 1, 2011 through January 27, 2012, which is the date the consolidated financial statements were issued

Recent Accounting Pronouncements - In August 2010, the FASB issued ASU No 2010-23, Measuring Charity Care for Disclosure ("ASU 2010-23") The provisions of ASU 2010-23 are intended to reduce the diversity in how charity care is calculated and disclosed by health care entities. Charity care is required to be measured at cost, defined as the direct and indirect costs of providing the charity care. As CGHS does not recognize revenue when charity care is provided. ASU 2010-23 will have no effect on the consolidated statements of operations and changes in net assets. ASU 2010-23 only requires additional disclosures, including the method used to estimate the cost of charity care. This new guidance is effective for CGHS for the year ended September 30, 2012.

In August 2010, the FASB issued ASU No 2010-24, *Presentation of Insurance Claims and Related Insurance Recoveries* ("ASU 2010-24") ASU 2010-24 prohibits the netting of insurance recoveries against a related claim liability and requires the claim liability to be calculated without consideration of insurance recoveries. This guidance is effective for CGHS for the year ended September 30, 2012

In July 2011, the FASB issued ASU No 2011-07, Presentation and Disclosure of Patient Service Revenue, Provision for Bad Debts, and the Allowance for Doubtful Accounts for Certain Health Care Entities. The amendments in this update require certain health care entities to change the presentation of their statement of operations by reclassifying the provision for bad debts associated with patient service revenue from an operating expense to a deduction from patient service revenue (net of contractual allowances and discounts), as well as to provide enhanced disclosures about policies for recognizing revenue and assessing bad debts. The amendments also require disclosures of patient service revenue (net of contractual allowances and discounts) as well as qualitative and quantitative information about changes in the allowance for doubtful accounts. This guidance is effective for CGHS for the year ended September 30, 2013.

3 Net Patient Service Revenue

A summary of payment arrangements with major third-party payors follows

Medicare

Medicare inpatient and outpatient services, with certain limited exceptions, are based on a prospective reimbursement methodology referred to as the Prospective Payment System ("PPS") for inpatients and Ambulatory Payment Classifications ("APCs") for outpatients Under PPS, a hospital is reimbursed at predetermined rates for an episode of care based on diagnosis-related groups ("DRGs") for inpatients and APCs for outpatients, which classify treatments for illnesses according to the estimated intensity of hospital resources necessary to furnish care for each diagnosis. As a teaching hospital, CGHS receives payments for training physicians and other medical professionals (graduate medical education or GME payments). These payments are in two different forms, direct medical education ("DME") and indirect medical education ("IME") payments. DME payments support the direct costs of training while IME payments support the higher infrastructure that teaching hospitals incur relating to teaching, and higher patient acuity. As a hospital serving a disproportionate share of low-income patients (Medicare and Medicaid patients eligible to receive supplemental Social Security income). CGHS also receives additional payments in the form of disproportionate share payments

CGHS is reimbursed for cost reimbursable items at a tentative rate with final settlement determined after submission of an annual cost report and audits thereof by the Medicare fiscal intermediary. CGHS's classification of patients under the Medicare program and the appropriateness of their admission are subject to an independent review by a peer review organization. CGHS's cost reports have been audited and final settled by the Medicare fiscal intermediary through September 30, 2006. Desk review adjustments have been received for the 2007, 2008 and 2009 cost report years, and these changes from prior year estimates have been recorded in estimated third party payor settlements.

Medicaid

Inpatient services rendered to Medicaid program beneficiaries are reimbursed under a diagnostic related group based methodology that is not subject to retroactive settlement. Outpatient services are paid on a cost reimbursement methodology subject to certain limits. Services rendered under this program are recorded at established rates and reduced to the estimated amount due from the third-party payors through recording of contractual adjustments and other discounts. Because CGHS cannot pursue collections for the contractual or discounted amounts, they are not reported as revenue.

Beginning June 1, 2006. Georgia Medicaid moved a significant portion of its recipients to managed care companies called Care Management Organizations ("CMO") Contractual payments are made by the CMO for services provided using the same methodology and payment rates as traditional Medicaid CGHS's cost reports have been audited and final settled by the Medicaid fiscal intermediary through September 30, 2006

Managed Care and Other Payors

CGHS has entered into payment agreements with certain commercial insurance carriers, health maintenance organizations, and preferred provider organizations. The bases for payment to CGHS under these agreements include prospectively determined rates per discharge, discounts from established charges, and prospectively determined daily rates

Net patient service revenues are reported at the estimated net realizable amounts from third-party payors and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payors. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and are adjusted in future periods as interim or final settlements are determined. In the opinion of management, adequate provisions have been made for any adjustments that may result from such reviews. However, it is reasonably possible that recorded estimates will change by material amounts in the near term. Net patient service revenue increased approximately \$7.914,000 and \$1.681,000 for 2011 and 2010, respectively, due to changes in amounts previously estimated as a result of final settlements and changes in estimates.

Laws and regulations governing the Medicare and Medicaid programs are complex and subject to interpretation CGHS believes that it is in compliance with all applicable laws and regulations and is not aware of any pending or threatened investigations involving allegations of potential wrongdoing that would have a material effect on the consolidated financial statements. Compliance with such laws and regulations can be subject to future government review and interpretation as well as significant regulators action including fines, penalties, and exclusion from the Medicare and Medicaid programs

The Medicare Prescription Drug, Improvement, and Modernization Act of 2003 created the Recovery Audit Contractors ("RAC") program to detect and correct improper payments in the Medicare program. The RAC reviews in Georgia began in late 2009 and continued in 2011. Management believes its billings policies will not result in significant overpayments, however, the effect of RAC reviews cannot be reasonably estimated, and the results of such reviews could materially affect the future operations of CGHS.

Gross patient service charges and net patient service revenue for the years ended September 30 include

	<u>2011</u>	<u>2010</u>
Gross patient service charges	\$ 1,902,726	\$ 1,804,434
Contractual adjustments		
Medicare	584,009	523,863
Medicaid	244,550	244,934
Other	300,186	259,897
Total contractual adjustments	1,128,745	1,028,694
Charity care		
Charity care charges	75,181	74,219
County contributions from tax revenue	(688)	(938)
Other state funding	(2.528)	(3,293)
Net charity care	71,965	69,988
Other allowances	9,265	7,586
Total deductions from gross patient service charges	1,209,975	1,106,268
Net patient service revenue	\$ <u>692,751</u>	\$ 698,166

Indigent Care Trust Fund - Under the provisions of the Georgia Indigent Care Trust Fund Act ("ICTF"). Medicaid disproportionate share hospitals ("DSH") may contribute funds to be used by the State in the Medicaid program and which will be supplemented by federal funds (combination dollars). The combination dollars are returned to DSH as additional Medicaid inpatient reimbursement.

Amounts recorded in the consolidated financial statements related to the ICTF are summarized approximately as follows

	<u>2011</u>		<u>2010</u>
Amounts received from the ICTF Contribution to ICTF	\$ 10,148 3,524	\$ _	13,593 4,742
Excess received over contribution	\$ 6,624	\$ _	8,851

<u>Upper Payment Limit</u> - Under the provisions of the Georgia Upper Payment Limit Rate adjustments ("UPL"), government owned or operated hospitals, nursing homes and critical access eligible hospitals may contribute funds to be used by the state in the Medicaid program, which will be supplemented by federal funds (combination dollars)

Amounts recorded in the consolidated financial statements related to the UPL are summarized approximately as follows

	<u> 2011</u>	<u>2010</u>
Amounts received from UPL Contributions to UPL	\$ 7,164 2,064	\$ 1,215 416
Excess received over contribution	\$ 5,100	\$ <u>799</u>

Net amounts received under the ICTF and UPL programs are within net patient revenue. The federal government does not ensure future ICTF and UPL funding. Reduced ICTF and UPL funding may impact the CGHS's operations.

4 **Investments**

Investments are summarized as follows

	<u>2011</u>		<u>2010</u>
Short-term investments			
Money market fund	\$ 34,268	\$	31,110
Equity securities	219,052		253,475
Alternative investments	158,945		141,601
Asset backed securities	48,876		60,910
US Treasury obligations and			
other government backed securities	41,262		26,725
Corporate bonds	62,199	_	44,674
	\$ 564,602	\$ _	558,495
Long-term investments in real estate funds	\$ 15,229	\$ _	9,745

Investment securities are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, the possibility is reasonable that changes in the values of investment securities will occur in the near term and that these changes could materially affect the amounts reported in the consolidated balance sheets

CGHS invests in alternative investments that are defined as venture capital, international and domestic private equity investments, and absolute return (hedge) funds. Long-term investments are alternative investment real estate funds that require seven to ten year fund terms before the investments can be liquidated.

The recorded market price for alternative investments is estimated by the individual investment manager taking into account such factors as the financial condition of each investee, economic and market conditions affecting their operations, any changes in management, the length of time since the initial investment, recent transactions involving the securities of the investee, the value of similar securities issued by companies in the same or similar businesses, and limited marketability of the portfolio

Valuations provided by the general partners and investment managers are evaluated by management through accounting and financial reporting processes to review and monitor existence and valuation assertions. Due to the inherent uncertainty of valuation of the alternative investments, the fair values estimated by the individual investment manager, in the absence of readily ascertainable market values, may not necessarily represent the amounts that could be realized from sales or other dispositions of investments, and the differences may be material

Investment income for assets limited as to use and short-term investments for the years ended September 30 includes

•		<u>2011</u>	<u>2010</u>
Investment income			
Interest and dividends	\$	11,716	\$ 15,824
Net realized gains (losses)			
Loss on OTTI		_	(2.086)
OTTI loss previously recognized		262	3,163
Realized gains		24,861	12,139
	_	25,123	13,216
	\$ =	36,839	\$ 29,040
Other changes in unrestricted net assets Unrealized gains (losses) on investments, other than			
trading securities	\$ _	(26,601)	\$ 18,562

The following table shows the gross unrealized losses and fair value of CGHS's short-term investments with unrealized losses that are not deemed to be other-than-temporarily impaired, aggregated by investment category and length of time that individual securities have been in a continuous unrealized position at September 30, 2011 and 2010

September 30, 2011						
	Less than	12 Months	12 Month	s or Greater	_ To	otal
		Unrealized		Unrealized		Unrealized
	<u>Fair Value</u>	<u>Losses</u>	Fair Value	<u>Losses</u>	<u>Fair Value</u>	<u>Losses</u>
Corporate bonds	\$ 22,315	\$ (792)	\$ 2,801	\$ (226)	\$ 25,116	\$ (1.018)
Equity securities	86,837	(15.053)	2,644	(651)	89,481	(15,704)
Asset backed surities	16,111	(402)	4,147	(235)	20,258	(637)
Alternative investments	37,299	(1,380)	<u>235</u>	(238)	<u>37,534</u>	<u>(1,618</u>)
Total	\$ <u>162,562</u>	\$ <u>(17,627</u>)	\$9,827	\$ <u>(1,350</u>)	\$ <u>172,389</u>	\$ <u>(18,977</u>)
		Septembe	er 30, 2010			
	Less than	12 Months	12 Month	s or Greater	To	otal
		Unrealized		Unrealized		Unrealized
	Fair Value	Losses	Fair Value	Losses	Faır Value	Losses
Equity securities Asset backed securities	\$ 33,357 7,649	\$ (2,387) (114)	\$ 22,528 2,262	\$ (2,578) (114)	\$ 55,885 9,911	\$ (4,965) (228)
U S government and agency securities	12,938	(169)	2,575	<u>(43</u>)	15,513	(212)
Total	\$ <u>53,944</u>	\$ <u>(2,670)</u>	\$ <u>27,365</u>	\$(2,735)	\$ <u>81,309</u>	\$ <u>(5,405)</u>

The unrealized losses on CGHS's investments were caused by changes in interest rates, the performance of the various companies in which CGHS maintains an equity interest, and the performance of the mortgage securities. Because CGHS anticipates that these investments will recover in the near term and that CGHS has the ability and intent to hold these investments until a recovery of fair value. CGHS does not consider the investments included in the above table to be other-than-temporarily impaired at September 30, 2011 and 2010.

5 Assets Limited as to Use

The composition of assets limited as to use stated at fair value is set forth in the following table

		<u>2011</u>	<u>2010</u>
Self-insurance reserve fund			
Cash and cash equivalents	\$	2,434	\$ 1,395
U S corporate bonds		25,093	21,633
U S government securities		10,114	20,617
U S mortgage and asset backed securities		26,625	19,800
Equity securities		18,306	23,986
Other	_	12,140	9,855
		94,712	97,286
Medcen Foundation, Inc			
Cash and cash equivalents		283	363
Money market funds		3,273	2,859
U S government securities		2.501	3,706
U S corporate bonds		6.108	5,086
Mortgage backed securities		2,549	2,229
Mutual funds		7,434	8,440
Equity securities		17.978	20,145
Private equities		19,102	15,545
man oqualos	_	59,228	58,373
Reservation deposits, held under escrow agreement			
Cash and cash equivalents		233	648
cash and cash equivalents		233	040
Held by trustee under indenture agreement			
Money market funds		-	940
Designated by Board			
Other		4,240	4,263
	-		
	\$ _	<u>158,413</u>	\$ <u> 161,510</u>

The self-insurance reserve fund amounts are held primarily by CPI in connection with the insurance program

2011

2010

6 **Property and Equipment**

Property and equipment consisted of the following at September 30

	<u>2011</u>	<u>2010</u>
Land and land improvements	\$ 28,003	\$ 28,277
Buildings and improvements	388,162	388,743
Parking deck	46,473	46,473
Movable equipment	278,733	276,014
Fixed equipment	94,391	98,688
	835,762	838,195
Less accumulated depreciation	464,830	473,599
	370,932	364,596
Construction-in-progress	22,356	23,308
	\$ 393,288	\$ <u>387,904</u>

Depreciation expense for the years ended September 30, 2011 and 2010 amounted to approximately \$38,668,000 and \$38,095,000, respectively

7 Asset Retirement Obligations

The fair value of a liability for a conditional asset retirement obligation is recognized in the period in which it occurred if a reasonable estimate of fair value can be made. CGHS has determined that conditional legal obligations exist for its facilities related primarily to asbestos materials. CGHS has recorded a liability of approximately \$3,716,000 and \$4,218,000 for the estimated present value for the conditional asset retirement obligation at September 30, 2011 and 2010, respectively. Discount rates used to calculate the present value of the obligation were 5.0% and 5.5% at September 30, 2011 and 2010, respectively. A related amount is recorded in property and equipment of approximately \$1,453,000 and \$1,317,000, representing the remaining undepreciated cost of the asset retirement obligation at September 30, 2011 and 2010, respectively

8. Long-Term Debt

MCCG. CGHS. Medcen, and HSCG comprise the Obligated Group CGSH is a limited obligor in respect to the Series 2000 Revenue Anticipation Certificates A summary of long-term debt of the Obligated Group at September 30 follows

Revenue Anticipation Certificates, Series 2009 issued		
in September 2009, fixed interest rates, ranging		
between 4% and 5%, due in varying installments		
beginning in 2019 to 2035, collateralized by the gross		
revenues of the Obligated Group, amount is net of		
unamortized bond discount of \$56 and \$58, respectively	\$ 80,744	\$ 80,742

		<u>2011</u>		<u>2010</u>
Revenue Anticipation Certificates, Series 2003A variable interest rates, 0 14% at September 30, 2011, due in varying installments to 2028, collateralized by the gross revenues of the Obligated Group	\$	15,075	\$	15,775
Revenue Anticipation Certificates, Series 2003B variable interest rates, 0 15% at September 30, 2011, due in varying installments to 2028, collateralized by the gross revenues of the Obligated Group		16,400		17.200
Revenue Anticipation Certificates, Series 2000 issued in May 2000, variable interest rates, 0.14% at September 30, 2011, due in varying installments to 2035, collateralized by the 2000-A Master Note of the Obligated Group		43,350		44,500
Revenue Anticipation Certificates. Series 1998 issued in December 1998, variable interest rate, at 0.15% at September 30, 2011, due in varying installments to 2018, collateralized by the gross revenues of the Obligated Group		17.000		17.000
Revenue Anticipation Certificates. Series 1997 issued in July 1997, variable interest rates, 0.15% at September 30, 2011, due in varying installments to 2018, collateralized by the gross revenues of the Obligated Group		15,300		17.100
Revenue Anticipation Certificates, Series 1993C issued in October 1993, interest rates ranging from 5 25% to 5 30%, due in varying installments to 2013, collateralized by the gross revenues of the Obligated Group, amount is net of unamortized bond discount of \$2 and \$12, respectively		3,373		6.403
Revenue Anticipation Certificates, Series 1993A issued in September 1993, paid during 2011, 2010 amount is net of unamortized bond discount of \$7		_		2,593
Less current portion	_	191,242 4,695	-	201,313
	\$ _	<u>186,547</u>	\$ _	191,223

In September 2009, the Authority issued \$80,800,000 Macon-Bibb County Hospital Authority Revenue Anticipation Certificates (The Medical Center of Central Georgia, Inc. Project), Series 2009 Certificates ("Series 2009 Certificates") The proceeds of the Series 2009 Certificates were

\$ 191,242

loaned to MCCG to (1) payoff two bank loans totaling \$80,000,000 obtained during 2009 that had been used to redeem the Series 2005 Certificates, and (11) pay the costs of issuing the Series 2009 Certificates

MCCG guarantees payment of the 1993A, 1993C, 1997, 1998, 2000, 2003A, 2003B and 2009 Revenue Anticipation Certificates (collectively, the "Certificates") to the Macon-Bibb County Hospital Authority in the form of a lease and transfer agreement. On November 1, 1995, the Master Trust Indenture (the "Indenture") for the Certificates was amended to include all members of the Obligated Group under the provisions of the Agreement. To secure prompt payment of principal and interest on the Certificates and secure performance of its obligation, the Obligated Group granted a security interest in its gross revenues (as more fully defined in the Indenture) and in all its property. The Obligated Group is subject to certain covenants, including limitations on additional indebtedness, transfers of assets, maintenance of certain amounts of insurance, and certain other financial covenants under the terms of the Indenture

Coinciding with the above redemption, the Series 2003 Certificates were segregated into Series 2003A and Series 2003B. The Series 2003A and 2003B along with several of the existing Certificates were remarketed with new direct-pay letters of credit, as follows.

	ed Letter of it Amount
Series 1997	\$ 15,572
Series 1998	17,303
Series 2000	44,133
Series 2003A	15,276
Series 2003B	16,616

The Series 1997, 1998 and 2003 B letters of credit expire on December 1, 2012, and the Series 2000 and 2003 A expire on January 1, 2016

Interest paid in 2011 and 2010 totaled approximately \$7,085,000 and \$6,815,000, respectively

Principal maturities of long-term debt are as follows

Years ending September 30

2012	\$ 4.695
2013	8,203
2014	5,075
2015	9,415
2016	9,570
Thereafter	154,284

9 Interest Rate Swaps

On October 1, 2001, CGSH entered into an interest rate swap agreement in relation to \$23,000,000 of its Revenue Anticipation Bonds. Series 2000. This interest rate swap agreement, which expires on September 1, 2021, requires CGSH to make fixed-rate interest payments of 4.1% on a monthly basis in return for receiving a monthly variable-rate interest payment. As of September 30, 2011, the floating interest rate, which is based on 67% of LIBOR, was 0.2%. The fair value of CGSH's interest swap liability was approximately \$3,115,000 and \$3,110,000 at September 30, 2011 and 2010, respectively, which is included in other long-term liabilities in the accompanying consolidated balance sheets. The fair value of the interest rate swap decreased approximately \$5,000 and \$624,000 for the years ended September 30, 2011 and 2010, respectively.

MCCG has an interest rate swap agreement ("interest rate swap") relating to a portion of the \$52,000,000 Series 2005 Revenue Anticipation Bonds ("2005 Series") Although the 2005 Series was refinanced during 2009, the interest rate swap agreement remains intact. The interest rate swap, which expires on August 1, 2035, requires MCCG to make fixed-rate interest payments of 3 1% on a monthly basis in return for receiving a monthly variable-rate interest payment equal to 67% of LIBOR, which was 0 15% at September 30, 2011. The fair value of MCCG's interest swap was a liability of approximately \$11,442,000 and \$8,429,000 at September 30, 2011 and 2010, respectively. These amounts are included in other long-term liabilities in the accompanying consolidated balance sheets. The fair value of the interest rate swap decreased approximately \$3,013,000 and \$3,706,000 for the years ended September 30, 2011 and 2010, respectively.

10 Deferred Revenues from Entrance Fees

Unamortized deferred revenues from entrance fees as of September 30 are as follows

	<u>2011</u>	<u>2010</u>
Refundable fees	\$ 31,645	\$ 30,457
Nonrefundable fees	_21,550	21,969
	53,195	52,426
Less accumulated amortization	<u> 16,797</u>	<u>15,488</u>
	\$ <u>36,398</u>	\$ <u>36,938</u>

Amortization of the refundable and nonrefundable entrance fees was approximately \$2,171,000 and \$1,793,000 for the years ended September 30, 2011 and 2010, respectively

11 Postretirement Benefit Plans

<u>Defined Benefit Pension Plan</u> - CGHS has a noncontributory defined benefit pension plan ("pension plan") covering substantially all employees of CGHS. The benefits are based on years of service and the employee's highest compensation during three of the employee's last ten years of service. CGHS's funding policy is to contribute amounts to the plan sufficient to meet the minimum funding requirements set forth in the Employee Retirement Income Security. Act of 1974, plus any additional amounts CGHS may determine to be appropriate

The Board of Directors of CGHS approved a redesign of the pension plan that was effective on January 1, 2008. The changes included freezing the plan as of December 31, 2007, with the plan closed to any new participants and all participants at December 31, 2007 remaining in the plan Plan participants under the age of 40 on January 1, 2008 no longer accumulate benefits. Plan participants age 40 and over on January 1, 2008 continue to accumulate plan benefits. CGHS offers an enhanced match in their defined contribution plan to offset the benefits that any new and under the age of 40 participants would have or were receiving under the plan

<u>Defined Benefit Health Care Plan</u> - CGHS sponsors a defined benefit health care plan ("health plan") that provides postretirement medical benefits to full-time employees who have worked 15 years and attained age 55 while in service with CGHS. The plan is contributory with retiree contributions adjusted annually, and it contains other cost-sharing features such as deductibles and coinsurance CGHS's policy is to fund the cost of medical benefits in amounts determined at the discretion of management.

The funded status of the pension plan and health plan is measured as the difference between the fair value of the plans` assets and the projected benefit obligation of the plans

The following tables present a reconciliation of the beginning and ending balances of the plans' projected benefit obligation, the fair value of plan assets, and the funded status of the plans

		d Benefit on Plan		d Benefit Care Plan
	<u>2011</u>	<u>2010</u>	2011	2010
Projected benefit obligation.				
beginning of year	\$ 230,142	\$ 201,612	\$ 26,059	\$ 24,469
Change in benefit obligation				
Service cost	6,473	6,048	563	458
Interest cost	11,961	11,344	1,152	1,295
Actuarial (gain) loss	28,884	17,932	3,116	2,316
Benefits paid	(7,398)	(6,794)	(2.899)	(2,479)
Change in plan provisions		-	<u> </u>	
Projected benefit obligation.				
end of year	\$ <u>270,062</u>	\$ <u>230,142</u>	\$ <u>28,184</u>	\$ <u>26,059</u>

		d Benefit on Plan		l Benefit Care Plan	
	<u>2011</u>	<u>2010</u>	<u>2011</u>	<u>2010</u>	
Fair value of plan assets.	ф. 157 (00	Ф. 111.160	dh	d).	
beginning of year Change in plan assets	\$ 157.689	\$ 141,469	\$ -	\$ -	
Actual return on plan assets	1,911	15,014	-	_	
Contributions of plan sponsor	11,418	8,000	2,899	2,479	
Benefits paid	<u>(7,398</u>)	<u>(6,794</u>)	(2,899)	(2,479)	
Fair value of plan assets. end of year	\$ <u>163,620</u>	\$ <u>157,689</u>	\$	\$	
Unfunded status at end of year	\$ <u>(106,442</u>)	\$ <u>(72,453)</u>	\$ <u>(28,184</u>)	\$ <u>(26,059)</u>	

Amounts recognized on the consolidated balance sheets at September 30, 2011 and 2010, are as follows

	_	Define Pensi 2011		Define Health 2011		
Other current liabilities Other long-term liabilities Accrued pension plan liability	\$!	- - 106,442	\$ - - 72,453	\$ 2.395 25.789	\$	2.279 23.780
	\$ <u></u>]	106,442	\$ 72,453	\$ 28,184	\$_	26,059

Included in unrestricted net assets at September 30, 2011 and 2010, are the following amounts that have not yet been recognized in the net periodic pension and postretirement benefit cost

	Defined Benefit Pension Plan			Defined B Health Car	
	<u>2011</u>	<u>2010</u>	<u>20</u>	<u>11</u>	<u>2010</u>
Unrecognized prior service cost (credit) Unrecognized actuarial loss (gain)	\$ - 109,479	Φ 50	\$ 2	(94) \$.732	S (344) (198)
	\$ <u>109,479</u>	\$ 72,244	\$ <u> 2</u>	<u>,638</u> \$	(542)

Changes recognized in unrestricted net assets for the years ended September 30, 2011 and 2010, are as follows

		Defined Pensi 2011				Defined Health 2011		
Prior service credit Net actuarial loss (gain) Amortization of prior service costs Amortization of actuarial gain	\$	41.626 (36)	\$	16.758 (43)	\$	194 3.116 56	\$	2.316 56
(loss)	_	<u>(4,355</u>)	_	(1,867)	_	(186)	_	6
	\$_	<u> 37,235</u>	\$_	14,848	\$_	3,180	\$_	2,378

The estimated prior service cost and net gain to be recognized in net periodic pension expense and net periodic postretirement cost during the next fiscal year are as follows

			Defined Benefit				Defined		
		Pension Plan			<u>Health</u>		Care Plan		
		<u>2012</u>		<u>2011</u>	<u>2012</u>		<u>2011</u>		
Prior service cost (credit)	\$	-	\$	36	\$ (36)	\$	(56)		
Actuarial loss (gain)		8,104		4,355	-		186		

A summary of the components of net periodic benefit cost at September 30, 2011 and 2010 is as follows

		Defined Benefit Pension Plan			Health	ed Benefit <u>1 Care Plan</u>		
		<u>2011</u>		<u>2010</u>		<u>2011</u>		<u>2010</u>
Service cost	\$	6,473	\$	6,049	\$	563	\$	458
Interest cost		11,961		11,344		1,152		1,295
Expected return on plan assets Amortization of unrecognized		(14,653)		(13,841)		-		-
prior service cost (credit)		36		43		(56)		(56)
Amortization of net loss (gain)	-	4,355	-	1,867	_	185	_	<u>(6</u>)
	\$_	8,172	\$_	5,462	\$_	1,844	\$_	1,691

Assumptions used in determining the actuarial present value of the projected benefit obligations as of September 30, 2011 and 2010, are as follows

	Defined Benefit Pension Plan		Defined Be Health Care	
	<u>2011</u>	<u>2010</u>	<u>2011</u>	2010
Weighted-average discount rate Rate of increase in compensation	5 54%	5 28%	5 15%	4 62%
levels	3 00%	3 00%	-	_

Assumptions used in determining the net periodic benefit cost for the years ended September 30, 2011 and 2010 are as follows

	Defined	Benefit	Defined Be	nefit
	Pension Plan		Health Care	e Plan
	<u>2011</u>	<u>2010</u>	<u>2011</u>	<u>2010</u>
Weighted-average discount rate	5 28%	5 72%	4 62%	5 53%
Rate of increase in compensation levels	3 00%	3 00%	-	-
Expected long-term rate of return on assets	8 50%	8 50%	-	-

The weighted-average annual assumed rate of increase in the per capita cost of covered benefits (i.e., health care cost trend rate) is 5% for 2011 and thereafter. The health care cost trend rate assumption has an effect on the amounts reported. For example, increasing the assumed health care cost trend rates by one percentage point in each year would increase the accumulated postretirement benefit obligation as of September 30, 2011, by approximately \$1,701,000 and the aggregate of the service and interest cost components of net periodic postretirement benefit cost for 2011 by approximately \$208,000.

CGHS uses fair market value as the market-related value of assets in calculating the expected return on the plan assets component of net periodic pension expense and net periodic postretirement benefit for the years ended September 30, 2011 and 2010

During 2012, CGHS expects to contribute approximately \$16,842,000 and \$2,395,000, respectively, to its defined benefit pension plan and health care plan

Benefits expected to be paid in each of the next five fiscal years and thereafter are estimated as follows

	Defined Benefit Pension Plan	Defined Benefit Health Care Plan		
Years ending September 30	·			
2012	\$ 8,283	\$ 2,395		
2013	8,664	2,340		
2014	9,194	2,237		
2015	9,853	2,250		
2016	10.734	2,312		
2017-2021	71,126	11,746		

The target allocation for the pension plan is as follows as of September 30, 2011 and 2010

	<u>Mınımum</u>	<u>Target</u>	<u>Maximum</u>
Equity securities	28%	50%	72%
Debt securities	15%	35%	55%
Alternative investments	7%	15%	23%

To develop the expected long-term rate of return on assets assumptions. CGHS considered the historical returns and the future expectations for returns for each asset class, as well as the target asset allocation of the pension portfolio

The Plan investment strategy is focused on matching the emerging long-term needs of the retirement plan with the proven, long-term performance patterns of the various investment markets. The Plan's investments represent the opportunity to reduce CGHS's cost of funding plan benefits, provide a funding resource for possible future enhancement of plan benefits, and insulate the Plan's assets against deterioration of purchasing power caused by inflation.

The target allocation of all assets is to reflect proper diversification in order to reduce the potential of a single security or single sector of securities having a disproportionate impact on the portfolio. In an effort to maintain the overall risk level of the portfolio within an acceptable range, the relative mix of asset classes will be rebalanced back toward the target allocations as opportunities permit, but in any event not less often than annually. CGHS utilizes an outside investment consultant to implement its investment strategy.

Fair values of the pension plan investments are summarized as follows

	Pension Assets at Fair Value						
	as of September 30, 2011						
	-	ed Prices in	Signif				
		e Markets	Otl		_	ıficant	
	For	Identical	Obser	vable	Unob	servable	
	I	Assets	Inp		In	puts	
	<u>(L</u>	<u>evel 1)</u>	(Lev	<u>el 2)</u>	<u>(Le</u>	<u>vel 3)</u>	
Money market funds	\$	8,149	\$	-	\$	-	
Mutual funds							
Equities	_	22,548				<u> </u>	
Total mutual funds		22,548		-		-	
Alternative investments							
Debt securities		-		-	1	3,391	
Equities		-		-		8,229	
Real estate		-		-		6,321	
Multi-category	_	<u> </u>				8,372	
Total alternative investments		-		-	3	6,313	
US government securities							
U S treasuries		2.874		-		-	
GNMA, FNMA, FHLMC pools				9,884		-	
Government collateralized mortgage							
and asset backed	_	-		3,650			
Total U S government securities		2.874		13,534		-	
Corporate bonds							
Domestic		16,171		-		-	
Foreign	_	2,336		-			
Total corporate obligations		18,507		-		-	

	Pension Pension	Asset	s at	Fair	<u>Value</u>	
s o	f Septen	iber 30	0. 2	011.	contini	ued

	Quoted Prices in	Significant		
	Active Markets	Other	Significant	
	For Identical	Observable	Unobservable	
	Assets	Inputs	Inputs	
	(Level 1)	(Level 2)	(Level 3)	
Common stocks				
Domestic	\$ 47.248	\$ -	\$ -	
Foreign	<u>3,861</u>	<u>-</u> _	<u>-</u>	
Total common stocks	51,109	-	-	
Mortgage and asset back securities	-	8,773	-	
Real estate investment trusts	1,564	-	-	
Exchange traded funds	249	_		
	\$ <u>105,000</u>	\$ <u>22,307</u>	\$ <u>36,313</u>	

Pension Assets at Fair Value

	as of September 30, 2010						
	Quote	ed Prices in	Sıgı	nıficant			
	Activ	ve Markets	C	O ther	Significant		
	For	Identical	Obs	ervable	Unobservable		
		Assets	Ir	iputs		Inputs	
	<u>(I</u>	Level 1)	(Le	evel 2)	9	(Level 3)	
Money market funds	\$	2,826	\$	-	\$	_	
Equity mutual funds		24,439		-		_	
Alternative investments		-		-		28,385	
U S government securities							
U S treasuries		3,537		-		-	
Government agencies		604		-		-	
GNMA, FNMA, FHLMC pools		-		11,014		-	
Government collateralized mortgage							
and asset backed		<u> </u>		5,609		<u> </u>	
Total U S government securities		4,141		16,623		_	
Corporate bonds							
Domestic		13,086		-		_	
Foreign		1,200		<u> </u>		<u> </u>	
Total corporate bonds		14,286		-		_	
Common stocks							
Domestic		54,069		-		_	
Foreign		2,251		<u> </u>		<u> </u>	
Total common stocks		56,320		-		_	
Mortgage and asset backed securities		-		8,147		-	
Real estate investment trusts		1,771		-		-	
Exchange traded funds		<u>751</u>		<u> </u>			
	\$	104 534	\$	24 770	\$	28 385	

The table below sets forth a summary of changes in the fair value of the Plan's level 3 assets for the year ended September 30, 2011

Beginning balance	\$ 28,385
Realized gains	130
Unrealized gains	2,107
Purchases, net	5,691
Ending balance	\$ _36,313

12 **Incentive Plan Payable**

The purpose of the plan is to motivate each employee to work toward achieving certain performance goals. Incentive plan payments in the amount of approximately \$3,088,000 and \$4,235,000 to employees of CGHS at September 30, 2011 and 2010, respectively, were approved by the Board of Directors and are included in accrued compensation and withholdings in the accompanying balance sheets.

13 **Income Taxes**

Deferred income taxes, which as of September 30, 2011 and 2010, have no net carrying value, reflect the net tax effect of temporary differences between the carrying amounts of assets and liabilities for financial reporting and the amounts used for income tax purposes. As of September 30, 2011 and 2010, CGHS had deferred tax assets of approximately \$6,100,000 and \$7,400,000, respectively, relating principally to net operating loss carryovers. As of September 30, 2011 and 2010, such deferred tax assets were offset by a valuation allowance of approximately \$6,100,000 and \$7,400,000, respectively.

Federal net operating loss carryovers for CGHV totaled approximately \$16,100,000 at September 30, 2011, and will expire between 2017 and 2030

14 Commitments and Contingencies

<u>Litigation</u> - CGHS is involved in litigation arising in the ordinary course of business. After consultation with legal counsel, management estimates that these matters will be resolved without material adverse effect on CGHS's consolidated financial position.

MCCG is currently under investigation by the U.S. Department of Health and Human Services. Office of Inspector General ("OIG") In August 2008, a subpoena (the "Short-Stay Matter") was received requesting documents concerning Medicare reimbursement for zero- and one-day stays, three-day inpatient admissions, where the patient was discharged directly to a skilled nursing facility, and billing of evaluation and medical services. In April 2009, a second subpoena was received related to the Short-Stay Matter requesting certain medical records. MCCG has provided, and is continuing to provide, the documents and other information requested and is working with outside counsel and consultants to determine medical necessity of each claim.

In September 2010, MCCG received a letter from the OIG making the hospital aware that it was conducting an investigation to determine whether or not certain hospitals have submitted claims for payment for the implantation of implantable cardioverter defibrillators ("ICD's") which were not medically indicated or otherwise violated Medicare payment policy. MCCG has received an initial

analysis of claims submitted to Medicare that relate to services that were potentially excluded from coverage and are currently in the process of evaluating a sample of these claims

In November 2011, MCCG received a subpoena from the OIG in connection with an investigation into possible improper claims submitted to federal health care programs. The subpoena requests the production of documents and other materials related to certain contracts with a vendor, and focuses on contracts containing "upfront" payments or discounts that may have been provided by the vender

The OIG has made no specific demand for payment for these matters, and the investigations are ongoing Management is hopeful that all issues raised in the investigation will be resolved in the favor of MCCG. Because these are ongoing investigations and they involve interpretation of complex regulatory matters, a loss, if any, is highly uncertain and cannot be reasonably estimated. As such, no amount has been accrued in the consolidated financial statements at September 30, 2011. Due to the nature of the matter, this assessment may be subject to material adverse change in the near term.

General and Professional Liability Insurance - CGHS is currently insured for commercial general liability on an occurrence basis and professional liability on a claims-made basis by Centra Professional Indemnity. Ltd ("CPI"), a wholly-owned subsidiary of CGHS, and excess coverage by commercial insurance carriers through CPI. The excess coverage limits are \$50,000,000 for 2011 and 2010. The coverage for professional liability is limited to claims incurred and reported during its term. Actuarially determined funding is provided for losses.

For all claims prior to October 1, 2002, the policy had a limit of \$2 million per occurrence and \$6 million in aggregate. For all claims between October 1, 2002 and September 30, 2004, the policy had a limit of \$4 million per occurrence and \$12 million in aggregate, and for all claims between October 1, 2004 and September 30, 2006, the policy had a limit of \$4 million per occurrence and \$14 million in aggregate. Effective October 1, 2006, the policy has a limit of \$4 million per occurrence and \$20 million in aggregate.

CPI also insures CGHS on an occurrence basis for workers' compensation insurance, which has a limit of \$500,000 per occurrence, with no aggregate limit per year Beginning April 1, 2011, CPI began insuring CGHS for equipment maintenance and repairs with limits of liability of \$2,500,000 per claim and annual aggregate

During 2011 and 2010, CGHS paid premiums of approximately \$10,270,000 and \$10,523,000, respectively, to CPI for these coverages. These premiums have been properly eliminated from consolidated statements of operations. The reserve for self-insured losses totaled approximately \$51,817,000 and \$44,590,000 at September 30, 2011 and 2010, respectively, and are comprised of reported loss reserves and incurred but not reported loss reserves.

<u>Employee Group Health Insurance</u> - CGHS is self-insured for its employee group health insurance CGHS has estimated and recorded accruals for claims incurred, but not reported or paid prior to the fiscal year-end

<u>Property and Equipment</u> - CGHS has commitments for purchases of property and equipment of approximately \$39,000,000 at September 30, 2011

<u>Management Agreement</u> – During 2011, CGHS began providing financial assistance and management assistance to a hospital in Peach County, Georgia under a management agreement

CGHS expects to continue this relationship during 2012 and is currently negotiating a formal lease agreement with the Peach County Hospital Authority

15 Temporarily Restricted Net Assets

Temporarily restricted net assets as of September 30 are available for the following purposes

	<u>2011</u>	<u>2010</u>
Promises for future years	\$ 1,254	\$ 864
Program grants		
Pathology development	6,148	6,112
Children's Hospital	11,871	11,383
Regional health education center	948	941
Research and education	5,287	5,313
HEAT Trust	2,758	2,968
Community grants	7,104	7,052
Hospice inpatient facility	4,099	4,588
Emergency center	1,660	1,647
Georgia Heart Center	9,142	9,077
Critical care center	1,158	783
Other grants	_2,971	2,475
	\$ <u>54,400</u>	\$ <u>53,203</u>

16 Concentrations of Credit Risk

CGHS grants credit to patients, substantially all of whom reside in central Georgia CGHS generally does not require collateral or other security in extending credit to patients, however, they routinely obtain assignment of (or are otherwise entitled to receive) patients' benefits payable under their health programs, plans, or policies (e.g. Medicare, Medicaid, Blue Cross, and other preferred provider arrangements and commercial insurance policies). Revenue from the Medicare and Medicaid programs accounted for approximately 45% and 46% of CGHS's net patient revenue for the years ended September 30, 2011 and 2010, respectively.

The mix of receivables from patients and third-party payors at September 30, 2011 and 2010 was as follows

	<u>2011</u>	<u>2010</u>
Medicare	30%	29%
Medicaid	16	13
Blue Cross	13	12
Other third-party payors	30	31
Patients	<u>11</u>	<u>15</u>
	<u>100</u> %	<u>100</u> %

CGHS recognizes that revenues and receivables from government agencies are significant to its operations, but it does not believe that there are any significant credit risks associated with these government agencies

17 Functional Expenses

CGHS does not present expense information by functional classification because its resources and activities are primarily related to providing health care services. Further, since CGHS receives substantially all of its resources from providing health care services in a manner similar to a business enterprise, other indicators contained in these consolidated financial statements are considered important in evaluating how well management has discharged their stewardship responsibilities.

18 Fair Value of Financial Instruments

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

Cash and cash equivalents The carrying amounts reported in the consolidated balance sheets for cash and cash equivalents approximate their fair value

Investments Fair values, which are the amounts reported in the consolidated balance sheets, are based on quoted market prices, if available, estimated using quoted market prices for similar securities, or estimated using pricing models, discounted cash flow methodologies, or similar techniques

Patient accounts receivable The carrying amounts reported in the consolidated balance sheets for patient accounts receivable approximate their fair values

Due to or from related parties The carrying amounts reported in the consolidated balance sheets for due to or from related parties approximate their fair values

Assets limited as to use Fair values, which are the amounts reported in the consolidated balance sheets, are based on quoted market prices, if available, or estimated using quoted market prices for similar securities

Accounts payable and accrued expenses The carrying amounts reported in the consolidated balance sheets for accounts payable and accrued expenses approximate their fair value

Accrued compensation and withholdings The carrying amounts reported in the consolidated balance sheets for accrued compensation and withholdings approximate their fair value

Estimated third-party payor settlements The carrying amounts reported in the balance sheets for estimated third-party payor settlements approximate their fair value

Long-term debt Fair values of CGHS's revenue anticipation certificates are based on current traded value. The fair value of CGHS's remaining long-term debt is estimated using discounted cash flow analyses, based on CGHS's current incremental borrowing rates for similar types of borrowing arrangements.

The carrying amounts and fair values of CGHS's long-term debt at September 30 are as follows

	<u>2</u>	011	<u>2</u>	010
	Carry ing <u>Amount</u>	Fair Value	Carry ing <u>Amount</u>	Fair Value
Long-term debt	\$ 191,242	\$ 193,117	\$ 201,313	\$ 204,535

Derivative Financial Instruments The fair value of the derivative financial instruments are determined from a discounted cash flow model based on projected interest rates during the term of the contract and amounts outstanding on the corresponding long-term debt. In addition, credit risk associated with the counter party (when an asset) or CGHS (when a liability) is factored into the fair value model.

The following summarizes CGHS's assets and (liabilities) by level

Activ For	as of d Prices in e Markets Identical Assets				
\$	34.268	\$	-	\$	_
_	- - - - -		8,900		- - - -
_	- - -		8,311		- - -
_	- - - - -		436 10,738 1,296 2,159 1,273 25,360		- - - - -
	Activ For A (<u>L</u>	as of Quoted Prices in Active Markets For Identical Assets (Level 1)	as of Septemb Quoted Prices in Signif Active Markets Oth For Identical Obser Assets Inp (Level 1) (Level \$ 34.268 \$	Active Markets Significant	Active Markets For Identical Assets (Level 1) \$ 34.268 - 844 - 16.080 - 23.052 - 8.900 - 48.876 - 53.888 - 8.311 - 62.199 - 436 - 10.738 - 1.296 - 2.159 - 1.273 - 25.360

			september 30, 201 Significant Other Observable Inputs (Level 2)			
Equity securities	db.	024	dh.		45	
Real estate investment trusts	\$	824	\$	-	\$	-
Mutual funds		42,921		10,251		-
Common stock						
Consumer staples		28,539		-		-
Health care		25,164		-		-
Information technology		24,760		-		-
Financials		22,900		-		-
Consumer discretionary		19,198		-		-
Energy		16,250		-		-
Industrials		13,272		-		-
Materials		6,705		-		-
Foreign		6,270		-		-
Other		1,998				_
Total common stocks		<u>165,056</u>		<u> </u>		
Total equity securities		208,801		10,251		-
Alternative investments						
Commodities		-		-		52,827
Asset backed securities		-		-		2,586
Multi-category		-		-		26,800
Equities		-		-		27,995
Debt securities				_		48,737
Total alternative investments		<u>-</u>		<u>-</u>		158,945
	\$	243,069	\$	162,588	\$	158,945
Long-term investments in real estate funds	\$	<u> </u>	\$	<u>-</u>	\$	15,229
Included in other long-term liabilities						
Interest rate swap	\$	<u> </u>	\$	(14,557)	\$	

Assets ((Liabilities)	at F	aır	<u>Value</u>
as of Sent	tember 30	2011	CC	ntinued

		as of September 30, 2011, continued							
	Quoteo	l Prices in	Sıgnı	ficant					
	Active	Markets	Ot	her	Significant Unobservable				
	For I	dentical	Obser	rvable					
	A	ssets	Ing	outs	In	outs			
	(Le	evel 1)		rel 2)	-	vel 3)			
Included in assets limited as to use		<u>-</u>		<u>_</u>		<u>-</u>			
Money market funds	\$	5,707	\$	-	\$	-			
Equity securities									
Mutual funds		9,244		-		_			
Common stocks									
Consumer discretionary, staples		4,916		-		_			
Information technology		3,109		-		_			
Materials and industrials		2,930		-		-			
Health care		2,618		_		_			
Financials		1,808		_		_			
Energy		1,108		-		_			
Foreign		946		-		_			
Other equity securities		17,040		_		_			
				-		_			
U S corporate bonds		-		31,201		-			
U S government securities						_			
U S Treasure securities		7,236		-		_			
U S Federal Agency securities		-		5,379		-			
Mortgage-backed and asset backed									
securities		-		29,174		-			
Alternative investments		-		-		19,102			

Assets (Liabilities) at Fair Value

26,719

8,846

22,029

(11.539)

15,545

9,745

U S corporate bonds

U S government securities

Alternative investments

Long-term investments in real estate funds

Interest rate swap

U S mortgage-backed securities

Included in other long-term liabilities

		10					
	Quote	ed Prices in	Signif	icant			
	Activ	e Markets	Oth	er	Significant Unobservable		
	For	Identical	Obser	vable			
	I	Assets	Inp	uts	Inputs (Level 3)		
	<u>(L</u>	evel 1)	(Leve	<u>el 2)</u>			
Short-term investments							
Money market funds	\$	31,110	\$	-	\$	-	
Equity securities		253,475		-		-	
Alternative investments		-		-		141,601	
US mortgage-backed securities		-		60,910		-	
U S government issues and asset							
backed securities		26,725		-		-	
U S mortgage-backed and asset							
backed securities		-		44,674		-	
Included in assets limited as to use							
Cash equivalents		4,254		-		-	
Equity securities		52,571		-		-	

15,477

The table below sets forth a summary of changes in the fair value of CGHS's level 3 short-term and long-term investments for the year ended September 30, 2011

Beginning balance	\$ 151.346
Gain on market value	3,575
Sales	(7,000)
Purchases	26,253
Ending balance	\$ <u>174,174</u>

The table below sets forth a summary of changes in the fair value of CGHS's level 3 assets limited as to use for the year ended September 30, 2011

Beginning balance	\$ 15,545
Gain	2.280
Purchases	1,277
Ending balance	\$19,102

<u>Capital Commitments</u> – CGHS has future capital commitment requirements to invest additional amounts in certain level 3 investments At September 30, 2011, the outstanding commitments totaled approximately \$30,200,000

19 Equity Investments

Central Georgia Health Network, LLC - Central Georgia Health Network, LLC was incorporated on October 25, 1996, for the purpose of participating in contracts with preferred provider organizations, health maintenance organizations or other alternative health care delivery systems MCCG owns 29% of the common stock in Central Georgia Health Network. Inc MCCG's investment of approximately \$90,000 is recorded under the cost method of accounting

Central Georgia MRI, LLC - Central Georgia MRI, LLC ("CG MRI") was incorporated on October 2, 2000, as a joint venture with Radiology Associates to share the cost of an MRI laboratory CG MRI became operational on September 16, 2002 CGHV provided 50% of the capital in CG MRI and records the investment under the equity method of accounting The investment amounted to approximately \$391,000 and \$513,000 at September 30, 2011 and 2010, respectively

Georgia Magnetic Imaging Center, Ltd. - Georgia Magnetic Imaging Center, Ltd ("GMIC") was incorporated on March 22, 1985 to own and operate certain medical equipment CGHV purchased a 49 5% ownership interest in GMIC on December 31, 2002 for \$1,181,000 and records the investment on the equity method of accounting The investment amounted to approximately \$837,000 and \$942,000 at September 30, 2011 and 2010, respectively

Supplemental Information



Independent Auditors' Report on Supplemental Information

The Board of Directors Central Georgia Health Systems. Inc. and Affiliates Macon, Georgia

Our audits were conducted for the purpose of forming an opinion on the basic consolidated financial statements taken as a whole. The supplemental information accompanying the consolidated financial statements is presented for purposes of additional analysis and is not a required part of the basic consolidated financial statements. Such information has been subjected to the auditing procedures applied in our audit of the 2011 basic consolidated financial statements and, in our opinion, is fairly stated in all material respects in relation to the 2011 basic consolidated financial statements taken as a whole

Dixon Hughes Goodman LLP

Atlanta, Georgia January 27, 2012



Central Georgia Health Systems, Inc. and Affiliates

Consolidating Balance Sheet (dollars in thousands)

September 30, 2011

	Georgia Cer Health Ce Systems, Ge		Medical Center of Central Georgia, Inc	of Community I Health		Central Georgia Semor Health, Inc	Health Services of Central Georgia, Inc	Central Georgia Health Ventures, Inc		Central Georgia Rehabilition Hospital, LLC		Centra Professional Indemnity, Ltd	ional Plans of nity, Georgia,		Eliminations	<u>C(</u>	Consolidated
<u>Assets</u>																	
Current assets																	
Cash and cash equivalents	\$	977		\$ -	\$	1 257	\$ 234	\$	1 915	\$ 2.39	5 8	-	\$	2 366	\$ -	\$	62 089
Short-term investments		-	517 051	-		47 551	-		-	-		-		-	-		564 602
Patient accounts receivable net		-	126 055	-		-	2 045		1 263	2 23		-		-	-		131 600
Estimated third-party settlements		-		-		-	-		-	38	6	-		-	-		386
Other accounts and notes receivable		156	5 647	1 380)	782	689		419	-		-		586	(156	1	9 503
Prepaid expenses and other current assets	_	3	10 152	1.20		80	49		13	21		-		56	- 154		10 572
Total current assets		1 136	711 850	1 380	J	49 670	3 017		3 610	5 23	/	-		3 008	(156	1	778 752
Assets limited as to use		-	-	59 228	:	233	-		971	-		94 712		3 269	-		158 413
Long-term investments		-	15 229	-		-	-		-	-		-		-	-		15 229
Investments in subsidiaries		23 319	-	-		-	-		-	-		-		-	(23 319	1	-
Intercompany		369	(9 803)	-		(72)	(9)	1	1 069	8 44	6	-		-	-		-
Property and equipment net		4	353 910	239)	36 415	1 740		431	41	2	-		137	-		393 288
Cash surrender value of insurance policies		-	18 521	-		-	-		-	-		-		-	-		18 521
Other		3 106	2 715	88	3	7 90	994		1 228	-		-		-	(3.127)	5 794
Total assets	\$	27 934	\$ 1 092 422	\$ 60.935	\$	87 036	\$ 5.742	\$	7 309	\$ 14 09	5 8	94 712	\$	6 414	\$ (26,602	\$	1 369 997

(43) (continued)

Central Georgia Health Systems, Inc. and Affiliates

Consolidating Balance Sheet (dollars in thousands)

September 30, 2011

		entral eorgia ealth stems, Inc	Medical Center of Central Georgia, Inc	MedCen Community Health Foundation, Inc	Central Georgia Senior Health, Inc	Health Services of Central Georgia, Inc	Central Georgia Health Ventures, Inc	Central Georgia Rehabilition Hospital, LLC	Centra Professional Indemnity, Ltd	Secure Health Plans of Georgia, LLC	Eliminations	Consolidated
Liabilities, net assets and stockholder's equity											Limitations	Consolidated
Current liabilities												
Accounts payable and accrued expenses	\$	359	\$ 22,059	\$ 92	\$ 825	\$ 1.072	\$ 153	\$ 89	\$ 302	\$ 196	\$ 61	\$ 25,208
Accrued compensation and withholdings		-	31 030	-	-	-	269	-	-	421	-	31 720
Current portion of long-term debt		-	3 500	-	1 195	-	-	-	-	-	-	4 695
Entrance fee deposits		_	-	-	1 128	-	-	-	-	-	-	1 128
Estimated third-party settlements		_	5 164	-	_	-	-	-	-	-	-	5 164
Other current liabilities		400	12 166	67	-	130	1-4	6	1 938	41	-	14 762
Total current liabilities		759	73 919	159	3 148	1 202	436	95	2 240	658	61	82 677
Long-term debt less current portion		_	144 392	-	42 155	-	_	-	-	-	-	186 547
Reserve for self-insured losses		-	-	-	-	-	-	-	51 817	-	-	51 817
Accrued pension benefit liability		-	106 442	-	-	-	-	-	-	-	-	106 442
Deferred revenues from entrance fees												
less current portion		-	-	-	36 398	-	-	-	-	-	-	36 398
Other long-term liabilities		-	37 230	-	3 115	-	971	-	-	234	-	41 550
Asset retirement obligation		-	3 716	-	-	-	-	-	-	-	-	3 716
Total liabilities		759	365 699	159	84 816	1 202	1 407	95	54 057	892	61	509 147
Net assets												
Unrestricted net assets - controlling interest		27 175	726 294	6 376	2 220	4 540	-	14 000	-	-	21 481	802 086
Temporarily restricted		-	-	54 400	-	-	-	-	-	-	-	54 400
Noncontrolling interest in subsidiary		-	429	-	-	-	-	-	-	-	3 935	4 364
Total net assets		27 175	726 723	60 776	2 220	4 540	=	14 000	=	=	25 416	860 850
Stockholder's equity												
Common stock		-	-	-	-	-	-	-	17	3 731	(3.748)	
Paid-in-capital		-	-	-	-	-	25 895	-	1 653	-	(27 548)	
(Accumulated deficit) retained earnings		-	-	-	-	-	(19 993)	-	38 985	1 791	(20 783)	
Total liabilities net assets												
and stockholder's equity	\$	27 934	\$ 1 092 422	\$ 60.935	\$ 87.036	\$ 5.742	\$ 7,309	\$ 14 095	\$ 94 712	\$ 6414	\$ (26,602)	\$ 1 369 997

Consolidating Schedule of Operations and Changes in Net Assets (dollars in thousands)

For the Year Ended September 30, 2011

	Central Georgia Health Systems, Inc	Medical Center of Central Georgia, Inc	MedCen Community Health Foundation, Inc	Central Georgia Senior Health, Inc	Health Services of Central Georgia, Inc	Central Georgia Health Ventures, Inc	Central Georgia Rehabilition Hospital, LLC	American Eagle RRG	Centra Professional Indemnity, Ltd	Secure Health Plans of Georgia, LLC	Eliminations	Consolidated
Unrestricted revenues gains											Emmations	consonauta
and other support												
Net patient service revenues	\$ -	\$ 649 803	\$ -	\$ 790	\$ 20.762	\$ 4 999	\$ 16 397	\$ -	\$ -	\$ -	\$ -	\$ 692 751
Other revenue	440	25 646	3 099	13 564	(24)	323	-	-	9 868	6 072	(16 377)	42 611
Total revenues gains and												
other support	440	675 449	3 099	14 354	20 738	5 322	16 397	-	9 868	6 072	(16 377)	735 362
Expenses												
Labor and employee benefits	18 569	294 283	1 014	6 575	28 426	3 201	9 216	-	-	3 410	-	364 694
Supplies and other expenses	(14 374)	261 425	2 027	4 540	4 392	1 883	4 194	1 599	11 332	2 471	(17 521)	261 968
Depreciation and amortization	1	35 918	2	2 940	959	142	90	-	-	67	-	40 119
Provision for uncollectible accounts	-	35 765	-	-	1 318	264	192	-	-	-	-	37 539
Interest		6 036	-	1 233	-	-	-	-	-	=	-	7 269
Total expenses	4 196	633 427	3 043	15 288	35 095	5 490	13 692	1 599	11 332	5 948	(17 521)	711 589
Income (loss) from operations	(3.756)	42 022	56	(934)	(14 357)	(168)	2 705	(1 599)	(1 464)	124	1 144	23 773
Other income (loss)												
Investment income	(573)	29 827	10	2 287	31	1 098	1	9	4 029	222	(102)	36 839
Change in fair value of interest rate swap	-	(3 ()13)	-	(5)	_	-	-	-	-	-	_	(3.018)
Contribution	-	1 505	-	-	-	-	-	-	-	-	(1.505)	-
Other	-	(1 477)	-	-	(9)	-	(4)	-	-	(122)	(2.018)	(3 630)
Excess of revenues gains and other												
support over (under) expenses	(4 329)	68 864	66	1 348	(14 335)	930	2 702	(1.590)	2 565	224	(2.481)	53 964
Other changes in net assets	4 247	(82 458)	1 197	(2.313)	16 536	(2.382)		382	(3 044)	-	3 884	(63 951)
Total change in net assets	(82)	(13 594)	1 263	(965)	2 201	(1.452)	2 702	(1.208)	(479)	224	1 403	(9 987)
Net assets (liabilities) at beginning of year	27 257	740 317	59 513	3 185	2 339	7 354	11 298	1 208	41 134	5 298	(28 066)	870 837
Net assets (liabilities) at end of year	\$ 27 175	\$ 726 723	\$ 60 776	\$ 2,220	\$ 4.540	\$ 5,902	\$ 14 000	\$ -	\$ 40 655	\$ 5.522	\$ (26 663)	860 850

CENTRAL GEORGIA HEALTH SYSTEMS, INC. AND AFFILIATES

Consolidated Financial Statements and Supplemental Information

for the

Years Ended September 30, 2011 and 2010

(with Independent Auditors' Report thereon)

CENTRAL GEORGIA HEALTH SYSTEMS, INC. AND AFFILIATES

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Independent Auditors' Report

The Board of Directors Central Georgia Health Systems. Inc. and Affiliates Macon, Georgia

We have audited the accompanying consolidated balance sheets of Central Georgia Health Systems. Inc (dba Central Georgia Health System) and Affiliates ("CGHS") as of September 30, 2011 and 2010, and the related consolidated statements of operations, changes in net assets, and cash flows for the years then ended. These consolidated financial statements are the responsibility of CGHS's management. Our responsibility is to express an opinion on these consolidated financial statements based on our audits. We did not audit the financial statements of Medcen Community. Health Foundation. Inc. ("Medcen") or Centra Professional Indemnity. Ltd. ("CPI"), which are consolidated affiliates. Medcen and CPI had total assets of approximately \$60,935,000 and \$94,712,000, respectively, as of September 30, 2011, and total revenues of \$3,099,000 and \$9,868,000, respectively, for the year ended September 30, 2010. Medcen and CPI had total assets of approximately \$59,670,000 and \$97,286,000, respectively, as of September 30, 2010, and total revenues of \$2,760,000 and \$9,263,000, respectively, for the year ended September 30, 2010. Those statements were audited by other auditors whose reports have been furnished to us. Our opinion, insofar as it relates to data included for MedCen and CPI, consolidated affiliates, is based solely on the reports of other auditors.

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

In our opinion, based on our audits and the reports of other auditors, the consolidated financial statements referred to above present fairly, in all material respects, the consolidated financial position of Central Georgia Health Systems. Inc. and Affiliates at September 30, 2011 and 2010, and the consolidated results of their operations, changes in their net assets, and their cash flows for the years then ended, in conformity with accounting principles generally accepted in the United States.

As discussed in note 2 to the consolidated financial statements, Central Georgia Health Systems, Inc. adopted a new accounting principle generally accepted in the United States for noncontrolling interest in its subsidiaries during the year ended September 30, 2011

Dixon Hughes Goodman LLP

Atlanta, Georgia January 27, 2012



Consolidated Balance Sheets (dollars in thousands)

September 30, 2011 and 2010

<u>Assets</u>	<u>2011</u>	<u>20</u>	
Current assets			
Cash and cash equivalents	\$ 62,089	\$	63,279
Short-term investments	564,602		558,495
Patient accounts receivable, less allowance for			
uncollectible accounts of \$33,198 and \$38,192			
in 2011 and 2010, respectively	131,600		121,468
Third-party settlements	386		7,473
Other accounts and notes receivable	9,503		15,020
Prepaid expenses and other current assets	10,572		11,326
Total current assets	778,752		777,061
Assets limited as to use	158,413		161,510
Long-term investments	15,229		9,745
Property and equipment, net	393,288		387,904
Cash surrender value of insurance policies	18,521		19,565
Other	 5,794		5,360
Total assets	\$ 1,369,997	\$	1,361,145

Liabilities and Net Assets	<u>2011</u>	<u>2010</u>
Current liabilities		
Accounts payable and accrued expenses	\$ 25,208	\$ 28,400
Accrued compensation and withholdings	31,720	37,206
Entrance fee deposits and refunds payable	1,128	390
Estimated third-party settlements	5,164	-
Other current liabilities	14,762	28,019
Current portion of long-term debt	4,695	10,090
Total current liabilities	82,677	104,105
Long-term debt, excluding current portion	186,547	191,223
Reserve for self-insured losses	51,817	44,590
Accrued pension benefit liability	106,442	72,453
Deferred revenue from entrance fees	36,398	36,938
Other long-term liabilities	41,550	36,781
Asset retirement obligation	3,716	4,218
Total liabilities	509,147	490,308
Net assets		
Unrestricted	802,086	813,344
Temporarily restricted	54,400	53,203
Total net assets excluding noncontrolling interest	856,486	866,547
Noncontrolling interest in subsidiaries	4,364	 4.290
Total net assets	 860,850	 870,837
Total liabilities and net assets	\$ 1,369,997	\$ 1,361,145

Consolidated Statements of Operations (dollars in thousands)

For the Years Ended September 30, 2011 and 2010

	<u>2011</u>		<u>2010</u>
Unrestricted revenues, gains, and other support			
Net patient service revenue	\$	692,751	\$ 698,166
Other revenue		42,611	40,356
Total unrestricted revenues, gains, and other support		735,362	738,522
Expenses			
Labor and employee benefits		364,694	350,581
Supplies and other expenses		261,968	239,972
Depreciation and amortization		40,119	39,578
Provision for uncollectible accounts		37,539	54,340
Interest		7,269	7,676
Total expenses		711,589	 692,147
Income from operations		23,773	46,375
Other income (loss)			
Investment income		36,839	29,040
Change in fair value of interest rate swap		(3.018)	(4,330)
Other		(3.630)	(1.543)
Total other income		30,191	23,167
Excess of unrestricted revenues, gains, and other support over expenses		53,964	69,542
Excess of unrestricted revenues, gains, and other support over expenses attributable to noncontrolling interest		(637)	(1,022)
Excess of unrestricted revenues, gains, and other support over expenses attributable to controlling interest	\$	53,327	\$ 68,520

Consolidated Statements of Changes in Net Assets (dollars in thousands)

For the Years Ended September 30, 2011 and 2010

	<u>2011</u>	<u>2010</u>		
Unrestricted net assets, controlling interest				
Excess of unrestricted revenues, gains, and other				
support over expenses	\$ 53,327	\$	68,520	
Net unrealized (losses) gains on investments	(26,601)		18,562	
Change in pension plan and post retirement				
health care plan funded status	(40,415)		(17,226)	
Contribution	424		677	
Net assets released from restriction and other	2,007		1,304	
(Decrease) increase in unrestricted net assets.				
controlling interest	(11,258)		71,837	
Unrestricted net assets, noncontrolling interest				
Excess of unrestricted revenues, gains, and other				
support over expenses	637		1,022	
Distribution to noncontrolling interest	 (563)		(610)	
Increase in unrestricted net assets.				
noncontrolling interest	74		412	
Temporarily restricted net assets				
Contributions	2.729		2,753	
Investment gain	475		4.068	
Net assets released from restrictions	(2.007)		(1,304)	
Increase in temporarily restricted net assets	1,197		5,517	
(Decrease) increase in net assets	(9,987)		77.766	
Net assets at beginning of year	870,837		793,071	
Net assets at end of year	\$ 860,850	\$	870,837	

Consolidated Statements of Cash Flows (dollars in thousands)

For the Years Ended September 30, 2011 and 2010

	<u>2011</u>	<u>2010</u>	
Operating activities			
(Decrease) increase in net assets	\$ (9.987)	\$ 77.766	6
Adjustments to reconcile (decrease) increase in net assets to			
net cash provided by operating activities			
Net realized and unrealized losses (gains) on investments	1,478	(31.778	8)
Net restricted contributions and investment (income) loss	(2.254)	(6.82)	1)
Change in pension plan and post retirement			
health care plan funded status	40,415	17.226	6
Change in fair value of interest rate swap	3.018	4.330	0
Depreciation and amortization	40,119	39.578	8
Loss on disposal of property and equipment	2.758	1.27	1
Provision for uncollectible accounts	37.539	54,340	0
Amortization of deferred revenues	(2.171)	(1.793	3)
Proceeds from non-refundable entrance fees	727	3.04	4
Changes in operating assets and liabilities			
Patient accounts receivable, net	(47.671)	(47.325	5)
Other assets, prepaid expenses, and supplies	4,405	(1.886	6)
Accounts payable and accrued expenses	(3.192)	4.285	5
Accrued compensation and withholdings	(5.486)	10,04-	4
Estimated third-party payor settlements	12.251	(11.670	0)
Entrance fee deposits	1.599	(538	8)
Other current liabilities	(13.257)	(11.03)	1)
Supplemental benefit plan	1.044	(2.000	0)
Other long-term liabilities	(1.931)	(433	3)
Reserve for self-insured losses	7.227	(6.21-	4)
Accrued pension benefit liability	 (3,246)	(2.538	8)
Net cash provided by operating activities	63,385	87.857	7
Investing activities			
Purchase of property and equipment, net of retirements	(46,810)	(47,440	
Purchases of investments, net	(13.069)	(30,958	
Change in assets limited as to use, net	 3.097	(8.295	
Net cash used in investing activities	(56,782)	(86,699	9)
Financing activities			
Principal payments on long-term debt	(10,090)	(9.950	
Net restricted contributions and investment income (loss)	2.254	6.82	
Refund of entrance fees	(4.150)	(3.140	6)
Proceeds from refundable entrance fees	 4.193	3.78-	4
Net cash used in financing activities	 (7,793)	(2,49)	1)
Net change in cash and cash equivalents	(1.190)	(1.333	3)
Cash and cash equivalents at beginning of year	 63.279	64,612	2
Cash and cash equivalents at end of year	\$ 62,089	\$ 63.279	9

The accompanying notes are an integral part of these consolidated financial statements

CENTRAL GEORGIA HEALTH SYSTEMS, INC. AND AFFILIATES

Notes to Consolidated Financial Statements

For the Years Ended September 30, 2011 and 2010 (All tabular amounts in thousands)

1 Organization and General

Central Georgia Health Systems, Inc (dba Central Georgia Health System) was incorporated on November 17, 1994, as a nonprofit corporation whose primary purpose is to serve as a controlling body for the Medical Center of Central Georgia, Inc ("MCCG") and other affiliated entities, in supporting their mission of coordinating the functions of individual corporate providers of a comprehensive range of high quality, reasonably priced health care services to the central Georgia community. These entities described below are consolidated to form Central Georgia Health Systems. Inc. and Affiliates ("CGHS")

Medical Center of Central Georgia, Inc. - MCCG is a nonprofit medical center whose primary purpose is to provide inpatient, outpatient, physician care, home care, emergency and other health care related services to the central Georgia community MCCG operates the Doctors Office Building. Central Georgia Pet, LLC and the Hospice of Central Georgia MCCG is a controlled affiliate of CGHS

MCCG leases certain assets from the Macon-Bibb County Hospital Authority (the "Authority") for a term of 30 years Pursuant to the lease agreement dated February 14, 1995, effective October 1, 1995, substantially all assets of the Authority were transferred to MCCG and substantially all liabilities and operating responsibilities of the Authority were assumed by MCCG Pursuant to the new lease agreement dated July 1, 2005, the lease term has been extended to July 1, 2045. In addition, MCCG pays bond indebtedness, the related interest thereon, and certain other expenses of the Authority. At the expiration or termination of the agreement, all assets of MCCG and certain interests of affiliated entities shall be distributed, subject to such debt or other liabilities as may be applicable, to the Authority

<u>Central Georgia Health Ventures, Inc. ("CGHV")</u> – CGHV was incorporated on February 14, 1995 and is a taxable corporation whose primary purpose is to operate Central Georgia Home Care Services, Inc ("CGHC")

Health Services of Central Georgia, Inc. ("HSCG") - HSCG, incorporated on February 24, 1997, is a nonprofit corporation whose primary purpose is to employ healthcare providers such as physicians, nurse practitioners and physician assistants that are in short supply in private practice and to provide medical education

<u>Central Georgia Senior Health, Inc. d/b/a Carlyle Place ("CGSH")</u> - CGSH, incorporated on May 2, 1997, is a nonprofit corporation whose primary purpose is to construct, own, and operate a continuing care retirement community in Macon, Georgia

Medcen Community Health Foundation, Inc. ("Medcen") - Medcen, incorporated on July 13, 1973, is a nonprofit corporation whose primary purpose is to raise funds of any kind or character to be used exclusively for charitable, medical, educational, and scientific purposes at or in connection with CGHS

<u>Centra Professional Indemnity, Ltd. ("CPI")</u> - CPI, incorporated on November 14, 1995, is a controlled foreign corporation whose primary purpose is to provide certain professional and workers' compensation insurance coverage for CGHS

American Eagle Insurance Company Risk Retention Group ("American Eagle") - American Eagle, incorporated on August 1, 2003, under the laws of the state of Vermont, insures and reinsures medical malpractice risk for physicians and physician groups - American Eagle ceased operations as of July 1, 2011

Central Georgia Rehabilitation Hospital, LLC ("CGRH") - CGRH is a Georgia limited liability company whose sole member is Central Georgia Health System. Inc The Limited Liability Company operating agreement was made effective as of June 28, 2006, by Central Georgia Health Systems. Inc CGRH is operated with the sole mission to provide rehabilitation services to the central Georgia community

Central Georgia PET, LLC ("PET") - PET was incorporated on December 5, 2001, for the purpose of operating an outpatient radiology imaging center MCCG has a 66 7% ownership interest in PET whose operations are consolidated within MCCG's consolidated financial statements. Included in unrestricted net assets at September 30, 2011 and 2010, are approximately \$429,000 and \$477,000, respectively, representing the noncontrolling interest in PET.

Secure Health Plans of Georgia, LLC ("SHPG") - SHPG, incorporated on November 6, 1996, is a limited liability company whose primary purpose is to provide certain health care services through the establishment, operation, and maintenance of a diversified portfolio of insurance products CGHS provided 50 4% of the capital of SHPG Included in unrestricted net assets at September 30, 2011 and 2010, are \$3,935,000 and \$3,813,000, respectively, representing the noncontrolling interest in SHPG

2 Significant Accounting and Reporting Policies

A summary of the significant accounting and reporting policies followed by CGHS in the preparation of its consolidated financial statements is presented below

Accounting Standards – CGHS follows accounting standards set by the Financial Accounting Standards Board, commonly referred to as the "FASB" The FASB sets accounting principles generally accepted in the United States of America ("GAAP") that CGHS follows to ensure consistent reporting of its financial condition, results of operations, and cash flows References to GAAP issued by the FASB in these footnotes are to the FASB Accounting Standards Codification, sometimes referred to as the "Codification" or "ASC" Updates to the Codification are referred to as Accounting Standard Updates ("ASU")

<u>Principles of Consolidation</u> - The consolidated financial statements include the accounts of CGHS and all affiliated entities. All significant intercompany transactions and accounts have been eliminated in consolidation.

Noncontrolling Interest in Subsidiary - During 2011. CGHS adopted new GAAP guidance for noncontrolling interest in subsidiaries. As required by the guidance, presentation and disclosure has been applied retrospectively and are included in the consolidated balance sheets and the consolidated statements of operations and changes in net assets. In addition, the adoption had the effect of increasing beginning unrestricted net assets by \$4,290,000 and \$3,878,000 at October 1, 2010 and October 1, 2009, respectively, due to the retrospective application of this new guidance.

<u>Fair Value Measurements</u> – GAAP defines fair value as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date GAAP requires entities to maximize the use of observable inputs and minimize the use of unobservable inputs in measuring fair value, and GAAP establishes a three level hierarchy that prioritizes the inputs used to measure fair value. The three levels of inputs used to measure fair value are as follows

- Level 1 Quoted prices in active markets for identical assets or liabilities such as debt and equity securities, mutual funds, and money market accounts that are traded in an active market, and other cash equivalents. Level one investments include common stocks, equity mutual funds and money market funds that are traded in an active market.
- Level 2 Observable inputs other than level 1 prices, such as quoted prices for similar assets or liabilities, quoted prices in markets that are not active, or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities. CGHS's level two investments include corporate bonds. U S government obligations, and asset and mortgage backed securities. CGHS utilizes a third party pricing service to determine the fair value of each of these investment securities. Because quoted prices in active markets for identical assets are not available, these prices are determined using observable market information such as quotes from less active markets and/or quoted prices of securities with similar characteristics.
- Level 3 Unobservable inputs that are supported by little or no market activity and that are significant to the fair value of the assets or liabilities. Level 3 assets and liabilities include financial instruments whose value is determined using pricing models, discounted cash flow methodologies, or similar techniques, as well as instruments for which the determination of fair value requires significant management judgment or estimation CGHS's level three investments include limited liability partnerships and limited liability companies. The fair value for these investments are determined by applying CGHS's ownership percentage to the net asset value of the investment fund. Underlying investments of the funds include hedge funds, real estate funds, mortgage back securities, asset backed securities and global equity fund of funds.

<u>Cash and Cash Equivalents</u> - Cash and cash equivalents consist of cash on hand, deposits with banks, overnight sweep repurchase agreements and investments in highly liquid debt instruments with maturities of three months or less when purchased, excluding assets limited as to use From time to time CGHS deposits at banks exceed the Federal Deposit Insurance Corporation insurance limit By policy, the amount of credit exposure to any one institution is limited, and such investments are generally not collateralized

<u>Investments</u> - Investments in marketable equity securities and all investments in debt securities are stated at fair value in the consolidated balance sheets. All investments have been designated by management to be other than trading securities. Investment income or loss (including realized gains and losses on investments, interest, dividends and other-than-temporary impairment in investments) is

included in the excess of unrestricted revenues, gains, and other support over expenses unless the income or loss is restricted by donor or law. Unrealized gains and losses on investments are excluded from the excess of unrestricted revenues, gains, and other support over expenses.

Management evaluates individual securities to ascertain whether other-than-temporary impairment ("OTTI") has occurred. Management considers several factors including when the security might recover in value, declines in market value below 80% of the original cost for a period in excess of a year, and whether or not management intends to hold the respective security until the anticipated recovery in value occurs. Based on this evaluation, CGHS recognized approximately \$2,086,000 of OTTI for the year ended September 30, 2010. This amount is included as a reduction of investment income in the accompanying consolidated statements of operations and changes in net assets. No OTTI was recognized during 2011. During 2011 and 2010, approximately \$262,000 and \$3,163,000, respectively, of OTTI losses recognized in previous years were realized when the corresponding investments were sold.

Assets Limited as to Use - Assets limited as to use include assets held by trustees under bond indenture agreements, held for use for Medcen activities and by donor restrictions, set aside for the self-insurance reserve fund, or set aside by the Board of Directors ("Board") for future capital improvements, over which the Board retains control and may at its discretion subsequently use for other purposes

Interest Rate Swap - CGHS utilizes an interest rate swap to manage the variability in interest rates on certain of its variable rate debt. Derivative instruments are required to be reported at fair value as either assets or liabilities in the balance sheet. The accounting for changes in the fair value (i.e., gains or losses) of a derivative instrument depends on whether it has been designated and qualifies as part of a hedging relationship and, further, on the type of hedging relationship. For those derivative instruments that are designated and qualify as hedging instruments, an entity must designate the hedging instrument, based upon the exposure being hedged. For derivative instruments not designated as hedging instruments, the changes in fair value are recognized in the performance indicator.

The performance indicator (excess of unrestricted revenues, gains, and other support over expenses) reported by not-for-profit healthcare organizations is analogous to income from continuing operations of a for-profit enterprise CGHS does not account for the interest rate swap under hedge accounting, and, accordingly, changes in the value of the swap are recorded above the performance indicator. Due to the uncertainty inherent in the valuation process, such estimates of fair value may differ significantly from the values that would have been used had a ready market for the securities existed.

Net Patient Service Revenue and Patient Accounts Receivable - CGHS has agreements with third-party payors that provide for payments at amounts different from their established rates. Payment arrangements include prospectively determined rates per discharge, reimbursed costs, discounted charges, and per diem payments. Net patient service revenue is reported at the estimated net realizable amounts from patients, third-party payors, and others for services rendered and include estimated retroactive revenue adjustments under reimbursement agreements with third-party payors due to future audits, reviews, and investigations. Retroactive adjustments are considered in the recognition of revenue on an estimated basis in the period the related services are rendered, and such amounts are adjusted in future periods as adjustments become known or as years are no longer subject to such audits, reviews, and investigations.

Allowance for Uncollectible Accounts - The allowance for uncollectible accounts is based upon management's assessment of historical and expected net collections, considering business and economic conditions, trends in health care coverage and other collection indicators. Periodically, management assesses the adequacy of the allowance for uncollectible accounts based upon historical write-off experience by payor category. The results of this review are then used to make any modifications to the provision for bad debts to establish an appropriate allowance for uncollectible accounts.

<u>Inventory</u> – Inventory is included as a component of other current assets on the consolidated balance sheets, and consists primarily of medical supplies stated principally at the lower of average cost or market

<u>Property and Equipment</u> - Property and equipment acquisitions are recorded on the basis of cost Expenditures for maintenance and repairs are charged to expense Expenditures that materially increase the value of property and equipment or extend useful lives are capitalized as a cost of the applicable property and equipment CGHS removes the costs and related allowances from the accounts for properties sold or retired

Property and equipment are depreciated using straight-line methods over their estimated economic lives. Useful lives range from 5 to 25 years for land improvements, 20 to 40 years for buildings, and 5 to 15 years for equipment.

<u>Long-Lived Assets</u> – Periodically, reviews are performed of long-lived assets, such as property and equipment and goodwill, to determine whether any impairment exists. Management believes that the long-lived assets in the accompanying consolidated balance sheets are appropriately valued at September 30, 2011 and 2010.

<u>Vacation Policy</u> - Employee vacation pay is accrued when earned by the employee and is recorded within accrued compensation and withholdings on the consolidated balance sheets

<u>Entrance Fee Deposits</u> - Deposits received from future residents (10% of the entrance fee) of the continuing care retirement community are held in an escrow account, earning interest, until the residents move into the continuing care retirement community. These deposits are recorded as a current liability

<u>Refundable and Nonrefundable Entrance Fees</u> - Refundable and nonrefundable entrance fees are received from residents upon admission to the continuing care retirement community

Certain contracts with residents stipulate that entrance fees are refundable on a vacated unit when the entrance fee on a comparable unit has been collected. Refundable entrance fees are recorded as deferred revenue and amortized on a straight-line basis over the remaining useful life of the facility.

Certain contracts with residents stipulate that entrance fees are not refundable forty-eight months after the original contract date. Nonrefundable entrance fees are recorded as deferred revenue and amortized on a straight-line basis over the life expectancy of the resident on the date of occupancy. Unamortized deferred revenue from nonrefundable entrance fees is recorded as revenue upon a resident's death or the termination of the contract.

<u>Temporarily Restricted Net Assets</u> - Temporarily restricted net assets are those whose use is restricted by the donor for a specific time period or purpose

Reserve for Self-Insured Losses – CGHS is insured by CPI for certain professional and workers' compensation insurance. CPI determines its provision for known cases on the basis of the losses reported to it by a claims handler. CPI has engaged the services of independent consulting actuaries to advise on the required level of total outstanding loss reserves. The provision for outstanding loss reserves is therefore based upon the advice of these actuaries and management's best estimate for the ultimate development of losses reported.

Changes in estimates of outstanding claims reserves resulting from the continuous review process and differences between estimates and payments are recognized in income in the period in which they are determined

CPI records its estimated liabilities gross of any amounts recoverable under its own reinsurance, which amounts, if any, are recorded separately in the consolidated balance sheets. In the event that CPI reinsurers are unable to meet their obligations under the reinsurance agreements. CPI would be liable to pay all losses under the reinsurance assumed but would only receive reimbursement to the extent that the reinsurers can meet their obligations

Operating and Nonoperating Activities - CGHS's primary purpose is to provide diversified health care services to the community. As such, activities related to the ongoing operations of CGHS are classified as operating activities. Operating revenues include those generated from direct patient care, related support services, and sundry revenues related to the operation of CGHS. Activities not directly related to the ongoing operations of CGHS, or that occur infrequently, are reported as other revenue included in other revenue are activities related to cafeteria, parking, grant, and other miscellaneous revenues. In addition, gains or losses from disposition of operating properties, earnings on interest bearing deposits, change in fair values of interest rate swaps, interest on nonoperating investments, and marketable securities that are used to support health related activities are reported as other income

<u>Charity Care</u> - CGHS provides care to patients who meet certain criteria under its charity care policy without charge or at amounts less than its established rates CGHS accepts all patients regardless of their ability to pay Because CGHS does not pursue collection of amounts determined to qualify as charity care, such amounts are excluded from net patient service revenue. Partial payments to which CGHS is entitled from public assistance programs on behalf of patients that meet CGHS's charity care criteria are reported as net patient service revenue.

Excess of Unrestricted Revenues, Gains, and Other Support Over Expenses - The consolidated statements of operations include excess of unrestricted revenues, gains, and other support over expenses. Changes in unrestricted net assets which are excluded from excess of unrestricted revenues, gains, and other support over expenses, consistent with industry practice, include unrealized gains and losses on investments other than trading securities, permanent transfers of assets to and from affiliates for other than goods and services, changes in unfunded pension and postretirement plan gains and losses, and contributions of long-lived assets (including assets acquired using contributions which by donor restriction were to be used for the purposes of acquiring such assets)

<u>Gifts, Contributions, and Grants</u> - Gifts, contributions, and grants are recorded at market value as of the date of receipt Noncash items are recorded at market value on the date of the gift Contributions restricted by the donor are recorded in restricted net assets at market value on the date of the contribution

<u>Donor-Restricted Gifts</u> - Unconditional promises to give cash and other assets are reported at fair value at the date the promise is received. Conditional promises to give and indications of intentions to give are reported at fair value at the date the gift is received. The gifts are reported as either temporarily or permanently restricted support if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reported in the consolidated statement of operations as net assets released from restrictions. Donor-restricted contributions whose restrictions are met within the same year as received are reported as unrestricted contributions in the accompanying consolidated financial statements.

<u>Income Tax</u> – Central Georgia Health Systems, Inc., MCCG, HSCG, CGSH, and Medcen are organizations exempt from federal income tax, pursuant to Section 501(a) as organizations described in Section 501(c)(3) of the Internal Revenue Code of 1986, as amended CPI is a foreign corporation not subject to tax in the United States PET, CGRH and SHPG are organized under Georgia law and the Internal Revenue Code as limited liability companies ("LLC") The members of an LLC report taxable income or loss on their corporate or individual tax returns CGHS's share of income from PET, CGRH and SHPG operations is not considered unrelated business income ("UBI") and is therefore not subject to tax

CGHV and American Eagle are subject to income tax. With respect to its for-profit subsidiaries, CGHS accounts for income taxes in accordance with the liability method under which deferred tax assets and liabilities are determined based on the differences between the financial accounting and tax bases of assets and liabilities. Deferred tax assets or liabilities at the end of each period are determined using the currently enacted tax rate expected to apply to taxable income in the periods that the deferred tax asset or liability is expected to be realized or settled

CGHS and its affiliates have evaluated their tax positions and have determined that they do not have any material unrecognized tax benefits or obligations as of September 30, 2011 Fiscal years ending on and after September 30, 2008 remain subject to examination by federal and state tax authorities

<u>Use of Estimates</u> - The preparation of consolidated financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the consolidated financial statements. Estimates also affect the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Asset Retirement Obligations – A conditional asset retirement obligation is an unconditional legal obligation to perform an asset retirement activity in which the timing and (or) method of settlement are conditional on a future event that may or may not be within the control of the entity CGHS recognizes a liability for the fair value of a conditional asset retirement obligation if the fair value of the liability can be reasonably estimated

<u>Cash Surrender Value of Insurance Policies</u> – CGHS previously had a supplemental executive benefit program ("SEBP") for current and retired executives ("Executive" or "Executives") that was designed to protect against the loss of key employees CGHS paid premiums on insurance policies for each Executive in the plan CGHS anticipated that the cash surrender value of the policies would grow to amounts sufficient for the Executives to take withdrawals from, or borrow against, the value to supplement the Executives' retirement income During 2009, CGHS suspended the SEBP program and stopped making further premium payments on the insurance policies

CGHS continues to retain an assigned interest in the life insurance policies. As such, CGHS records the cash surrender value of the policies, which is included as a long-term asset

Pension Plan and Postretirement Health Care Benefits - CGHS sponsors a defined benefit pension plan and a postretirement health care plan CGHS recognizes the overfunded and underfunded status of the defined benefit pension and postretirement plans in its balance sheets. Changes in the funded status are recorded in the year in which the changes occurred through changes in unrestricted net assets. Plan assets and benefit obligations are measured as of the date of the fiscal year-end balance sheet.

<u>Subsequent Events</u> – CGHS evaluated the effect subsequent events would have on the consolidated financial statements from October 1, 2011 through January 27, 2012, which is the date the consolidated financial statements were issued

Recent Accounting Pronouncements - In August 2010, the FASB issued ASU No 2010-23, Measuring Charity Care for Disclosure ("ASU 2010-23") The provisions of ASU 2010-23 are intended to reduce the diversity in how charity care is calculated and disclosed by health care entities. Charity care is required to be measured at cost, defined as the direct and indirect costs of providing the charity care. As CGHS does not recognize revenue when charity care is provided. ASU 2010-23 will have no effect on the consolidated statements of operations and changes in net assets. ASU 2010-23 only requires additional disclosures, including the method used to estimate the cost of charity care. This new guidance is effective for CGHS for the year ended September 30, 2012.

In August 2010, the FASB issued ASU No 2010-24, *Presentation of Insurance Claims and Related Insurance Recoveries* ("ASU 2010-24") ASU 2010-24 prohibits the netting of insurance recoveries against a related claim liability and requires the claim liability to be calculated without consideration of insurance recoveries. This guidance is effective for CGHS for the year ended September 30, 2012

In July 2011, the FASB issued ASU No 2011-07, Presentation and Disclosure of Patient Service Revenue, Provision for Bad Debts, and the Allowance for Doubtful Accounts for Certain Health Care Entities. The amendments in this update require certain health care entities to change the presentation of their statement of operations by reclassifying the provision for bad debts associated with patient service revenue from an operating expense to a deduction from patient service revenue (net of contractual allowances and discounts), as well as to provide enhanced disclosures about policies for recognizing revenue and assessing bad debts. The amendments also require disclosures of patient service revenue (net of contractual allowances and discounts) as well as qualitative and quantitative information about changes in the allowance for doubtful accounts. This guidance is effective for CGHS for the year ended September 30, 2013.

3 Net Patient Service Revenue

A summary of payment arrangements with major third-party payors follows

Medicare

Medicare inpatient and outpatient services, with certain limited exceptions, are based on a prospective reimbursement methodology referred to as the Prospective Payment System ("PPS") for inpatients and Ambulatory Payment Classifications ("APCs") for outpatients Under PPS, a hospital is reimbursed at predetermined rates for an episode of care based on diagnosis-related groups ("DRGs") for inpatients and APCs for outpatients, which classify treatments for illnesses according to the estimated intensity of hospital resources necessary to furnish care for each diagnosis. As a teaching hospital, CGHS receives payments for training physicians and other medical professionals (graduate medical education or GME payments). These payments are in two different forms, direct medical education ("DME") and indirect medical education ("IME") payments. DME payments support the direct costs of training while IME payments support the higher infrastructure that teaching hospitals incur relating to teaching, and higher patient acuity. As a hospital serving a disproportionate share of low-income patients (Medicare and Medicaid patients eligible to receive supplemental Social Security income). CGHS also receives additional payments in the form of disproportionate share payments

CGHS is reimbursed for cost reimbursable items at a tentative rate with final settlement determined after submission of an annual cost report and audits thereof by the Medicare fiscal intermediary. CGHS's classification of patients under the Medicare program and the appropriateness of their admission are subject to an independent review by a peer review organization. CGHS's cost reports have been audited and final settled by the Medicare fiscal intermediary through September 30, 2006. Desk review adjustments have been received for the 2007, 2008 and 2009 cost report years, and these changes from prior year estimates have been recorded in estimated third party pay or settlements.

Medicaid

Inpatient services rendered to Medicaid program beneficiaries are reimbursed under a diagnostic related group based methodology that is not subject to retroactive settlement. Outpatient services are paid on a cost reimbursement methodology subject to certain limits. Services rendered under this program are recorded at established rates and reduced to the estimated amount due from the third-party payors through recording of contractual adjustments and other discounts. Because CGHS cannot pursue collections for the contractual or discounted amounts, they are not reported as revenue.

Beginning June 1, 2006. Georgia Medicaid moved a significant portion of its recipients to managed care companies called Care Management Organizations ("CMO") Contractual payments are made by the CMO for services provided using the same methodology and payment rates as traditional Medicaid CGHS's cost reports have been audited and final settled by the Medicaid fiscal intermediary through September 30, 2006

Managed Care and Other Payors

CGHS has entered into payment agreements with certain commercial insurance carriers, health maintenance organizations, and preferred provider organizations. The bases for payment to CGHS under these agreements include prospectively determined rates per discharge, discounts from established charges, and prospectively determined daily rates

Net patient service revenues are reported at the estimated net realizable amounts from third-party payors and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payors. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and are adjusted in future periods as interim or final settlements are determined. In the opinion of management, adequate provisions have been made for any adjustments that may result from such reviews. However, it is reasonably possible that recorded estimates will change by material amounts in the near term. Net patient service revenue increased approximately \$7.914,000 and \$1.681,000 for 2011 and 2010, respectively, due to changes in amounts previously estimated as a result of final settlements and changes in estimates.

Laws and regulations governing the Medicare and Medicaid programs are complex and subject to interpretation CGHS believes that it is in compliance with all applicable laws and regulations and is not aware of any pending or threatened investigations involving allegations of potential wrongdoing that would have a material effect on the consolidated financial statements. Compliance with such laws and regulations can be subject to future government review and interpretation as well as significant regulators action including fines, penalties, and exclusion from the Medicare and Medicaid programs

The Medicare Prescription Drug, Improvement, and Modernization Act of 2003 created the Recovery Audit Contractors ("RAC") program to detect and correct improper payments in the Medicare program. The RAC reviews in Georgia began in late 2009 and continued in 2011. Management believes its billings policies will not result in significant overpayments, however, the effect of RAC reviews cannot be reasonably estimated, and the results of such reviews could materially affect the future operations of CGHS.

Gross patient service charges and net patient service revenue for the years ended September 30 include

	<u>2011</u>	<u>2010</u>
Gross patient service charges	\$ 1,902,726	\$ 1.804,434
Contractual adjustments Medicare	584,009	523,863
Medicaid		
	244,550	244,934
Other	300,186	259,897
Total contractual adjustments	1,128,745	1.028,694
Charity care		
Charity care charges	75,181	74,219
County contributions from tax revenue	(688)	(938)
Other state funding	(2,528)	(3,293)
Net charity care	71,965	69,988
Other allowances	9,265	7,586
Total deductions from gross patient service charges	1,209,975	1,106,268
Net patient service revenue	\$ <u>692,751</u>	\$ <u>698,166</u>

Indigent Care Trust Fund - Under the provisions of the Georgia Indigent Care Trust Fund Act ("ICTF"). Medicaid disproportionate share hospitals ("DSH") may contribute funds to be used by the State in the Medicaid program and which will be supplemented by federal funds (combination dollars). The combination dollars are returned to DSH as additional Medicaid inpatient reimbursement.

Amounts recorded in the consolidated financial statements related to the ICTF are summarized approximately as follows

		<u>2011</u>		<u>2010</u>
Amounts received from the ICTF Contribution to ICTF	\$	10,148 3,524	\$ _	13,593 4,742
Excess received over contribution	\$ =	6,624	\$ _	8,851

<u>Upper Payment Limit</u> - Under the provisions of the Georgia Upper Payment Limit Rate adjustments ("UPL"), government owned or operated hospitals, nursing homes and critical access eligible hospitals may contribute funds to be used by the state in the Medicaid program, which will be supplemented by federal funds (combination dollars)

Amounts recorded in the consolidated financial statements related to the UPL are summarized approximately as follows

	<u>2011</u>			<u>2010</u>		
Amounts received from UPL Contributions to UPL	\$	7,164 2,064	\$	1,215 416		
Excess received over contribution	\$	5,100	\$	<u>799</u>		

Net amounts received under the ICTF and UPL programs are within net patient revenue. The federal government does not ensure future ICTF and UPL funding. Reduced ICTF and UPL funding may impact the CGHS's operations.

4 **Investments**

Investments are summarized as follows

	<u>2011</u>		<u>2010</u>
Short-term investments			
Money market fund	\$ 34,268	\$	31,110
Equity securities	219,052		253,475
Alternative investments	158,945		141,601
Asset backed securities	48,876		60,910
US Treasury obligations and			
other government backed securities	41,262		26,725
Corporate bonds	62,199	_	44,674
	\$ 564,602	\$ _	558,495
Long-term investments in real estate funds	\$ 15,229	\$ _	9,745

Investment securities are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, the possibility is reasonable that changes in the values of investment securities will occur in the near term and that these changes could materially affect the amounts reported in the consolidated balance sheets

CGHS invests in alternative investments that are defined as venture capital, international and domestic private equity investments, and absolute return (hedge) funds. Long-term investments are alternative investment real estate funds that require seven to ten year fund terms before the investments can be liquidated.

The recorded market price for alternative investments is estimated by the individual investment manager taking into account such factors as the financial condition of each investee, economic and market conditions affecting their operations, any changes in management, the length of time since the initial investment, recent transactions involving the securities of the investee, the value of similar securities issued by companies in the same or similar businesses, and limited marketability of the portfolio

Valuations provided by the general partners and investment managers are evaluated by management through accounting and financial reporting processes to review and monitor existence and valuation assertions. Due to the inherent uncertainty of valuation of the alternative investments, the fair values estimated by the individual investment manager, in the absence of readily ascertainable market values, may not necessarily represent the amounts that could be realized from sales or other dispositions of investments, and the differences may be material

Investment income for assets limited as to use and short-term investments for the years ended September 30 includes

•		<u>2011</u>	<u>2010</u>
Investment income			
Interest and dividends	\$	11,716	\$ 15,824
Net realized gains (losses)			
Loss on OTTI		_	(2.086)
OTTI loss previously recognized		262	3,163
Realized gains		24,861	12,139
	_	25,123	13,216
	\$ =	36,839	\$ 29,040
Other changes in unrestricted net assets Unrealized gains (losses) on investments, other than			
trading securities	\$ _	(26,601)	\$ 18,562

The following table shows the gross unrealized losses and fair value of CGHS's short-term investments with unrealized losses that are not deemed to be other-than-temporarily impaired, aggregated by investment category and length of time that individual securities have been in a continuous unrealized position at September 30, 2011 and 2010

	Less than	12 Months	12 Month	s or Greater	 Total		
		Unrealized		Unrealized		Unrealized	
	<u>Fair Value</u>	<u>Losses</u>	Fair Value	<u>Losses</u>	<u>Fair Value</u>	<u>Losses</u>	
Corporate bonds	\$ 22,315	\$ (792)	\$ 2,801	\$ (226)	\$ 25,116	\$ (1.018)	
Equity securities	86,837	(15.053)	2,644	(651)	89,481	(15,704)	
Asset backed surities	16,111	(402)	4,147	(235)	20,258	(637)	
Alternative investments	37,299	(1,380)	<u>235</u>	(238)	<u>37,534</u>	<u>(1,618</u>)	
Total	\$ <u>162,562</u>	\$ <u>(17,627</u>)	\$9,827	\$ <u>(1,350</u>)	\$ <u>172,389</u>	\$ <u>(18,977</u>)	
		Septembe	er 30, 2010				
	Less than	12 Months	12 Month	s or Greater	To	otal	
		Unrealized		Unrealized		Unrealized	
	Fair Value	Losses	Fair Value	Losses	Faır Value	Losses	
Equity securities Asset backed securities	\$ 33,357 7,649	\$ (2,387) (114)	\$ 22,528 2,262	\$ (2,578) (114)	\$ 55,885 9,911	\$ (4,965) (228)	
U S government and agency securities	12,938	(169)	2,575	<u>(43</u>)	15,513	(212)	
Total	\$ <u>53,944</u>	\$ <u>(2,670)</u>	\$ <u>27,365</u>	\$(2,735)	\$ <u>81,309</u>	\$ <u>(5,405)</u>	

The unrealized losses on CGHS's investments were caused by changes in interest rates, the performance of the various companies in which CGHS maintains an equity interest, and the performance of the mortgage securities. Because CGHS anticipates that these investments will recover in the near term and that CGHS has the ability and intent to hold these investments until a recovery of fair value. CGHS does not consider the investments included in the above table to be other-than-temporarily impaired at September 30, 2011 and 2010.

5 Assets Limited as to Use

The composition of assets limited as to use stated at fair value is set forth in the following table

		<u>2011</u>	<u>2010</u>
Self-insurance reserve fund			
Cash and cash equivalents	\$	2,434	\$ 1,395
U S corporate bonds		25,093	21,633
U S government securities		10,114	20,617
U S mortgage and asset backed securities		26,625	19,800
Equity securities		18,306	23,986
Other	_	12,140	9,855
		94,712	97,286
Medcen Foundation, Inc			
Cash and cash equivalents		283	363
Money market funds		3,273	2,859
U S government securities		2.501	3,706
U S corporate bonds		6.108	5,086
Mortgage backed securities		2,549	2,229
Mutual funds		7,434	8,440
Equity securities		17.978	20,145
Private equities		19,102	15,545
man oqualos	_	59,228	58,373
Reservation deposits, held under escrow agreement			
Cash and cash equivalents		233	648
cash and cash equivalents		233	040
Held by trustee under indenture agreement			
Money market funds		-	940
Designated by Board			
Other		4,240	4,263
	-		
	\$ _	<u>158,413</u>	\$ <u> 161,510</u>

The self-insurance reserve fund amounts are held primarily by CPI in connection with the insurance program

2011

2010

6 **Property and Equipment**

Property and equipment consisted of the following at September 30

	<u>2011</u>	<u>2010</u>
Land and land improvements	\$ 28,003	\$ 28,277
Buildings and improvements	388,162	388,743
Parking deck	46,473	46,473
Movable equipment	278,733	276,014
Fixed equipment	94,391	98,688
	835,762	838,195
Less accumulated depreciation	464,830	473,599
	370,932	364,596
Construction-in-progress	22,356	23,308
	\$ 393,288	\$ <u>387,904</u>

Depreciation expense for the years ended September 30, 2011 and 2010 amounted to approximately \$38,668,000 and \$38,095,000, respectively

7 Asset Retirement Obligations

The fair value of a liability for a conditional asset retirement obligation is recognized in the period in which it occurred if a reasonable estimate of fair value can be made. CGHS has determined that conditional legal obligations exist for its facilities related primarily to asbestos materials. CGHS has recorded a liability of approximately \$3,716,000 and \$4,218,000 for the estimated present value for the conditional asset retirement obligation at September 30, 2011 and 2010, respectively. Discount rates used to calculate the present value of the obligation were 5.0% and 5.5% at September 30, 2011 and 2010, respectively. A related amount is recorded in property and equipment of approximately \$1,453,000 and \$1,317,000, representing the remaining undepreciated cost of the asset retirement obligation at September 30, 2011 and 2010, respectively

8. Long-Term Debt

MCCG. CGHS. Medcen, and HSCG comprise the Obligated Group CGSH is a limited obligor in respect to the Series 2000 Revenue Anticipation Certificates A summary of long-term debt of the Obligated Group at September 30 follows

Revenue Anticipation Certificates, Series 2009 issued		
in September 2009, fixed interest rates, ranging		
between 4% and 5%, due in varying installments		
beginning in 2019 to 2035, collateralized by the gross		
revenues of the Obligated Group, amount is net of		
unamortized bond discount of \$56 and \$58, respectively	\$ 80,744	\$ 80,742

		<u>2011</u>		<u>2010</u>
Revenue Anticipation Certificates, Series 2003A variable interest rates, 0 14% at September 30, 2011, due in varying installments to 2028, collateralized by the gross revenues of the Obligated Group	\$	15,075	\$	15,775
Revenue Anticipation Certificates, Series 2003B variable interest rates, 0 15% at September 30, 2011, due in varying installments to 2028, collateralized by the gross revenues of the Obligated Group		16,400		17.200
Revenue Anticipation Certificates, Series 2000 issued in May 2000, variable interest rates, 0.14% at September 30, 2011, due in varying installments to 2035, collateralized by the 2000-A Master Note of the Obligated Group		43,350		44,500
Revenue Anticipation Certificates. Series 1998 issued in December 1998, variable interest rate, at 0.15% at September 30, 2011, due in varying installments to 2018, collateralized by the gross revenues of the Obligated Group		17.000		17.000
Revenue Anticipation Certificates. Series 1997 issued in July 1997, variable interest rates, 0.15% at September 30, 2011, due in varying installments to 2018, collateralized by the gross revenues of the Obligated Group		15,300		17.100
Revenue Anticipation Certificates, Series 1993C issued in October 1993, interest rates ranging from 5 25% to 5 30%, due in varying installments to 2013, collateralized by the gross revenues of the Obligated Group, amount is net of unamortized bond discount of \$2 and \$12, respectively		3,373		6.403
Revenue Anticipation Certificates, Series 1993A issued in September 1993, paid during 2011, 2010 amount is net of unamortized bond discount of \$7		_		2,593
Less current portion	_	191,242 4,695	-	201,313
	\$ _	<u>186,547</u>	\$ _	191,223

In September 2009, the Authority issued \$80,800,000 Macon-Bibb County Hospital Authority Revenue Anticipation Certificates (The Medical Center of Central Georgia, Inc. Project), Series 2009 Certificates ("Series 2009 Certificates") The proceeds of the Series 2009 Certificates were

\$ 191,242

loaned to MCCG to (1) payoff two bank loans totaling \$80,000,000 obtained during 2009 that had been used to redeem the Series 2005 Certificates, and (11) pay the costs of issuing the Series 2009 Certificates

MCCG guarantees payment of the 1993A, 1993C, 1997, 1998, 2000, 2003A, 2003B and 2009 Revenue Anticipation Certificates (collectively, the "Certificates") to the Macon-Bibb County Hospital Authority in the form of a lease and transfer agreement. On November 1, 1995, the Master Trust Indenture (the "Indenture") for the Certificates was amended to include all members of the Obligated Group under the provisions of the Agreement. To secure prompt payment of principal and interest on the Certificates and secure performance of its obligation, the Obligated Group granted a security interest in its gross revenues (as more fully defined in the Indenture) and in all its property. The Obligated Group is subject to certain covenants, including limitations on additional indebtedness, transfers of assets, maintenance of certain amounts of insurance, and certain other financial covenants under the terms of the Indenture

Coinciding with the above redemption, the Series 2003 Certificates were segregated into Series 2003A and Series 2003B. The Series 2003A and 2003B along with several of the existing Certificates were remarketed with new direct-pay letters of credit, as follows.

	Unused Letter of Credit Amount			
Series 1997	\$ 15,572			
Series 1998	17,303			
Series 2000	44,133			
Series 2003A	15,276			
Series 2003B	16,616			

The Series 1997, 1998 and 2003 B letters of credit expire on December 1, 2012, and the Series 2000 and 2003 A expire on January 1, 2016

Interest paid in 2011 and 2010 totaled approximately \$7,085,000 and \$6,815,000, respectively

Principal maturities of long-term debt are as follows

Years ending September 30

2012	\$ 4.695
2013	8,203
2014	5,075
2015	9,415
2016	9,570
Thereafter	154,284

9 Interest Rate Swaps

On October 1, 2001, CGSH entered into an interest rate swap agreement in relation to \$23,000,000 of its Revenue Anticipation Bonds. Series 2000. This interest rate swap agreement, which expires on September 1, 2021, requires CGSH to make fixed-rate interest payments of 4.1% on a monthly basis in return for receiving a monthly variable-rate interest payment. As of September 30, 2011, the floating interest rate, which is based on 67% of LIBOR, was 0.2%. The fair value of CGSH's interest swap liability was approximately \$3,115,000 and \$3,110,000 at September 30, 2011 and 2010, respectively, which is included in other long-term liabilities in the accompanying consolidated balance sheets. The fair value of the interest rate swap decreased approximately \$5,000 and \$624,000 for the years ended September 30, 2011 and 2010, respectively.

MCCG has an interest rate swap agreement ("interest rate swap") relating to a portion of the \$52,000,000 Series 2005 Revenue Anticipation Bonds ("2005 Series") Although the 2005 Series was refinanced during 2009, the interest rate swap agreement remains intact. The interest rate swap, which expires on August 1, 2035, requires MCCG to make fixed-rate interest payments of 3 1% on a monthly basis in return for receiving a monthly variable-rate interest payment equal to 67% of LIBOR, which was 0 15% at September 30, 2011. The fair value of MCCG's interest swap was a liability of approximately \$11,442,000 and \$8,429,000 at September 30, 2011 and 2010, respectively. These amounts are included in other long-term liabilities in the accompanying consolidated balance sheets. The fair value of the interest rate swap decreased approximately \$3,013,000 and \$3,706,000 for the years ended September 30, 2011 and 2010, respectively.

10 Deferred Revenues from Entrance Fees

Unamortized deferred revenues from entrance fees as of September 30 are as follows

	<u>2011</u>	<u>2010</u>
Refundable fees	\$ 31,645	\$ 30,457
Nonrefundable fees	_21,550	21,969
	53,195	52,426
Less accumulated amortization	<u> 16,797</u>	<u>15,488</u>
	\$ <u>36,398</u>	\$ <u>36,938</u>

Amortization of the refundable and nonrefundable entrance fees was approximately \$2,171,000 and \$1,793,000 for the years ended September 30, 2011 and 2010, respectively

11 Postretirement Benefit Plans

<u>Defined Benefit Pension Plan</u> - CGHS has a noncontributory defined benefit pension plan ("pension plan") covering substantially all employees of CGHS. The benefits are based on years of service and the employee's highest compensation during three of the employee's last ten years of service. CGHS's funding policy is to contribute amounts to the plan sufficient to meet the minimum funding requirements set forth in the Employee Retirement Income Security. Act of 1974, plus any additional amounts CGHS may determine to be appropriate

The Board of Directors of CGHS approved a redesign of the pension plan that was effective on January 1, 2008. The changes included freezing the plan as of December 31, 2007, with the plan closed to any new participants and all participants at December 31, 2007 remaining in the plan Plan participants under the age of 40 on January 1, 2008 no longer accumulate benefits. Plan participants age 40 and over on January 1, 2008 continue to accumulate plan benefits. CGHS offers an enhanced match in their defined contribution plan to offset the benefits that any new and under the age of 40 participants would have or were receiving under the plan

<u>Defined Benefit Health Care Plan</u> - CGHS sponsors a defined benefit health care plan ("health plan") that provides postretirement medical benefits to full-time employees who have worked 15 years and attained age 55 while in service with CGHS. The plan is contributory with retiree contributions adjusted annually, and it contains other cost-sharing features such as deductibles and coinsurance CGHS's policy is to fund the cost of medical benefits in amounts determined at the discretion of management

The funded status of the pension plan and health plan is measured as the difference between the fair value of the plans` assets and the projected benefit obligation of the plans

The following tables present a reconciliation of the beginning and ending balances of the plans' projected benefit obligation, the fair value of plan assets, and the funded status of the plans

		d Benefit on Plan		d Benefit Care Plan
	<u>2011</u>	<u>2010</u>	<u>2011</u>	2010
Projected benefit obligation.				
beginning of year	\$ 230,142	\$ 201,612	\$ 26,059	\$ 24,469
Change in benefit obligation				
Service cost	6,473	6,048	563	458
Interest cost	11,961	11,344	1,152	1,295
Actuarial (gain) loss	28,884	17,932	3,116	2,316
Benefits paid	(7,398)	(6,794)	(2.899)	(2,479)
Change in plan provisions		-	<u> </u>	
Projected benefit obligation.				
end of year	\$ <u>270,062</u>	\$ <u>230,142</u>	\$ <u>28,184</u>	\$ <u>26,059</u>

		d Benefit on Plan		l Benefit Care Plan	
	<u>2011</u>	<u>2010</u>	<u>2011</u>	<u>2010</u>	
Fair value of plan assets.	ф. 157 (00	Ф. 111.160	dh	d).	
beginning of year Change in plan assets	\$ 157.689	\$ 141,469	\$ -	\$ -	
Actual return on plan assets	1,911	15,014	-	_	
Contributions of plan sponsor	11,418	8,000	2,899	2,479	
Benefits paid	<u>(7,398</u>)	<u>(6,794</u>)	(2,899)	(2,479)	
Fair value of plan assets. end of year	\$ <u>163,620</u>	\$ <u>157,689</u>	\$	\$	
Unfunded status at end of year	\$ <u>(106,442</u>)	\$ <u>(72,453)</u>	\$ <u>(28,184</u>)	\$ <u>(26,059)</u>	

Amounts recognized on the consolidated balance sheets at September 30, 2011 and 2010, are as follows

	Defined Benefit Pension Plan 2011 2010			Defined Benefit Health Care Plan 2011 2010				
Other current liabilities Other long-term liabilities Accrued pension plan liability	\$!	- - 106,442	\$	- - 72,453	\$	2.395 25.789	\$	2.279 23.780
	\$ <u></u>]	106,442	\$	72,453	\$	28,184	\$_	26,059

Included in unrestricted net assets at September 30, 2011 and 2010, are the following amounts that have not yet been recognized in the net periodic pension and postretirement benefit cost

		ned Benefit	Defined Benefit Health Care Plan			
	<u>2011</u>	<u>2010</u>	<u>20</u>	<u>11</u>	<u>2010</u>	
Unrecognized prior service cost (credit) Unrecognized actuarial loss (gain)	\$ - 109,479	Φ 50	\$ 2	(94) \$.732	S (344) (198)	
	\$ <u>109,479</u>	\$ 72,244	\$ <u> 2</u>	<u>,638</u> \$	(542)	

Changes recognized in unrestricted net assets for the years ended September 30, 2011 and 2010, are as follows

		Defined Pensi 2011				Defined Health 2011		
Prior service credit Net actuarial loss (gain) Amortization of prior service costs Amortization of actuarial gain	\$	41.626 (36)	\$	16.758 (43)	\$	194 3.116 56	\$	2.316 56
(loss)	_	<u>(4,355</u>)	_	(1,867)	_	(186)	_	6
	\$_	<u> 37,235</u>	\$_	14,848	\$_	3,180	\$_	2,378

The estimated prior service cost and net gain to be recognized in net periodic pension expense and net periodic postretirement cost during the next fiscal year are as follows

		Defined Benefit Pension Plan			Defined Benefit			
					<u>Heal</u>		th Care Plan	
		<u>2012</u>		<u>2011</u>		<u>2012</u>		<u>2011</u>
Prior service cost (credit)	\$	_	\$	36	\$	(36)	\$	(56)
Actuarial loss (gain)		8,104		4,355		-		186

A summary of the components of net periodic benefit cost at September 30, 2011 and 2010 is as follows

		Defined Benefit Pension Plan			Health		ed Benefit Care Plan	
		<u>2011</u>		<u>2010</u>		<u>2011</u>		<u>2010</u>
Service cost	\$	6,473	\$	6,049	\$	563	\$	458
Interest cost		11,961		11,344		1,152		1,295
Expected return on plan assets Amortization of unrecognized		(14,653)		(13,841)		-		-
prior service cost (credit)		36		43		(56)		(56)
Amortization of net loss (gain)	-	4,355	-	1,867	_	185	_	<u>(6</u>)
	\$_	8,172	\$_	5,462	\$_	1,844	\$_	1,691

Assumptions used in determining the actuarial present value of the projected benefit obligations as of September 30, 2011 and 2010, are as follows

	Defined Benefit Pension Plan		Defined Benefit Health Care Plan	
	<u>2011</u>	<u>2010</u>	<u>2011</u>	2010
Weighted-average discount rate Rate of increase in compensation	5 54%	5 28%	5 15%	4 62%
levels	3 00%	3 00%	-	_

Assumptions used in determining the net periodic benefit cost for the years ended September 30, 2011 and 2010 are as follows

	Defined Benefit Pension Plan		Defined Benefit	
			Health Care	e Plan
	<u>2011</u>	<u>2010</u>	<u>2011</u>	<u>2010</u>
Weighted-average discount rate	5 28%	5 72%	4 62%	5 53%
Rate of increase in compensation levels	3 00%	3 00%	-	-
Expected long-term rate of return on assets	8 50%	8 50%	-	-

The weighted-average annual assumed rate of increase in the per capita cost of covered benefits (i.e., health care cost trend rate) is 5% for 2011 and thereafter. The health care cost trend rate assumption has an effect on the amounts reported. For example, increasing the assumed health care cost trend rates by one percentage point in each year would increase the accumulated postretirement benefit obligation as of September 30, 2011, by approximately \$1,701,000 and the aggregate of the service and interest cost components of net periodic postretirement benefit cost for 2011 by approximately \$208,000.

CGHS uses fair market value as the market-related value of assets in calculating the expected return on the plan assets component of net periodic pension expense and net periodic postretirement benefit for the years ended September 30, 2011 and 2010

During 2012, CGHS expects to contribute approximately \$16,842,000 and \$2,395,000, respectively, to its defined benefit pension plan and health care plan

Benefits expected to be paid in each of the next five fiscal years and thereafter are estimated as follows

	Defined Benefit Pension Plan	Defined Benefit Health Care Plan	
Years ending September 30	·		
2012	\$ 8,283	\$ 2,395	
2013	8,664	2,340	
2014	9,194	2,237	
2015	9,853	2,250	
2016	10.734	2,312	
2017-2021	71,126	11,746	

The target allocation for the pension plan is as follows as of September 30, 2011 and 2010

	<u>Mınımum</u>	<u>Target</u>	<u>Maximum</u>
Equity securities	28%	50%	72%
Debt securities	15%	35%	55%
Alternative investments	7%	15%	23%

To develop the expected long-term rate of return on assets assumptions. CGHS considered the historical returns and the future expectations for returns for each asset class, as well as the target asset allocation of the pension portfolio

The Plan investment strategy is focused on matching the emerging long-term needs of the retirement plan with the proven, long-term performance patterns of the various investment markets. The Plan's investments represent the opportunity to reduce CGHS's cost of funding plan benefits, provide a funding resource for possible future enhancement of plan benefits, and insulate the Plan's assets against deterioration of purchasing power caused by inflation.

The target allocation of all assets is to reflect proper diversification in order to reduce the potential of a single security or single sector of securities having a disproportionate impact on the portfolio. In an effort to maintain the overall risk level of the portfolio within an acceptable range, the relative mix of asset classes will be rebalanced back toward the target allocations as opportunities permit, but in any event not less often than annually. CGHS utilizes an outside investment consultant to implement its investment strategy.

Fair values of the pension plan investments are summarized as follows

	Pension Assets at Fair Value						
	as of September 30, 2011						
	-	ed Prices in	Signif				
		e Markets	Otl		_	ıficant	
	For	Identical	Obser	vable	Unob	servable	
	I	Assets	Inp		In	puts	
	<u>(L</u>	<u>evel 1)</u>	(Lev	<u>el 2)</u>	<u>(Le</u>	<u>vel 3)</u>	
Money market funds	\$	8,149	\$	-	\$	-	
Mutual funds							
Equities	_	22,548				<u> </u>	
Total mutual funds		22,548		-		-	
Alternative investments							
Debt securities		-		-	1	3,391	
Equities		-		-		8,229	
Real estate		-		-		6,321	
Multi-category	_	<u> </u>				8,372	
Total alternative investments		-		-	3	6,313	
US government securities							
U S treasuries		2.874		-		-	
GNMA, FNMA, FHLMC pools				9,884		-	
Government collateralized mortgage							
and asset backed	_	-		3,650			
Total U S government securities		2.874		13,534		-	
Corporate bonds							
Domestic		16,171		-		-	
Foreign	_	2,336		-			
Total corporate obligations		18,507		-		-	

	Pension Pension	Asset	s at	Fair	<u>Value</u>	
s o	f Septen	iber 30	0. 2	011.	contini	ued

	Quoted Prices in	Significant		
	Active Markets	Other	Significant	
	For Identical	Observable	Unobservable	
	Assets	Inputs	Inputs	
	(Level 1)	(Level 2)	(Level 3)	
Common stocks				
Domestic	\$ 47.248	\$ -	\$ -	
Foreign	<u>3,861</u>	<u>-</u> _	<u>-</u>	
Total common stocks	51,109	-	-	
Mortgage and asset back securities	-	8,773	-	
Real estate investment trusts	1,564	-	-	
Exchange traded funds	249	_		
	\$ <u>105,000</u>	\$ <u>22,307</u>	\$ <u>36,313</u>	

Pension Assets at Fair Value

	as of September 30, 2010					
	Quote	ed Prices in	Sıgı	nıficant		
	Activ	ve Markets	C	O ther	S	ıgnıficant
	For	Identical	Obs	ervable	Un	observable
		Assets	Ir	iputs		Inputs
	<u>(I</u>	Level 1)	(Le	evel 2)	9	(Level 3)
Money market funds	\$	2,826	\$	-	\$	_
Equity mutual funds		24,439		-		_
Alternative investments		-		-		28,385
U S government securities						
U S treasuries		3,537		-		-
Government agencies		604		-		-
GNMA, FNMA, FHLMC pools		-		11,014		-
Government collateralized mortgage						
and asset backed		<u> </u>		5,609		<u> </u>
Total U S government securities		4,141		16,623		_
Corporate bonds						
Domestic		13,086		-		_
Foreign		1,200		<u> </u>		<u> </u>
Total corporate bonds		14,286		-		_
Common stocks						
Domestic		54,069		-		_
Foreign		2,251		<u> </u>		<u> </u>
Total common stocks		56,320		-		_
Mortgage and asset backed securities		-		8,147		-
Real estate investment trusts		1,771		-		-
Exchange traded funds		751		<u> </u>		
	\$	104 534	\$	24 770	\$	28 385

The table below sets forth a summary of changes in the fair value of the Plan's level 3 assets for the year ended September 30, 2011

Beginning balance	\$ 28,385
Realized gains	130
Unrealized gains	2,107
Purchases, net	5,691
Ending balance	\$ _36,313

12 **Incentive Plan Payable**

The purpose of the plan is to motivate each employee to work toward achieving certain performance goals. Incentive plan payments in the amount of approximately \$3,088,000 and \$4,235,000 to employees of CGHS at September 30, 2011 and 2010, respectively, were approved by the Board of Directors and are included in accrued compensation and withholdings in the accompanying balance sheets.

13 **Income Taxes**

Deferred income taxes, which as of September 30, 2011 and 2010, have no net carrying value, reflect the net tax effect of temporary differences between the carrying amounts of assets and liabilities for financial reporting and the amounts used for income tax purposes. As of September 30, 2011 and 2010, CGHS had deferred tax assets of approximately \$6,100,000 and \$7,400,000, respectively, relating principally to net operating loss carryovers. As of September 30, 2011 and 2010, such deferred tax assets were offset by a valuation allowance of approximately \$6,100,000 and \$7,400,000, respectively.

Federal net operating loss carryovers for CGHV totaled approximately \$16,100,000 at September 30, 2011, and will expire between 2017 and 2030

14 Commitments and Contingencies

<u>Litigation</u> - CGHS is involved in litigation arising in the ordinary course of business. After consultation with legal counsel, management estimates that these matters will be resolved without material adverse effect on CGHS's consolidated financial position.

MCCG is currently under investigation by the U.S. Department of Health and Human Services. Office of Inspector General ("OIG") In August 2008, a subpoena (the "Short-Stay Matter") was received requesting documents concerning Medicare reimbursement for zero- and one-day stays, three-day inpatient admissions, where the patient was discharged directly to a skilled nursing facility, and billing of evaluation and medical services. In April 2009, a second subpoena was received related to the Short-Stay Matter requesting certain medical records. MCCG has provided, and is continuing to provide, the documents and other information requested and is working with outside counsel and consultants to determine medical necessity of each claim.

In September 2010, MCCG received a letter from the OIG making the hospital aware that it was conducting an investigation to determine whether or not certain hospitals have submitted claims for payment for the implantation of implantable cardioverter defibrillators ("ICD's") which were not medically indicated or otherwise violated Medicare payment policy. MCCG has received an initial

analysis of claims submitted to Medicare that relate to services that were potentially excluded from coverage and are currently in the process of evaluating a sample of these claims

In November 2011, MCCG received a subpoena from the OIG in connection with an investigation into possible improper claims submitted to federal health care programs. The subpoena requests the production of documents and other materials related to certain contracts with a vendor, and focuses on contracts containing "upfront" payments or discounts that may have been provided by the vender

The OIG has made no specific demand for payment for these matters, and the investigations are ongoing Management is hopeful that all issues raised in the investigation will be resolved in the favor of MCCG. Because these are ongoing investigations and they involve interpretation of complex regulatory matters, a loss, if any, is highly uncertain and cannot be reasonably estimated. As such, no amount has been accrued in the consolidated financial statements at September 30, 2011. Due to the nature of the matter, this assessment may be subject to material adverse change in the near term.

General and Professional Liability Insurance - CGHS is currently insured for commercial general liability on an occurrence basis and professional liability on a claims-made basis by Centra Professional Indemnity. Ltd ("CPI"), a wholly-owned subsidiary of CGHS, and excess coverage by commercial insurance carriers through CPI. The excess coverage limits are \$50,000,000 for 2011 and 2010. The coverage for professional liability is limited to claims incurred and reported during its term. Actuarially determined funding is provided for losses.

For all claims prior to October 1, 2002, the policy had a limit of \$2 million per occurrence and \$6 million in aggregate. For all claims between October 1, 2002 and September 30, 2004, the policy had a limit of \$4 million per occurrence and \$12 million in aggregate, and for all claims between October 1, 2004 and September 30, 2006, the policy had a limit of \$4 million per occurrence and \$14 million in aggregate. Effective October 1, 2006, the policy has a limit of \$4 million per occurrence and \$20 million in aggregate.

CPI also insures CGHS on an occurrence basis for workers' compensation insurance, which has a limit of \$500,000 per occurrence, with no aggregate limit per year Beginning April 1, 2011, CPI began insuring CGHS for equipment maintenance and repairs with limits of liability of \$2,500,000 per claim and annual aggregate

During 2011 and 2010, CGHS paid premiums of approximately \$10,270,000 and \$10,523,000, respectively, to CPI for these coverages. These premiums have been properly eliminated from consolidated statements of operations. The reserve for self-insured losses totaled approximately \$51,817,000 and \$44,590,000 at September 30, 2011 and 2010, respectively, and are comprised of reported loss reserves and incurred but not reported loss reserves.

<u>Employee Group Health Insurance</u> - CGHS is self-insured for its employee group health insurance CGHS has estimated and recorded accruals for claims incurred, but not reported or paid prior to the fiscal year-end

<u>Property and Equipment</u> - CGHS has commitments for purchases of property and equipment of approximately \$39,000,000 at September 30, 2011

<u>Management Agreement</u> – During 2011, CGHS began providing financial assistance and management assistance to a hospital in Peach County, Georgia under a management agreement

CGHS expects to continue this relationship during 2012 and is currently negotiating a formal lease agreement with the Peach County Hospital Authority

15 Temporarily Restricted Net Assets

Temporarily restricted net assets as of September 30 are available for the following purposes

	<u>2011</u>	<u>2010</u>
Promises for future years	\$ 1,254	\$ 864
Program grants		
Pathology development	6,148	6,112
Children's Hospital	11,871	11,383
Regional health education center	948	941
Research and education	5,287	5,313
HEAT Trust	2,758	2,968
Community grants	7,104	7,052
Hospice inpatient facility	4,099	4,588
Emergency center	1,660	1,647
Georgia Heart Center	9,142	9,077
Critical care center	1,158	783
Other grants	_2,971	2,475
	\$ <u>54,400</u>	\$ <u>53,203</u>

16 Concentrations of Credit Risk

CGHS grants credit to patients, substantially all of whom reside in central Georgia CGHS generally does not require collateral or other security in extending credit to patients, however, they routinely obtain assignment of (or are otherwise entitled to receive) patients' benefits payable under their health programs, plans, or policies (e.g. Medicare, Medicaid, Blue Cross, and other preferred provider arrangements and commercial insurance policies). Revenue from the Medicare and Medicaid programs accounted for approximately 45% and 46% of CGHS's net patient revenue for the years ended September 30, 2011 and 2010, respectively.

The mix of receivables from patients and third-party payors at September 30, 2011 and 2010 was as follows

	<u>2011</u>	<u>2010</u>
Medicare	30%	29%
Medicaid	16	13
Blue Cross	13	12
Other third-party payors	30	31
Patients	<u>11</u>	<u>15</u>
	<u>100</u> %	<u>100</u> %

CGHS recognizes that revenues and receivables from government agencies are significant to its operations, but it does not believe that there are any significant credit risks associated with these government agencies

17 Functional Expenses

CGHS does not present expense information by functional classification because its resources and activities are primarily related to providing health care services. Further, since CGHS receives substantially all of its resources from providing health care services in a manner similar to a business enterprise, other indicators contained in these consolidated financial statements are considered important in evaluating how well management has discharged their stewardship responsibilities.

18 Fair Value of Financial Instruments

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

Cash and cash equivalents The carrying amounts reported in the consolidated balance sheets for cash and cash equivalents approximate their fair value

Investments Fair values, which are the amounts reported in the consolidated balance sheets, are based on quoted market prices, if available, estimated using quoted market prices for similar securities, or estimated using pricing models, discounted cash flow methodologies, or similar techniques

Patient accounts receivable The carrying amounts reported in the consolidated balance sheets for patient accounts receivable approximate their fair values

Due to or from related parties The carrying amounts reported in the consolidated balance sheets for due to or from related parties approximate their fair values

Assets limited as to use Fair values, which are the amounts reported in the consolidated balance sheets, are based on quoted market prices, if available, or estimated using quoted market prices for similar securities

Accounts payable and accrued expenses The carrying amounts reported in the consolidated balance sheets for accounts payable and accrued expenses approximate their fair value

Accrued compensation and withholdings The carrying amounts reported in the consolidated balance sheets for accrued compensation and withholdings approximate their fair value

Estimated third-party payor settlements The carrying amounts reported in the balance sheets for estimated third-party payor settlements approximate their fair value

Long-term debt Fair values of CGHS's revenue anticipation certificates are based on current traded value. The fair value of CGHS's remaining long-term debt is estimated using discounted cash flow analyses, based on CGHS's current incremental borrowing rates for similar types of borrowing arrangements.

The carrying amounts and fair values of CGHS's long-term debt at September 30 are as follows

	<u>2</u>	011	<u>2</u>	010
	Carry ing <u>Amount</u>	Fair Value	Carry ing <u>Amount</u>	Fair Value
Long-term debt	\$ 191,242	\$ 193,117	\$ 201,313	\$ 204,535

Derivative Financial Instruments The fair value of the derivative financial instruments are determined from a discounted cash flow model based on projected interest rates during the term of the contract and amounts outstanding on the corresponding long-term debt. In addition, credit risk associated with the counter party (when an asset) or CGHS (when a liability) is factored into the fair value model.

The following summarizes CGHS's assets and (liabilities) by level

Activ For	as of d Prices in e Markets Identical Assets	Septemb Signif Oth Obser Inp	er 30, 201 ficant ner vable uts			
\$	34.268	\$	-	\$	_	
_	- - - - -		8,900		- - - -	
_	- - -		8,311		- - -	
_	- - - - -		436 10,738 1,296 2,159 1,273 25,360		- - - - -	
	Activ For A	as of Quoted Prices in Active Markets For Identical Assets (Level 1)	as of Septemb Quoted Prices in Signif Active Markets Oth For Identical Obser Assets Inp (Level 1) (Level \$ 34.268 \$	Active Markets Significant	Active Markets For Identical Assets (Level 1) \$ 34.268 - 844 - 16.080 - 23.052 - 8.900 - 48.876 - 53.888 - 8.311 - 62.199 - 436 - 10.738 - 1.296 - 2.159 - 1.273 - 25.360	

	Quoted Active For I	Assets (Liabil as of d Prices in e Markets Identical assets evel 1)	Septer Sigi C Obs Ir	t Fair Value, mber 30, 201 nificant Other servable iputs evel 2)			
Equity securities	4h	024	4b		db.		
Real estate investment trusts	\$	824	\$	-	\$	-	
Mutual funds		42,921		10,251		-	
Common stock							
Consumer staples		28,539		-		-	
Health care		25,164		-		-	
Information technology		24,760		-		-	
Financials		22,900		-		-	
Consumer discretionary		19.198		-		-	
Energy		16,250		-		-	
Industrials		13,272		-		-	
Materials		6,705		-		-	
Foreign		6,270		-		-	
Other		1,998					
Total common stocks		165,056		<u>-</u>			
Total equity securities		208,801		10,251		-	
Alternative investments							
Commodities		-		-		52,827	
Asset backed securities		-		-		2,586	
Multi-category		-		-		26,800	
Equities		-		-		27,995	
Debt securities		<u>-</u>		_		48,737	
Total alternative investments		<u>-</u>		<u>-</u>		158,945	
	\$	243,069	\$	162,588	\$	158,945	
Long-term investments in real estate funds	\$	<u> </u>	\$	<u>-</u>	\$	15,229	
Included in other long-term liabilities							
Interest rate swap	\$	<u>-</u>	\$	(14,557)	\$		

Assets ((Liabilities)	at F	aır	<u>Value</u>
as of Sent	tember 30	2011	CC	ntinued

	as of September 30, 2011, continue									
	Quoteo	l Prices in	Sıgnı	ficant						
	Active	Markets	Ot	her	Significant Unobservable					
	For I	dentical	Obser	rvable						
	A	ssets	Ing	outs	In	outs				
	(Le	(Level 1)		rel 2)	(Level 3)					
Included in assets limited as to use		<u>-</u>		<u>_</u>		<u>-</u>				
Money market funds	\$	5,707	\$	-	\$	-				
Equity securities										
Mutual funds		9,244		-		_				
Common stocks										
Consumer discretionary, staples		4,916		-		_				
Information technology		3,109		-		_				
Materials and industrials		2,930		-		-				
Health care		2,618		_		_				
Financials		1,808		_		_				
Energy		1,108		-		_				
Foreign		946		-		_				
Other equity securities		17,040		_		_				
				-		_				
U S corporate bonds		-		31,201		-				
U S government securities						_				
U S Treasure securities		7,236		-		_				
U S Federal Agency securities		-		5,379		-				
Mortgage-backed and asset backed										
securities		-		29,174		-				
Alternative investments		-		-		19,102				

Assets (Liabilities) at Fair Value

(11.539)

9,745

Long-term investments in real estate funds

Interest rate swap

Included in other long-term liabilities

		as of	f Septem	ber 30, 20	10	
	Quoted Pr	ices in	Sıgn	ıficant		
	Active M	arkets	O	ther	Sıgn	ıficant
	For Idea	ıtıcal	Obse	ervable	Unob	servable
	Asse	ts	In	puts	In	puts
	(Leve	<u>l 1)</u>	(Le	<u>vel 2)</u>	<u>(Le</u>	<u>vel 3)</u>
Short-term investments						
Money market funds	\$ 3	1,110	\$	-	\$	-
Equity securities	25.	3,475		-		-
Alternative investments		-		-		141,601
US mortgage-backed securities		-		60,910		-
U S government issues and asset						
backed securities	2	6,725		-		-
US mortgage-backed and asset						
backed securities		-		44,674		-
Included in assets limited as to use						
Cash equivalents		4,254		-		-
Equity securities	5.	2,571		-		-
U S corporate bonds		-		26,719		-
U S government securities	1.	5,477		8,846		-
U S mortgage-backed securities		-		22,029		-
Alternative investments		-		-		15,545

The table below sets forth a summary of changes in the fair value of CGHS's level 3 short-term and long-term investments for the year ended September 30, 2011

Beginning balance	\$ 151.346
Gain on market value	3,575
Sales	(7,000)
Purchases	26,253
Ending balance	\$ <u>174,174</u>

The table below sets forth a summary of changes in the fair value of CGHS's level 3 assets limited as to use for the year ended September 30, 2011

Beginning balance	\$ 15,545
Gain	2.280
Purchases	1,277
Ending balance	\$19,102

<u>Capital Commitments</u> – CGHS has future capital commitment requirements to invest additional amounts in certain level 3 investments. At September 30, 2011, the outstanding commitments totaled approximately \$30,200,000

19 Equity Investments

Central Georgia Health Network, LLC - Central Georgia Health Network, LLC was incorporated on October 25, 1996, for the purpose of participating in contracts with preferred provider organizations, health maintenance organizations or other alternative health care delivery systems MCCG owns 29% of the common stock in Central Georgia Health Network. Inc MCCG's investment of approximately \$90,000 is recorded under the cost method of accounting

Central Georgia MRI, LLC - Central Georgia MRI, LLC ("CG MRI") was incorporated on October 2, 2000, as a joint venture with Radiology Associates to share the cost of an MRI laboratory CG MRI became operational on September 16, 2002 CGHV provided 50% of the capital in CG MRI and records the investment under the equity method of accounting The investment amounted to approximately \$391,000 and \$513,000 at September 30, 2011 and 2010, respectively

Georgia Magnetic Imaging Center, Ltd. - Georgia Magnetic Imaging Center, Ltd ("GMIC") was incorporated on March 22, 1985 to own and operate certain medical equipment CGHV purchased a 49 5% ownership interest in GMIC on December 31, 2002 for \$1,181,000 and records the investment on the equity method of accounting The investment amounted to approximately \$837,000 and \$942,000 at September 30, 2011 and 2010, respectively

Supplemental Information



Independent Auditors' Report on Supplemental Information

The Board of Directors Central Georgia Health Systems. Inc. and Affiliates Macon, Georgia

Our audits were conducted for the purpose of forming an opinion on the basic consolidated financial statements taken as a whole. The supplemental information accompanying the consolidated financial statements is presented for purposes of additional analysis and is not a required part of the basic consolidated financial statements. Such information has been subjected to the auditing procedures applied in our audit of the 2011 basic consolidated financial statements and, in our opinion, is fairly stated in all material respects in relation to the 2011 basic consolidated financial statements taken as a whole

Dixon Hughes Goodman LLP

Atlanta, Georgia January 27, 2012



Central Georgia Health Systems, Inc. and Affiliates

Consolidating Balance Sheet (dollars in thousands)

September 30, 2011

	Georgia Center o Health Central		Georgia Center of Health Central Systems, Georgia,		Center of Community Georgia Central Health Senior Georgia, Foundation, Health,		Georgia Senior Health,	Health Central Services of Georgia Central Health Georgia, Ventures, Inc Inc		Ge Reha Ho	Central Georgia Centra Rehabilition Professional Hospital, Indemnity, LLC Ltd			ofessional Plans of Georgia,			nations <u>(</u>	Consolidated
Assets Current assets																		
Cash and cash equivalents	\$	977	\$ 52,945	\$ -	\$	1 257	\$ 234	\$	1 915	\$	2 395	\$	_	\$	2 366	\$	- 5	62 089
Short-term investments		-	517 051	-		47 551	_		_		-		_		_		-	564 602
Patient accounts receivable net		-	126 055	-		-	2 045		1 263		2 237		-		-		-	131 600
Estimated third-party settlements		-	-	-		-	-		-		386		-		-		-	386
Other accounts and notes receivable		156	5 647	1 380)	782	689		419		-		-		586		(156)	9 503
Prepaid expenses and other current assets		3	10 152	-		80	49		13		219		-		56		-	10 572
Total current assets		1 136	711 850	1 380)	49 670	3 017		3 610		5 237		-		3 008		(156)	778 752
Assets limited as to use		-	-	59 228	;	233	-		971		-		94 712		3 269		-	158 413
Long-term investments		-	15 229	-		-	-		-		-		-		-		-	15 229
Investments in subsidiaries		23 319	-	-		-	-		-		-		-		-		(23 319)	-
Intercompany		369	(9 803)	-		(72)	(9)		1 069		8 446		-		-		-	-
Property and equipment net		4	353 910	239)	36 415	1 740		431		412		-		137		-	393 288
Cash surrender value of insurance policies		-	18 521	-		-	-		-		-		-		-		-	18 521
Other		3 106	2 715	88	3	790	994		1 228		-		-		-		(3 127)	5 794
Total assets	\$	27 934	\$ 1 092 422	\$ 60.935	\$	87 036	\$ 5.742	\$	7 309	\$	14 095	\$	94 712	\$	6 414	\$	(26 602) - 8	1 369 997

(43) (continued)

Central Georgia Health Systems, Inc. and Affiliates

Consolidating Balance Sheet (dollars in thousands)

September 30, 2011

	Ge H Sy	entral eorgia ealth stems, Inc	Medical Center of Central Georgia, Inc	MedCen Community Health Foundation, Inc	Central Georgia Senior Health, Inc	Health Services of Central Georgia, Inc	Central Georgia Health Ventures, Inc	Central Georgia Rehabilition Hospital, LLC	Centra Professional Indemnity, Ltd	Secure Health Plans of Georgia, LLC	Eliminations	Consolidated
Liabilities, net assets and stockholder's equity											23111111111111	<u>conzonaurta</u>
Current liabilities												
Accounts payable and accrued expenses	\$	359	\$ 22,059	\$ 92	\$ 825	\$ 1.072	\$ 153	\$ 89	\$ 302	\$ 196	\$ 61	\$ 25,208
Accrued compensation and withholdings		-	31 030	-	-	-	269	-	-	421	-	31 720
Current portion of long-term debt		-	3 500	-	1 195	-	-	-	-	-	-	4 695
Entrance fee deposits		_	-	-	1 128	-	-	-	-	-	-	1 128
Estimated third-party settlements		_	5 164	-	_	-	-	-	-	-	-	5 164
Other current liabilities		400	12 166	67	-	130	14	6	1 938	41	-	14 762
Total current liabilities		759	73 919	159	3 148	1 202	436	95	2 240	658	61	82 677
Long-term debt less current portion		-	144 392	-	42 155	-	-	-	-	-	-	186 547
Reserve for self-insured losses		-	-	-	-	-	-	-	51 817	-	-	51 817
Accrued pension benefit liability		-	106 442	-	-	-	-	-	-	-	-	106 442
Deferred revenues from entrance fees												
less current portion		-	-	-	36 398	-	-	-	-	-	-	36 398
Other long-term liabilities		-	37 230	-	3 115	-	971	-	-	234	-	41 550
Asset retirement obligation		-	3 716	-	-	-	-	-	-	-	-	3 716
Total liabilities		759	365 699	159	84 816	1 202	1 407	95	54 057	892	61	509 147
Net assets												
Unrestricted net assets - controlling interest		27 175	726 294	6 376	2 220	4 540	-	14 000	-	-	21 481	802 086
Temporarily restricted		-	-	54 400	-	-	-	-	-	-	-	54 400
Noncontrolling interest in subsidiary		-	429	-	-	-	-	-	-	-	3 935	4 364
Total net assets		27 175	726 723	60 776	2 220	4 540	-	14 000	-	-	25 416	860 850
Stockholder's equity												
Common stock		-	-	-	-	-	-	-	17	3 731	(3.748)	
Paid-in-capital		-	-	-	-	-	25 895	-	1 653	-	(27 548)	
(Accumulated deficit) retained earnings		-	-	-	-	-	(19 993)	-	38 985	1 791	(20 783)	
Total liabilities net assets												
and stockholder's equity	\$	27 934	\$ 1 092 422	\$ 60.935	\$ 87.036	\$ 5.742	\$ 7,309	\$ 14 095	\$ 94 712	\$ 6414	\$ (26,602)	\$ 1 369 997

Central Georgia Health Systems, Inc. and Affiliates

Consolidating Schedule of Operations and Changes in Net Assets (dollars in thousands)

For the Year Ended September 30, 2011

	Central Georgia Health Systems, Inc	Medical Center of Central Georgia, Inc	MedCen Community Health Foundation, Inc	Central Georgia Senior Health, Inc	Health Services of Central Georgia, Inc	Central Georgia Health Ventures, Inc	Central Georgia Rehabilition Hospital, LLC	American Eagle RRG	Centra Professional Indemnity, Ltd	Secure Health Plans of Georgia, LLC	Eliminations	Consolidated
Unrestricted revenues gains											Emmations	consonauta
and other support												
Net patient service revenues	\$ -	\$ 649.803	\$ -	\$ 790	\$ 20.762	\$ 4 999	\$ 16 397	\$ -	\$ -	\$ -	\$ -	\$ 692 751
Other revenue	440	25 646	3 099	13 564	(24)	323	-	-	9 868	6 072	(16 377)	42 611
Total revenues gains and												
other support	440	675 449	3 099	14 354	20 738	5 322	16 397	-	9 868	6 072	(16 377)	735 362
Expenses												
Labor and employee benefits	18 569	294 283	1 014	6 575	28 426	3 201	9 216	-	-	3 410	-	364 694
Supplies and other expenses	(14 374)	261 425	2 027	4 540	4 392	1 883	4 194	1 599	11 332	2 471	(17 521)	261 968
Depreciation and amortization	1	35 918	2	2 940	959	142	90	-	-	67	-	40 119
Provision for uncollectible accounts	-	35 765	-	-	1 318	264	192	-	-	-	-	37 539
Interest		6 036	-	1 233	-	-	-	-	-	=	-	7 269
Total expenses	4 196	633 427	3 043	15 288	35 095	5 490	13 692	1 599	11 332	5 948	(17 521)	711 589
Income (loss) from operations	(3.756)	42 022	56	(934)	(14 357)	(168)	2 705	(1 599)	(1 464)	124	1 144	23 773
Other income (loss)												
Investment income	(573)	29 827	10	2 287	31	1 098	1	9	4 029	222	(102)	36 839
Change in fair value of interest rate swap	-	(3 ()13)	-	(5)	_	-	-	-	-	-	_	(3.018)
Contribution	-	1 505	-	-	-	-	-	-	-	-	(1.505)	-
Other	-	(1 477)	-	-	(9)	-	(4)	-	-	(122)	(2.018)	(3 630)
Excess of revenues gains and other												
support over (under) expenses	(4 329)	68 864	66	1 348	(14 335)	930	2 702	(1.590)	2 565	224	(2.481)	53 964
Other changes in net assets	4 247	(82 458)	1 197	(2.313)	16 536	(2.382)		382	(3 044)	-	3 884	(63 951)
Total change in net assets	(82)	(13 594)	1 263	(965)	2 201	(1.452)	2 702	(1.208)	(479)	224	1 403	(9 987)
Net assets (liabilities) at beginning of year	27 257	740 317	59 513	3 185	2 339	7 354	11 298	1 208	41 134	5 298	(28 066)	870 837
Net assets (liabilities) at end of year	\$ 27 175	\$ 726 723	\$ 60 776	\$ 2,220	\$ 4.540	\$ 5,902	\$ 14 000	\$ -	\$ 40 655	\$ 5.522	\$ (26 663)	860 850

Form **8868**

Application for Extension of Time To File an

(Rev January 2011)		Exempt Organization Return					OMB No 1545-1709	
Department of the Treasury Internal Revenue Service		▶ File	a separate a					
		omatic 3-Month Extension, complete	only Part I	and check this box				▶ X
				plete only Part II (on page 2 of this form	1)			. 23
Do not comp	lete Part II unio	ss you have already been granted an a	automatic 3-r	nonth extension on a previously filed For	m 8868			
Electronic fil	ing (e-file). You	can electronically file Form 8868 if you	need a 2 m	onth automatic extension of time to file (f	S months f	or		
		•		onth automatic extension of time to file (6 th extension of time You can electronica				
•	-			II with the exception of Form 8870, Info	•			
				nust be sent to the IRS in paper format (
				v/efile and click on e-file for Charities & f				
Part I				mit original (no copies needed)		_		
		Form 990-T and requesting an automati		· ·· ···				
Part I only	•			•				▶□
	rations (includi	ng 1120-C filers), partnerships, REMICs	s, and trusts	must use Form 7004 to request an exter	sion of tin	ne		
o file income				<u></u>				
Type or	Name of exe	mpt organization			Employer identification number			
print								
File by the	CENTRA	<u>L GEORGIA HEALTH SY</u>	STEMS,	INC	58~2	1491	.27	
due date for	Number, stre	et, and room or suite no If a P O box,	see instruction	ons				
filing your return See	691 CH	ERRY ST		400				
nstructions		post office, state, and ZIP code For a f	foreign addre	ess, see instructions.				
	MACON	GA	<u>31201</u>	<u> </u>	 			
Enter the Retu	um code for the	return that this application is for (file a s	separate app	lication for each return)				01
Application)		Return	Application				Return
ls For	-		Code	is For		Code		
Form 990			01	Form 990-T (corporation)	07			
Form 990-B	L		02	Form 1041-A		08		
Form 990-E			03	Form 4720	-	09		
Form 990-P	•		04	Form 5227		10		
Form 990-T	(sec 401(a) or	408(a) trust)	05	Form 6069		11		
Farm 990 <u>-</u> T	(trust other tha	n above)	06	Form 8870				
		RHONDA S. PERRY	<u> </u>					-
		777 HEMLOCK ST						
 The books 	are in the care of l	► MACON				G.	A 3120	01
Telephone	• No. ▶ 4.7	8-633-1452	FAX No	>				_
 If the orga 	nization does n	ot have an office or place of business in	the United S	States, check this box				▶ 📋
 If this is for 	r a Group Retu	ກ, enter the organ <u>iza</u> tion's four digit Gro	oup Exempte	on Number (GEN) If	thıs is			
or the whole (group, check thi	s box ▶ ∐ If it is for part of	the group, ch	neck this box	ch			
		of all members the extension is for						_
		3-month (6 months for a corporation req						
until _. C	5/15/12	, to file the exempt organization return	for the orga	nization named above. The extension is				
for the o	organization's re	turn for.						
▶∐	calendar year	or						
► X	tax year beginn	ing $10/01/10$, and ending	09/30/:	11 .				
2 If this ta	x vear entered i	n line 1 is for less than 12 months, chec	ck reason.	Initial return Final return				
	hange in accou							
3a If this ap	oplication is for l	Form 990-BL, 990-PF, 990-T, 4720, or 6	6069, enter t	he tentative tax, less any		<u> </u>		
nonrefundable credits. See instructions.			3a \$					
b If this application is for Form 990-PF, 990-T, 4720, or 6069, ent			ter any refun	dable credits and				
estimate	ed tax payments	made Include any prior year overpayr	nent allowed	as a credit	35	\$		
c Balance due. Subtract line 3b from line 3a. Include your paym								
(Electronic Federal Tax Payment System) See instructions					3с	\$		
Caution. If yo	u are going to m	ake an electronic fund withdrawal with	this Form 88	68, see Form 8453-EO and Form 8879-	EO for			
payment instru								
Sar Danasus.	de Dadustian A	ct Notice and Instructions				r-	ARER /	/Day 4 00441

Form 8868 (R	ev. 1-2012)					Page 2			
• If you are	filing for an Additional (Not Automatic) 3-Month Ext	lension, con	plete only Part II and check this box			► X			
Note. Only co	mplete Part II if you have already been granted an aut	omatic 3-mor	nth extension on a previously filed Form	8868.					
	filing for an Automatic 3-Month Extension, complete	e only Part I	(on page 1).						
Part II	Additional (Not Automatic) 3-Month Ex	tension o							
			Enter file		ing number, see				
Туре ог	Name of exempt organization or other filer, see inst	ructions.		Етрюу	er identification nun	nder (EIN) or			
print	GENERAL GEORGIA MENTEN CI	ᄝᇎ	3 58-2149127						
File by the	CENTRAL GEORGIA HEALTH S'		Social security number (SSN)						
due date for	Number, street, and room or suite no. If a P.O. box, 691 CHERRY ST								
filing your return. See									
Instructions.	Only to this or post of the professional and a constitution of the professional and the profe								
	J MACON CI	* ******	-						
Enter the Reti	urn code for the return that this application is for (file a	separate apo	olication for each return)			01			
Litter the rect	art dodd for the retain stat the approacher to the the	oopsidte opp	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, ,				
Application	1	Return	Application		Return				
ls For	•	Code	ls For	Code					
Form 990		01	**************************************	3	\$\$\`\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$				
Form 990-B	IL	02	Form 1041-A		08				
Form 990-E	Z	01	Form 4720			09			
Form 990-P	PF	04	Form 5227			10			
Form 990-T	(sec 401(a) or 408(a) trust)	05	Form 6069	11					
Form 990-T	(trust other than above)	06	Form 8870		<u> </u>	12			
STODI Do no	t complete Part II if you were not already granted a	n automatic	2-month extension on a previously f	iled Form	8868.				
• If this is for the whole is the with the new first wide with the new first with the new first with the new first with the new first with the new	ames and EINs of all members the extension is for. st an additional 3-month extension of time until 08 ander year or other tax year beginning ix year entered in line 5 is for less than 12 months, che change in accounting period a detail why you need the extension ITIONAL TIME IS REQUESTED	roup Exempt rt of the group /15/12 / 10/j eck reason.	ion Number (GEN)	l attach a	RE A COMP	LETĖ			
8a If this a	ACCURATE RETURN . pplication is for Form 990-BL, 990-PF, 990-T, 4720, or	6069, enter	the tentative tax, less any	. 8a	<u> </u>	·•····			
Will Had a 4 6 5 000 PE 000 T 4700 - 0000 and a 4 daylor and					 • 				
to it this application is for Form 990-17, 990-1, 4720, or 6009, enter any felundacie credits and									
estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.									
and the second s									
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions									
Toronto	### AUV	4.	.41						
Under penalte knowledge an	Signature and Verifi es of perjury, I declare that I have examined this form, and belief, it is true, correct, and complete, and that I am	including acc	st be completed for Part II onl companying schedules and statements, o prepare this form.		best of my	**			
A	Jacqueline attens		ide CPA		Date > 4	1/30/12 _			
Signature -	June 1	<u></u>	100 #		Form 886				