

ANNUAL COMMUNITY BENEFIT REPORT

[As Required Pursuant to O.C.G.A. § 31-7-90.1(a) and O.C.G.A. § 14-3-305 (d)]

To be filed with the Clerk of the Superior Court of the County in which the Authority's Hospital is located and with the governing body (or bodies) of the Authority's participating unit(s).

Clerk: After recording, please return to: John Moore
South Georgia Medical Center
P.O. Box 1727
Valdosta, GA 31603-1727

For the Period October 1, 2023 through September 30, 2024 (or dates for fiscal year).

PART A. GENERAL INFORMATION

1. Facility Name or Hospital Authority Name: South Georgia Medical Center, Inc.

2. Street Address: 2501 North Patterson Street
Valdosta, GA 31602

3. Mailing Address (if different from Street Address): P.O. Box 1727
Valdosta, GA 31603-1727


4. County in which Facility or Hospital is located: Lowndes

5. Governing Body (or Bodies) of Hospital Authority's Participating Units: _____
City of Valdosta; Lowndes County

6. Person Authorized to respond to inquiries about this report:
a. Name: John Moore
b. Title: Senior Vice President and Chief Financial Officer
c. Phone Number: (229) 259-4162

7. Report data for the full preceding 12-month period, either calendar or fiscal year. Confirm that the correct report period has been used by completing the report period beginning and ending dates below.

a. Report Period: Beginning Date 10/1/2023 Ending Date 9/30/2024
b. Was the hospital operational for the entire year? Yes No
If No, provide the dates the hospital was operational (*explain*): _____

8. Verification of Review by Facility Chief Executive Officer:
Reviewed and Approved:  Date: _____
Signature of CEO (Original Signature)
John Moore, Senior Vice President Chief Financial Officer
(Typed/Printed Name and Title of CEO)

ANNUAL REPORT OF CERTAIN TRANSACTIONS

[As Required Pursuant to O.C.G.A. §31-7-90.1 and O.C.G.A. §14-3-305(d)]

To be filed with the Clerk of the Superior Court of the County in which the Authority's Hospital is located and with the governing body (or bodies) of the Authority's participating unit(s).

Note: A separate form should be completed and filed for the Hospital Authority and each nonprofit corporation formed, created or operated by or on behalf of the Hospital Authority (a "Nonprofit") in order to operate the hospital.

Clerk: After recording, please return to: South Georgia Medical Center, Inc.
Ronald E. Dean, President and CEO
P.O. Box 1727, Valdosta, GA 31603-1727

For the Period October 1, 2023 through September 30, 2024.

PART A. GENERAL INFORMATION

1. Name of Hospital Authority or Nonprofit: South Georgia Medical Center, Inc.
2. Street Address: 2501 North Patterson Street
Valdosta, GA 31602
3. Mailing Address (if different from Street Address): P.O. Box 1727
Valdosta, GA 31603-1727
4. County in which Hospital is located: Lowndes
5. Governing Body (or Bodies) of Hospital Authority's Participating Units: City of Valdosta; Lowndes County
6. Person Authorized to respond to inquiries about this report:
 - a. Name: John Moore
 - b. Title: Senior Vice President and Chief Financial Officer
 - c. Phone Number: (229) 259-4162

PART B. BUSINESS TRANSACTIONS -- HOSPITAL AUTHORITY

If this report is being filed on behalf of a Hospital Authority, please identify below any entity in which a Hospital Authority member (or a Hospital Authority member's spouse, child or sibling) has a direct or indirect ownership of assets or stock constituting between 10% and 25% and which Transacted Business with the Hospital Authority during the year covered by this report. (Attach additional pages, if necessary.) For purposes hereof, the term "Transacted Business" means any sale or lease of any personal property, real property, or services on behalf of oneself or on behalf of any third party as an agent, broker, dealer, or representative.

B. BUSINESS TRANSACTIONS - HOSPITAL AUTHORITY (Continued)

<u>Name of Hospital Authority Member (or Family Member)</u>	<u>Name of Entity</u>	<u>Type of Ownership Interest</u>	<u>Percentage Ownership Interest</u>	<u>Nature of Business Transaction</u>
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1. _____

2. _____

3. _____

4. _____

5. _____

PART C. BUSINESS TRANSACTIONS -- NONPROFIT

If this report is being filed on behalf of a Nonprofit, please identify below any entity in which a member of the board of such Nonprofit (or such board member's spouse, child or sibling) has a direct or indirect ownership of assets or stock constituting between 10% and 25% and which Transacted Business with the Nonprofit during the year covered by this report. (Attach additional pages, if necessary.) For purposes hereof, the term "Transacted Business" means any sale or lease of any personal property, real property, or services on behalf of oneself or on behalf of any third party as an agent, broker, dealer, or representative.

<u>Name of Nonprofit Board Member (or Family Member)</u>	<u>Name of Entity</u>	<u>Type of Ownership Interest</u>	<u>Percentage Ownership Interest</u>	<u>Nature of Business Transaction</u>
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1. _____

2. _____

3. _____

4. _____

5. _____

PART D. CERTIFICATION

By signing below, I certify that, to the best of my knowledge and belief, this report is complete and accurate as of the date of signing.

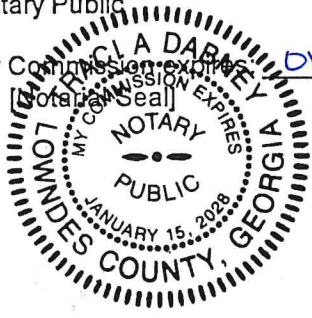
John Moore
Signature
John Moore
Name (please print or type)

12/31/2024
Date
Chief Executive Officer
Title

Sworn to and subscribed before me this 31st day of December, 2024.

Francis Darbey
Notary Public

My Commission Expires 01/15/2028



Hospital Authority of Valdosta and Lowndes County, Georgia
 Indigent/Charity Write-offs
 Fiscal Year Ended September 30, 2024

COUNTY	INPATIENT		OUTPATIENT		TOTAL	
	# PATIENT	ADJUSTMENTS	# PATIENT	ADJUSTMENTS	# PATIENT	ADJUSTMENTS
ATKINSON	8	469,721	48	268,009	56	737,730
BACON			10	6,210	10	6,210
BALDWIN			1	2,062	1	2,062
BARTOW	1	103,340			1	103,340
BAY			4	13,733	4	13,733
BELL			2	8,803	2	8,803
BEN HILL	8	476,915	35	114,998	43	591,913
BERRIEN	61	1,650,743	1,257	2,165,813	1,318	3,816,556
BIBB			2	1,128	2	1,128
BLOUNT			1	3,042	1	3,042
BRANTLEY			4	6,263	4	6,263
BREVARD			2	11,165	2	11,165
BRONX			1	5,613	1	5,613
BROOKS	66	1,539,156	1,018	2,348,832	1,084	3,887,988
BROWARD			3	28,135	3	28,135
BURKE			2	724	2	724
CARROLL			2	2,952	2	2,952
CHARLESTON	1	15,961			1	15,961
CHARLTON	1	1,490	3	898	4	2,388
CHATHAM	1	1,400	1	339	2	1,739
CHEROKEE	1	22,941			1	22,941
CLARKE			1	903	1	903
CLAYTON			2	791	2	791
CLINCH	20	527,717	292	817,899	312	1,345,616
CLINTON			1	7,262	1	7,262
COFFEE	6	125,801	55	167,980	61	293,781
COLLIER	1	32,522			1	32,522
COLLIN	1	15,485			1	15,485
COLQUITT	15	821,193	117	243,135	132	1,064,328
COLUMBIA			2	13,884	2	13,884
COOK	66	1,478,537	1,076	1,933,521	1,142	3,412,058
COWETA			2	5,673	2	5,673
DEKALB	1	269,875	5	57,232	6	327,107
DODGE			3	1,683	3	1,683
DOUGLAS			2	886,064	2	886,064
DUVAL	3	451,783	13	32,385	16	484,168
EARLY			3	38,989	3	38,989
ECHOLS	56	1,745,434	737	1,599,565	793	3,344,999
FLAGLER	1	11,427	1	6,822	2	18,249
FORSYTH			1	3,106	1	3,106
FORT BEND			1	1,236	1	1,236
GLYNN			2	19,532	2	19,532
GRADY			9	45,060	9	45,060
GWINNETT			1	2,294	1	2,294
HAMILTON	5	107,612	230	635,756	235	743,368
HILLSBOROUGH			1	674	1	674
HOUSTON			2	1,159	2	1,159
HYDE			2	6,123	2	6,123
IRWIN	2	4,265	39	56,596	41	60,861
JACKSON			6	4,900	6	4,900
JEFF DAVIS	1	2,065	3	765	4	2,830
JEFFERSON	2	350,371	4	20,520	6	370,891
JENKINS	1	1,363	1	4	2	1,367
LAKE			1	959	1	959
LANIER	61	1,192,404	1,190	2,126,776	1,251	3,319,180
LAURENS			2	1,257	2	1,257
LEE			16	48,090	16	48,090
LEON			8	9,191	8	9,191
LINCOLN			1	1,299	1	1,299
LOWNDES	866	23,146,659	72,331	34,313,928	73,197	57,460,587
MADISON	29	789,830	342	400,448	371	1,190,278
MANATEE			4	4,885	4	4,885
MARICOPA			2	44,503	2	44,503
MITCHELL			7	19,353	7	19,353
MONTEREY			5	6,604	5	6,604
MORGAN			1	936	1	936
MUHLENBERG			1	627	1	627
NASSAU			1	1,095	1	1,095
NEW HAVEN			2	7,324	2	7,324
NEW LONDON	1	1,632			1	1,632
ORANGEBURG			3	2,094	3	2,094
OTERO			1	1,137	1	1,137
PASCO			15	61,489	15	61,489
PASSAIC			1	478	1	478
PERRY	1	79,018			1	79,018
PIERCE			10	2,374	10	2,374
PINELLAS	1	65,130	1	87	2	65,217

COUNTY	INPATIENT		OUTPATIENT		TOTAL	
	# PATIENT	ADJUSTMENTS	# PATIENT	ADJUSTMENTS	# PATIENT	ADJUSTMENTS
POLK			1	504	1	504
PULASKI			2	308	2	308
QUITMAN	2	1,894	2	528	4	2,422
RANKIN			1	317	1	317
SAINT JOHNS			6	13,389	6	13,389
SALT LAKE	1	78,728			1	78,728
SANTA ROSA			7	8,564	7	8,564
SEMINOLE			12	4,445	12	4,445
STEPHENS			1	2,468	1	2,468
SUMTER			7	8,810	7	8,810
SUWANNEE	3	75,714	43	380,623	46	456,337
TAYLOR	3	221,129	10	27,711	13	248,840
TERRELL			2	565	2	565
THOMAS	2	3,257	75	63,331	77	66,588
TIFT	13	153,369	82	204,809	95	358,178
TURNER	1	1,632	6	3,307	7	4,939
VANDEBURGH	1	23,257			1	23,257
VOLUSIA	1	1,632	1	6,932	2	8,564
WARE	4	71,505	142	198,189	146	269,694
WAYNE			2	4,105	2	4,105
WINDHAM			2	4,448	2	4,448
WORTH			9	7,390	9	7,390
YAVAPAI			3	17,719	3	17,719
** GRAND TOTALS	1,319	36,133,907	79,371	49,613,628	80,690	85,747,535