



## 2020 QUALIFIED RURAL HOSPITAL ORGANIZATION EXPENSE TAX CREDIT

**January 31, 2020**

**The Qualified Rural Hospital Organization Expense Tax Credit Cap for Calendar Year 2020 is \$60,000,000**

**For preapprovals processed through the date of this report, \$7,961,224 of the 2020 Qualified Rural Hospital Organization Expense Tax Credit cap of \$60 million has been used. As such \$52,038,776 is remaining from the 2020 cap. This number does not include applications that have been received but not yet processed. Also, if a donation is not confirmed as made the amounts will change.**

2020 Timelines relating to the credit:

1. January 2, 2020 is the beginning date when applications can be submitted for preapproval by donors for the January 1 to June 30 period.
2. Assuming the cap is not met, June 30, 2020 is the ending date when applications can be submitted for preapproval by donors for the January 1 to June 30 period.
3. Assuming the cap is not met on June 30, 2020, July 1, 2020 is the beginning date when applications can be submitted for preapproval by donors for the July 1 to December 31 period;
4. Assuming the cap is not met, December 31, 2020 is the ending date when applications can be submitted for preapproval by donors for the July 1 to December 31 period; and
5. The preapproved contributions are required to be sent to the rural hospital organization by the earlier of 180 days from the preapproval date or December 31, 2020;

The list and ranking order of rural hospital organizations eligible to receive contributions is available at <https://dch.georgia.gov/rural-hospital-tax-credit>

Undesignated contributions received by the Department are listed below. Information about undesignated contributions received by the Georgia HEART Hospital Program, and which rural hospital organization the contribution was attributed to, can be viewed on their website:

<https://www.georgiaheart.org/>

Calendar year 2020 information through the date of this report is listed on the following page. Note the undesignated contribution information is a subset of the total columns (the total columns include both designated and undesignated).

Name of Rural Hospital Organization (RHO) as shown on report	Pre-Approved Amount of Credit	Reported Contribution by Hospital	Pre-Approved Amount that was Unspecified or Undesignated (note this is a subset of the "Total Pre-Approved Amount of Credit" column)	Reported Contribution that was Unspecified or Undesignated (note this is a subset of the "Total Reported Contribution by Hospital" column)
APPLING HOSPITAL	59,458.00	0.00	0.00	0.00
BACON COUNTY HOSPITAL	119,850.00	10,000.00	0.00	0.00
BLECKLEY MEMORIAL HOSPITAL	12,000.00	0.00	0.00	0.00
BROOKS COUNTY HOSPITAL	113,300.00	20,000.00	0.00	0.00
BURKE MEDICAL CENTER	59,000.00	0.00	0.00	0.00
CANDLER COUNTY HOSPITAL	200,375.00	10,000.00	0.00	0.00
CHATUGE REGIONAL HOSPITAL	32,000.00	0.00	0.00	0.00
CLINCH MEMORIAL HOSPITAL	30,500.00	5,000.00	0.00	0.00
COFFEE REGIONAL MEDICAL CENTER	121,500.00	0.00	0.00	0.00
COLQUITT REGIONAL MEDICAL CENTER	1,125,226.00	5,000.00	0.00	0.00
CRISP REGIONAL HOSPITAL	251,500.00	0.00	0.00	0.00
DODGE COUNTY HOSPITAL	123,748.00	2,000.00	0.00	0.00
DONALSONVILLE HOSPITAL INC	64,111.00	12,000.00	0.00	0.00
DORMINY MEDICAL CENTER	158,500.00	30,000.00	0.00	0.00
EFFINGHAM HEALTH SYSTEM	100,000.00	0.00	0.00	0.00
ELBERT MEMORIAL HOSPITAL	59,300.00	11,500.00	0.00	0.00
EMANUEL MEDICAL CENTER	102,250.00	25,000.00	0.00	0.00
EVANS MEMORIAL HOSPITAL	40,000.00	0.00	0.00	0.00
HABERSHAM COUNTY MEDICAL CENTER	76,000.00	15,000.00	0.00	0.00
HIGGINS GENERAL HOSPITAL	98,000.00	0.00	0.00	0.00
IRWIN COUNTY HOSPITAL	96,000.00	4,000.00	0.00	0.00
JASPER MEMORIAL HOSPITAL	163,550.00	6,000.00	0.00	0.00
JEFF DAVIS HOSPITAL	19,500.00	2,500.00	0.00	0.00
JEFFERSON HOSPITAL	101,229.00	28,334.00	0.00	0.00
JOHN D ARCHBOLD MEMORIAL HOSPITAL	1,024,511.00	10,000.00	0.00	0.00
LIBERTY REGIONAL MEDICAL CENTER	247,546.00	33,998.00	0.00	0.00
MEADOWS REGIONAL MEDICAL CENTER	226,111.00	0.00	0.00	0.00
MEDICAL CENTER OF PEACH COUNTY, NAVICENT HEALTH	29,111.00	0.00	0.00	0.00
MEMORIAL HOSPITAL OF BAINBRIDGE	209,700.00	25,200.00	0.00	0.00
MILLER COUNTY HOSPITAL	262,000.00	3,000.00	0.00	0.00
MITCHELL COUNTY HOSPITAL	16,000.00	0.00	0.00	0.00
MONROE COUNTY HOSPITAL	86,000.00	0.00	0.00	0.00
MORGAN MEMORIAL HOSPITAL	94,000.00	17,000.00	0.00	0.00
MURRAY MEDICAL CENTER	11,500.00	1,500.00	0.00	0.00
NAVICENT HEALTH BALDWIN	21,111.00	10,000.00	0.00	0.00
PHOEBE SUMTER MEDICAL CENTER	169,278.00	0.00	0.00	0.00
PHOEBE WORTH MEDICAL CENTER	7,167.00	5,000.00	0.00	0.00
PIEDMONT MOUNTAINSIDE HOSPITAL	166,500.00	30,000.00	0.00	0.00
POLK MEDICAL CENTER, INC.	96,111.00	20,000.00	0.00	0.00

PUTNAM GENERAL HOSPITAL	23,000.00	3,000.00	0.00	0.00
SOUTH GEORGIA MEDICAL CENTER - BERRIEN CAMPUS	64,150.00	0.00	0.00	0.00
SOUTH GEORGIA MEDICAL CENTER - LANIER CAMPUS	43,750.00	0.00	0.00	0.00
SOUTHEAST GEORGIA HEALTH SYSTEM - CAMDEN CAMPUS	374,300.00	6,000.00	0.00	0.00
SOUTHWEST GEORGIA REGIONAL MEDICAL CENTER	1,666.00	0.00	0.00	0.00
ST MARY'S GOOD SAMARITAN HOSPITAL	322,842.00	16,000.00	0.00	0.00
ST. MARY'S SACRED HEART HOSPITAL	126,798.00	11,500.00	0.00	0.00
STEPHENS COUNTY HOSPITAL	27,000.00	0.00	0.00	0.00
TAYLOR REGIONAL HOSPITAL	95,000.00	10,000.00	0.00	0.00
TIFT REGIONAL MEDICAL CENTER	129,111.00	10,000.00	0.00	0.00
UNION GENERAL HOSPITAL	80,000.00	7,500.00	0.00	0.00
UNIVERSITY HOSPITAL MCDUFFIE	50,111.00	0.00	0.00	0.00
UPSON REGIONAL MEDICAL CENTER	45,400.00	400.00	0.00	0.00
WASHINGTON COUNTY REGIONAL MEDICAL CENTER	81,500.00	2,000.00	0.00	0.00
WAYNE MEMORIAL HOSPITAL	13,000.00	0.00	0.00	0.00
WELLSTAR SYLVAN GROVE HOSPITAL	380,600.00	40,100.00	0.00	0.00
WILLS MEMORIAL HOSPITAL	109,453.00	33,480.00	0.00	0.00
	<b>7,961,224.00</b>	<b>482,012.00</b>	<b>0.00</b>	<b>0.00</b>