End of Year Listing of Hospital Net Assets (HB 321)

	Unrestricted Net Assets ($)	Restricted – Expendable Net Assets ($)*	Restricted – Non-Expendable Net Assets ($)*	Total Net Assets ($)	Notes (**)
Hospital					
Hospital Parent Company					
Hospital Owned or Controlled Foundation* **	Please see audited Financial Statements Pages 18-20				
[Hospital Subsidiary #1][NAME]					
[Hospital Subsidiary #2][NAME]					
[continue]					

Notes:

a. Fiscal Year End _____.
b. List of net assets of the hospital, its parent company, its subsidiaries, and any foundation owned or controlled by the hospital or its parent company as of the close of the most recently completed fiscal year.
c. Restrictions shall include any restrictions on assets to the extent required to be reported under GAAP (*e.g.*, unrestricted and restricted net assets)
d. (*) Indicate whether temporarily or permanently restricted to the extent required by generally accepted accounting principles.
e. (**) Indicate whether any unrestricted assets are Board designated.
f. (***) The Hospital's interest in its Foundation shall be deducted from the value of the Foundation's Net Assets.

GEORGIA ALLIANCE OF COMMUNITY HOSPITALS GHA