

**2019 Qualified Rural Hospital Organization Expense Tax Credit Proxy for IRS Form 990
Attestation Statement**

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.

Signature of Officer:  Date: 10/16/2020

Print Name and Title: MICHAEL PURVIS, CEO CANDLER COUNTY HOSPITAL

Signature of Preparer  Date: 10/16/2020

Print Preparer's Name: WILL BENNETT, CFO CANDLER COUNTY HOSPITAL

Preparer's Firm's Name: _____

Preparer's Firm's Address: _____

2019 Qualified Rural Hospital Organization Expense Tax Credit Proxy for IRS Form 990

Name of Hospital	HOSPITAL AUTHORITY OF CANDLER COUNTY
Doing Business As	CANDLER COUNTY HOSPITAL
Number and Street Address	P.O. BOX 597 / 400 CEDAR ST
Room/Suite	
City or Town	METTER
State	GA
Zip Code	30439
Telephone Number	(912) 685-1769
Name and Address of Principal Officer .	WILL BENNETT, CFO

Total Number of Individuals Employed in Calendar Year 2019.

The Hospital's Fiscal Year 2018 Covered the Following Dates:

Start Date: End Date:

The Hospital's Fiscal Year 2019 Covered the Following Dates:

Start Date: End Date:

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Net Assets or Fund Balances

1. Total Assets	Beginning of Current Year	End of Year
a. Cash - Non-Interest Bearing	\$ 558,300.00	\$2,022,172.00
b. Savings and Temporary Cash Investments		
c. Pledges and Grants Receivable, Net		
d. Accounts Receivable, Net	\$ 1,255,376.00	\$1,923,459.00
e. Loans and Other Receivables From Current and Former Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
f. Notes and Loans Receivable, Net	\$ 609,955.00	\$ 649,261.00
g. Inventories for sale or use	\$ 176,472.00	\$ 185,873.00
h. Prepaid expenses and deferred charges	\$ 2,376.00	\$ 70,104.00
i. Land, buildings, and equipment: cost or other basis Less Accumulated Depreciation	\$ 2,707,755.00	\$ 2,782,507.00
j. Investments- Publicly Traded Securities		
k. Investments- Other Securities		
l. Investments- Program-Related		
m. Intangible Assets		
n. Other Assets		
o. Total a - n above	\$ 5,310,234.00	\$ 7,633,376.00

2. Total Liabilities	Beginning of Current Year	End of Year
a. Accounts Payable and Accrued Expenses	\$ 6,631,625.00	\$6,239,127.00
b. Grants Payable		
c. Deferred Revenue		
d. Tax-Exempt Bond Liabilities		
e. Escrow or Custodial Account Liability		
f. Loans and Other Payables to Current and Former Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Disqualified Persons		
g. Secured Mortgages and Notes Payable to Unrelated Third Parties	\$ 3,811,072.00	\$4,007,206.00
h. Unsecured Notes and Loans Payable to Unrelated Third Parties Other Liabilities (including Federal Income Tax, Payables to i. Related Third Parties, and Other Liabilities Not Included in Lines a through h).		
h. Total a - i above	\$ 10,442,697.00	\$10,246,333.00

3. Net Assets or Fund Balances. Subtract line 2h from line 1o.	Beginning of Current Year	End of Year
	(\$5,132,463.00)	(\$2,612,957.00)