

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2020
Open to Public Inspection

A For the 2020 calendar year, or tax year beginning 10-01-2020, and ending 09-30-2021

- B** Check if applicable:
- Address change
 - Name change
 - Initial return
 - Final return/terminated
 - Amended return
 - Application pending

C Name of organization
Southern Baptist Hospital of Florida Inc

Doing business as
See Schedule O

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
1660 Prudential Dr 203

City or town, state or province, country, and ZIP or foreign postal code
Jacksonville, FL 32207

D Employer identification number
59-0747311

E Telephone number
(904) 202-2883

G Gross receipts \$ 1,835,865,778

F Name and address of principal officer:
Michael A Mayo
841 Prudential Dr Ste 1601
Jacksonville, FL 32207

H(a) Is this a group return for subordinates? Yes No

H(b) Are all subordinates included? Yes No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ www.baptistjax.com

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1965

M State of legal domicile: FL

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
Continue the healing ministry of Christ by providing accessible, quality healthcare services at a reasonable cost in an atmosphere that fosters respect and compassion.

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	15
4 Number of independent voting members of the governing body (Part VI, line 1b)	10
5 Total number of individuals employed in calendar year 2020 (Part V, line 2a)	9,849
6 Total number of volunteers (estimate if necessary)	178
7a Total unrelated business revenue from Part VIII, column (C), line 12	593,414
7b Net unrelated business taxable income from Form 990-T, line 39	58,679

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	33,843,473	56,034,598
9 Program service revenue (Part VIII, line 2g)	1,433,202,656	1,719,925,479
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	63,480,616	58,115,549
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,898,790	1,160,372
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,532,425,535	1,835,235,998
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,744,238	2,542,855
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	637,580,364	751,058,673
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	707,230,346	805,689,256
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,346,554,948	1,559,290,784
19 Revenue less expenses. Subtract line 18 from line 12	185,870,587	275,945,214

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	3,630,662,240	4,112,924,251
21 Total liabilities (Part X, line 26)	1,490,241,195	1,529,237,950
22 Net assets or fund balances. Subtract line 21 from line 20	2,140,421,045	2,583,686,301

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.

Sign Here

Signature of officer
Date: 2022-08-11

Keith Tickell SVP & CFO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name ▶			Firm's EIN ▶	
Firm's address ▶			Phone no.	

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission:

Continue the healing ministry of Christ by providing accessible, quality healthcare services at a reasonable cost in an atmosphere that fosters respect and compassion.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 1,346,644,600 including grants of \$ 2,542,855) (Revenue \$ 1,719,928,699)
See Additional Data

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 1,346,644,600

Part IV Checklist of Required Schedules

		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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	Yes	
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		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		No
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		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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		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? If "Yes," complete Schedule D, Part II		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	Yes	
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, line 10? If "Yes," complete Schedule D, Part VI.	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		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		No
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	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	Yes	
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		No
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 and XII is optional	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		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? If "Yes," complete Schedule G, Part I (see instructions)		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? If "Yes," complete Schedule G, Part II		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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	Yes	
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	Yes	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	Yes	

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 covering various organizational requirements and schedules.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V []

Table with 3 columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance *(continued)*

<p>2a 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 return</p>	<p>2a 9,849</p>				
<p>b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</p>			2b	Yes	
<p>3a Did the organization have unrelated business gross income of \$1,000 or more during the year?</p>			3a	Yes	
<p>b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i></p>			3b	Yes	
<p>4a 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)?</p>			4a		No
<p>b If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).</p>					
<p>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</p>			5a		No
<p>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</p>			5b		No
<p>c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?</p>			5c		
<p>6a 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 as charitable contributions?</p>			6a		No
<p>b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</p>			6b		
7 Organizations that may receive deductible contributions under section 170(c).					
<p>a 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?</p>			7a		No
<p>b If "Yes," did the organization notify the donor of the value of the goods or services provided?</p>			7b		
<p>c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</p>			7c		No
<p>d If "Yes," indicate the number of Forms 8282 filed during the year</p>	<p>7d </p>				
<p>e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</p>			7e		No
<p>f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</p>			7f		No
<p>g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?</p>			7g		No
<p>h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</p>			7h		No
<p>8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?</p>			8		
<p>9 Sponsoring organizations maintaining donor advised funds.</p>					
<p>a Did the sponsoring organization make any taxable distributions under section 4966?</p>			9a		
<p>b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?</p>			9b		
10 Section 501(c)(7) organizations. Enter:					
<p>a Initiation fees and capital contributions included on Part VIII, line 12</p>	<p>10a </p>				
<p>b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</p>	<p>10b </p>				
11 Section 501(c)(12) organizations. Enter:					
<p>a Gross income from members or shareholders</p>	<p>11a </p>				
<p>b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)</p>	<p>11b </p>				
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?					
<p>b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.</p>	<p>12b </p>				
13 Section 501(c)(29) qualified nonprofit health insurance issuers.					
<p>a 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.</p>			13a		
<p>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</p>	<p>13b </p>				
<p>c Enter the amount of reserves on hand</p>	<p>13c </p>				
<p>14a Did the organization receive any payments for indoor tanning services during the tax year?</p>			14a		No
<p>b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i></p>			14b		
<p>15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.</p>			15		No
<p>16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.</p>			16		No

Part VI 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. Check if Schedule O contains a response or note to any line in this Part VI



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (15), 1b (10), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed
18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records:

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

Check if Schedule O contains a response or note to any line 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. 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, or 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.

See instructions for the order in which to list the persons above.

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 per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b Sub-Total										
1c Total from continuation sheets to Part VII, Section A										
1d Total (add lines 1b and 1c)							4,712,518	7,911,973		1,572,732

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ **13**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
MCKESSON CORPORATION 4345 Southpoint Blvd Jacksonville, FL 32216	Medical Supply Distributor	82,289,089
DPR CONSTRUCTION A GENERAL 315 E Robinson St Orlando, FL 32801	Construction Projection Management	56,570,914
OWENS & MINOR INC 8489 Westside Industrial Dr Jacksonville, FL 32219	Medical Supply Distributor	52,505,267
HASKELL COMPANY 111 Riverside Ave Jacksonville, FL 32202	Construction Projection Management	21,757,670
NEMOURS FOUNDATION 10140 Centurion Parkway North Jacksonville, FL 32256	Pediatric Care	17,808,623

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ **591**

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a	0				
	b Membership dues	1b	0				
	c Fundraising events	1c	0				
	d Related organizations	1d	9,259,851				
	e Government grants (contributions)	1e	46,724,246				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	50,501				
	g Noncash contributions included in lines 1a - 1f:\$	1g	0				
	h Total. Add lines 1a-1f			56,034,598			
Program Service Revenue	2a Patient Service Revenues, Net	Business Code					
		621990	1,688,969,486	1,688,969,486	0	0	
	b Hospital Cafeteria	722514	6,745,005	6,745,005	0	0	
	c Hospital Program Revenue	621990	24,025,039	24,025,039	0	0	
	d Health & Fitness Center	713940	55,411	55,411	0	0	
	e Rental Revenue	531120	111,167	111,167	0	0	
	f All other program service revenue.		19,371	19,371	0	0	
g Total. Add lines 2a-2f.		1,719,925,479					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		51,922,445	0	0	51,922,445	
	4 Income from investment of tax-exempt bond proceeds		0	0	0	0	
	5 Royalties		0	0	0	0	
	6a Gross rents	(i) Real	1,377,741	0			
		(ii) Personal					
		b Less: rental expenses	629,780	0			
		c Rental income or (loss)	747,961	0			
	d Net rental income or (loss)		747,961	0	184,223	563,738	
	7a Gross amount from sales of assets other than inventory	(i) Securities	0	6,193,104			
		(ii) Other					
		b Less: cost or other basis and sales expenses	0	0			
		c Gain or (loss)	0	6,193,104			
	d Net gain or (loss)		6,193,104	0	0	6,193,104	
	8a Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c). See Part IV, line 18		0				
		b Less: direct expenses	0				
c Net income or (loss) from fundraising events			0		0	0	
9a Gross income from gaming activities. See Part IV, line 19		0					
	b Less: direct expenses	0					
	c Net income or (loss) from gaming activities		0	0	0	0	
10a Gross sales of inventory, less returns and allowances		0					
	b Less: cost of goods sold	0					
	c Net income or (loss) from sales of inventory		0	0	0		
11a Reference lab revenues	Miscellaneous Revenue	Business Code					
		621500	409,191	0	409,191	0	
	b Miscellaneous Revenue	900099	3,220	3,220	0	0	
	c						
	d All other revenue		0	0	0	0	
e Total. Add lines 11a-11d		412,411					
12 Total revenue. See instructions		1,835,235,998	1,719,928,699	593,414	58,679,287		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	2,527,767	2,527,767		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	15,088	15,088		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	0	0		
4 Benefits paid to or for members	0	0		
5 Compensation of current officers, directors, trustees, and key employees	3,015,296	1,507,648	1,507,648	0
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	0	0	0
7 Other salaries and wages	558,643,305	480,433,242	78,210,063	0
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	25,528,810	21,954,777	3,574,033	0
9 Other employee benefits	123,386,000	106,111,960	17,274,040	0
10 Payroll taxes	40,485,262	34,817,325	5,667,937	0
11 Fees for services (non-employees):				
a Management	6,244,407	4,683,305	1,561,102	0
b Legal	989,998	494,999	494,999	0
c Accounting	805,120	402,560	402,560	0
d Lobbying	0	0	0	0
e Professional fundraising services. See Part IV, line 17	0			0
f Investment management fees	0	0	0	0
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	118,820,739	89,115,554	29,705,185	0
12 Advertising and promotion	80,541	60,406	20,135	0
13 Office expenses	73,432,728	55,074,546	18,358,182	0
14 Information technology	6,810,781	5,108,086	1,702,695	0
15 Royalties	165,721	124,291	41,430	0
16 Occupancy	29,607,757	22,205,818	7,401,939	0
17 Travel	764,628	573,471	191,157	0
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19 Conferences, conventions, and meetings	890,411	667,808	222,603	0
20 Interest	27,898,591	20,923,943	6,974,648	0
21 Payments to affiliates	0	0	0	0
22 Depreciation, depletion, and amortization	108,369,628	81,277,221	27,092,407	0
23 Insurance	27,454,812	20,591,109	6,863,703	0
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Hospital/Medical Supplies	353,602,540	353,602,540	0	0
b Patient Transportation	3,657,778	3,657,778	0	0
c Patient Reference Lab	7,448,333	7,448,333	0	0
d AHCA & NICA ASSESSMENTS	17,125,874	17,125,874	0	0
e All other expenses	21,518,869	16,139,151	5,379,718	0
25 Total functional expenses. Add lines 1 through 24e	1,559,290,784	1,346,644,600	212,646,184	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part IX

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	22,717	1	13,346
	2 Savings and temporary cash investments	0	2	0
	3 Pledges and grants receivable, net	0	3	0
	4 Accounts receivable, net	242,304,682	4	291,242,523
	5 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	0
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use	29,791,036	8	28,955,028
	9 Prepaid expenses and deferred charges	9,663,491	9	13,434,407
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	2,339,179,787		
	b Less: accumulated depreciation	1,172,667,181		
	11 Investments—publicly traded securities	1,046,627,301	10c	1,166,512,606
	12 Investments—other securities. See Part IV, line 11	1,768,684,605	11	2,005,029,542
	13 Investments—program-related. See Part IV, line 11	0	12	
	14 Intangible assets	0	13	
	15 Other assets. See Part IV, line 11	5,754,175	14	5,754,175
16 Total assets. Add lines 1 through 15 (must equal line 33)	527,814,233	15	601,982,624	
	3,630,662,240	16	4,112,924,251	
Liabilities	17 Accounts payable and accrued expenses	578,052,187	17	522,545,934
	18 Grants payable	0	18	0
	19 Deferred revenue	0	19	0
	20 Tax-exempt bond liabilities	654,185,536	20	793,822,621
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	258,003,472	25	212,869,395
	26 Total liabilities. Add lines 17 through 25	1,490,241,195	26	1,529,237,950
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	1,961,131,214	27	2,356,902,831
	28 Net assets with donor restrictions	179,289,831	28	226,783,470
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds	0	29	0
	30 Paid-in or capital surplus, or land, building or equipment fund	0	30	0
	31 Retained earnings, endowment, accumulated income, or other funds	0	31	0
32 Total net assets or fund balances	2,140,421,045	32	2,583,686,301	
33 Total liabilities and net assets/fund balances	3,630,662,240	33	4,112,924,251	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,835,235,998
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,559,290,784
3	Revenue less expenses. Subtract line 2 from line 1	3	275,945,214
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,140,421,045
5	Net unrealized gains (losses) on investments	5	181,213,350
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-13,893,308
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	2,583,686,301

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the 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.
- 3a** 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?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a	Yes	
3b	Yes	

Additional Data

Software ID: 20011424

Software Version: 2020v4.0

EIN: 59-0747311

Name: Southern Baptist Hospital of Florida Inc

Form 990 (2020)

Form 990, Part III, Line 4a:

Southern Baptist Hospital of Florida, Inc. (SBHF) is a subsidiary of Baptist Health System, Inc. (Baptist Health), a tax-exempt parent holding company located in Jacksonville, Florida. SBHF is a tax-exempt organization that operates two acute care hospitals, Baptist Medical Center (Baptist Jacksonville) and Baptist Medical Center South (Baptist South), and four emergency departments: Baptist Emergency Center Clay, Baptist Emergency Town Center, Baptist Emergency Center North, and Baptist Emergency Center Oakleaf. The primary program service accomplishments are the operation of the hospitals, and the following are some of the achievements for the organization's hospitals during the year. The two hospitals have 691 and 291 licensed beds, respectively. Baptist Jacksonville is a full-service, magnet-designated tertiary care hospital representing nearly all major specialties. This flagship hospital is also home to the Baptist Heart Hospital, offering comprehensive, high-quality cardiovascular care, and Wolfson Children's Hospital (WCH), the only full-service tertiary hospital for children in the region, serving North Florida, South Georgia, and beyond. WCH is a pediatric trauma referral center and is recognized year after year as one of America's best children's hospitals by U.S. News & World Report. WCH serves as the main teaching facility for the University of Florida College of Medicine's Pediatric Residency Training Program. For fiscal year 2021, SBHF had 68,808 admissions accounting for 309,316 inpatient & observation days, 281,567 emergency room visits, and 37,792 surgeries. SBHF's primary focus is addressing unmet health needs, particularly among vulnerable populations who have limited health resources and access to health care. SBHF's community health efforts are guided by the community health committee, which is comprised of selected Baptist Health board members from across our health system. A cornerstone of SBHF's commitment to the community is caring for the health of vulnerable, uninsured and underserved people among us. During fiscal year 2021, SBHF provided the following uncompensated care and community benefit; (1) charity care - \$45.7 million, (2) unreimbursed Medicaid costs - \$39 million, (3) unreimbursed Medicare costs - \$86.1 million, and (4) specific community programs - \$18 million, for a total of \$188.9 million of uncompensated care and community benefits. MD Anderson Cancer Center and Baptist Health have united to create Baptist MD Anderson Cancer Center. This partnership brings together MD Anderson's world-renowned cancer expertise and Baptist Health's comprehensive health system to create an unprecedented range of options for adult cancer patients in our region. The goal of the partnership is to provide the same high-level, multidisciplinary cancer care to patients in Northeast Florida that is available to MD Anderson patients in Houston. This includes all aspects along the continuum of cancer care -- patient care, research, education and prevention. The following are some of the awards and honors received by Baptist Jacksonville and Baptist South: (1) recipient from American Heart Association of gold plus quality achievement award for stroke program (Baptist Jacksonville & Baptist South), (2) ranked in U.S. News Best Hospitals in two pediatric specialties - Pediatric Diabetes and Endocrinology and Pediatric Orthopedics at Wolfson Children's Hospital - during 2021-22, (3) Leapfrog A Hospital (Baptist Jacksonville & Baptist South), (4) Leapfrog named Wolfson Children's Hospital as a Top Children's Hospital, and (5) 2017-21 magnet re-designation. Baptist Health is the first and only health system in North Florida to achieve magnet recognition as a health system by the American nurses credentialing center. Currently, only eight percent of the hospitals in the United States enjoy magnet designation, which is considered the gold standard for recognizing quality patient care, nursing excellence and innovations in professional nursing practice, an honor first earned in 2007. Many other awards and honors can be viewed at the organization's website www.baptistjax.com.

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Asghar A Syed ESQ Vice Chair	0.5	X		X				0	0	0
Brett S McClung Former President/CEO (As of 5/1/21)	0.5	X		X				0	1,662,735	118,689
Matthew A Zuino EVP/COO	39.5	X		X				0	788,238	136,318
Michael A Mayo DHA SVP/President/CEO	36.0	X		X				870,707	0	43,486
Michael K Diaz Chair/Vice Chair/Secretary/Treasurer	4.0	X		X				0	0	0
Pam Chally RNPhD Chair	0.5	X		X				0	0	0
Rev Kyle T Reese Secretary/Treasurer	0.2	X		X				0	0	0
Barbara G Jaffe Director	0.1	X						0	0	0
Eric Mann Director	0	X						0	0	0
Ken Babby Director	0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Kyle Etkorn MD Director	0.1 0	X						0	0	0
M C Harden III Director	0.1 0	X						0	0	0
Mark LaBorde Director	0.5 0.1 0	X						0	0	0
Marsha Oliver Director	0.1 0	X						0	0	0
Rachel Tutwiler Director	0.1 0	X						0	0	0
Richard D Glock MD Director	0.1 39.9	X						0	17,657	1,243
David Rice MD SVP, CMO, CQO	0.5 39.5			X				0	651,749	146,594
Elizabeth R Ransom MD EVP/CPE	0.5 39.5			X				0	1,000,029	23,609
G Scott Baity ESQ SVP/General Counsel/Asst. Secretary	0.5 39.5			X				0	566,167	138,996
Kyle M Dorsey Interim SVP	40.0 0			X				288,736	0	39,504

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Mary Ellen Schoop SVP/CHRO	0.5 39.5			X				0	675,124	22,731
Melanie J Husk SVP/CCO	0.5 39.5			X				0	555,749	34,537
Michael A Aubin SVP	39.5 0.5			X				914,386	0	44,604
Nicole B Thomas SVP	40.0 0			X				635,996	0	121,066
Scott M Wooten EVP/CFO/Asst Treasurer	0.5 39.5			X				0	949,777	288,594
Cicely Brooks VP - Patient Care Services - BMC	40.0 0					X		350,248	0	86,786
Cynthia R Reynolds SVP, Chief Philanthropy Officer	39.9 0.1					X		330,016	0	66,471
Darin Roark Hospital President, CLA	40.0 0					X		428,827	0	94,969
Jerry Bridgham MD CMO - WCH	40.0 0					X		525,929	0	29,387
LeeAnn Mengel VP & Admin BMDA Cancer Center	40.0 0					X		367,673	0	47,875

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
John F Wilbanks Former EVP/COO (AS OF 12/31/19)	0.0 40.0						X	0	440,925	20,494
Keith L Stein MD Former SVP/CMO (AS OF 5/4/20)	0.0 40.0						X	0	603,823	66,779

SCHEDULE A
(Form 990 or 990-EZ)

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.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2020
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
Southern Baptist Hospital of Florida Inc

Employer identification number
59-0747311

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 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:
- 5 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.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 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.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10 An organization that normally receives: (1) more than 33 1/3% 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 33 1/3% 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.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations _____
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II 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 failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .						
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 line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4. . .						
8 Gross income from interest, 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 VI.). . .						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 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 ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2020 (line 6, column (f) divided by line 11, column (f))	14	
15 Public support percentage for 2019 Schedule A, Part II, line 14	15	
16a 33 1/3% support test—2020. 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 ▶ <input type="checkbox"/>		
b 33 1/3% support test—2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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 in) ▶		(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
2	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						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . .						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	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.						
8	Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶		(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6.						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . .						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c	Add lines 10a and 10b.						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 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

15	Public support percentage for 2020 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2019 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2020 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2019 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2020. 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 organization

b 33 1/3% support tests—2019. 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

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, of Part I, complete Sections A and B. If you checked box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 12d, of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?		
b	A family member of a person described in 11a above?		
c	A 35% controlled entity of a person described in line 11a or 11b above? <i>If "Yes" to 11a, 11b, or 11c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2	Activities Test. Answer lines 2a and 2b below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b	Did the activities described in line 2a constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (<i>prior IRS approval required - provide details in Part VI</i>)	5	
6 Other distributions (<i>describe in Part VI</i>). See instructions	6	
7 Total annual distributions. Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions	8	
9 Distributable amount for 2020 from Section C, line 6	9	
10 Line 8 amount divided by Line 9 amount	10	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required-- <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2020:			
a From 2015.			
b From 2016.			
c From 2017.			
d From 2018.			
e From 2019.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7:			
\$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016.			
b Excess from 2017.			
c Excess from 2018.			
d Excess from 2019.			
e Excess from 2020.			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

SCHEDULE D (Form 990) Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

OMB No. 1545-0047 2020 Open to Public Inspection

Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization Southern Baptist Hospital of Florida Inc

Employer identification number 59-0747311

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 for values, 5-6 for Yes/No questions.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Form with multiple sections: 1. Purpose(s) of conservation easements (checkboxes); 2. Conservation contribution details (table); 3-5. Monitoring and enforcement questions (checkboxes); 6-8. Hours and expenses; 9. Reporting requirements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form with sections 1a, 1b, 2. 1a and 1b: Reporting on collections of art/treasures. 2: Reporting on assets held for financial gain.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---|--------|
| 1c Beginning balance | |
| 1d Additions during the year | |
| 1e Distributions during the year | |
| 1f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . Yes No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	169,024,389	159,298,707	148,666,240	130,883,252	87,206,094
b Contributions	9,554,851	10,350,719	10,502,965	15,629,958	35,812,484
c Net investment earnings, gains, and losses	27,968,132	5,794,248	4,337,729	6,676,974	10,294,301
d Grants or scholarships	0	0	0	0	0
e Other expenditures for facilities and programs	7,371,159	6,419,285	4,208,227	4,523,944	2,429,627
f Administrative expenses	0	0	0	0	0
g End of year balance	199,176,213	169,024,389	159,298,707	148,666,240	130,883,252

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶ 1.37 %
 - b** Permanent endowment ▶ 78.25 %
 - c** Term endowment ▶ 20.38 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | | |
|--|------------|-----------|
| | Yes | No |
| (i) Unrelated organizations | 3a(i) | No |
| (ii) Related organizations | 3a(ii) | Yes |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | 3b | Yes |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	35,305,967		35,305,967
b Buildings	0	1,250,793,065	508,402,706	742,390,359
c Leasehold improvements	0	8,776,599	5,044,709	3,731,890
d Equipment	0	806,708,122	653,552,859	153,155,263
e Other	0	237,596,034	5,666,907	231,929,127
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				1,166,512,606

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments—Program Related.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)		

Part IX Other Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) Other assets	45,351,588
(2) Interest in net assets of Baptist Health System Foundation, Inc.	225,673,603
(3) Due From Affiliated Organizations	9,730,830
(4) Advances to Affiliated Organizations	261,647,209
(5) Excess Self Insurance Receivable	11,076,360
(6) Direct Payment Program Receivable	48,503,034
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	601,982,624

Part X Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
(2) All other liabilities	16,761,015
(3) WORKER'S COMP. SELF-INSURANCE TRUST	12,034,327
(4) ESTIMATED THIRD-PARTY SETTLEMENTS	9,495,501
(5) PENSION & SERP LIABILITY	109,599,262
(6) HOSPITAL SELF-INSURANCE TRUST	53,561,673
(7) LONG TERM LEASE LIABILITY	11,417,617
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	212,869,395

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
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		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	

Part XIII Supplemental Information

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, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID: 20011424

Software Version: 2020v4.0

EIN: 59-0747311

Name: Southern Baptist Hospital of Florida Inc

Supplemental Information

Return Reference	Explanation
Schedule D, Part V, Line 4 Intended uses of endowment funds	SOUTHERN BAPTIST HOSPITAL OF FLORIDA, INC. (SBHF) ENDOWMENT FUNDS ARE HELD BY ITS RELATED AFFILIATE, BAPTIST HEALTH SYSTEM FOUNDATION, INC. (BHF). BHF'S ENDOWMENT POLICY ALLOWS ANNUALLY THAT 5% OF THE COMBINED ENDOWMENT CORPUS AND ACCUMULATED EARNINGS BECOME AVAILABLE FOR OR SPENDING ON CAPITAL PROJECTS OF SBHF.

Supplemental Information

Return Reference	Explanation
Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote	With few exceptions, Southern Baptist Hospital of Florida, Inc. is no longer subject to examinations by major tax jurisdictions for years ended September 30, 2017 and prior. Management does not believe there are any material uncertain positions.

SCHEDULE H (Form 990)
 Department of the Treasury
 Internal Revenue Service

Hospitals

OMB No. 1545-0047
2020
 Open to Public Inspection

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, question 20.**
 ▶ **Attach to Form 990.**
 ▶ **Go to www.irs.gov/Form990EZ for instructions and the latest information.**

Name of the organization
 Southern Baptist Hospital of Florida Inc

Employer identification number
 59-0747311

Part I Financial Assistance and Certain Other Community Benefits at Cost

	Yes	No
1a Did the organization have a financial assistance policy during the tax year? If "No," skip to question 6a	1a Yes	
b If "Yes," was it a written policy?	1b Yes	
2 If the organization had multiple hospital facilities, indicate which of the following best describes application of the financial assistance policy to its various hospital facilities during the tax year. <input checked="" type="checkbox"/> Applied uniformly to all hospital facilities <input type="checkbox"/> Applied uniformly to most hospital facilities <input type="checkbox"/> Generally tailored to individual hospital facilities		
3 Answer the following based on the financial assistance eligibility criteria that applied to the largest number of the organization's patients during the tax year. a Did the organization use Federal Poverty Guidelines (FPG) as a factor in determining eligibility for providing <i>free</i> care? If "Yes," indicate which of the following was the FPG family income limit for eligibility for free care: <input type="checkbox"/> 100% <input type="checkbox"/> 150% <input checked="" type="checkbox"/> 200% <input type="checkbox"/> Other _____ %	3a Yes	
b Did the organization use FPG as a factor in determining eligibility for providing <i>discounted</i> care? If "Yes," indicate which of the following was the family income limit for eligibility for discounted care: <input type="checkbox"/> 200% <input type="checkbox"/> 250% <input type="checkbox"/> 300% <input type="checkbox"/> 350% <input checked="" type="checkbox"/> 400% <input type="checkbox"/> Other _____ %	3b Yes	
c If the organization used factors other than FPG in determining eligibility, describe in Part VI the criteria used for determining eligibility for free or discounted care. Include in the description whether the organization used an asset test or other threshold, regardless of income, as a factor in determining eligibility for free or discounted care.		
4 Did the organization's financial assistance policy that applied to the largest number of its patients during the tax year provide for free or discounted care to the "medically indigent"?	4 Yes	
5a Did the organization budget amounts for free or discounted care provided under its financial assistance policy during the tax year?	5a Yes	
b If "Yes," did the organization's financial assistance expenses exceed the budgeted amount?	5b	No
c If "Yes" to line 5b, as a result of budget considerations, was the organization unable to provide free or discounted care to a patient who was eligible for free or discounted care?	5c	
6a Did the organization prepare a community benefit report during the tax year?	6a Yes	
b If "Yes," did the organization make it available to the public?	6b Yes	

Complete the following table using the worksheets provided in the Schedule H instructions. Do not submit these worksheets with the Schedule H.

7 Financial Assistance and Certain Other Community 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 benefit expense	(f) Percent of total expense
a Financial Assistance at cost (from Worksheet 1)			45,742,237	0	45,742,237	2.93 %
b Medicaid (from Worksheet 3, column a)			231,207,728	192,195,424	39,012,304	2.50 %
c Costs of other means-tested government programs (from Worksheet 3, column b)			0	0	0	0 %
d Total Financial Assistance and Means-Tested Government Programs	0	0	276,949,965	192,195,424	84,754,541	5.44 %
Other Benefits						
e Community health improvement services and community benefit operations (from Worksheet 4).			2,717,430	0	2,717,430	0.17 %
f Health professions education (from Worksheet 5)			3,577,929	0	3,577,929	0.23 %
g Subsidized health services (from Worksheet 6)			26,045,784	16,769,738	9,276,046	0.59 %
h Research (from Worksheet 7)			0	0	0	0 %
i Cash and in-kind contributions for community benefit (from Worksheet 8)			2,412,202	0	2,412,202	0.15 %
j Total. Other Benefits	0	0	34,753,345	16,769,738	17,983,607	1.15 %
k Total. Add lines 7d and 7j	0	0	311,703,310	208,965,162	102,738,148	6.59 %

Part II Community Building Activities Complete this table if the organization conducted any 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.

	(a) Number of activities or programs (optional)	(b) Persons served (optional)	(c) Total community building expense	(d) Direct offsetting revenue	(e) Net community building expense	(f) Percent of total expense
1 Physical improvements and housing					0	0 %
2 Economic development					0	0 %
3 Community support	3				0	0 %
4 Environmental improvements					0	0 %
5 Leadership development and training for community members					0	0 %
6 Coalition building	34				0	0 %
7 Community health improvement advocacy	26				0	0 %
8 Workforce development	1				0	0 %
9 Other	2				0	0 %
10 Total	66	0	0	0	0	0 %

Part III Bad Debt, Medicare, & Collection Practices

Section A. Bad Debt Expense

	Yes	No
1 Did the organization report bad debt expense in accordance with Healthcare Financial Management Association Statement No. 15?	1	No
2 Enter the amount of the organization's bad debt expense. Explain in Part VI the methodology used by the organization to estimate this amount.	2	106,450,181
3 Enter the estimated amount of the organization's bad debt expense attributable to patients eligible under the organization's financial assistance policy. Explain in Part VI the methodology used by the organization to estimate this amount and the rationale, if any, for including this portion of bad debt as community benefit.	3	0
4 Provide in Part VI the text of the footnote to the organization's financial statements that describes bad debt expense or the page number on which this footnote is contained in the attached financial statements.		

Section B. Medicare

5 Enter total revenue received from Medicare (including DSH and IME)	5	410,320,945
6 Enter Medicare allowable costs of care relating to payments on line 5	6	496,481,840
7 Subtract line 6 from line 5. This is the surplus (or shortfall)	7	-86,160,895
8 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: <input checked="" type="checkbox"/> Cost accounting system <input type="checkbox"/> Cost to charge ratio <input type="checkbox"/> Other		

Section C. Collection Practices

9a Did the organization have a written debt collection policy during the tax year?	9a	Yes
b If "Yes," did the organization's collection policy that applied to the largest number of its patients during the tax year contain provisions on the collection practices to be followed for patients who are known to qualify for financial assistance? Describe in Part VI	9b	Yes

Part IV Management Companies and Joint Ventures

(a) Name of entity (owned 10% or more by officers, directors, trustees, key employees, and physicians—see instructions)	(b) Description of primary activity of entity	(c) Organization's profit % or stock ownership %	(d) Officers, directors, trustees, or key employees' profit % or stock ownership %	(e) Physicians' profit % or stock ownership %
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				

Part V Facility Information**Section A. Hospital Facilities**

(list in order of size from largest to smallest—see instructions)

How many hospital facilities did the organization operate during the tax year?

2

Name, address, primary website address, and state license number (and if a group return, the name and EIN of the subordinate hospital organization that operates the hospital facility)

	Licensed hospital	General medical & surgical	Children's hospital	Teaching hospital	Critical access hospital	Research facility	ER-24 hours	ER-other	Other (describe)	Facility reporting group
See Additional Data Table										

Part V Facility Information (continued)

Section B. Facility Policies and Practices

(Complete a separate Section B for each of the hospital facilities or facility reporting groups listed in Part V, Section A)

Name of hospital facility or letter of facility reporting group _____

Line number of hospital facility, or line numbers of hospital facilities in a facility reporting group (from Part V, Section A): _____

		Yes	No
Community Health Needs Assessment			
1	Was the hospital facility first licensed, registered, or similarly recognized by a state as a hospital facility in the current tax year or the immediately preceding tax year?		No
2	Was the hospital facility acquired or placed into service as a tax-exempt hospital in the current tax year or the immediately preceding tax year? If "Yes," provide details of the acquisition in Section C.		No
3	During the tax year or either of the two immediately preceding tax years, did the hospital facility conduct a community health needs assessment (CHNA)? If "No," skip to line 12. If "Yes," indicate what the CHNA report describes (check all that apply):	Yes	
a	<input checked="" type="checkbox"/> A definition of the community served by the hospital facility		
b	<input checked="" type="checkbox"/> Demographics of the community		
c	<input checked="" type="checkbox"/> Existing health care facilities and resources within the community that are available to respond to the health needs of the community		
d	<input checked="" type="checkbox"/> How data was obtained		
e	<input checked="" type="checkbox"/> The significant health needs of the community		
f	<input checked="" type="checkbox"/> Primary and chronic disease needs and other health issues of uninsured persons, low-income persons, and minority groups		
g	<input checked="" type="checkbox"/> The process for identifying and prioritizing community health needs and services to meet the community health needs		
h	<input checked="" type="checkbox"/> The process for consulting with persons representing the community's interests		
i	<input checked="" type="checkbox"/> The impact of any actions taken to address the significant health needs identified in the hospital facility's prior CHNA(s)		
j	<input type="checkbox"/> Other (describe in Section C)		
4	Indicate the tax year the hospital facility last conducted a CHNA: 20 <u>18</u>		
5	In conducting its most recent CHNA, did the hospital facility take into account input from persons who represent the broad interests of the community served by the hospital facility, including those with special knowledge of or expertise in public health? If "Yes," describe in Section C how the hospital facility took into account input from persons who represent the community, and identify the persons the hospital facility consulted	Yes	
6 a	Was the hospital facility's CHNA conducted with one or more other hospital facilities? If "Yes," list the other hospital facilities in Section C	Yes	
b	Was the hospital facility's CHNA conducted with one or more organizations other than hospital facilities? If "Yes," list the other organizations in Section C.		No
7	Did the hospital facility make its CHNA report widely available to the public? If "Yes," indicate how the CHNA report was made widely available (check all that apply):	Yes	
a	<input checked="" type="checkbox"/> Hospital facility's website (list url): <u>https://www.baptistjax.com/about-us/social-responsibility/assessing-community-health-needs</u>		
b	<input checked="" type="checkbox"/> Other website (list url): <u>http://www.hpcnef.org/jacksonville-nonprofit-hospital-partnership-community-health-needs-assessment/</u>		
c	<input checked="" type="checkbox"/> Made a paper copy available for public inspection without charge at the hospital facility		
d	<input checked="" type="checkbox"/> Other (describe in Section C)		
8	Did the hospital facility adopt an implementation strategy to meet the significant community health needs identified through its most recently conducted CHNA? If "No," skip to line 11.	Yes	
9	Indicate the tax year the hospital facility last adopted an implementation strategy: 20 <u>18</u>		
10	Is the hospital facility's most recently adopted implementation strategy posted on a website? <u>https://www.baptistjax.com/about-us/social-responsibility/assessing-community-health-needs</u>	Yes	
a	If "Yes" (list url): <u>health-needs</u>		
b	If "No," is the hospital facility's most recently adopted implementation strategy attached to this return?		
11	Describe in Section C how the hospital facility is addressing the significant needs identified in its most recently conducted CHNA and any such needs that are not being addressed together with the reasons why such needs are not being addressed.		
12a	Did the organization incur an excise tax under section 4959 for the hospital facility's failure to conduct a CHNA as required by section 501(r)(3)?		No
b	If "Yes" on line 12a, did the organization file Form 4720 to report the section 4959 excise tax?		
c	If "Yes" on line 12b, what is the total amount of section 4959 excise tax the organization reported on Form 4720 for all of its hospital facilities? \$ _____		

Part V Facility Information (continued)**Financial Assistance Policy (FAP)**

A

Name of hospital facility or letter of facility reporting group _____

		Yes	No
Did the hospital facility have in place during the tax year a written financial assistance policy that:			
13	Explained eligibility criteria for financial assistance, and whether such assistance included free or discounted care? If "Yes," indicate the eligibility criteria explained in the FAP:	Yes	
a	<input checked="" type="checkbox"/> Federal poverty guidelines (FPG), with FPG family income limit for eligibility for free care of <u>200.0</u> % and FPG family income limit for eligibility for discounted care of <u>400.0</u> %		
b	<input type="checkbox"/> Income level other than FPG (describe in Section C)		
c	<input checked="" type="checkbox"/> Asset level		
d	<input checked="" type="checkbox"/> Medical indigency		
e	<input checked="" type="checkbox"/> Insurance status		
f	<input checked="" type="checkbox"/> Underinsurance discount		
g	<input checked="" type="checkbox"/> Residency		
h	<input type="checkbox"/> Other (describe in Section C)		
14	Explained the basis for calculating amounts charged to patients?	Yes	
15	Explained the method for applying for financial assistance? If "Yes," indicate how the hospital facility's FAP or FAP application form (including accompanying instructions) explained the method for applying for financial assistance (check all that apply):	Yes	
a	<input checked="" type="checkbox"/> Described the information the hospital facility may require an individual to provide as part of his or her application		
b	<input checked="" type="checkbox"/> Described the supporting documentation the hospital facility may require an individual to submit as part of his or her application		
c	<input checked="" type="checkbox"/> Provided the contact information of hospital facility staff who can provide an individual with information about the FAP and FAP application process		
d	<input checked="" type="checkbox"/> Provided the contact information of nonprofit organizations or government agencies that may be sources of assistance with FAP applications		
e	<input type="checkbox"/> Other (describe in Section C)		
16	Was widely publicized within the community served by the hospital facility? If "Yes," indicate how the hospital facility publicized the policy (check all that apply):	Yes	
a	<input checked="" type="checkbox"/> The FAP was widely available on a website (list url): <u>https://www.baptistjax.com/patient-info/financial-assistance</u>		
b	<input checked="" type="checkbox"/> The FAP application form was widely available on a website (list url): <u>https://www.baptistjax.com/patient-info/financial-assistance</u>		
c	<input checked="" type="checkbox"/> A plain language summary of the FAP was widely available on a website (list url): <u>https://www.baptistjax.com/patient-info/financial-assistance</u>		
d	<input checked="" type="checkbox"/> The FAP was available upon request and without charge (in public locations in the hospital facility and by mail)		
e	<input checked="" type="checkbox"/> The FAP application form was available upon request and without charge (in public locations in the hospital facility and by mail)		
f	<input checked="" type="checkbox"/> A plain language summary of the FAP was available upon request and without charge (in public locations in the hospital facility and by mail)		
g	<input checked="" type="checkbox"/> Individuals were notified about the FAP by being offered a paper copy of the plain language summary of the FAP, by receiving a conspicuous written notice about the FAP on their billing statements, and via conspicuous public displays or other measures reasonably calculated to attract patients' attention		
h	<input checked="" type="checkbox"/> Notified members of the community who are most likely to require financial assistance about availability of the FAP		
i	<input checked="" type="checkbox"/> The FAP, FAP application form, and plain language summary of the FAP were translated into the primary language(s) spoken by LEP populations		
j	<input type="checkbox"/> Other (describe in Section C)		

Part V Facility Information (continued)

Billing and Collections

A

Name of hospital facility or letter of facility reporting group _____

		Yes	No
17	Did the hospital facility have in place during the tax year a separate billing and collections policy, or a written financial assistance policy (FAP) that explained all of the actions the hospital facility or other authorized party may take upon nonpayment?	17	Yes
18	Check all of the following actions against an individual that were permitted under the hospital facility's policies during the tax year before making reasonable efforts to determine the individual's eligibility under the facility's FAP: a <input type="checkbox"/> Reporting to credit agency(ies) b <input type="checkbox"/> Selling an individual's debt to another party c <input type="checkbox"/> Deferring, denying, or requiring a payment before providing medically necessary care due to nonpayment of a previous bill for care covered under the hospital facility's FAP d <input type="checkbox"/> Actions that require a legal or judicial process e <input type="checkbox"/> Other similar actions (describe in Section C) f <input checked="" type="checkbox"/> None of these actions or other similar actions were permitted		
19	Did the hospital facility or other authorized party perform any of the following actions during the tax year before making reasonable efforts to determine the individual's eligibility under the facility's FAP? If "Yes," check all actions in which the hospital facility or a third party engaged: a <input type="checkbox"/> Reporting to credit agency(ies) b <input type="checkbox"/> Selling an individual's debt to another party c <input type="checkbox"/> Deferring, denying, or requiring a payment before providing medically necessary care due to nonpayment of a previous bill for care covered under the hospital facility's FAP d <input type="checkbox"/> Actions that require a legal or judicial process e <input type="checkbox"/> Other similar actions (describe in Section C)	19	No
20	Indicate which efforts the hospital facility or other authorized party made before initiating any of the actions listed (whether or not checked) in line 19. (check all that apply): a <input checked="" type="checkbox"/> Provided a written notice about upcoming ECAs (Extraordinary Collection Action) and a plain language summary of the FAP at least 30 days before initiating those ECAs (if not, describe in Section C) b <input checked="" type="checkbox"/> Made a reasonable effort to orally notify individuals about the FAP and FAP application process (if not, describe in Section C) c <input checked="" type="checkbox"/> Processed incomplete and complete FAP applications (if not, describe in Section C) d <input checked="" type="checkbox"/> Made presumptive eligibility determinations (if not, describe in Section C) e <input checked="" type="checkbox"/> Other (describe in Section C) f <input type="checkbox"/> None of these efforts were made		

Policy Relating to Emergency Medical Care

21	Did the hospital facility have in place during the tax year a written policy relating to emergency medical care that required the hospital facility to provide, without discrimination, care for emergency medical conditions to individuals regardless of their eligibility under the hospital facility's financial assistance policy? If "No," indicate why: a <input type="checkbox"/> The hospital facility did not provide care for any emergency medical conditions b <input type="checkbox"/> The hospital facility's policy was not in writing c <input type="checkbox"/> The hospital facility limited who was eligible to receive care for emergency medical conditions (describe in Section C) d <input type="checkbox"/> Other (describe in Section C)	21	Yes
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Part V Facility Information *(continued)*

Charges to Individuals Eligible for Assistance Under the FAP (FAP-Eligible Individuals)

A

Name of hospital facility or letter of facility reporting group _____

22 Indicate how the hospital facility determined, during the tax year, the maximum amounts that can be charged to FAP-eligible individuals for emergency or other medically necessary care.

- a The hospital facility used a look-back method based on claims allowed by Medicare fee-for-service during a prior 12-month period
- b The hospital facility used a look-back method based on claims allowed by Medicare fee-for-service and all private health insurers that pay claims to the hospital facility during a prior 12-month period
- c The hospital facility used a look-back method based on claims allowed by Medicaid, either alone or in combination with Medicare fee-for-service and all private health insurers that pay claims to the hospital facility during a prior 12-month period
- d The hospital facility used a prospective Medicare or Medicaid method

23 During the tax year, did the hospital facility charge any FAP-eligible individual to whom the hospital facility provided emergency or other medically necessary services more than the amounts generally billed to individuals who had insurance covering such care?

If "Yes," explain in Section C.

24 During the tax year, did the hospital facility charge any FAP-eligible individual an amount equal to the gross charge for any service provided to that individual?

If "Yes," explain in Section C.

	Yes	No
23		No
24		No

Part V Facility Information *(continued)*

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16j, 18e, 19e, 20a, 20b, 20c, 20d, 20e, 21c, 21d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

Form and Line Reference	Explanation
See Add'l Data	

Part V Facility Information (continued)**Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**

(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? 10

Name and address	Type of Facility (describe)
1 BAPTIST EMERGENCY CENTER NORTH 11250 BAPTIST HEALTH DRIVE JACKSONVILLE, FL 32218	EMERGENCY AND PRIMARY CARE, SPECIALIST PHYSICIAN OFFICES, IMAGING, AND LABS FOR ADULTS AND CHILDREN.
2 BAPTIST EMERGENCY CENTER CLAY 1771 BAPTIST CLAY DR FLEMING ISLAND, FL 32003	THE FACILITY FEATURES AN EMERGENCY CENTER WITH SEPARATE WAITING AREAS AND EXAM ROOMS FOR CHILDREN.
3 BAPTIST EMERGENCY TOWN CENTER 841 PRUDENTIAL DR STE 1802 JACKSONVILLE, FL 32207	THE FACILITY FEATURES TWO EMERGENCY CENTERS UNDER ONE ROOF; ONE FOR CHILDREN AND ONE FOR ADULTS.
4 BAPTIST EMERGENCY CENTER OAKLEAF 9868 FAMILY PLACE JACKSONVILLE, FL 32222	THE FACILITY FEATURES TWO EMERGENCY CENTERS UNDER ONE ROOF; ONE FOR CHILDREN AND ONE FOR ADULTS.
5 BAPTIST MD ANDERSON CANCER CENTER 1301 PALM AVENUE JACKSONVILLE, FL 32207	The facility offers cutting-edge research and serves as a hub for all cancer care needs.
6 BAPTIST BEHAVIORAL HEALTH 800 PRUDENTIAL DR JACKSONVILLE, FL 32207	COMPREHENSIVE MENTAL HEALTH SERVICES AT BAPTIST MEDICAL CENTER JACKSONVILLE'S HOSPITAL CAMPUS.
7 Baptist BEHAVIORAL HEALTH 1350 13TH AVE SOUTH Jacksonville BEACH, FL 32250	COMPREHENSIVE MENTAL HEALTH SERVICES AT BAPTIST MEDICAL CENTER BEACHES HOSPITAL CAMPUS.
8 Baptist BEHAVIORAL HEALTH 1250 SOUTH 18TH STREET FERNANDINA BEACH, FL 32034	COMPREHENSIVE MENTAL HEALTH SERVICES AT BAPTIST MEDICAL CENTER NASSAU'S HOSPITAL CAMPUS.
9 BAPTIST BEHAVIORAL HEALTH 14550 Old St Augustine Road JACKSONVILLE, FL 32258	COMPREHENSIVE MENTAL HEALTH SERVICES AT BAPTIST MEDICAL CENTER SOUTH'S HOSPITAL CAMPUS.
10 BAPTIST BEHAVIORAL HEALTH 800 PRUDENTIAL DR JACKSONVILLE, FL 32207	COMPREHENSIVE MENTAL HEALTH SERVICES AT WOLFSON CHILDREN'S HOSPITAL CAMPUS.

Part VI Supplemental Information

Provide the following information.

- 1 Required descriptions.** Provide the descriptions required for Part I, lines 3c, 6a, and 7; Part II and Part III, lines 2, 3, 4, 8 and 9b.
- 2 Needs assessment.** Describe how the organization assesses the health care needs of the communities it serves, in addition to any CHNAs reported in Part V, Section B.
- 3 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.
- 5 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.).
- 6 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.

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part II, Line 3 Community Support	<p>COVID-19 Efforts: Besides educational videos, social media postings, and advertisements underscoring the importance of following CDC guidelines during COVID-19, Baptist Health provided a number of services to support the community. The COVID Hotline received 16,029 calls to address the community's concerns and questions and made 2,332 outbound calls to remind community members of their second COVID dose. To address mental health concerns and isolation in senior populations, The Friendly Caller Program provided a powerful way for 69 AgeWell patients to remain connected to others during a time when in-person activities were suspended. Tipping the Scale, a mentoring program for at-risk teens, provided students with opportunities and tools to address their mental health concerns. Through UNF's Meals on Wings which assists waitlisted seniors for meal services through Meals on Wheels, around 250 seniors' needs were met in Duval County. Panel discussions were also held in the spring to address African-Americans' mental health during the pandemic targeted to youth, adults, and seniors. Tipping the Scale - Youth Mentoring Program: Thirty-five Baptist Health employees volunteered their time to provide one-to-one mentoring for 37 high school students each week. The students who participate in the program are from our most vulnerable communities and low income families, and they attend local schools with low graduation rates. In this career guidance mentoring program, mentors introduce students to various careers in healthcare. In addition, they serve as supporters and encouragers for teens as they navigate the challenges of adolescence. Tipping the Scale - Summer Employment Experience: New employment opportunities are provided to teenagers 16-18 years old after successful completion of an eight-week job readiness training program. Teens are provided exposure to the scope of practice for one of their top three areas of career interest at our flagship hospital system. This exposure to real-life careers motivates them to prepare appropriately for their life after high school. Session topics included how to be successful on the job, resume writing, the interview and hiring process, money management, accountability and consequences, and interpersonal skills. Eighty-five teenagers participated in the job readiness training, but only 19 were a part of and completed the summer sessions with 15 of the 19 at Baptist Medical Center Jacksonville.</p>

Form and Line Reference	Explanation
Schedule H, Part II, Line 6 Coalition Building	<p>Baker County School Health Advisory Council: THE PLAYERS Center for Child Health participates in the Baker County School District's advisory council. The advisory council advises and supports the school districts efforts to assess and design programs to help children develop the knowledge, skills, and attitudes they need to become healthy, productive citizens. Child Protection Team - Child Death Review Committee reviews infant deaths to develop a community plan to reduce infant deaths. Wolfson Children's Hospital is an active member of the committee. Clay County Community Partnership School model is a community school in which four core community partners - a school district, a university/college, a nonprofit and a health care provider - commit to a long-term partnership (25 years) to establish, develop and sustain the Community Partnership School. In this model, the school becomes a hub for the community where services are brought directly to the campus. Baptist Health has a goal to be the health care partner for the Community Partnership School at Wilkinson Junior High School in Clay County. The other partners are Clay County District Schools, Children's Home Society and St. Johns River State College. After a needs assessment is conducted and a strategic action plan is developed, Baptist will play the lead role in coordinating resources and other health care organizations to provide needed services onto the campus for students and the community. Clay, Duval, and St. Johns Counties Traffic Safety Teams consist of advocates who are committed to solving traffic safety problems through a comprehensive, multi-jurisdictional, multidisciplinary approach. Members include city, county, state, private industry, citizens and Wolfson Children's Hospital. The goal is to reduce the number and severity of traffic crashes within their community. Clay Safety Net Alliance is a network of Clay County nonprofit, faith-based, and local government agencies which brings support to the county's 200,000 residents. The group works to share resources and avoid duplication of services to Clay residents. Community-Based Crime Reduction (CBCR) Program was formed to address three main goals: reduce crime, increase mutual trust between police and neighborhood residents, and improve community safety. It is responsible for devising and recommending strategies to be implemented, along with being involved in the on-going work of making the focus area neighborhoods of Grand Park, New Town, Durkeville, and LaVilla safer. These target locations were chosen due to their now high crime and distressed neighborhoods. The program includes, but is not limited to, the following partners: Baptist Health, CareerSource of Northeast Florida, Citizen Planning Advisory Committee District (CPACD) 1 - Urban Core, CPACD 5 - Northwest Jacksonville, City of Jacksonville (COJ) Kids Hope Alliance, COJ Neighborhoods, COJ Parks, Recreation & Social Services, COJ Public Works, Cultural Council of Greater Jacksonville, Edward Waters College, Emmanuel Missionary Baptist Church, Family Support Services, Florida Department of Health, Florida Department of Juvenile Justice, Florida State College at Jacksonville, Jacksonville Area Legal Aid, the Jacksonville Re-Entry Center, Jacksonville Sheriff's Office, LISCA, Northwest Behavioral Health, Public Defender's Office, UF Health, United States Attorney's Office, and other churches and faith based organizations. DCPS Behavioral Health Subcommittee collaborates to enhance the behavioral health of students within the Duval County Public School system. Processes are enhanced and streamlined to better coordinate available resources. DCPS Health Education Committee: The purpose of the Health Education Committee (HEC) is to review programs, organizations, and speakers who would like to present in Duval County Public Schools on health topics. The committee is comprised of DCPS staff, teachers, and community organization staff. Duval and St Johns Child Abuse Death Review Committee - The local child abuse death review committee is a community group, which is sanctioned by the Governor's office and reviews all child deaths received by the Dept. of Children and Families. The CADR group uses the data from the meetings to determine trends based on the numbers and causes of the deaths occurring in the County, which are then used to determine and develop prevention initiative/activities which are implemented to help prevent other child deaths. Duval County School Health Advisory Council's purpose is to offer recommendations and advice to the Duval County School Board and Duval County Public Schools Administration on issues that relate to the health of children and their families. In accordance with the Centers for Disease Control Coordinated School Health Model, including, but not limited to matters pertaining to Health Education, Physical Education, Health Services, Nutrition Services, Counseling and Psychological Services, Healthy School Environment.</p>

Form and Line Reference	Explanation
Schedule H, Part II, Line 6 Coalition Building	<p>Environment, Health Promotion for Staff, Family/Community Involvement, the Safe and Drug Free Schools Program and the Wellness Policy. Wolfson Children's Hospital is an active member of the Council. Episcopal Children's Services Health Services Advisory Council for Baker, Clay, Duval and Nassau Counties provides a network of community connections to support Head Start and Early Head Start programs with integrated, comprehensive health services. Wolfson Children's Hospital representatives are active members in these councils and provide services to Head Start and Early Head Start centers such as health education and access to healthcare. Fetal Infant Mortality Review Committee aims to reduce infant mortality by gathering and reviewing detailed information to gain a better understanding of fetal and infant deaths in Northeast Florida. The project examines cases with the worst outcomes to identify gaps in maternal and infant services and to promote future improvements. Wolfson Children's Hospital and Baptist Health representatives are active members of the Committee. Full Service Schools Oversight Committee directs and guides the operation of Full Service Schools of Jacksonville led by United Way of Northeast Florida. Through Full Service Schools nearly 3,500 students and families are connected to a critical range of therapeutic, health and social services that address non-academic barriers to success in school. Each Full Service Schools site strives to meet the specific needs of the neighborhood in which it is based by providing a number of free services. Wolfson Children's Hospital is an active member of the Full Service Schools Oversight Committee. Florida Asthma Coalition's goal is to reduce the overall burden of asthma, with a focus on minimizing the disproportionate impact of asthma in racial/ethnic and low-income populations, by promoting asthma awareness and disease prevention at the community level and expanding and improving the quality of asthma education, management, and services through system and policy changes. Wolfson Children's Hospital is an active member of the Asthma Coalition. Florida Occupant Protection Coalition (FOPC) was formed to identify and prioritize Florida's most pressing occupant protection issues. The Coalition reviews proven strategies and discusses promising new practices. The FOPC is developing a strategic plan that will serve as the blueprint for legislation, program, and funding strategies to maximize Florida's ability to reduce unrestrained motor vehicle occupant crashes. The FOPC is responsible for overseeing the implementation of the Occupant Protection Strategic Plan. Wolfson Children's Hospital is active on the coalition, providing a child passenger safety technician support. Healing Hands Community Advisory Council provides support to Healing Hands efforts to provide access to crisis intervention, case coordination, and medical services for at-risk children in Jacksonville and surrounding areas. The organization brings together physicians, psychologists, nurses and other medical professionals who diagnose cases of childhood physical and sexual abuse. Wolfson Children's Hospital is an active member of the Healing Hands Advisory Council. Hope & Healing Jax seeks to gather community members, service providers, and the resources of Jacksonville to bring awareness to adverse childhood experiences (ACEs), community traumas, toxic stress, and trauma. Hope & Healing Jax builds positive relationships to help children, adults, and systems of care resolve care, and explores inclusive healing-centered opportunities to create pathways to connection and flourishing for an empowered community. Wolfson Children's Hospital is an active member of the Hope & Healing Jax steering committee.</p>

Form and Line Reference	Explanation
<p>Schedule H, Part II, Line 6 Coalition Building</p>	<p>Infant Mortality Task Force - Duval County - Baptist Health and Wolfson Children's Hospital are active members of the Duval County Infant Mortality Task Force. With the goal of reducing infant mortality, the task force reviews and addresses maternal and infant health issues specific to Duval County. Jacksonville Nonprofit Hospital Partnership came together to develop a multi-hospital system collaborative community health needs assessment. The Partnership is a network of five health systems that are a shared voice to improve population health by eliminating the gaps that prevent quality, integrated health care and to improve access to resources that support a healthier lifestyle. During FY 2016, the Partnership initiated, and continues today, a collaboration to reduce stigma and crises related to mental illness through a community implementation of Mental Health First Aid, a best-practices program recognized by the Substance Abuse and Mental Health Services Administration. Jacksonville System of Care Initiative is a collaboration of governmental agencies and community-based organizations to develop a system of mental health care for Jacksonville's children. Baptist Health is an active member of the Initiative. Lutheran Family Services Health Adversity Board: The Players Center for Child Health at Wolfson Children's Hospital attends quarterly health adversity board meeting which focuses on health care challenges in the head start population. TPC also has a MOU with LFS which allows us the opportunity to assist LFS families with access to health care by offering application assistance with Medicaid or KidCare applications. Mayor's Council On Fitness and Well-Being is dedicated to improving the health and well-being of all residents by the promotion of lifelong physical activity and healthy lifestyles through education, promotion, programs, resources, materials and events. The council seeks to help people understand the benefits of physical activity and provide opportunities for all citizens to participate in safe and effective exercise. The New Town Success Zone is a group of community stakeholders who work to provide a place-based continuum of services from prenatal to college, the military or some form of secondary training for the children and their families living in the neighborhood. Leaders from Baptist Health, UF Health Jacksonville, Mayo, St. Vincent's and Florida Blue serve as a coalition to provide programs and resources in the New Town Children's Success Zone in a coordinated effort to address some of the health care disparities such as asthma, diabetes, nutrition in addition to Florida KidCare enrollment. Baptist partnered with the neighborhood elementary and middle school to provide asthma training for children with asthma, faculty and parents. Baptist along with the rest of the coalition worked with families to get children enrolled in Florida KidCare insurance programs. Northeast Florida Coalition for Access to Healthcare will address COVID and Testing, Cancer Control, Telemedicine, and services to undocumented individuals. The coalition was created to eliminate barriers so that healthcare is more available, affordable, and acceptable for all. A Community Partnership Coordinator from Wolfson Children's Hospital sits on the coalition. Northeast Florida Healthy Start Coalition leads a cooperative community effort to reduce infant mortality and improve the health of children, childbearing women and their families in Northeast Florida. Wolfson Children's Hospital is an active member of the Healthy Start Coalition. Northeast Florida Healthy Start Community Action Group works to implement the Fetal and Infant Mortality Review (FIMR) recommendations to reduce infant mortality in Northeast Florida. Wolfson Children's Hospital is an active member. The Partnership for Child Health develops and implements programs and services to improve the health and wellbeing of all children and youth in Northeast Florida by collaborating with community partners in major child-serving organizations. Wolfson Children's Hospital is an active member of The Partnership which is focused on providing a medical home for children with complex medical conditions, mental, behavioral and addiction health disorders, developmental disabilities, access to dental care, family violence and dysfunction, poverty, child trafficking, and other marginalized children and families. Partnership to End Childhood Hunger is a group of community stakeholders focused on addressing and advocating for children's food insecurity and nutritional needs within Jacksonville, Florida. Wolfson Children's Hospital is an active participant of the partnership in collaboration with Feeding Northeast Florida. Ribault High School Advisory Council assists in preparation and evaluation of the School Improvement Plan as well as providing input regarding the school's annual budget. Safe Kids Northeast Florida, a local coalition of Safe Kids Worldwide and led by THE P</p>

Form and Line Reference	Explanation
Schedule H, Part II, Line 6 Coalition Building	<p>LAYERS Center for Child Health at Wolfson Children's Hospital, was founded in 2003. Funding is provided by Wolfson Children's Hospital, along with grants from Safe Kids Worldwide, and public and private contributors. Safe Kids brings together local organizations to promote pediatric injury prevention, and offer programs to prevent accidental injuries to children ages 19 and under. St. Johns School Health and Wellness Advisory Committee: THE PLAYERS Center for Child Health at Wolfson Children's Hospital has supported the SHWAC by offering our curriculum programs at multiple VPK/Elementary School locations within St. John's County. Through our work with the St. Johns SHWAC, one of our community health educators was able to present to the school district nurses during their training about services provided at THE PLAYERS Center for Child Health. WaterSmart Florida Drowning Prevention Task Force is a state-wide coalition led by the Florida Department of Health and key partners Safe Kids Florida and YMCA. Members represent local drowning prevention task forces and many regions and counties in our state, all working together to decrease fatal and non-fatal drowning in Florida's children through awareness, education, and swimming lessons. Wolfson Children's Health Center Community Advisory Council consists of community partners that meet quarterly to discuss the data and operations of the Health Center.</p>

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
<p>Schedule H, Part II, Line 7 Community Health Improvement Advocacy</p>	<p>CHNA Priority of Access to Care - Baptist Health partners with Sulzbacher Center, Muslim American Social Services, The Way Free Medical Clinic, We Care Jacksonville, Community Health Outreach, and Volunteers in Medicine to provide access to primary and specialty care. Baptist Health partners with the Jacksonville Speech and Hearing, DLC Nurse and Learn, Pine Castle, YMCA and JASMYN to ensure targeted health care needs are met for the vulnerable clients within their organizations. Baptist Health provides access to vision services for children and adults through United Way Full Service Schools and Vision Is Priceless. Wolfson Children's Hospital, through THE PLAYERS Center for Child Health, is working with community partners to identify and help families complete Florida KidCare applications. In addition, outreach educators train and educate the community on the importance of coverage. In addition, Baptist Health worked with the Duval County School System, Sulzbacher Center, UF Health Jacksonville, and the Department of Health-Duval to open a school health center for children in underserved areas. CHNA Priority Mental Health - Baptist Health partners with The Women's Center of Jacksonville to provide access to mental health services. In addition, Baptist Health has partnered with Delta Research Foundation, Florida's First Coast YMCA, and Jewish Community Alliance to provide mental health support services to keep seniors and youth mentally healthy. Baptist Health partners with The Community Foundation for Northeast Florida to address access to care, to reduce stigma, and to increase advocacy. Mental health concerns for LGBT+ residents and youth were addressed through a partnership with JASMYN, as well. Baptist Health also planned to hold a Behavioral Health Conference to address health and well-being but had to postpone it due to COVID-19 surges. CHNA Priority Maternal and Child Health - In addition to supporting access to care for adults without insurance, Baptist Health partnered with the Jacksonville Jaguars Foundation to implement PLAY 60, a nutrition and physical activity program targeted to 6th grade students. In addition, Baptist Health partners with the Northeast Florida Healthy Start Coalition to research infant mortality and implement solutions such as home visits by nurses, and working with Duval Healthy Start and Duval County Public Schools, safe sleep education was provided to mothers to reduce infant mortality. In partnership with Florida Blue, UF Health, and Northeast Florida Healthy Start Coalition, Baptist also developed the WELLcome Home visiting program which focuses on newborn and maternal education for families in Duval County. CHNA Priority Health Disparities - In addition to supporting access to care for adults without insurance, Baptist Health partners with Boys and Girls Clubs of Northeast Florida, Year Up and United Way to address economic and educational conditions that foster health disparities. CHNA Priority Senior Health - Baptist Health partners with Aging True to address the social needs seniors have that prevent them from remaining healthy. Baptist Health is working with Ascension Health, Brooks Rehabilitation, Mayo Florida, UF Health Jacksonville and ElderSource to identify solutions to reduce senior isolation and falls such as a Friendly Caller program. CHNA Priority LGBTQ+ Health - Baptist Health partners with JASMYN and other community partners to implement support groups to connect LGBT+ adults with other community members and to provide educational resources that address mental health. To increase health education and information, Baptist Health partners with the Health Planning Council of Northeast Florida and the Museum of Science and History.</p>

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part II, Line 8 Workforce Development	Southern Baptist Hospitals also provided Clinical Education and Training to undergraduate and graduate student interns procuring degrees in nursing, IT, pharmacy, physical therapy and other health care professional provided by Baptist Health clinicians. In fiscal year 2021, Southern Baptist Hospitals provided 2,538 (2,413 IN FY20, 3,099 in FY19 and 2,888 in FY 18) students with 66,648.61 hours of clinical education supervision.

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part II, Line 9 Other	Mental Health First Aid: Baptist Health provided 8-hour certification training in Mental Health First Aid, Youth and Adult, to 1,107 (1,114 in FY20, 2,517 in FY19 and 191 in FY18) community members. The AgeWell Institute and Baptist Health provided education on various topics to 300 (515 in FY20, 2,111 in FY19 and 1,110 in FY18) people during fiscal year 2021.

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part VI, Line 7 State Filing Requirements	Baptist Health System, Inc. (BHS), parent company of the filing organization, is located within the northeast Florida quadrant. There are no requirements for state filing in Florida of the annual community benefit report. However, BHS does publish the report and it is available upon request or at the www.baptistjax.com website or at https://www.baptistjax.com/about-us/social-responsibility/assessing-community-health-needs .

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part I, Line 6a Community benefit report prepared by related organization	Baptist Health System, Inc.

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part I, Line 7g Subsidized Health Services	THERE WERE NO PHYSICIAN CLINIC COSTS INCLUDED IN THE SUBSIDIZED HEALTH SERVICES COSTS.

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part I, Line 7 Bad Debt Expense excluded from financial assistance calculation	0

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part I, Line 7 Costing Methodology used to calculate financial assistance	WE OBTAINED OUR COST USING OUR CCA ACCOUNTING SYSTEM TO DEVELOP PAYOR-LEVEL RCC'S WHICH WERE APPLIED TO PAYOR CHARGES TO CALCULATE COST.

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part III, Line 2 Bad debt expense - methodology used to estimate amount	<p>PATIENT SERVICE REVENUES ARE REPORTED AT ESTIMATED NET REALIZABLE AMOUNTS FOR SERVICES RENDERED. BHS RECOGNIZES PATIENT SERVICE REVENUES ASSOCIATED WITH PATIENTS WHO HAVE THIRD-PARTY PAYOR COVERAGE ON THE BASIS OF CONTRACTUAL RATES FOR THE SERVICES RENDERED. FOR UNINSURED PATIENTS THAT DO NOT QUALIFY FOR CHARITY CARE, REVENUE IS RECOGNIZED ON THE BASIS OF DISCOUNTED RATES IN ACCORDANCE WITH BHS' POLICY. PATIENT SERVICE REVENUES ARE REDUCED BY THE PROVISION FOR BAD DEBTS AND ACCOUNTS RECEIVABLE ARE REDUCED BY AN ALLOWANCE FOR UNCOLLECTIBLE ACCOUNTS. THESE AMOUNTS ARE BASED ON MANAGEMENT'S ASSESSMENT OF HISTORICAL AND EXPECTED NET COLLECTIONS FOR EACH MAJOR PAYOR SOURCE, CONSIDERING BUSINESS AND ECONOMIC CONDITIONS, TRENDS IN HEALTH CARE COVERAGE AND OTHER COLLECTION INDICATORS. MANAGEMENT REGULARLY REVIEWS COLLECTIONS DATA BY MAJOR PAYOR SOURCES IN EVALUATING THE SUFFICIENCY OF THE ALLOWANCE FOR UNCOLLECTIBLE ACCOUNTS. ON THE BASIS OF HISTORICAL EXPERIENCE, A SIGNIFICANT PORTION OF BHS' SELF-PAY PATIENTS WILL BE UNABLE OR UNWILLING TO PAY FOR THE SERVICES PROVIDED. THUS, BHS RECORDS A SIGNIFICANT PROVISION FOR BAD DEBTS IN THE PERIOD SERVICES ARE PROVIDED RELATED TO SELF-PAY PATIENTS. FOR RECEIVABLES ASSOCIATED WITH PATIENTS WHO HAVE THIRD-PARTY COVERAGE, BHS ANALYZES CONTRACTUALLY DUE AMOUNTS AND PROVIDES AN ALLOWANCE FOR UNCOLLECTIBLE ACCOUNTS AND A PROVISION FOR BAD DEBTS, IF NECESSARY. ACCOUNTS RECEIVABLE ARE WRITTEN OFF AFTER COLLECTION EFFORTS HAVE BEEN FOLLOWED IN ACCORDANCE WITH BHS' POLICIES.</p>

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part III, Line 3 Bad Debt Expense Methodology	THE ENTIRE PROVISION FOR BAD DEBTS IS RECORDED AS A DEDUCTION FROM PATIENT SERVICE REVENUES. NONE OF THE PROVISION IS INCLUDED IN THE EXPENSES OF THE FORM 990 INCLUDING SCHEDULE H AND THE CALCULATION OF COMMUNITY BENEFIT.

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part III, Line 4 Bad debt expense - financial statement footnote	Baptist Health System, Inc. and Subsidiaries Notes to Consolidated Financial Statements Footnote 2, Significant Accounting Policies, Page 16.

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part III, Line 8 Community benefit & methodology for determining medicare costs	Medicare allowable costs of care based on the organization's cost accounting system which is used to determine the amount reported on Line 6. None of the shortfall reported on Line 7 is included in Schedule H, Part I.

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part III, Line 9b Collection practices for patients eligible for financial assistance	YES, THE ORGANIZATION DOES HAVE A WRITTEN DEBT COLLECTION POLICY. THE POLICY DOES NOT SPECIFICALLY ADDRESS THOSE PATIENTS WHO ARE KNOWN TO QUALIFY OR HAVE APPLIED FOR CHARITY CARE AS THE ORGANIZATION DOES NOT BILL THESE PATIENTS. THE ORGANIZATION'S COST ACCOUNTING SYSTEM IDENTIFIES ALL PATIENTS WHO HAVE A PENDING OR APPROVED CHARITY APPLICATION. THE ORGANIZATION WOULD ONLY BILL THE PATIENT IF, AFTER MULTIPLE ATTEMPTS TO OBTAIN ANY NEEDED DOCUMENTATION FROM THE PATIENT TO COMPLETE THE CHARITY APPROVAL PROCESS, THE PATIENT WAS NONCOMPLIANT.

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 16a FAP website	A - Baptist Medical Center: Line 16a URL: https://www.baptistjax.com/patient-info/financial-assistance;

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 16b FAP Application website	A - Baptist Medical Center: Line 16b URL: https://www.baptistjax.com/patient-info/financial-assistance;

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 16c FAP plain language summary website	A - Baptist Medical Center: Line 16c URL: https://www.baptistjax.com/patient-info/financial-assistance;

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part VI, Line 2 Needs assessment	Baptist Health System, Inc. (BHS), parent company of the filing organization, is a member of the Jacksonville Community Benefit Partnership that is a collaborative of 5 hospitals who work together to access and address important community health needs. BHS has partnered with 43 faith-based organizations located in vulnerable low-income neighborhoods where a health needs survey is conducted annually. The survey of the members of our faith-based partners is anonymous. In addition, data is gathered from the Northeast Florida Counts website which serves as a source of population data and information about the health status of the community. It gathers information for Baker, Clay, Duval, Flagler, Nassau, St. Johns, and Volusia Counties.

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part VI, Line 3 Patient education of eligibility for assistance	<p>AT PATIENT Access POINTs, "GUIDELINES FOR CHARITY CARE ELIGIBILITY" CARDS ARE PROVIDED THAT CONTAIN FINANCIAL DISCOUNT AND CHARITY CARE INFORMATION. THIS INCLUDES A GENERAL CHART OF ELIGIBLE INCOME LEVELS AND ENCOURAGES PATIENTS TO SPEAK WITH ONE OF OUR PATIENT FINANCIAL ADVOCATES TO ARRANGE A FINANCIAL EVALUATION. Signs are also posted in the emergency room and patient admission areas informing everyone that charity care is available with contact information. All bills sent to patients conspicuously show the web address and contact information of our patient financial services office to assist with financial assistance. A copy of the plain language summary is also mailed out to patients with a copy of their bill. Baptist Health also has the Financial Assistance policy, Plain language summary, application, contact information, and translations into different languages available on its website and free of charge at all hospital locations. Baptist Health makes a reasonable effort to ensure that a copy of the plain language summary is provided to patients and that patients know there is assistance if they need it. In the event that a patient has not submitted all information needed to apply for financial assistance, Baptist Health will contact the patient to request the remaining information to help complete the application process.</p>

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
<p>Schedule H, Part VI, Line 4 Community information</p>	<p>Baptist Medical Center Jacksonville: The Service Area Is Defined As The Geographic Boundary of Duval County And Includes All Of The County's Associated Zip Codes. The Service Area Has A Total Area Of 918 Square Miles, Of Which 762 Square Miles (Or 83%) Is Land And 156 Square Miles (Or 17%) Is Water, Much Of It The Atlantic Ocean And St. Johns River. The Population Of People Residing In The Service Area is 884,998. The Racial Makeup Of The Service Area Is 56.05% White, 32.20% Black Or African American, 0.42% Native American, 4.84% Asian, 0.09% Pacific Islander, 2.89% From Other Race, And 3.52% From Two Or More Races. 10.22% Of The Population Are Hispanic Or Latino Of Any Race. The Service Area Population Is Spread Out With 23.08% Under The Age Of 18, 8.14% From 18 To 24, 28.20% From 25 To 44, 25.12% From 45 To 64, And 15.45% Who Are 65 Years Of Age Or Older. The Median Age Is 38 Years. The Median Income For A Household In The Service Area Is \$55,090. 12.40% Of Families Are Below The Poverty Line, Including 9.55% Of Families with Kids. The Hospital's Patients Include 9.9% Uninsured and 9.7% Are Medicaid Recipients. There Are 7 Other Hospitals Serving The Area Community, And There Are 5 Of Federally-Designated Medically Underserved Areas Present In The Service Area. Baptist Medical Center South: The Area Serviced by Baptist Medical Center South Includes Clay, Duval, and St. Johns Counties , And The Total Land Area Is 1967 Square Miles. The Population Of People Residing In The Service Area is 279,586. The Racial Makeup Of The Service Area Is 78.41% White, 8.72% Black Or African American, 0.28% Native American, 7.27% Asian, 0.07% Pacific Islander, 1.85% From Other Race, And 3.39% From Two Or More Races. 10.62% Of The Population Are Hispanic Or Latino Of Any Race. The Service Area Population Is Spread Out With 23.13% Under The Age Of 18, 8.31% From 18 To 24, 25.62% From 25 To 44, 27.82% From 45 To 64, And 15.11% Who Are 65 Years Of Age Or Older. The Median Age Is 40 Years. The Median Income For A Household In The Service Area Is \$82,444. 4.85% Of Families Are Below The Poverty Line, Including 3.28 % Of Those Families with Kids. The Hospital's Patients Include 7% Uninsured and 8.1% Are Medicaid Recipients. There Are 11 Of Other Hospitals Serving The Area Community, And There Are 6 Federally Designated Medically Underserved Areas Present In The Service Area. Wolfson Children's Hospital: The Service Area Includes Baker, Clay, Duval, Nassau And St. Johns Counties, And Has A Total Area Of 3202.3 Square Miles. The Population Of People Residing In The Service Area is 1,579,191. The Racial Makeup Of The Service Area Is 67.67% White, 21.79% Black Or African American, 0.41% Native American, 4.23% Asian, 0.10% Pacific Islander, 2.44% From Other Race, And 3.38% From Two Or More Races. 9.72% Of The Population Are Hispanic Or Latino Of Any Race. The Service Area Population Is Spread Out With 6.16% From 0 to 4, 6.17% From 5 to 9, 6.20% From 10 To 14, 3.75% From 15 To 17, And 3.71% Who Are 18 to 20. The Median Income For A Household In The Service Area Is \$63,208. 4.85% Of Families Are Below The Poverty Line, Including 3.28% With Kids. The Hospital's Patients Include 3.2% Uninsured and 50.9% Are Medicaid Recipients. There Are 12 Of Other Hospitals Serving The Area Community, And There Are 7 Federally-Designated Medically Underserved Areas Present In The Service Area.</p>

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part VI, Line 5 Promotion of community health	Baptist Health System, Inc. (BHS) continues to maintain an open medical staff. A designated Social Responsibility Community Health Board Committee is established to provide direction to the community health work based on the community need within the five county area served by BHS. In FY21, BHS provided over \$53 Million in charity care to people who where under/un-insured, over \$16 million in community benefit, and over \$3 Million in direct cash to the community to support nonprofit organizations that provide health services to the underserved and low income community. Some of the nonprofit organizations provide primary care for the uninsured and the underinsured. Some provide behavioral health services to families who would not otherwise have access while others provide health services and transportation for the frail elderly.

990 Schedule H, Supplemental Information

Form and Line Reference	Explanation
Schedule H, Part VI, Line 6 Affiliated health care system	<p>Baptist Health System, Inc. (BHS) is the parent affiliate of Southern Baptist Hospital of Florida, Inc. (SBHF). The Social Responsibility and Community Health team at BHS coordinates the funding of nonprofit partners for SBHF and works with our employees in facilitating volunteer opportunities across our community. Members of the SBHF board of directors serve on the Social Responsibility and Community Health Committee. SBHF works closely with a number of nonprofit partners to meet the health needs in our community.</p>

Additional Data

Software ID: 20011424
Software Version: 2020v4.0
EIN: 59-0747311
Name: Southern Baptist Hospital of Florida Inc

Form 990 Schedule H, Part V Section A. Hospital Facilities

Section A. Hospital Facilities (list in order of size from largest to smallest—see instructions) How many hospital facilities did the organization operate during the tax year? 2		Licensed hospital	General medical & surgical	Children's hospital	Teaching hospital	Critical access hospital	Research facility	ER—24 hours	ER—other	Other (Describe)	Facility reporting group
1	Baptist Medical Center 800 Prudential Dr Jacksonville, FL 32207 www.baptistjax.com 4448	X	X	X	X		X	X		Children's Hospital is Wolfson Children's Hospital	A
2	BAPTIST MEDICAL CENTER SOUTH 144550 OLD ST AUGUSTINE RD JACKSONVILLE, FL 32258 www.baptistjax.com 4448	X	X					X			A

Form 990 Part V Section C Supplemental Information for Part V, Section B.

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 3E	The significant health needs of the community are identified on our CHNA. The methodology to determine the significance of the community health needs and prioritization of the health needs are also described in our CHNA.

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
<p>Schedule H, Part V, Section B, Line 5 Facility A, 1</p>	<p>Facility A, 1 - Southern Baptist Hospital of Florida, Inc.. The Community Health Needs Assessments were conducted to identify priority health needs within each community served by each hospital, and to inform development of implementation strategies to address the identified needs selected by each hospital based on their ability to impact the need. Additionally, the Partnership focuses collaborative efforts to include the five-county service area of Baker, Clay, Duval, Nassau, and St. Johns. The CHNAs were conducted to respond to federal regulatory requirements and seek to identify significant health needs for particular geographic areas and populations by focusing on the following questions: * Who in the community is most vulnerable in terms of health status or access to care? * What are the unique health status and/or access needs for these populations? * Where do these people live in the community? * Why are these problems present? Primary Data The primary data used in this assessment consist of (1) key informant interviews conducted by phone by HCI, (2) focus group discussions facilitated by HCI and the Partnership, and (3) a community survey distributed throughout the service area through online and paper submissions. Over 1,320 community members contributed their input on the community's health and health-related needs, barriers, and opportunities for Wolfson Children's Hospital's five county service area, with special focus on needs of vulnerable and underserved populations. Over 940 community members contributed their input on the community's health and health-related needs for Baptist Medical Center Jacksonville's service area. And, more than 1,100 community members contributed their input on the community's health and health-related needs for Baptist Medical Center South's service area. The Partnership especially solicited input from members of or representatives of vulnerable and underserved populations through key informant interviews and focus group discussions. Details: Baptist Medical Center Jacksonville - Of the 29 key informant interviews conducted, 21 interviews were with community experts who either served or represented underserved communities (such as low-income individuals and groups experiencing disparities in health outcomes or health access). In addition, 10 of the focus groups included community members and advocates who are members of underserved communities. Baptist Medical Center South - Of the 36 key informant interviews conducted, 28 interviews were with community experts who either served or represented underserved communities (such as low-income individuals and groups experiencing disparities in health outcomes or health access). In addition, 11 of the focus groups included community members and advocates who are members of underserved communities. Wolfson Children's Hospital - Of the 44 key informant interviews conducted, 34 interviews were with community experts who either served or represented underserved commu</p>

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
<p>Schedule H, Part V, Section B, Line 5 Facility A, 1</p>	<p>nities (such as low-income individuals and groups experiencing disparities in health outcomes or health access). In addition, 14 of the focus groups included community members and advocates who are members of underserved communities. Secondary data used for this assessment were collected and analyzed from HCI's community indicator database. The database, maintained by researchers and analysts at HCI, includes over 150 community indicators from 29 state and national data sources such as Florida Department of Health, Florida Behavioral Risk Factor Surveillance System, and American Community Survey. The indicators cover over 20 topics in the areas of health and quality of life: Health: * Access to Health Services * Cancer * Children's Health * Diabetes * Disabilities * Environmental & Occupational Health * Exercise, Nutrition & Weight * Family Planning * Heart Disease & Stroke * Immunizations & Infectious Diseases * Maternal, Fetal & Infant Health * Men's Health * Mental Health & Mental Disorders * Older Adults & Aging * Oral Health * Other Chronic Diseases * Prevention & Safety * Respiratory Diseases * Substance Abuse * Teen & Adolescent Health * Women's Health Quality of Life: * Economy * Education * Environment * Government & Politics * Public Safety * Social Environment * Transportation Indicator values for Baker, Clay, Duval, Nassau, and St. Johns Counties were compared to other Florida counties and other U.S. counties to identify relative need. Other considerations in weighing relative areas of need included comparisons to Florida state values, comparisons to national values, trends over time, and Healthy People 2020 targets (as applicable). Based on these six different comparisons, indicators were systematically ranked from high to low need.</p>

Form 990 Part V Section C Supplemental Information for Part V, Section B.

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 6a Facility A, 1	Facility A, 1 - Southern Baptist Hospital of Florida, Inc.. 12 hospitals: (Baptist Medical Center Jacksonville, Baptist Medical Center South, Wolfson Children's Hospital, Baptist Medical Center of the Beaches, Inc., Baptist Medical Center of Nassau, Inc., Brooks Rehabilitation Hospital, Mayo Clinic Florida, St. Vincent's Medical Center Riverside, St. Vincent's Medical Center South, St. Vincent's Medical Center Clay, UF Health North and UF Health Jacksonville)

Form 990 Part V Section C Supplemental Information for Part V, Section B.

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 7 Facility A, 1	Facility A, 1 - Southern Baptist Hospital of Florida, Inc.. public release was held May 31, 2019 with all health system CEOs presenting the assessment methodology, the needs identified in the assessment and the needs prioritized by each hospital. The public release was attended by approximately 75 people including media representatives. Newspaper articles and radio and television stories reported on the assessment and informed community members where they could find each hospital's assessment and implementation plans. Link to story in the Florida Times-Union - https://www.jacksonville.com/news/20190531/northeast-florida-community-health-assessment-spotlights-lack-of-access-to-care

Form 990 Part V Section C Supplemental Information for Part V, Section B.

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 1	Facility A, 1 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center Jacksonville). "Baptist Medical Center Jacksonville" Although Baptist Medical Center Jacksonville is able to play a direct role in addressing many health-related priorities, others will require the development of strategic partnerships with community service partners or involve the expertise of Baptist Medical Center Jacksonville staff in the development of new and effective efforts that will be administered by other local community organizations. Regardless of the role Baptist Medical Center Jacksonville will play in meeting needs, Baptist remains committed to leading and supporting efforts that increase access to care and engage patients and community members in improving health and community wellbeing. All Community Health Plan efforts implemented by Baptist Medical Center Jacksonville must be measurable, achievable and financially feasible. This report reflects the goals and strategic objectives identified to address community priorities within Baptist Medical Center Jacksonville's influence and scope of service. Behavioral Health: Baptist Health has made behavioral health services a priority, providing comprehensive inpatient and outpatient services to both children and adults. Mental Health was a priority health need addressed by Baptist Medical Center Jacksonville in the last three-year CHNA cycle, and the focus on this health need continues into this CHNA cycle as behavioral health needs of Jacksonville residents continue to increase. Key Issues Identified in the Assessment * Alcohol use continues to negatively affect the region * Stigma related to mental health and substance abuse often prevents those affected from seeking help * Depression and substance abuse issues among seniors is growing * Deaths due to drugs are a concern, in part due to the opioid crisis

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
<p>Schedule H, Part V, Section B, Line 11 Facility A, 2</p>	<p>Facility A, 2 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center Jacksonville). Behavioral Health: Goal: Increase access to behavioral health services. Strategies: * Continue offering Mental Health First Aid, a proven best practice to reduce stigma of mental illness which increases the likelihood that people will access care; * Provide funding to innovative efforts to reduce stigma, advocate for increased services and increase access to care; * Participate in Project Save Lives to provide access to peer support for ED patients with mental health and substance use disorder for the purpose of getting them into treatment; * Implement support groups for LGBT+ populations to address addictions, mental health, advocacy, community resources, etc.; * Host a community-wide conference on mental health to reduce stigma and barriers to care * Provide education and prevention programming in the community. Metrics/What we are measuring: * 3,000 people trained by 2021 * Evaluate participant satisfaction * Evaluate the impact of each initiative according to its focus * Number of people who met with peer specialist * Number of people who enter treatment * Number of people who are readmitted into ED * Number of people participating in support groups * Evaluation of quality and outcomes of support groups * Number of people attending the conference * Satisfaction surveys * Number of people participating in programs Potential Partnering/External Organizations: * Jacksonville Nonprofit Hospital Partnership * National Council for Behavioral Health * Baptist Health Faith Partners * Florida's First Coast YMCA * The Partnership for Mental Health: A project of Baptist Health and the Delores Barr Weaver Fund at The Community Foundation for Northeast Florida * City of Jacksonville * Gateway Services * JASMYN * University of North Florida * PFLAG * Jacksonville Coalition for Equality * Faith organizations * Community mental health providers * Jewish Community Alliance Results: * 4,472 people were trained October 1, 2018 - September 30, 2021 a cross Northeast Florida * Year 1 (October 1, 2018 - September 30, 2019) - 2,517 trained 98% of participants rated high satisfaction with training quality 96% of participants rated high satisfaction with training usefulness 99% of participants would recommend the training to others * Year 2 (October 1, 2019 - September 30, 2020) - 1,050 trained 98% of participants rated high satisfaction with training quality 99% of participants rated high satisfaction with training usefulness 95% of participants would recommend the training to others * Year 3 (October 1, 2020 - September 30, 2021) - 905 trained 97% of participants rated high satisfaction with training quality 94% of participants rated high satisfaction with training usefulness 99% of participants would recommend the training to others 178 Narcan kits and training were distributed to participants * The fund was established with \$2.2m. As of December 2021, 60 grants have</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 2	<p>ve been made to 49 organizations for a total of approximately \$2,407,874 * With funding fr om Baptist, Community Health Outreach, MASS, Mission House, Sulzbacher, We Care, Volunteer s in Medicine and The Way collectively served: - In 2020, 833 un- and under-insured patien ts who needed mental health services of which 78.4% participated in at least one treatment session - In 2021, 933 un- and under-insured patients who needed mental health services o f which 92.7% participated in at least one treatment session * With funding from Baptist t o community behavioral health organizations, 527 youth received mental health services and Ending the Silence presentations were made to 7,638 middle and high school students * Wit h funding from Baptist to community behavioral health organizations, 407 calls to NAMI's c risis line were answered * Wolfson launched the On Our Sleeves campaign to educate about y outh mental health. 1,056 people subscribed to the monthly educational newsletter * Year 1 (October 1, 2018 - September 30, 2019) - The Project Save Lives MOU was signed and fundin g provided in September 2019 * Year 2 (October 1, 2019 - September 30, 2020) - Peer suppor t services began at Baptist North on November 18 * Year 3 (October 1, 2020 - September 30, 2021) - Peer support services began at Baptist Jacksonville on May 21 - Through September , 1,099 patients were seen and 549 patients consented to services from both sites * Year 1 (October 1, 2018 - September 30, 2019) - Baptist Health hosted a weekly support group Apr il 10 - May 15, for one hour. 19 individuals registered and an average of 8 individuals at tended weekly 88% of respondents agreed their social support system increased since partic ipating in the group 100% of respondents "strongly agreed" they would recommend this group to other LGBT+ adults * Year 2 (October 1, 2019 - September 30, 2020) - Baptist Health ho sted a weekly support group from October 2 - December 18. Seventeen individuals registered and an average of 6 individuals attended weekly 100% of evaluation respondents "strongly agreed" their social support system increased since participating in the group and they wo uld recommend this group to other LGBT+ adults - Baptist Health hosted a weekly support gr oup from February 12 - April 1 (The March 18 meeting was canceled due to COVID, and subseq uent meetings were transferred to virtual. 100% of evaluation respondents "somewhat agreed " their social support system increased since participating in the group and they would re commend this group to other LGBT+ adults 100% of respondents "strongly agreed" they would recommend this group to other LGBT+ adults * Year 3 (October 1, 2020 - September 30, 2021) - A weekly virtual support group was offered from April 7 - April 28 and May 26 - June 9, but there was a lack of attendance. * Year 1 (October 1, 2018 - September 30, 2019) - A p lanning committee of community representatives and BH team members met monthly to determin e conference content and forma</p>

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Form and Line Reference	Explanation
<p>Schedule H, Part V, Section B, Line 11 Facility A, 2</p>	<p>t * Year 2 (October 1, 2019 - September 30, 2020) - The 2020 Behavioral Health Conference - Health and Wellbeing in a Pandemic, was hosted virtually on Nov. 17, 18, and 19 with 159 ,151 and 131 individuals attending, respectively Recordings and other session content were posted on the Baptist Health website, receiving about 56 views a day the week of the conference 96% of survey respondents rated the conference quality as excellent or good * Year 3 (October 1, 2020 - September 30, 2021) - COVID-19 surges in 2021 postponed the September conference to April 2022 - Provided a total of 192 mediation classes with 1,598 visits at Y Healthy Living Centers and JCA Wellness Connexion (all locations) from October 1, 2018 - September 30, 2021 * Year 1 (October 1, 2018 - September 30, 2019) - Hosting 24 NAMI Peer Connection Recovery Support Groups at Riverside YHLC - Participated in 6 health fairs attended by 132 individuals. Attendees were screened for mental health risk, and behavioral health resource information was provided. If identified as at-risk, participants received a follow-up from a RN * Year 2 (October 1, 2019 - September 30, 2020) - Hosted a 3 week "Coping with COVID" webinar series which reached a total of 4,096 individuals - Hosted "Suicide Prevention 101: What You Need to Know to Help Save Lives" virtually for the community and Baptist Health Team Members on September 22, 2020 with 100 individuals attending 100% of survey respondents rated the quality of the event as excellent or good - Hosted a webinar on depression in the LGBT+ community on September 24, 2020 with 51 individuals attending 80% of survey respondents were either likely or very likely to recommend the event to a friend or family member 80% of survey respondents rated the quality of the event overall as above average or outstanding * Year 3 (October 1, 2020 - September 30, 2021) - Hosted "Distress Tolerance & Practicing Acceptance" webinar on Jan. 1, 2021 reaching 1,833 individuals. - The Resilience and Strength: Supporting the Mental Well-Being of our Black Community series was a three-session panel held in the spring/summer of 2021 and focused on the mental health of elders, caregivers and adults, and youth with attendance totaling 280 people - Hosted a webinar on depression, substance use, and suicide in the LGBT+ community on July 15, 2021 that was shared with the community - Hosted five behavioral health Grand Rounds presentations with 349 participants</p>

Form 990 Part V Section C Supplemental Information for Part V, Section B.

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 3	Facility A, 3 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center Jacksonville). Maternal, Fetal and Infant Health: Each year, approximately 2,000 babies are delivered Baptist Medical Center Jacksonville. The health and wellbeing of the mothers, fathers and their babies is important to the hospital. This health need is a new focus for Baptist Medical Center Jacksonville due to the significant number of adverse outcomes in Jacksonville identified in the 2018 Community Health Needs Assessment. Key Issues Identified in the Assessment: * High rates of adverse outcomes in service area, such as pre-term births, babies with low birth weight, infant mortality. * A large proportion of mothers do not receive early prenatal care. * Adverse birth outcomes are prevalent as a result of substance abuse among pregnant women.

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 4	<p>Facility A, 4 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center Jacksonville). Maternal, Fetal, and Infant Health: Goals: Decrease the number of pre-term births, babies with low birth weight and infant mortality and support parents with perinatal mood disorders. Strategies: * Partner with the Northeast Florida Healthy Start Coalition to study the cause of every infant death in Northeast Florida in a 12-month period. * Partner with Northeast Florida Health Start Coalition to develop a community plan to reduce the number of infant deaths. * Offer Ready, Set, Sleep class focused on increasing awareness of safe sleep practices and CPR to expectant mothers. * Continue partnering with Duval County Public Schools to provide safe sex education through health curriculum. * Provide a continuum of care including psychology and psychiatry support on an inpatient and outpatient basis. * Provide education on perinatal mood disorder to clinicians. * Provide support groups to new mothers experiencing perinatal mood disorder. Metrics/What we are measuring: * Identify causes for infant deaths in Northeast Florida * Decrease in the number of infant deaths * Measure pre and post-test knowledge gains * Number of students participating in classes * Number of participants * Number of people trained * Number of people participating in support groups Potential Partnering/External Organizations: * Northeast Florida Healthy Start Coalition * Florida Blue * UF Health Jacksonville * Jacksonville University * The Community Foundation for Northeast Florida * Florida Department of Health * Duval Healthy Start * UF Health Healthy Start * University of North Florida * Duval County Public Schools * Private OBGYN Practices * Postpartum Support International * Florida's First Coast YMCA Results: * Year 1 (October 1, 2018 - September 30, 2019) - Actively participated in Fetal Infant Mortality Review meetings - Provided funding for an in-depth review of all 2019 infant deaths to develop a strategy to end infant mortality * Year 2 (October 1, 2019 - September 30, 2020) - Actively participated in Fetal Infant Mortality Review meetings - Provided funding for an in-depth review of all 2020 infant deaths resulting in a strategic plan to reduce infant mortality in Duval County - Provided funding to implement community health workers in OB offices to increase risk-screening completion rates, a key part of the strategic plan to reduce infant mortality in Duval * Year 3 (October 1, 2020 - September 30, 2021) - Actively participated in Fetal Infant Mortality Review meetings - Provided funding for an in-depth review of all 2021 infant deaths resulting in a strategic plan to reduce infant mortality in Duval County * Year 1 (October 1, 2018 - September 30, 2019) - Developed WELCome Home visiting program which focuses on newborn and maternal education for families who deliver at Baptist Medical Center Jacksonville and reside in Duval County. WELCome Home is designed to provide</p>

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 4	<p>Provide mothers and families with educational resources, such as lactation support, postpartum emotional encouragement, home and car safety, and safe sleep practices. - Implemented safe sleep policies in hospitals and education for new parents * Year 2 (October 1, 2019 - September 30, 2020) - Developed WELLcome Home visiting program focused on newborn and maternal education for families who deliver at South and reside in Duval County. WELLcome Home is designed to provide mothers and families with educational resources, such as lactation support, postpartum emotional encouragement, home and car safety, and safe sleep practices. 743 calls placed, 356 were first time moms 491 mothers actively participated, 230 first time moms 157 mothers were referred or requested additional services Top three WELLcome Home participant zip codes 32210, 32218, 32207 - Baptist Health implemented a system-wide "Infant Safe Sleep" hospital policy no. 7.22.02, which follows the Safe Sleeping Guidelines established by the American Academy of Pediatrics. The purpose of the policy is to model and promote safe sleep practices for patients and visitors at Baptist Health - Baptist Health engaged in a Safe Sleep Initiative to train hospital staff in appropriate safe sleeping behaviors to model safe sleep practices in the hospital setting practices before parents and families return to their home environment - 521 maternal and newborn hospital staff members attend a Safe Sleep Return Demonstration training to identify safe and unsafe sleep practices, swaddling demonstrations, and patient education and correction * Year 3 (October 1, 2020 - September 30, 2021) - Continued WELLcome Home visiting program focused on newborn and maternal education for families who deliver at BMC-Jax and reside in Duval County 1141 total calls placed 759 mothers participated, 374 first time moms Top Three WELLcome Home participant zip codes 32210,32218,32207 - 347 mother referred to additional services, such as WELLcome Home Healthy Start Home visit, Lactation Consultation, Behavioral Health 63.5% of mothers referred to the WELLcome Home Healthy Start Home Visit completed the home visit * Year 1 (October 1, 2018 - September 30, 2019) - THE PLAYERS Center for Child Health educators provided safe sleep education to 956 people at 21 community events - Safe Sleep messaging had a program reach of 220,026 media impressions - 136 sleep sacks and 116 pack and plays were distributed * Year 2 (October 1, 2019 - September 30, 2020) - A total of 417 individuals were educated on safe sleep - Distributed a total of 9 pack and plays and 9 sleep sacks - Attended a total of 15 community events - Had a total of 557,000 social media impressions - Participated in Sleep Baby Safely - a community initiative to help reduce infant mortality related to unsafe sleep. Funding was provided by DOH Florida. Every mom that birthed at one of the 9 birthing hospitals was given a "safety bag" along with education provided by the nurse bef</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 4	<p>ore discharge. * Year 3 (October 1, 2020 - September 30, 2021) - Hosted virtual, in-person , and Spanish-speaking specific safe sleep classes - Organized 7 classes to educate individuals on safe sleep. - Distributed a total of 7 Pack N Plays - Had a total of 6,085 social media impressions on safe sleep practices and tips. * Year 1 (October 1, 2018 - September 30, 2019) - Wolfson Children's Hospital assisted with condom demonstrations for 7 schools educating 1,122 students * Year 2 (October 1, 2019 - September 30, 2020 - Wolfson Children's Hospital assisted with condom demonstrations for 17 school classes educating a total of 671 students * Year 3 (October 1, 2020 - September 30, 2021) - Wolfson Children's Hospital assisted with condom demonstrations for 1 school educating a total of 13 students - Developed new behavioral health services for new moms and dads - Outpatient: Baptist Behavioral Health received 981 maternal mental health referrals, of those referrals: 227 patients were served (Y1&2) 294 were scheduled (Y3) - Inpatient (maternity): Baptist Behavioral Health received 436 maternal mental health referrals, of those referrals, 384 patients were served - 38 clinicians trained in "Pregnancy Emotional Health: Perinatal Mood and Anxiety Disorders" - 64 clinicians trained in "MNB Intensive: Care of the Postpartum Patient" - 137 individuals participated in new mom support groups</p>

Form 990 Part V Section C Supplemental Information for Part V, Section B.

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 5	<p>Facility A, 5 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center Jacksonville). Vulnerable Population - LGBT+ The Lesbian, Gay, Bisexual, Transgender, Queer or Questioning and Intersex (LGBT+) community has made important advancements in their attainment of civil liberties. However, LGBT+ individuals continue to face barriers that prevent them from accessing culturally competent healthcare and achieving the highest possible level of health. Due to these barriers, LGBT+ individuals experience multiple health disparities. Compared to their heterosexual counterparts, LGBT+ populations have higher rates of HIV and sexually transmitted infections, obesity, certain forms of cancer, suicide, and tobacco, alcohol, and other drug use. LGBT+ adults are also more likely to delay or avoid seeking medical care due to decreased access to healthcare and fear of discrimination. LGBT+ people experience disparities in health outcomes resulting from a variety of sources: differential risks and risk taking between the community and the general population, unequal access to health and societal resources, stigma in the community and healthcare institutions, disparities in insurance coverage, and a history of culturally incompetent care. Baptist Health participated in the Jacksonville-Area Community Assessment, which was initiated to learn about the composition, experiences, and needs of Northeast Florida's large and diverse lesbian, gay, bisexual, transgender and intersex (LGBT+) community. Between August and November 2017, 671 LGBT+ adults who lived, worked, worshipped or received services in Jacksonville in the prior year completed anonymous, English-language surveys. Health needs identified in the survey include: * more than one-third (34.2%) of respondents reported a lifetime diagnosis of depression, * almost sixty percent (58.4%) of gender minorities reported a lifetime diagnosis of depression * rates of attempted suicide were higher among gender minority respondents (11.1%) compared to cisgender respondents (2.6%) * rates of attempted suicide were higher among younger respondents (5.6%) compared to older respondents (0.0%) * 16.5% of all LGBTQI respondents reported being a current smoker * Binge drinking in the past 30 days was reported by nearly four out of ten respondents</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 6	<p>Facility A, 6 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center Jacksonville). Vulnerable Population - LGBT+: Goal: Increase access to support services. Strategies: * Implement support groups for LGBT+ populations to address addictions, mental health, advocacy, community resources, etc. * Partner with JASMYN to provide support to parents and family members of LGBT+ people. * Partner with organizations to provide health education specific to LGBT+ populations.</p> <p>Metrics/What we are measuring: * Number of people participating in support groups * Evaluation of quality and outcomes of support groups * Number of people who participate in education Potential Partnering/External Organizations: * JASMYN * University of North Florida * PFLAG * Jacksonville Coalition for Equality * Pride Team Member Community Results: * Year 1 (October 1, 2018 - September 30, 2019) - Baptist Health hosted a weekly support group April 10 - May 15, for one hour. 19 individuals registered and an average of 8 individuals attended weekly 88% of respondents agreed their social support system increased since participating in the group 100% of respondents "strongly agreed" they would recommend this group to other LGBT+ adults * Year 2 (October 1, 2019 - September 30, 2020) - Baptist Health hosted a weekly support group from October 2 - December 18. Seventeen individuals registered and an average of 6 individuals attended weekly 100% of evaluation respondents "strongly agreed" their social support system increased since participating in the group and they would recommend this group to other LGBT+ adults - Baptist Health hosted a weekly support group February 12 - April 1 (The March 18 meeting was canceled due to COVID; subsequent meetings were transferred to virtual) 100% of evaluation respondents "somewhat agreed" their social support system increased since participating in the group and they would recommend this group to other LGBT+ adults 100% of respondents "strongly agreed" they would recommend this group to other LGBT+ adults * Year 3 (October 1, 2020 - September 30, 2021) - A weekly virtual support group was offered from April 7 - April 28 and May 26 - June 9, but there was a lack of attendance. * Year 3 (October 1, 2020 - September 30, 2021) - Two support group cycles were offered to the community. Sessions were 1 hour weekly and led by a facilitator who was also the parent of a LGBT+ person. Cycle 1 (4 weeks: March 9- March 30) * Average attendance: 5 parents/family members * The quality of the sessions was rated as above average * Participants agreed that the space was safe and welcoming * Participants were very likely to recommend the group to other parents/family members with a LGBT+ child Cycle 2 (6 weeks: May 11 - June 15) * Average attendance: 3 parents/family members Cycle 3 was set to begin on August 10, but due to unforeseen circumstances, efforts were transferred to JASMYN's Family Space support group. * Year 2 (October 1, 2019 -</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 6	September 30, 2020) Hosted a webinar on depression in the LGBT+ community on September 24 with 51 individuals attending * 80% of survey respondents were either likely or very likely to recommend the event to a friend or family member * 80% of survey respondents rated the quality of the event overall as above average or outstanding * Year 3 (October 1, 2020 - September 30, 2021) - Hosted a webinar series on various LGBT+ topics and shared with the community "Pre-Exposure Prophylaxis" on June 3 "Depression, Substance Use, and Suicide" on July 15 "Disparities in Healthcare" on September 9

Form 990 Part V Section C Supplemental Information for Part V, Section B.

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 7	<p>Facility A, 7 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center Jacksonville). Vulnerable Population - Seniors Seniors, the fastest-growing population in Northeast Florida, is identified as a population in need of services through the 2016 needs assessment. Baptist Health partnered with United Way in 2003 to better serve our senior population resulting in a Robert Wood Johnson grant to provide additional social supports to frail seniors upon discharge from our downtown hospital. These early efforts informed the development of AgeWell, which opened as the region's first and only comprehensive geriatric program in 2012. AgeWell provides an enriched level of specialized, geriatric primary care uniquely designed to meet the needs of our community's medically complex, frail seniors. The Institute provides comprehensive geriatric assessments and utilizes evidenced-based protocols through an integrated, interdisciplinary care team model. The team includes Geriatricians, Geropsychiatrist, Psychologist, RN Care Manager, Licensed Social Workers, Clinical Pharmacists, Nutritionist, a rehab team, and Social Service coordinators. The team of geriatric specialists extend traditional medical boundaries to address the social and emotional needs of patients and their caregivers; promoting better health and maximizing their functional capacity and ability to live at home in their communities. Most of the non-medical services are unreimbursed by Medicare or other insurance carriers and not charged to patients. The type of comprehensive geriatric care is typically only available at academic medical centers where unreimbursed costs can be covered/reduced through residents and fellowships and research funding. Key Issues Identified in the Assessment: * According to the data, the Medicare population has high rates of chronic diseases and injuries; specifically, atrial fibrillation, cancer, hyperlipidemia, rheumatoid arthritis, and stroke. * In Nassau County, the Age-Adjusted Death Rate due to Falls is higher than the state average. * The percentages of older adults over age 65 with arthritis and cancer are higher than the state averages.</p>

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Form and Line Reference	Explanation
<p>Schedule H, Part V, Section B, Line 11 Facility A, 8</p>	<p>Facility A, 8 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center Jacksonville). Vulnerable Population - Seniors: Goals: * Reduce isolation of frail seniors and proactively identify health needs. * Provide educational, therapeutic, and exercise opportunities for seniors and caregivers to improve the health of seniors. Strategies: * Partner with Meals on Wheels to provide nutritional meals to seniors on the state waiting list for services. * Partner with organizations to reduce senior isolation. * Implement ENRICH Outreach cognitive enhancement program for seniors experiencing moderate to moderately severe cognitive impairment and their care partners. * Partner with health education organizations to offer senior programming to address health needs. * Implement Congregational Health Network to provide care and support to seniors through key, trained volunteers within collaborating churches. Two Levels: - Congregational Health Network Basic Partnership: Certified Community Health Workers ("Liaisons") are trained to independently assist members of the church with general health needs and health promotion, and assistance in navigating the hospital system and connecting to community health resources - Congregational Health Network Plus Partnership: Certified Community Health Workers are trained as described in the above bullet. Additionally, the agreement includes formalized alert process to contact program coordinator to CHW when a member (patient) is admitted to the hospital (via auto-alert with Patient Access Services) * Address the social needs of patients with chronic conditions that are not being optimally managed by performing skilled and non-skilled services in the home. * Collaborate with Ames Production and the Nonprofit Hospital Partnership to share the Saving Claire program with the NE Florida community. Saving Claire is a 2-part program that includes a documentary film and panel discussion with falls prevention experts * Collaborate with the Caregiver Coalition, a formal network of area senior care providers to enhance the resource network available to seniors and caregivers of older adults through financial sponsorship/membership and team member involvement Metrics/What we are measuring: * Number of seniors receiving meals * Number of seniors reached through the program * Number of needs identified * Number of seniors and care partners who participate * Evaluation of program satisfaction and health outcomes by seniors and care partners * Number of patients in program, Number of hospital admissions, Admits per patient, Total patient days, Days per admission, Days per patient (total), Total charges, Average charge /admit, Average charge /patient, Number of ED visits, Number of ED admits * Reduction in avoidable hospital admissions, readmissions, and ED visits * Patient satisfaction * Number of events offered in the community * Number of community members attending each event. * Participants' responses to program (based on</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 8	<p>n formal evaluation of program) * Number of seniors who connect to a falls prevention strategy following the program (e.g. home assessment, exercise class, etc.) * Number of educational events * Number of participants * Percentage of new participants * Percentage of returning participants * Newsletter distribution (number of contacts) * Post-evaluation polls assess satisfaction with that specific workshop Potential Partnering/External Organizations: * UNF * Morrison's Cafeteria * Nonprofit Hospital Partnership * ElderSource * Hartfelt Ministries * Baptist Health Auxiliary and volunteers * AHEC (Area Health Education Centers) * AgeWell * Area church congregations - Pastors - Health Ministry Members (To serve as liaisons) * Certified trainers for volunteers ("Liaisons"), Life Limbs * City of Jacksonville * Aging True * Baptist Health Auxiliary * Caregiver Coalition Professional Members * Faith Partner Network Results: Across the Baptist system, 27,995.6 meals were provided to seniors from 2019-2021, with 19,038.2 meals being provided to BMC Jacksonville seniors during this period from food donated to the UNF dietary department for the Meals on Wings program. * Year 1 (October 1, 2018 - September 30, 2019) 5,216.2 meals provided to BMCJ seniors Around 25 seniors were assisted across the NEFL program * Year 2 (October 1, 2019 - September 30, 2020) 6,865.1 meals provided to BMCJ seniors Around 75 seniors were assisted across the NEFL program * Year 3 (October 1, 2020 - September 30, 2021) 6,956.9 meals provided to BMCJ seniors Over 250 seniors were assisted across the NEFL program * Year 2 (June 1, 2020 - September 30, 2020) - Across the system 72 volunteers 100 community members 400 phone calls 200 hours Quality of calls (as rated by volunteers) * Excellent: 64.02% * Pretty Good: 30.16% * OK: 2.91% * Weak: 1.85% * Poor: 1.06% * Year 3 (October 1, 2020 - September 30, 2021) - Across the system 67 volunteers 69 community members 1605 phone calls 654 hours Quality of calls (as rated by volunteers) * Excellent: 77.43% * Pretty Good: 17.62% * OK: 2.01% * Weak: 1.85% * Poor: 1.09% * Year 1 (October 1, 2018 - September 30, 2019) - 2 days of ENRICH classes with 8 couples. (COVID caused cancellation of any further classes) - Comments also indicated that it was a safe environment for sharing ideas and receiving emotional support; was an avenue for resources to help better understand and care for loved ones; and was enjoyed by patients who looked forward to attending - Care partners were highly satisfied with content and opportunities for respite and self-care - In addition, care partners felt that AgeWell cared about them as well. Through a creation of a support system, and access to education and resources, care partners are hopefully able to reduce levels of stress, improving their personal health, thus allowing them to better care for their loved one. Providing them with unique holistic care, care partners begin to feel supported and relieved. Providing the</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 8	<p>m with disease-specific education allows them to gain a better understanding of the disease and its progression. Knowing what to expect calms fears -10 partner organizations, 31 events with 3,245 total participants with tabling events and presentations covering health education topics including: blood pressure and BMI management, end of life planning, falls prevention, healthy aging, joint care, lung health, mental health and stroke awareness - In partnership with our faith-based community, the following topics were covered with seniors and the participants from our faith community: "Isolation and Loneliness" "Advanced Care Planning" "Rheumatoid Arthritis" "Lung Cancer" "Saving Claire, Falls Prevention" Approximately 150 individuals attended these virtual events. * Year 1 (October 1, 2018 - September 30, 2019) - 865 people attended 75 health and aging educational programs in the community throughout the Baptist Health system. - Social distancing precautions for COVID-19 forced all face-to-face educational opportunities to be offered through virtual platforms. As such, participants from around the region were invited to attend these events. * Year 2 (October 1, 2019 - September 30, 2020) - The Social responsibility Office provided 7 presentations to approx. 215 community members (live and virtual events) - Educated Senior Round Table on the connection between grief and health/immunity in seniors and strategies for stress reduction to manage both stress and grief attended by 50 caregivers - Provided education on stress management, and information on where to turn for additional support to staff at senior ALF or ILF facilities. 250 attended Those reached reported high satisfaction with information and support provided * Year 3 (October 1, 2020 - September 30, 2021) - The following topics were covered virtually for seniors and members of the faith community: "Healthy Aging" "Resilience and Strength-Supporting Elders" "Resilience and Strength-Supporting Parents, Caregivers and All Adults" "Colorectal Cancer" "Saving Claire-Falls Prevention" - Baptist AgeWell offered senior health education on 10 formal topics and an additional option to customize chronic disease education by specific illness: "5 Keys to Healthy Aging", "Understanding the 3 D's", "Fall prevention", "Bladder Health", "Is this depression?", "Coping with grief" "Caring for the Caregiver Mind, Body, and Spirit", "Accessing community resources for yourself or your loved one", "Pills, Pills, Pills", "Living a Brain Healthy Lifestyle" Approximately 300 individuals attended live and virtual events. Those attending training sessions took surveys which averaged a "highly satisfactory" or "satisfactory" ratings. * Year 2 (October 1, 2019 - September 30, 2020) - Program's official launch: August, 18, 2020</p>

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Form and Line Reference	Explanation
<p>Schedule H, Part V, Section B, Line 11 Facility A, 9</p>	<p>Facility A, 9 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center Jacksonville). Vulnerable Population - Seniors: * Year 2 (October 1, 2019 - September 30, 2020) - Program's official launch: August, 18, 2020 - Number of patient-members: 23 - Marketing efforts underway in all congregations, 12 churches agreed to participate in the Congregational Health Network Basic Partnership - 6 churches signed agreements to participate as Congregational Health Network Plus Partnership - Cohort 1 consisted of 18 Liaisons. 2 hours of program training completed January, 13, and 6.5 hours of Community Health Worker training completed January, 25. (Training was paused due to COVID-19) * Year 3 (October 1, 2020 - September 30, 2021) - Cohort 2 consisted of 13 Liaisons. - The CHW credential required 30 hours of education; participants completed 15 hours of education. Classes continued every other week through October. - 13 CHW completed the 30 hours of required certification training virtually. - 69 seniors served since pilot began in October 2019 - After 6 months of service, ED visits decreased 20% compared to 6 months prior to receiving services - After 12 months of service inpatient visits decreased 36% and ED visits decreased 50% compared to 12 months prior to receiving services - All patients who completed the satisfaction survey (n=6) rated the program 100/100 and replied "yes" when asked if they are likely to recommend - Although not an anticipated metric, this program has helped transition patients off the ElderSource waitlist for home and community services to long-term Medicaid. Without these services, these patients would most likely be living in a nursing home or ALF. These services allow the individual to remain at home, reducing their overall cost of care * Year 3 (October 1, 2020 - September 30, 2021) Two events hosted in December: - Faith Partners: 24 attendees - Baptist Health Auxiliary Volunteers: 46 attendees - An in-person event scheduled for August 2 at City of Jacksonville's Mary Singleton Senior Center was canceled due to COVID restrictions. - The Caregiver Coalition event on August 27 was pivoted to virtual. 85 people attended. 27 survey respondents 92.6% thought the content was very helpful 100% believed they learned something that would make them a better caregiver 92.6% were very likely to take action or make a change to help themselves or a loved one prevent a fall 100% wanted follow-up emails to learn more and about next steps - Quarterly newsletter distributed to 2320 contacts - Number of workshops: 7 - Total Attendance for all events : 666 - Post-workshop evaluations assessing satisfaction to questions: - Responses were 99.9% positive on a three-point scale. * Year 2 (October 1, 2019 - September 30, 2020) - May : "Caregiving During COVID-19" - June: "The Legal Aspects of Caregiving" - July: "Preparing for a Crisis During a Crisis" - Aug: "Caring for Yourself as You Care for Others" - September: "Caring for the Veteran"</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 9	Caregiver Conference" * Year 3 (October 1, 2020 - September 30, 2021) - November: "The Jo ys in Caregiving: Meeting the Challenges of Caregiving During the Holidays" - December: "H ow to Make the Most of the Holidays"

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 10	<p>Facility A, 10 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center Jacksonville). Needs Baptist Medical Center Jacksonville Will Not Address: No entity can address all of the health needs present in its community. Baptist Medical Center Jacksonville is committed to serving the community by adhering to its mission, using its skills and capabilities, and remaining a strong organization so that it can continue to provide a wide range of community benefits. This plan does not include specific strategies to address the following health priorities that were identified in the 2018 Community Health Needs Assessment; however, each of these health needs will continue to be addressed through partnerships and ongoing initiatives: Access - Baptist Medical Center Jacksonville through Baptist Health will continue to support Jacksonville's health care safety net organizations: Sulzbacher Center, Volunteers in Medicine, Muslim American Social Services, Community Health Outreach, We Care Jacksonville and Agape Community Health Center. These organizations provide access to care for Jacksonville residents who are un- or under-insured. Given this long-term investment, the hospital will focus on other significant community health needs. Poverty - This need is being addressed by other entities in Duval County, including United Way of Northeast Florida, which is supported by Baptist Health. In addition, Baptist Health's Vice President of Community Investment and Impact actively participates in a community effort that includes businesses, city government and funders to end poverty in Jacksonville. Baptist Medical Center Jacksonville does not anticipate implementing additional initiatives to address poverty. The hospital does not have sufficient resources to effectuate a significant change in this area, and believes resources devoted to its health plan should focus on other significant community health needs. Obesity and Physical Activity - Baptist Medical Center Jacksonville through Baptist Health operates 8 Weeks to Healthy Living, a nutrition and physical activity program, in partnership with faith organizations and the YMCA. Baptist Health also operates Healthy Living Centers in YMCA locations and Health Connections in the Jewish Community Alliance, located in the Baptist Medical Center Jacksonville service area. Community members, regardless of membership with the YMCA or JCA, receive screenings and health coaching through the centers. Baptist Medical Center Jacksonville does not anticipate implementing additional initiatives to address obesity and physical activity. Given this long-term investment, the hospital will focus on other significant community health needs. Cancer - Baptist MD Anderson Cancer Center is part of the Baptist Medical Center Jacksonville services and campus. Baptist MD Anderson participates in outreach and education activities throughout Jacksonville. Given this significant investment in cancer care and education in the Baptist</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 10	st Medical Center Jacksonville service area, the hospital will focus on other significant community health needs.

Form 990 Part V Section C Supplemental Information for Part V, Section B.

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 11	Facility A, 11 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center South). Although Baptist Medical Center South is able to play a direct role in addressing many health-related priorities, others will require the development of strategic partnerships with community service partners or involve the expertise of Baptist Medical Center South staff in the development of new and effective efforts that will be administered by other local community organizations. Regardless of the role Baptist Medical Center South will play in meeting needs, our organization remains committed to leading and supporting efforts that increase access to care and engage our patients in improving health and community wellbeing. All Community Health Plan efforts implemented by Baptist Medical Center South must be measurable, achievable and financially feasible. This report reflects the goals and strategic objectives identified to address community priorities within Baptist Medical Center South's influence and scope of service. Access to Care: Baptist Medical Center South has partnered with Muslim American Social Services, The Way Free Clinic and Vision is Priceless to provide access to care for people living in Baptist Medical Center South's service area who do not have insurance. Key Issues Identified in the Assessment: * There is a lack of adults with a usual source of health care in the service area * There is a deficit of mental health services in the service area, with access being nearly impossible for those who are underinsured or uninsured * There are language barriers and barriers due to transportation issues that affect access

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 12	<p>Facility A, 12 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center South). Access to Care: Goals: Increase access to health services for un- and under-insured people in the BMCS service area and Every Child in Northeast Florida has Health Care Strategies: * Continue partnering with organizations who provide access to care for Duval and Clay residents who do not have health insurance. * Support Duval free medical clinics and Federally Qualified Health Centers in collaborative efforts to increase access to care. * Continue partnering with organizations to provide referrals for and increase access to smoking cessation classes and assistive medication. * Continue providing screenings and health coaching through Youth Living Centers and JCA Health Connections. * Partner with Children's Home Society, Clay Public Schools and Aza Health to assess the feasibility of offering health services in the Clay County Community Schools and developing a plan if determined to be feasible. Metrics/What are we measuring: * Number of people served * Evaluate health and wellness of participants * Number of people referred to programs * Number of people participating in classes * Number of people completing classes * Number of people receiving screening * Number of people receiving coaching * Feasibility of offering health services in Wilkinson Junior High and Keystone Heights Junior/Senior High Potential Partnering/External Organizations: * Muslim American Social Services (MASS) * The Way Free Clinic * Agape Health * Community Health Outreach * Mission House * Sulzbacher Center * We Care Jacksonville * Volunteers In Medicine * Agency Health Education Center * American Lung Association * Florida's First Coast YMCA * Jewish Community Alliance * Children's Home Society Buckner Division * Clay County Public Schools * Aza Health * Year 1 (October 1, 2018 - September 30, 2019) - Community Health Outreach, MASS, Mission House, Sulzbacher, We Care, Volunteers in Medicine and The Way collectively served 8,283 un- and under-insured patients 1,238 diabetic patients were served, of which 914 were seen at least twice during the 12-month period and 41.5% reported reaching within normal levels (HbA1c < 7% or 8%) 2,936 hypertensive patients were served, of which 1,980 were seen at least twice during the 12-month period and 55.4% measured < 140/90 * Year 2 (October 1, 2019 - September 30, 2020) - Community Health Outreach, MASS, Mission House, Sulzbacher, We Care, Volunteers in Medicine and The Way collectively served 5,163 un- and under-insured patients 1,177 diabetic patients were served, of which 807 were seen at least twice during the 12-month period and 32.8% reported reaching within normal levels (HbA1c < 7% or 8%) 2,323 hypertensive patients were served, of which 1,625 were seen at least twice during the 12-month period and 49.0% measured < 140/90 1,444 patients with mental health needs were serviced, of which 833 scored 10 or greater on PHQ9 and were referred</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 12	<p>or treatment and 78.4% participated in at least one counseling session during the 12-month period * Year 3 (October 1, 2020 - September 30, 2021) - Community Health Outreach, MASS, Mission House, Sulzbacher, Volunteer in Medicine, The Way, and WeCare collectively served 8,844 un- and under-insured patients 1,339 diabetic patients were served, of which 978 were seen at least twice during the 12-month period and 31.6% reported reaching within normal levels (HbA1c<7% or 8%) 3,115 hypertensive patients were served, of which 2,203 were seen at least twice during the 12-month period and 53.1% measured <140/90 1,648 patients with mental health needs were serviced, of which 933 scored 10 or greater on PHQ9 and/or were referred for treatment and 92.7% participated in at least one counseling session during the 12-month period. - Baptist Health funded a facilitator to help the free clinics and FQH Cs develop a model to create JaxCareConnect, a system of care led by WeCare Jacksonville As of September 31, 2021, 429 referrals for care were received from community members and emergency department social workers, 305 (71.1%) moved forward with scheduling an appointment with a primary care physician and 151 of these patients (49.5%) established a medical home with a JaxCareConnect-affiliated free clinic or FQHC and 70 (22.9%) were enrolled in private or city sponsored healthcare plans. - Provided Mission House clinic tour to healthcare professionals each month in FY2019; 40 team members participated - Mission House volunteer recruitment event and sponsorship on 11/10/18 * Year 1 (October 1, 2018 - September 30, 2019) - In 2019, Better Breathers class was held onsite at BMCS with 14 participants * Year 1 and 2 (October 1, 2018 - Sept. 30, 2020) - 56 signed referrals for Smoking Cessation Program 23 participants enrolled in a class * Year 3 (October 1, 2020 - September 30, 2021) - AHEC: Smoking Cessation at Mandarin Y-Health Living Centers hosted 2 classes with 2 participants * Year 1 (October 1, 2018 - September 30, 2019) - Mandarin Y Healthy Living Center had 916 total visits/interactions 59 patients with biometric screenings 118 1:1 health coaching sessions - JCA had a total of 1,118 total visits/interactions 224 patients with biometric screenings 664 1:1 coaching sessions * Year 2 (October 1, 2019 - September 30, 2020) - Due to COVID, there was an expected drop in visitations. Mandarin Y Healthy Living Center had 369 total visits/interactions 57 patients with biometric screenings 115 1:1 health coaching sessions 197 program participants - JCA had a total 365 visits/interactions 21 patients with biometric screenings 250 1:1 coaching sessions 94 program participants * Year 3 (October 1, 2020 - September 30, 2021) - Due to COVID, there was an expected drop in visitations. Mandarin Y Healthy Living Center had 249 total visits/interactions 39 patients with biometric screenings 48 1:1 health coaching sessions 162 program participants - JCA had a total 365 visits/inte</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 12	<p> ractions 92 patients with biometric screenings 203 1:1 coaching sessions 413 program parti cipants - Nocatee Center for Healthy Living had a total of 319 total visits/interactions 8 3 patients with biometric screenings 236 coaching sessions - No enrollment events took pla ce with Wilkinson Jr High for 20-21. However, Florida KidCare marketing materials were dro pped off. - Application assistance and enrollment events at Wilkinson Junior High School t ook place January 30th, 2019 and February 10th, 2020. Seven families were helped during th e events </p>

Form 990 Part V Section C Supplemental Information for Part V, Section B.

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 13	Facility A, 13 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center South). Behavioral Health: Baptist Health has made behavioral health services a priority, providing comprehensive inpatient and outpatient services to both children and adults. Mental Health was a priority health need addressed by Baptist Medical Center South in the last three-year CHNA cycle, and the focus on this health need continues into this CHNA cycle as behavioral health needs of residents of Duval Clay and St. Johns counties continue to increase. Key Issues Identified in the Assessment: * Many clinics are not equipped to deal with serious mental health illnesses * Great need for psychiatrists for the underinsured/uninsured as services are expensive but mental health issues often affect those without coverage * Smoking and drug use are prevalent in Duval County * Alcohol use and health issues and outcomes related to it affect the entire service area

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Form and Line Reference	Explanation
<p>Schedule H, Part V, Section B, Line 11 Facility A, 14</p>	<p>Facility A, 14 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center South). Behavioral Health: Goal: Increase access to behavioral health services. Strategies: * Continue offering Mental Health First Aid, a proven best practice to reduce stigma of mental illness which increases the likelihood that people will access care. * Provide funding to innovative efforts to reduce stigma, advocate for increased services and increase access to care. * Host a community-wide conference on mental health to reduce stigma and barriers to care. * Provide education and prevention programming in the community. Metrics/What we are measuring: * 3,000 people trained by 2021 * Evaluate participant satisfaction * Evaluate the impact of each initiative according to its focus * Number of people attending the conference * Satisfaction surveys * Number of people participating in programs Potential Partnering/External Organizations: * Jacksonville Nonprofit Hospital Partnership * National Council for Behavioral Health * Baptist Health Faith Partners * Florida's First Coast YMCA * The Partnership: For Mental Health, A project of Baptist Health and the Delores Barr Weaver Fund at The Community Foundation for Northeast Florida * Faith organizations * University of North Florida * Community mental health providers * Jewish Community Alliance Results: * 4,472 people were trained October 1, 2018 - September 30, 2021 across Northeast Florida * Year 1 (October 1, 2018 - September 30, 2019) - 2,517 people 98% of participants rated high satisfaction with training quality 96% of participants rated high satisfaction with training usefulness 99% of participants would recommend the training to others * Year 2 (October 1, 2019 - September 30, 2020) - 1,050 people were trained 98% of participants rated high satisfaction with training quality 99% of participants rated high satisfaction with training usefulness 95% of participants would recommend the training to others * Year 3 (October 1, 2020 - September 30, 2021) - 905 people were trained 97% of participants rated high satisfaction with training quality 94% of participants rated high satisfaction with training usefulness 99% of participants would recommend the training to others 178 Narcan kits and training were distributed to participants - The fund was established with \$ 2.2m. As of December 2021, 60 grants were made to 49 organizations for a total of approximately \$2,407,874 - With funding from Baptist, Community Health Outreach, MASS, Mission House, Sulzbacher, We Care, Volunteers in Medicine and The Way collectively served: In 2020, 833 un- and under-insured patients who needed mental health services of which 78.4% participated in at least one treatment session In 2021, 933 un- and under-insured patients who needed mental health services of which 92.7% participated in at least one treatment session - With funding from Baptist to community behavioral health organizations, 527 youth received mental health services and</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 14	<p>Ending the Silence presentations were made to 7,638 middle and high school students - With funding from Baptist to community behavioral health organizations, 407 calls to NAMI's crisis line were answered - Wolfson launched the On Our Sleeves campaign to educate about youth mental health. 1,056 people subscribed to the monthly educational newsletter * Year 1 (October 1, 2018 - September 30, 2019) - A planning committee of community representatives and BH team members met monthly to determine conference content and format * Year 2 (October 1, 2019 - September 30, 2020) - The 2020 Behavioral Health Conference - Health and Wellbeing in a Pandemic, was hosted on Nov. 17, 18 and 19 with 159, 151 and 131 individuals attending each day, respectively Recordings and other content from each session was posted on the Baptist Health website, receiving about 56 views a day the week of the conference 96% of survey respondents rated the conference quality as excellent or good * Year 3 (October 1, 2020 - September 30, 2021) - COVID-19 surges in 2021 postponed the September conference to April 2022 * Year 1 (October 1, 2018 - September 30, 2019) - Provided 275 people with mental health education and prevention programming material at the Clay County Government Health & Benefits Fair and the Springs Church Community Outreach event - Participated in 6 health fairs attended by 132 individuals. Attendees were screened for mental health risk, and behavioral health resource information was provided. If identified as at-risk, participants received a follow-up from a RN * Year 2 (October 1, 2019 - September 30, 2020) - Hosted a 3 week "Coping with COVID" webinar series which reached a total of 4,096 individuals. - Hosted "Suicide Prevention 101: What You Need to Know to Help Save Lives" virtually for the community and Baptist Health Team Members on September 22, 2020 with 100 individuals attending. 100% of survey respondents rated the quality of the event as excellent or good - Hosted a webinar on depression in the LGBT+ community on September 24, 2020 with 51 individuals attending. 80% of survey respondents were either likely or very likely to recommend the event to a friend or family member 80% of survey respondents rated the quality of the event overall as above average or outstanding * Year 3 (October 1, 2020 - September 30, 2021) - Hosted "Distress Tolerance & Practicing Acceptance" webinar on Jan. 1, 2021 reaching 1,833 individuals. - The Resilience and Strength: Supporting the Mental Well-Being of our Black Community series was a three-session panel held in the spring/summer of 2021 and focused on the mental health of elders, caregivers and adults, and youth with attendance totaling 280 people - Hosted a webinar on depression, substance use, and suicide in the LGBT+ community on July 15, 2021 that was shared with the community - Hosted five behavioral health Grand Rounds presentations with 349 participants</p>

Form 990 Part V Section C Supplemental Information for Part V, Section B.

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 15	Facility A, 15 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center South). Maternal, Fetal, and Infant Health: Each year, approximately 2,500 babies are delivered Baptist Medical Center South. The health and wellbeing of the mothers, fathers and their babies is important to the hospital. This health need is a new focus for Baptist Medical Center South due to the significant number of adverse outcomes in Jacksonville. Key Issues Identified in the Assessment * Duval County in particular struggles in this area * Adverse birth outcomes are prevalent as a result of substance abuse and smoking among pregnant women * The environment that many people live in, particularly those who are low-income or underserved, is not conducive to good fetal and infant health

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Form and Line Reference	Explanation
<p>Schedule H, Part V, Section B, Line 11 Facility A, 16</p>	<p>Facility A, 16 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center South). Maternal, Fetal, and Infant Health: Goals: Decrease the number of pre-term births, babies with low birth weight and infant mortality and Support parents with perinatal mood disorders. Strategies: * Partner with the Northeast Florida Healthy Start Coalition to study the cause of every infant death in Northeast Florida in a 12-month period. * Partner with Northeast Florida Healthy Start Coalition to develop a community plan to reduce the number of infant deaths. * Continue partnering with Duval County Public Schools to provide safe sex education through health curriculum. * Offer Ready, Set, Sleep class focused on increasing awareness of safe sleep practices and CPR to expectant mothers * Provide a continuum of care including psychology and psychiatry support on an inpatient and outpatient basis. * Provide education on perinatal mood disorder to clinicians. * Provide support groups to new mothers experiencing perinatal mood disorder. Metrics/What we are measuring: * Identify causes for infant deaths in Northeast Florida * Decrease in the number of infant deaths * Number of students participating in classes * Measure pre and post-test knowledge gains * Number of participants * Number of people trained * Number of people participating in support groups Potential Partnering/External Organizations: * Northeast Florida Healthy Start Coalition * Florida Blue * UF Health Jacksonville * Jacksonville University * The Community Foundation for Northeast Florida * University of North Florida * Duval County Public Schools * Florida Department of Health * UF Health Healthy Start * Private OBGYN Practices * Postpartum Support International * Florida's First Coast YMCA * Duval Healthy Start Results: * Year 1 (October 1, 2018 - September 30, 2019) - Actively participated in Fetal Infant Mortality Review meetings - Provided funding for an in-depth review of all 2019 infant deaths to develop a strategy to end infant mortality * Year 2 (October 1, 2019 - September 30, 2020) - Actively participated in Fetal Infant Mortality Review meetings - Provided funding for an in-depth review of all 2020 infant deaths resulting in a strategic plan to reduce infant mortality in Duval County - Provided funding to implement community health workers in OB offices to increase risk-screening completion rates, a key part of the strategic plan to reduce infant mortality in Duval * Year 3 (October 1, 2020 - September 30, 2021) - Actively participated in Fetal Infant Mortality Review meetings - Provided funding for an in-depth review of all 2021 infant deaths resulting in a strategic plan to reduce infant mortality in Duval County * Year 1 (October 1, 2018 - September 30, 2019) - Developed WELLCome Home visiting program which focuses on newborn and maternal education for families who deliver at Baptist Medical Center Jacksonville and reside in Duval County. WELLCome Home is designed to provide mot</p>

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 16	<p>hers and families with educational resources, such as lactation support, postpartum emotional encouragement, home and car safety, and safe sleep practices - Implemented safe sleep policies in hospitals and education for new parents * Year 2 (October 1, 2019 - September 30, 2020) - Developed WELLcome Home visiting program focused on newborn and maternal education for families who deliver at South and reside in Duval County. WELLcome Home provides mothers and families with educational resources, such as lactation support, postpartum emotional encouragement, home and car safety, and safe sleep practices. 743 calls placed, 356 were first time moms 491 mothers participated, 230 first time moms 157 mothers were referred or requested additional services Top three WELLcome Home participant zip codes 32210, 32218, 32207 - Baptist Health implemented a system-wide "Infant Safe Sleep" hospital policy no. 7.22.02, which follows the Safe Sleeping Guidelines established by the American Academy of Pediatrics. The purpose of the policy is to model and promote safe sleep practices for patients and visitors at Baptist Health - Baptist Health engaged in a Safe Sleep Initiative to train hospital staff in appropriate safe sleeping behaviors to model safe sleep practices in the hospital setting practices before parents and families return to their home environment - 521 maternal and newborn hospital staff members attended a Safe Sleep Demonstration training to identify safe and unsafe sleep practices, swaddling demonstrations, and patient education and correction * Year 3 (October 1, 2020 - September 30, 2021) - Continued WELLcome Home visiting program focused on newborn and maternal education for families who deliver at BMC-Jax and reside in Duval County. 1141 total calls placed 759 mothers participated, 374 first time moms Top three WELLcome Home participant zip codes 32210, 32218, 32207 - 347 mothers referred to additional services, such as WELLcome Home Healthy Start Home visit, Lactation Consultation, Behavioral Health. 63.5% of mothers referred to the WELLcome Home Healthy Start Home Visit completed the home visit. * Year 1 (October 1, 2018 - September 30, 2019) - Wolfson Children's Hospital team members assisted with condom demonstration for 7 schools educating 1,122 students. * Year 2 (October 1, 2019 - September 30, 2020) - Wolfson Children's Hospital team members assisted with condom demonstration for 17 school classes educating a total of 671 students. * Year 3 (October 1, 2020 - September 30, 2021) - Wolfson Children's Hospital team members assisted with condom demonstration for 1 school educating a total of 13 students. * Year 1 (October 1, 2018 - September 30, 2019) - THE PLAYERS Center for Child Health educators provided safe sleep education to 956 people at 21 community events - Safe Sleep messaging had a program reach of 220,026 media impressions - 136 sleep sacks and 116 pack and plays were distributed * Year 2 (October 1, 2019 - September 30, 2020) -</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 16	<p>A total of 417 individuals were educated on safe sleep - Distributed a total of 9 pack and plays and 9 sleep sacks - Attended a total of 15 community events - Had a total of 557,000 social media impressions - Participated in Sleep Baby Safely - a community initiative to help reduce infant mortality related to unsafe sleep. Funding was provided by DOH Florida. Every mom that birthed at one of the 9 birthing hospitals was given a "safety bag" along with education provided by the nurse before discharge. * Year 3 (October 1, 2020 - September 30, 2021) - Hosted virtual, in-person, and Spanish-speaking specific safe sleep classes - Organized 7 classes to educate individuals on safe sleep. - Distributed a total of 7 Pack N Plays - Had a total of 6,085 social media impressions on safe sleep practices and tips. - Developed new behavioral health services for new moms and dads - Outpatient: Baptist Behavioral Health received 981 maternal mental health referrals, of those referrals: 227 patients were served (Y1&2) 294 were scheduled (Y3) - Inpatient (maternity): Baptist Behavioral Health received 436 maternal mental health referrals, of those referrals, 384 patients were served - 38 clinicians trained in Pregnancy Emotional Health: Perinatal Mood and Anxiety Disorders - 64 clinicians trained in MNB Intensive: Care of the Postpartum Patient - 137 individuals participated in new mom support groups.</p>

Form 990 Part V Section C Supplemental Information for Part V, Section B.

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 17	<p>Facility A, 17 - Southern Baptist Hospital of Florida, Inc. (dba Baptist Medical Center South). Needs Baptist Medical Center South Will Not Address: No entity can address all of the health needs present in its community. Baptist Medical Center South is committed to serving the community by adhering to its mission, using its skills and capabilities, and remaining a strong organization so that it can continue to provide a wide range of community benefits. This plan does not include specific strategies to address the following health priorities that were identified in the 2018 Community Health Needs Assessment; however, each of these health needs will continue to be addressed through partnerships and ongoing initiatives: Poverty - This need is being addressed by other entities in Clay, Duval and St. Johns counties, including United Way of Northeast Florida, which is supported by Baptist Health. In addition, Baptist Health's Vice President of Community Investment and Impact actively participates in a community effort that includes businesses, city government and funders to end poverty in Jacksonville. Baptist Medical Center South does not anticipate implementing additional initiatives to address poverty. The hospital does not have sufficient resources to effectuate a significant change in this area, and believes resources devoted to its health plan should focus on other significant community health needs. Obesity and Physical Activity - Baptist Medical Center South through Baptist Health operates 8 Weeks to Healthy Living, a nutrition and physical activity program, in partnership with faith organizations and the YMCA. Baptist Health also operates Healthy Living Centers in YMCA locations and Heath Connexions in the Jewish Community Alliance, located in the Baptist Medical Center South service area. Community members, regardless of membership with the YMCA or JCA, receive screenings and health coaching through the centers. Baptist Medical Center South does not anticipate implementing additional initiatives to address obesity and physical activity. Given this long-term investment, the hospital will focus on other significant community health needs. Cancer - Baptist MD Anderson Cancer Center is part of the Baptist Medical Center South services. Baptist MD Anderson participates in outreach and education activities throughout Northeast Florida. Given this significant investment in cancer care and education in the Baptist Medical Center South service area, the hospital will focus on other significant community health needs. Vulnerable Populations - Baptist Medical Center South is addressing the vulnerable populations of children and African Americans through strategies to address its prioritized health needs of Access to Care, Behavioral Health and Maternal, Fetal and Infant Health. As such, Baptist Medical Center South will not develop additional strategies to address vulnerable populations.</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 18	<p>Facility A, 18 - Southern Baptist Hospital of Florida, Inc. (dba Wolfson Children's Hospital). Wolfson Children's Hospital: Although Wolfson Children's Hospital is able to play a direct role in addressing many health-related priorities, others will require the development of strategic partnerships with community service partners or involve the expertise of Wolfson Children's Hospital staff in the development of new and effective efforts that will be administered by other local community organizations. Regardless of the role Wolfson Children's Hospital will play in meeting needs, our organization remains committed to leading and supporting efforts that increase access to care and engage our patients in improving health and community wellbeing. All Community Health Plan efforts implemented by Wolfson Children's Hospital must be measurable, achievable and financially feasible. This report reflects the goals and strategic objectives identified to address community priorities within Wolfson Children's Hospital's influence and scope of service. Access to Care: In 2015, Baptist Health and Wolfson Children's Hospital established a goal to transform the health of children in our community. By improving access and increasing utilization of primary care services, we can improve health outcomes and reduce preventable ED visits and hospitalizations. Wolfson Children's Hospital aims to partner with community organizations in order to ensure that every child in Northeast Florida has healthcare. Research indicates that school-based health centers are an effective mechanism for providing health care to children and youth due to convenient access. In a December 2013 survey of Duval County Public Schools (DCPS) administrators, 86% of respondents had some need or a great need for health services in their school. Services identified as needed included vision, dental and overall health services. In consultation with DCPS, Ribault High School and Ribault Middle School were identified as the first sites to initiate health centers based on need, proximity to each other, and the existing presence of mental health services in the schools. Health services in Ribault High School and Ribault Middle School began in January of 2018. A community health center was also opened to increase access to all children under age 21 in the community. The health centers are operated by Sulzbacher Center, a Federally Qualified Health Center, with a pediatrician from UF Health Jacksonville. Full Service Schools will continue to provide mental health services and Wolfson will work in partnership with Full Service Schools and others to initiate additional programs and services aimed to impact the social determinants of health. Funding for these services is provided by Baptist Health, grants, donors and Medicaid revenue. Key Issues Identified in the Assessment: * For families a cross Wolfson Children's Hospital service area, access due to transportation and waiting times can be a major barrier to</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 18	family health. * Child food insecurity is high within Wolfson Children's Hospital service area.

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 19	<p>Facility A, 19 - Southern Baptist Hospital of Florida, Inc. (dba Wolfson Children's Hospital). Access to Care: Goal: Every Child in Northeast Florida has Health Care Strategies: * Continue operating health centers in schools in the Ribault and Raines feeder pattern in Duval County. * Provide enrollment assistance to children eligible for Florida KidCare. * Provide asthma education to children diagnosed with the chronic disease. * Partner with Children's Home Society, Clay Public Schools and Azalea Health to assess the feasibility of offering health services in the Clay County Community Schools and developing a plan if determined to be feasible. Metrics/What we are measuring: * Number of visits * Student health as measured through surveys * Number of children enrolled in Florida KidCare * Pre and post-test for knowledge gains * Number of children/adults educated * Feasibility of offering health services in Wilkinson Junior High and Keystone Heights Junior/Senior High Potential Partnering/External Organizations: * Sulzbacher Center * Department of Health - Duval * Duval County Public Schools * UF Health Jacksonville * Full Service Schools * St Vincent's Mobile Health outreach * Lutheran Services Florida Head Start * Clay County Public Schools * St Johns County Head Start * Children's Home Society Buckner Division * Azalea Health Results: * Year 1 (October 1, 2018 - September 30, 2019) - Opened Wolfson Children's School Health Centers on the Ribault High and Ribault Middle School campuses. 583 appointments provided between October 1st, 2018 and September 2019 - R.A.W. (Ribault Access & Wellness) the student advisory committee for the Wolfson Children's School Based Health at Ribault High School was established during this time. Its mission is to promote the health center, healthy living and well-being - Ribault Middle Health & Wellness Club (Healthtastic) is a middle school group that was established during this time to promote healthy living. This club was established to give students an opportunity to improve their overall health and wellness * Year 2 (October 1, 2019 - September 30, 2020) - Opened Wolfson Children's School Health Centers on the Ribault High campus. - Provided a total of 519 appointments at the Wolfson Children's School Health Center - R.A.W. (Ribault Access & Wellness) student advisory committee for the Wolfson Children's School Based Health was established to promote the health center, healthy living and well-being. During the 2019-2020 fiscal year, 17 students participated in the committee. 7 activities took place during this report period - Ribault Middle Health & Wellness Club (Healthtastic) is a middle school group established to promote healthy living. During the 2019-2020 fiscal year, 12 students participated. A total of 5 activities took place during this report period - With funding from Wolfson, 144 children received eye exams and glasses if needed - With funding from Wolfson, 88 children received speech and hearing services</p>

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 19	<p>ces - With funding from Baptist to community behavioral health organizations, 359 youth received mental health services * Year 3 (October 1, 2020 - September 30, 2021) - Provided a total of 670 appointments at the Wolfson Children's School Health Center. - R.A.W. (Ribault Access & Wellness) student advisory committee for the Wolfson Children's School Based Health Center hosted their 1st Inaugural Health Fair with a total of 7 vendors and over 100 attendees. - R.A.W. student advisory committee had 2 students participate on the Duval County Public Schools Mental Health Conference Panel. - R.A.W student advisory committee hosted 3 "R.A.W. Chats" for students covering the health educational topics of Adverse Childhood Experiences (ACES), LGBTQ+, and Health Disparities & COVID-19, bringing information to over 50 students. - Wolfson Children's Health Center held their first Future Medical Professionals of America meeting, with 16 student-members in participation. - R.A.W. student advisory committee surveyed 100 students on student health, health disparities, and COVID-19 Approximately 40% of students preferred receiving health information through browsing the web/internet Over 70% of students stated being sexually active, with approximately 70% practicing safe sex Over 50% of students surveyed cited not receiving the COVID-19 vaccine, stating "No, I don't trust it/it's not safe" or "No, my parents don't want me to get it." * Year 1 (October 1, 2018 - September 30, 2019) - Provided application assistance to 852 individuals from October 1st, 2018 to September 30th, 2019 - Participated in 67 health fairs and provided education to 6,631 individuals * Year 2 (October 1, 2019 - September 30, 2020) - Provided application assistance to a total of 840 individuals - Participated in a total of 83 events/health fairs and provided education to a total of 13,524 individuals - During 2020, promoted Flu vaccine shot in media with a total of 15 media posts and a total reach of 17,401 and 422 engagements - Held two "Access to Health Care" Facebook live series with YMCA Healthy Living Centers, JCA and Wolfson. The series had an outreach of 2,000 * Year 3 (October 1, 2020 - September 30, 2021) - Provided application assistance to a total of 983 individuals. - Participated in a total of 50 events/health fairs and provided education to a total of 6,276 individuals. - During 2021, promoted healthcare coverage, including dental and vision media, with a total of 36 media posts and a total reach of 27,888. * Year 1 (October 1, 2018 - September 30, 2019) - CAP-W provided education to 1,122 children and 780 adults. CAP-W care coordinated 64 newly identified high risk patients * Year 2 (October 1, 2019 - September 30, 2020) - CAP-W provided education to a total of 897 individuals. Increased knowledge gained for the 2018-2019 fiscal year was 5.6% - Identified a total of 35 high risk patients either through admissions or ED encounters - Patients in the High Risk Asthma program were f</p>

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Form and Line Reference	Explanation
<p>Schedule H, Part V, Section B, Line 11 Facility A, 19</p>	<p>ollowed for 12 months. Families received patient education materials and supplies needed for patient - HRA families were contacted quarterly for follow ups, and helped with insurance and scheduling appointments for allergies or pulmonology - PCP provider and school nurse were notified of enrollment of high risk patient; support and resources provided to school - Held "Pandemic Parenting: COVID: 19 and Asthma" Facebook Live event in partnership with Nemours. The event was viewed by more than 2,700 viewers and had 5,561 media impressions * Year 3 (October 1, 2020 - September 30, 2021) - CAP-W provided education to a total of 1,227 individuals. - Identified a total of 39 high risk patients either through admissions or ED encounters. Patients in the High Risk Asthma program were followed for 12 months. Families receive patient education materials and supplies needed for patient. HRA families were contacted quarterly for follow ups, and helped with insurance and scheduling appointments for allergies or pulmonology. PCP provider and school nurse were notified of enrollment of high risk patient; support and resources provided to school. - Assisted families with additional community resources, such as rent/utility, food, and legal assistance. - Ongoing support and resources for school health nurses for Baker, Clay, Duval, Nassau, and St. John's counties. * Year 1 (October 1, 2018 - September 30, 2019) - Actively participated in the Wilkinson Junior High School Community Partnership School Committee - Application assistance event at Wilkinson Junior High School planned for February * Year 2 (October 1, 2019 - September 30, 2020) - Actively participated in the Wilkinson Junior High School Community Partnership School Committee - Application assistance and enrollment events at Wilkinson Junior High School took place January 30th, 2019 and February 10th, 2020. Seven families were helped during the events - Provided access to free telehealth services with 5 appointments being used in Clay county and 3 in Nassau county * Year 3 (October 1, 2020 - September 30, 2021) * Actively participated in the Wilkinson Junior High School Community Partnership School Executive and Telehealth Committees * Application assistance and enrollment information were provided to Wilkinson Junior High School on August 5th, 2021. 100 individuals were talked to and provided enrollment information during the events.</p>

Form 990 Part V Section C Supplemental Information for Part V, Section B.

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 20	Facility A, 20 - Southern Baptist Hospital of Florida, Inc. (dba Wolfson Children's Hospital). Behavioral Health: Baptist Health has made behavioral health services a priority providing comprehensive inpatient and outpatient services. Mental Health was a priority health need addressed by Wolfson Children's Hospital in the last three-year CHNA cycle, and the focus on this health need continues into this CHNA cycle as behavioral health needs of children and youth in the Wolfson Children's Hospital service area continue to increase. Key Issues Identified in the Assessment: * Access to mental health providers for children and families in the region served by Wolfson Children's Hospital is a barrier * The opioid epidemic impacts the health of children in both the social environment and family life as well as their ability to access health care Duval Middle School - Suicide Youth Risk Behavior Survey: * Ever seriously thought about killing themselves: 25.9% * Ever made a plan about how they would kill themselves: 21.7% * Ever tried to kill themselves: 16.8% Duval High School - Suicide Youth Risk Behavior Survey: * Seriously considered attempting suicide: 20.8% * Made a serious plan to attempt suicide: 18.5% * Attempted Suicide: 18.8% * Felt hopeless or sad almost every day for two weeks in a row: 35.1%

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 21	<p>Facility A, 21 - Southern Baptist Hospital of Florida, Inc. (dba Wolfson Children's Hospital). Behavioral Health: Goal: Increase access to behavioral health services. Strategies: * Continue offering Mental Health First Aid, a proven best practice to reduce stigma of mental illness which increases the likelihood that people will access care. * Support implementation of Calm Classroom in Northeast Florida. * Provide funding to innovative efforts to reduce stigma, advocate for increased services and increase access to care. * Provide screenings of The Ripple Effect to reduce stigma, the screenings will include a local resource guide. Metrics/What we are measuring: * 3,000 people trained by 2021 * Evaluate participant satisfaction * Number of schools and organizations participating in Calm Classroom * Evaluation of implementation and results * Evaluate the impact of each initiative according to its focus * Number of participants at screenings Potential Partnering/External Organizations: * Jacksonville Nonprofit Hospital Partnership * National Council for Behavioral Health * Baptist Health Faith Partners * Florida's First Coast YMCA * Duval County Public Schools * Calm Classroom * BASCA * Early Learning Coalition of Duval * University of North Florida * North Florida School for Special Education * The Partnership for Mental Health: A project of Baptist Health and the Delores Barr Weaver Fund at The Community Foundation for Northeast Florida Results: * Year 1 (October 1, 2018 - September 30, 2019) - 528 people were trained October 1, 2018 - January 1, 2019 - 1,989 people were trained January 2, 2019 - September 30, 2019 98% of participants rated high satisfaction with training quality 96% of participants rated high satisfaction with training usefulness 99% of participants would recommend the training to others - Wolfson Children's Hospital offered 7 Youth Mental Health First Aid classes. The classes educated 79 community participants * Year 2 (October 1, 2019 - September 30, 2020) - 1,050 people were trained October 1, 2019 - September 30, 2020 98% of participants rated high satisfaction with training quality 99% of participants rated high satisfaction with training usefulness 95% of participants would recommend the training to others - 4 classes offered - Educated a total of 64 community participants, including DCPS and Fresh Ministries employees, UNF nursing students, and other community members - The overall impression of the course is 4.84 out of 5 - 100% of the participants would recommend the course to others * Year 3 (October 1, 2020 - September 30, 2021) - 15 Youth Mental Health First Aid classes were offered - 221 people were trained October 1, 2020 - September 30, 2021 * Year 1 (October 1, 2018 - September 30, 2019) - Calm Classroom was implemented in 33 schools in Duval County 91% of teachers rated the Calm Classroom program as successful 80% of teachers said their students were calmer and more peaceful after participating in Calm Classroom 60</p>

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 21	<p>% of teachers reported leading the Calm Classroom program 2 or more times per school day 7 3% of teachers reported students were more focused and learning ready due to Calm Classroom m techniques 61% of teachers reported seeing improvement in their classroom culture and climate * Year 2 (October 1, 2019 - September 30, 2020) - Calm Classroom was implemented in 124 schools in Duval County 95% of teachers rated the Calm Classroom program as successful 91% of teachers said their students were calmer and more peaceful after participating in Calm Classroom 92% of teachers reported that students enjoyed practicing Calm Classroom 87 % of teachers reported students were more engaged and learning ready due to Calm Classroom techniques 80% of teachers have reported that students were better able to regulate their emotions since beginning the program * Year 3 (October 1, 2020 - September 30, 2021) - Ca lm Classroom was implemented with Clay County Schools (specifically Exceptional Student Ed ucation students [25% of the student population]) 150 school facilitators and behavioral c oaches were provided Calm Classroom trainings * Year 1 (October 1, 2018 - September 30, 20 19) - The fund was established with \$2.2m. As of December 2019, 14 grants were made for a total of approximately \$900,000 * Year 2 (October 1, 2019 - September 30, 2020) - As of De cember 2020, 29 grants were made for a total of approximately \$1,452,000 - With funding fr om Baptist to community behavioral health organizations, 359 youth received mental health services * Year 3 (October 1, 2020 - September 30, 2021) - As of December 2021, 60 grants were made to 49 organizations for a total of approximately \$2,407,874. * Year 1 (October 1 , 2018 - September 30, 2019) - Wolfson Children's Hospital conducted two screenings of The Ripple Effect. A total of 26 individuals attended the screenings. The main purpose of the screenings was to enhance suicide prevention efforts in the communities where it was show n * Year 2 (October 1, 2019 - September 30, 2020) - Wolfson Children's Hospital did not co nduct screenings of The Ripple Effect. * Year 3 (October 1, 2020 - September 30, 2021) - W olfson Children's Hospital did not conduct screenings of The Ripple Effect due to COVID-19 .</p>

Form 990 Part V Section C Supplemental Information for Part V, Section B.

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Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 22	Facility A, 22 - Southern Baptist Hospital of Florida, Inc. (dba Wolfson Children's Hospital). Maternal, Fetal and Infant Health: Each year, approximately 17,500 babies are born in Northeast Florida. The health and wellbeing of the mothers, fathers and their babies is important to Baptist Health and Wolfson Children's Hospital. This health need continues to be a focus for Wolfson Children's Hospital due to the significant number of adverse outcomes in the hospital's service area. Key Issues Identified in the Assessment: * High rates of adverse outcomes in service area, such as preterm births, babies with low birth weight, infant mortality * Large proportion of mothers do not receive early prenatal care * Adverse birth outcomes are prevalent as a result of substance abuse among pregnant women * Based on secondary data indicators, Baker and Duval counties have the poorest health outcomes and health behaviors related to Maternal, Fetal and Infant health compared to the area served by Wolfson Children's Hospital

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
<p>Schedule H, Part V, Section B, Line 11 Facility A, 23</p>	<p>Facility A, 23 - Southern Baptist Hospital of Florida, Inc. (dba Wolfson Children's Hospital). Maternal, Fetal, and Infant Health: Goal: Decrease the number of preterm births, babies with low birth weight and infant mortality. Strategies: * Partner with the Northeast Florida Healthy Start Coalition to study the cause of every infant death in Northeast Florida in a 12-month period. * Partner with Northeast Florida Healthy Start Coalition to develop a community plan to reduce the number of infant deaths. * Offer Ready, Set, Sleep class focused on increasing awareness of safe sleep practices and CPR to expectant mothers. * Continue partnering with Duval County Public Schools to provide safe sex education through health curriculum. Metrics/What we are measuring: * Causes for infant deaths in Northeast Florida * Decrease in number of infant deaths * Measure pre and post-test knowledge gains * Number of participants to class * Number of students participating in classes Potential Partnering/External Organizations: * Northeast Florida Healthy Start Coalition * Florida Blue * UF Health Jacksonville * Jacksonville University * The Community Foundation for Northeast Florida * Florida Department of Health * Duval Healthy Start * UF Health Healthy Start * University of North Florida * Duval County Public Schools Results: * Year 1 (October 1, 2018 - September 30, 2019) - Actively participated in Fetal Infant Mortality Review meetings - Provided funding for an in-depth review of all 2019 infant deaths to develop a strategy to end infant mortality * Year 2 (October 1, 2019 - September 30, 2020) - Actively participated in Fetal Infant Mortality Review meetings - Provided funding for an in-depth review of all 2020 infant deaths resulting in a strategic plan to reduce infant mortality in Duval County - Provided funding to implement community health workers in OB offices to increase risk-screening completion rates, a key part of the strategic plan to reduce infant mortality in Duval * Year 3 (October 1, 2020 - September 30, 2021) - Actively participated in Fetal Infant Mortality Review meetings - Provided funding for an in-depth review of all 2021 infant deaths resulting in a strategic plan to reduce infant mortality in Duval County * Year 1 (October 1, 2018 - September 30, 2019) - Developed WELLcome Home visiting program which focused on newborn and maternal education for families who delivered at Baptist Medical Center Jacksonville and resided in Duval County. WELLcome Home was designed to provide mothers and families with educational resources, such as lactation support, postpartum emotional encouragement, home and car safety, and safe sleep practices - Implemented safe sleep policies in hospitals and education for new parents * Year 2 (October 1, 2019 - September 30, 2020) - Developed WELLcome Home visiting program focused on newborn and maternal education for families who delivered at South and resided in Duval County. WELLcome Home provided mothers and family</p>

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 23	<p>ies with educational resources, such as lactation support, postpartum emotional encouragement, home and car safety, and safe sleep practices. 743 calls placed, 356 were first time moms 491 mothers participated, 230 first time moms 157 mothers were referred or requested additional services Top three WELLcome Home participant zip codes 32210, 32218, 32207 - Baptist Health implemented a system-wide "Infant Safe Sleep" hospital policy no. 7.22.02, which follows the Safe Sleeping Guidelines established by the American Academy of Pediatrics . The purpose of the policy was to model and promote safe sleep practices for patients and visitors at Baptist Health - Baptist Health engaged in a Safe Sleep Initiative to train hospital staff in appropriate safe sleeping behaviors to model safe sleep practices in the hospital setting practices before parents and families return to their home environment - 521 maternal and newborn hospital staff members attended a Safe Sleep Demonstration training to identify safe and unsafe sleep practices, swaddling demonstrations, and patient education and correction * Year 3 (October 1, 2020 - September 30, 2021) - Continued WELLcome Home visiting program focused on newborn and maternal education for families who delivered at BMC-Jax and resided in Duval County. 1141 total calls placed 759 mothers participated, 374 first time moms Top three WELLcome Home participant zip codes 32210, 32218, 32207 - 347 mothers referred to additional services, such as WELLcome Home Healthy Start Home visit , Lactation Consultation, Behavioral Health. 63.5% of mothers referred to the WELLcome Home Healthy Start Home Visit completed the home visit. * Year 1 (October 1, 2018 - September 30, 2019) - THE PLAYERS Center for Child Health educators provided safe sleep education to 956 people at 21 community events - Safe Sleep messaging had a program reach of 220,026 media impressions - 136 sleep sacks and 116 pack and plays were distributed * Year 2 (October 1, 2019 - September 30, 2020) - A total of 417 individuals were educated on safe sleep - Distributed a total of 9 pack and plays and 9 sleep sacks - Attended a total of 15 community events - Had a total of 557,000 social media impressions - Participated in Sleep Baby Safely - a community initiative to help reduce infant mortality related to unsafe sleep. Funding was provided by DOH Florida. Every mom that birthed at one of the 9 birthing hospitals was given a "safety bag" along with education provided by the nurse before discharge . * Year 3 (October 1, 2020 - September 30, 2021) - Hosted virtual, in-person, and Spanish -speaking specific safe sleep classes - Organized 7 classes to educate individuals on safe sleep. - Distributed a total of 7 Pack N Plays - Had a total of 6,085 social media impressions on safe sleep practices and tips. * Year 1 (October 1, 2018 - September 30, 2019) - Wolfson Children's Hospital team members assisted with condom demonstration for 7 schools educating 1,122 students. * Year</p>

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 23	ar 2 (October 1, 2019 - September 30, 2020) - Wolfson Children's Hospital team members assisted with condom demonstration for 17 school classes educating a total of 671 students. * Year 3 (October 1, 2020 - September 30, 2021) - Wolfson Children's Hospital team members assisted with condom demonstration for 1 school educating a total of 13 students.

Form 990 Part V Section C Supplemental Information for Part V, Section B.

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 11 Facility A, 24	<p>Facility A, 24 - Southern Baptist Hospital of Florida, Inc. (dba Wolfson Children's Hospital). Needs Wolfson Children's Hospital Will Not Address: No entity can address all of the health needs present in its community. Wolfson Children's Hospital is committed to serving the community by adhering to its mission, using its skills and capabilities, and remaining a strong organization so that it can continue to provide a wide range of community benefits. This plan does not include specific strategies to address the following health priorities that were identified in the 2018 Community Health Needs Assessment; however, each of these health needs will continue to be addressed through partnerships and ongoing initiatives: Poverty - This need is being addressed by other entities in Northeast Florida, including United Way of Northeast Florida, which is supported by Baptist Health. In addition, Baptist Health's Vice President of Community Investment and Impact actively participates in a community effort that includes businesses, city government and funders to end poverty in Jacksonville. Wolfson Children's Hospital does not anticipate implementing additional initiatives to address poverty. The hospital does not have sufficient resources to effectuate a significant change in this area, and believes resources devoted to its health plan should focus on other significant community health needs. Obesity and Physical Activity - Wolfson Children's Hospital through THE PLAYERS Center for Child Health provides developmentally and age appropriate nutrition education to children in classroom and community based settings. In addition, Wolfson Children's Hospital provides support for the local Play 60 program, the NFL initiative that encourages 6th grade students to get 60 minutes of physical activity a day. Wolfson Children's Hospital does not anticipate implementing additional initiatives to address obesity and physical activity. Given this long-term investment, the hospital will focus on other significant community health needs. Cancer - Wolfson Children's Hospital partners with Nemours Children's Specialty Care to provide top-rated cancer care to children in Wolfson Children's Hospital's service area. Given this significant partnership and limited resources, Wolfson Children's Hospital has determined it is best to use its resources to address the prioritized health needs of Access to Care, Behavioral Health and Maternal, Fetal and Infant Health. Vulnerable Populations - Wolfson Children's Hospital is addressing the vulnerable populations of children and African Americans through strategies to address its prioritized health needs of Access to Care, Behavioral Health and Maternal, Fetal and Infant Health. As such, Wolfson Children's Hospital will not develop additional strategies to address vulnerable populations.</p>

Form 990 Part V Section C Supplemental Information for Part V, Section B.

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 1j, 3, 4, 5d, 6i, 7, 10, 11, 12i, 14g, 16e, 17e, 18e, 19c, 19d, 20d, 21, and 22. If applicable, provide separate descriptions for each facility in a facility reporting group, designated by "Facility A," "Facility B," etc.

Form and Line Reference	Explanation
Schedule H, Part V, Section B, Line 20 Facility A, 1	Facility A, 1 - Facility A. Charity or Discounted Care posters are located in the Emergency Rooms and Patient Admission areas to inform patients of financial assistance and who to contact regarding financial assistance. AT PATIENT ACCESS POINTS, "GUIDELINES FOR CHARITY CARE ELIGIBILITY" CARDS ARE PROVIDED THAT CONTAIN FINANCIAL DISCOUNT AND CHARITY CARE INFORMATION. THIS INCLUDES A GENERAL CHART OF ELIGIBLE INCOME LEVELS AND ENCOURAGES PATIENTS TO SPEAK WITH OUR PATIENT FINANCIAL ADVOCATES TO ARRANGE A FINANCIAL EVALUATION. All billing statements conspicuously display the phone number, address, and website which directs patients to our financial assistance advocates and contains all financial assistance information. ALL APPLICANTS FOR FINANCIAL ASSISTANCE ARE MAINTAINED WHETHER OR NOT THE PATIENT QUALIFIES. All attempts to contact the patient are exhausted before sending to collections. All patients are sent through a system that analyses the financial position of the individual. All patients who are scored a certain number in accordance with our policy and who have not already applied for financial assistance are automatically deemed eligible for financial assistance.

Note: To capture the full content of this document as Filed, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

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

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

Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Southern Baptist Hospital of Florida Inc

Employer identification number 59-0747311

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of noncash assistance, (h) Purpose of grant or assistance. Rows 1-12.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 21
3 Enter total number of other organizations listed in the line 1 table 1

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) THE ORGANIZATION PROVIDED SCHOLARSHIPS DURING THE TAX YEAR FOR APPROXIMATELY 15 RECIPIENTS WHO ARE QUALIFIED NURSING/MEDICAL STUDENTS, STUDENT APPLICANTS, CURRENT NURSES, OR MEDICAL PROFESSIONALS IN THE NORTHEAST FLORIDA REGION.	15	15,088			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
Schedule I, Part I, Line 2 Procedures for monitoring use of grant funds.	OUR COMMUNITY HEALTH EFFORTS ARE GUIDED BY THE ORGANIZATION'S COMMUNITY HEALTH COMMITTEE, COMPRISED OF SELECTED BAPTIST HEALTH SYSTEM, INC. (BHS) BOARD MEMBERS (BHS IS THE PARENT AFFILIATE OF THE ORGANIZATION). THE COMMITTEE PROVIDES STRATEGIC DIRECTION RELATED TO OUR COMMUNITY HEALTH ACTIVITIES AND ENSURES WE FOCUS ON KEY PRIORITIES THAT ALIGN WITH OUR MISSION.

Additional Data

Software ID: 20011424
Software Version: 2020v4.0
EIN: 59-0747311
Name: Southern Baptist Hospital of Florida Inc

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Jacksonville Sports Medicine Program Inc 3563 Philips Hwy Jacksonville, FL 32207	59-2997510	501(c)3	69,212				To support the youth safety program dedicated to youth sports injury prevention.
Boys and Girls Club of NE FL Inc 555 W 25th St Jacksonville, FL 32206	59-6167630	501(c)3	57,500				To inspire and enable all young people, especially those who need us most, to realize their full potential as productive, responsible and caring citizens.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Community Health Outreach 5126 Timuquana Rd Jacksonville, FL 32210	59-3038067	501(c)3	40,000				To provide a variety of services and tangible items for consumption to people who are living in temporary or permanent poverty situations.
Jacksonville Speech and Hearing Center Inc 1010 N Davis St Jacksonville, FL 32209	59-0970718	501(c)3	25,000				To provide the highest quality professional and compassionate care to ALL individuals with hearing, speech and/or language disorders in the community.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
2nd Mile Ministries Inc 1650 MARGARET ST STE 302 Jacksonville, FL 322043868	73-1715604	501(c)3	14,500				To seek to see the gospel renew lives and communities so they are transformed in every way.
IM Sulzbacher Center for the Homeless Inc 611 East Adam Street Jacksonville, FL 32202	59-3229898	501(c)3	267,317				TO EMPOWER HOMELESS AND AT RISK WOMEN, CHILDREN AND MEN THROUGH HEALTH, HOUSING AND INCOME SERVICES THEREBY RESTORING HOPE AND SELF-SUFFICIENCY.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Volunteers In Medicine Jacksonville Inc 41 E Duval St Jacksonville, FL 32202	75-3002172	501(c)3	75,000				To improve the health of the NE Florida community by providing free primary and limited specialty care to the working poor, who cannot afford health insurance or healthcare for themselves and their families.
Women's Center of Jacksonville Inc 5644 Colcord Ave Jacksonville, FL 32211	23-7437216	501(c)3	49,194				To improve the lives of women through advocacy, support and education and to provide services for individuals of all genders in Duval, Baker and Nassau Counties.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Young Men's Christian Association of Florida's First Coast Inc 40 E Adams St Jacksonville, FL 32202	59-0638514	501(c)3	25,000				To put christian principles into practice through programs that build healthy spirit, mind and body for all.
Blue Zones LLC 323 N Washington Ave 2nd Fl Minneapolis, MN 55401	27-1603327		200,000				To empower everyone, everywhere to live longer, better.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Northeast FL Healthy Start Coalition Inc 751 Oak St 610 Jacksonville, FL 32204	59-3139801	501(c)3	92,655				To establish and maintain a community-based prenatal and infant health care coalition that is comprised of persons representing the public, private sector, state and local government, providers, community alliances and maternal and child health organizations.
Year Up Inc 101 W State St 3001 Jacksonville, FL 32202	04-3534407	501(c)3	13,750				To close the opportunity divide by providing young adults with the skills, experience and support that will empower them to reach their adult potential through professional careers and higher education.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DLC Nurse and Learn Inc 4101 College St 1 Jacksonville, FL 32205	59-3618761	501(c)3	45,000				To provide year-round high quality education, nursing care and therapies to children of all abilities so that children and families have the opportunity to reach their maximum potential.
Planned Parenthood of South FL and the Treasure Coast Inc 5978 Powers Ave Jacksonville, FL 32217	59-1391115	501(c)3	10,000				To ensure all people have access to the care and resources they need to make informed decisions about their bodies, their lives, and their futures.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
United Way of NE FL Inc 40 E Adams St 200 Jacksonville, FL 32202	59-0637825	501(c)3	30,000				To solve the community's toughest challenges by connecting people, resources and ideas.
Youth Crisis Center Inc 3015 Parental Home Rd Jacksonville, FL 32216	59-2176287	501(c)3	15,000				To build a healthier community by empowering young people and families to rise above adversity.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Professional Resource Network Inc 1430 Piedmont Dr E Tallahassee, FL 32308	86-1171352	501(c)3	10,000				To Support impaired practitioner network assistance within the state of Florida.
Art with a heart in Healthcare Inc 841 Prudential Drive Jacksonville, FL 32207	26-1313805	501(c)3	104,167				TO PROVIDE PERSONALIZED FINE ART EXPERIENCES THAT ENHANCE THE HEALING PROCESS FOR PATIENTS AND THEIR FAMILIES.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Gateway Community Services Inc 555 Stockton Street Jacksonville, FL 32204	59-1881828	501(c)3	84,500				To provide rehabilitation services to individuals and their families who are suffering from alcoholism & drug abuse, regardless of their ability to pay.
Jacksonville Chamber Foundation Inc 3 Independent Dr Jacksonville, FL 32202	59-1867407	501(c)3	75,000				To promote quality economic development and growth in NE Florida.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Pie in the Sky Community Alliance Inc PO Box 600887 Jacksonville, FL 32260	27-0616592	501(c)3	10,000				To connect seniors with resources and facilitate long-term solutions that affect the lives of the elderly, the poor, the historically underserved, and the disenfranchised people in the community.
FLORIDA HEALTHCARE PARTNERSHIPS FOUNDATION INC 401 W 15TH STREET STE 840 AUSTIN, TX 78701	85-3682775	501(C)3	1,199,205				To promote health and the relief of the poor and distressed by improving access, availability and efficiency in the delivery of healthcare services to low-income residents in Florida.

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
Southern Baptist Hospital of Florida Inc

Employer identification number
59-0747311

Part I Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
<input type="checkbox"/>	First-class or charter travel	<input type="checkbox"/>	Housing allowance or residence for personal use
<input type="checkbox"/>	Travel for companions	<input type="checkbox"/>	Payments for business use of personal residence
<input type="checkbox"/>	Tax idemnification and gross-up payments	<input type="checkbox"/>	Health or social club dues or initiation fees
<input type="checkbox"/>	Discretionary spending account	<input type="checkbox"/>	Personal services (e.g., maid, chauffeur, chef)
b	If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?	2	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.		
<input type="checkbox"/>	Compensation committee	<input type="checkbox"/>	Written employment contract
<input type="checkbox"/>	Independent compensation consultant	<input type="checkbox"/>	Compensation survey or study
<input type="checkbox"/>	Form 990 of other organizations	<input type="checkbox"/>	Approval by the board or compensation committee
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a	Receive a severance payment or change-of-control payment?	4a	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a	The organization?	5a	No
b	Any related organization?	5b	No
	If "Yes," on line 5a or 5b, describe in Part III.		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a	The organization?	6a	No
b	Any related organization?	6b	No
	If "Yes," on line 6a or 6b, describe in Part III.		
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7	No
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	8	No
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	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 on 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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
Schedule J, Part I, Line 3 Arrangement used to establish the top management official's compensation	IN ACCORDANCE WITH THE EXECUTIVE COMPENSATION POLICY OF BAPTIST HEALTH SYSTEM, INC. (BHS), THE ORGANIZATION'S SOLE MEMBER, THE LEADERSHIP & COMPENSATION COMMITTEE (THE COMMITTEE) OF BHS (MADE UP OF INDEPENDENT DIRECTORS OF BHS) ANNUALLY ENGAGES A THIRD PARTY EXECUTIVE COMPENSATION CONSULTANT WHO PROVIDES COMPARABLES FOR EXECUTIVE COMPENSATION BASED ON CURRENT DATA REGARDING COMPENSATION PAID TO SIMILAR EXECUTIVES AT SIMILARLY-SITUATED TAX EXEMPT HEALTH SYSTEMS IN THE U.S. SUCH CONSULTANT USES THESE COMPARABLE HEALTH SYSTEMS, WHICH ARE GENERALLY THE SAME SIZE AS BHS (CONSIDERING REVENUE AND OTHER APPROPRIATE INDICATORS), TO ESTABLISH AN APPROPRIATE MARKET. WHEN THE COMMITTEE MEETS WITH SUCH CONSULTANT, THE CONSULTANT PROVIDES TO COMMITTEE MEMBERS EXECUTIVE COMPENSATION TARGET LEVELS THAT ARE COMPETITIVE WITH THE MARKET. GENERALLY, THE MEDIAN OF THE MARKET IS TARGETED. THE ACTUAL AMOUNT THAT BHS EXECUTIVES RECEIVE AS COMPENSATION MAY BE HIGHER OR LOWER THAN THE MEDIAN, DEPENDING ON BHS'S AND THE INDIVIDUAL'S PERFORMANCE. ONE OBJECTIVE OF THE COMMITTEE IS TO HAVE A STRONG LINK BETWEEN BHS AND INDIVIDUAL PERFORMANCE AND EXECUTIVE COMPENSATION SUCH THAT IF BHS AND THE INDIVIDUAL PERFORM AT AN OPTIMAL LEVEL, HIS OR HER COMPENSATION IS IN THE HIGHER RANGE OF THE MARKET. CONVERSELY, IF EITHER BHS OR INDIVIDUAL PERFORMANCE IS BELOW EXPECTATION, COMPENSATION MAY BE IN THE LOWER RANGE OF THE MARKET. OTHER FACTORS THAT INFLUENCE EXECUTIVE COMPENSATION RELATIVE TO THE MARKET INCLUDE THE EXECUTIVE'S EXPERIENCE AND BHS'S NEED TO ATTRACT AND RETAIN TOP EXECUTIVE TALENT. MINUTES OF THIS ANNUAL COMPENSATION REVIEW BY THE COMMITTEE ARE RECORDED BY SUCH CONSULTANT AND ARE APPROVED PROMPTLY BY THE CHAIR OF THE COMMITTEE.
Schedule J, Part I, Line 4b Supplemental nonqualified retirement plan	Baptist Health System, Inc. (BHS) parent affiliate of Southern Baptist Hospital of Florida, Inc., has three supplemental nonqualified retirement plans (SERPs). One is a SERP for certain executives, another is a defined benefit SERP for vice presidents, and the third is a defined contribution SERP for senior management. These SERPs are plans described in IRS Section 457(f). The benefits under these plans accrue during each executive's term of employment. These benefits are unvested and subject to forfeiture until the covered employee reaches retirement age. The following individuals accrued unvested benefits under these plans during calendar year 2020: Scott Wooten \$266,254, Nicole Thomas \$92,150, G. Scott Baity \$80,650, David V. Rice \$78,751, Cicely Brooks \$24,550, Matthew Zuino \$106,719, Brett McClung \$87,981, Lee Ann Mengel \$18,830, Elizabeth Ransom \$4,327, Cynthia Reynolds \$52,098, Mary Ellen Schopp \$2,674, Kyle Dorsey \$19,431 and Darin Roark \$63,385. These accrued benefits are unvested and subject to forfeiture unless the named employee remains employed with Southern Baptist Hospital of Florida, Inc. until the covered employee reaches retirement age. This amount is included on Schedule J, part II, column (c).

Additional Data

Software ID: 20011424
Software Version: 2020v4.0
EIN: 59-0747311
Name: Southern Baptist Hospital of Florida Inc

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 Brett S McClung	(i)	0	0	0	0	0	0	0
Former President/CEO (As of 5/1/21)	(ii)	1,115,539	546,850	346	97,474	21,215	1,781,424	0
1 Matthew A Zuino	(i)	0	0	0	0	0	0	0
EVP/COO	(ii)	623,552	164,686	0	118,119	18,199	924,556	0
2 Michael A Mayo DHA	(i)	571,422	285,900	13,385	16,388	27,098	914,193	0
SVP/President/CEO	(ii)	0	0	0	0	0	0	0
3 Keith L Stein MD	(i)	0	0	0	0	0	0	0
Former SVP/CMO (AS OF 5/4/20)	(ii)	289,377	200,000	114,446	54,990	11,789	670,602	0
4 John F Wilbanks	(i)	0	0	0	0	0	0	0
Former EVP/COO (AS OF 12/31/19)	(ii)	29,799	263,813	147,313	19,238	1,256	461,419	0
5 Scott M Wooten	(i)	0	0	0	0	0	0	0
EVP/CFO/Asst Treasurer	(ii)	745,199	189,001	15,577	279,792	8,802	1,238,371	0
6 Elizabeth R Ransom MD	(i)	0	0	0	0	0	0	0
EVP/CPE	(ii)	776,482	212,955	10,592	5,467	18,142	1,023,638	0
7 Michael A Aubin	(i)	599,406	304,595	10,385	16,388	28,216	958,990	0
SVP	(ii)	0	0	0	0	0	0	0
8 David Rice MD	(i)	0	0	0	0	0	0	0
SVP, CMO, CQO	(ii)	542,228	109,521	0	125,968	20,626	798,343	0
9 Nicole B Thomas	(i)	487,799	133,783	14,414	108,538	12,528	757,062	0
SVP	(ii)	0	0	0	0	0	0	0
10 G Scott Baity ESQ	(i)	0	0	0	0	0	0	0
SVP/General Counsel/Asst. Secretary	(ii)	476,950	89,217	0	127,282	11,714	705,163	0
11 Mary Ellen Schoop	(i)	0	0	0	0	0	0	0
SVP/CHRO	(ii)	522,534	128,340	24,250	3,433	19,298	697,855	0
12 Melanie J Husk	(i)	0	0	0	0	0	0	0
SVP/CCO	(ii)	408,917	136,447	10,385	19,238	15,299	590,286	0
13 Kyle M Dorsey	(i)	251,971	36,765	0	32,969	6,535	328,240	0
Interim SVP	(ii)	0	0	0	0	0	0	0
14 Jerry Bridgham MD	(i)	393,012	117,732	15,185	16,388	12,999	555,316	0
CMO - WCH	(ii)	0	0	0	0	0	0	0
15 Darin Roark	(i)	366,694	56,788	5,345	76,923	18,046	523,796	0
Hospital President, CLA	(ii)	0	0	0	0	0	0	0
16 Cicely Brooks	(i)	304,287	45,961	0	65,920	20,866	437,034	0
VP - Patient Care Services - BMC	(ii)	0	0	0	0	0	0	0
17 LeeAnn Mengel	(i)	319,808	47,865	0	35,218	12,657	415,548	0
VP & Admin BMDA Cancer Center	(ii)	0	0	0	0	0	0	0
18 Cynthia R Reynolds	(i)	183,309	0	146,707	58,944	7,527	396,487	0
SVP, Chief Philanthropy Officer	(ii)	0	0	0	0	0	0	0

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule K (Form 990)

Supplemental Information on Tax-Exempt Bonds

OMB No. 1545-0047

2020

Open to Public Inspection

▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization
Southern Baptist Hospital of Florida Inc

Employer identification number

59-0747311

Part I Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A JACKSONVILLE HEALTH FACILITIES AUTHORITY SERIES 2007B	59-2263061	469404UL9	12-01-2011	27,750,000	Hospital Revenue Bond to refund prior issue 02/22/2007.		X		X		X
B JACKSONVILLE HEALTH FACILITIES AUTHORITY SERIES 2012D	59-2263061	000000000	03-28-2011	40,000,000	Hospital Capital Improvements		X		X		X
C City of Jacksonville Florida Series 2017	59-6000344	469400CM5	08-15-2017	65,000,752	Revenue Refunding bonds to refund prior issue 02/22/2007.		X		X		X
D City of Jacksonville Florida Series 2019A	59-6000344	469400DW2	04-25-2019	70,005,185	Revenue Refunding Bonds to refund a prior issue 06/18/2003		X		X		X

Part II Proceeds

		A		B		C		D	
1	Amount of bonds retired	23,975,000		14,000,000		0		0	
2	Amount of bonds legally defeased	0		0		0		0	
3	Total proceeds of issue	27,750,000		40,000,000		65,000,752		70,005,185	
4	Gross proceeds in reserve funds	0		0		752		5,185	
5	Capitalized interest from proceeds	0		0		0		0	
6	Proceeds in refunding escrows	0		0		0		0	
7	Issuance costs from proceeds	0		0		0		0	
8	Credit enhancement from proceeds	0		0		0		0	
9	Working capital expenditures from proceeds	0		0		0		0	
10	Capital expenditures from proceeds	0		40,000,000		0		0	
11	Other spent proceeds	0		0		0		0	
12	Other unspent proceeds	0		0		0		0	
13	Year of substantial completion	2007		2012		2007		2003	
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue of tax-exempt bonds (or, if issued prior to 2019, a current refunding issue)?	X			X	X		X	
15	Were the bonds issued as part of an advance refunding issue of taxable bonds (or, if issued prior to 2019, an advance refunding issue)?		X		X		X		X
16	Has the final allocation of proceeds been made?	X		X		X		X	
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X	

Part III Private Business Use

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X		X		X
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X		X		X		X

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?	X		X		X		X	
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X		X		X		X	
c Are there any research agreements that may result in private business use of bond-financed property?		X		X		X		X
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶		0.01 %		0.01 %		0.01 %		0.01 %
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶		0 %		0 %		0 %		0 %
6 Total of lines 4 and 5		0.01 %		0.01 %		0.01 %		0.01 %
7 Does the bond issue meet the private security or payment test?	X		X		X		X	
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X		X		X
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of.								
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X		X		X		X	

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X		X		X
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X		X		X		X
b Exception to rebate?		X		X		X		X
c No rebate due?		X		X		X		X
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?	X		X		X		X	
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	X			X	X		X	
b Name of provider	WELLS FARGO							
c Term of hedge		1090 %						
d Was the hedge superintegrated?		X						
e Was the hedge terminated?	X							

Part IV Arbitrage (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		X		X
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X		X		X		X
7 Has the organization established written procedures to monitor the requirements of section 148?	X		X		X		X	

Part V Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X		X		X		X	

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. (See instructions).

Return Reference	Explanation
Schedule K, Part I, Column (c) Series 2019 BCDE	CUSIP #'s: 2019B: 469400DX0 2019C: 469400DY8 2019D: 469400DZ5 2019E: 469400EA9

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule K (Form 990)

Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Southern Baptist Hospital of Florida Inc

Employer identification number

59-0747311

Part I Bond Issues

Table with 10 columns: (a) Issuer name, (b) Issuer EIN, (c) CUSIP #, (d) Date issued, (e) Issue price, (f) Description of purpose, (g) Defeased (Yes/No), (h) On behalf of issuer (Yes/No), (i) Pool financing (Yes/No). Rows include City of Jacksonville Florida Series 2019BCDE and CITY OF JACKSONVILLE FLORIDA SERIES 2021AB.

Part II Proceeds

Table with 13 rows and 8 columns (A-D, Yes/No). Rows include amounts of bonds retired, legally defeased, total proceeds, and various expenditures. Includes questions 14-17 regarding bond issuance details.

Part III Private Business Use

Table with 2 rows and 8 columns (A-D, Yes/No). Questions 1 and 2 regarding partnership/LLC ownership and lease arrangements for bond-financed property.

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?	X		X					
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X		X					
c Are there any research agreements that may result in private business use of bond-financed property?		X		X				
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶		0.01 %		0.01 %				
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶		0 %		0 %				
6 Total of lines 4 and 5		0.01 %		0.01 %				
7 Does the bond issue meet the private security or payment test?	X		X					
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X				
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of.								
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X		X					

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X				
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X		X				
b Exception to rebate?		X		X				
c No rebate due?		X		X				
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?	X		X					
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X				
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								

Part IV Arbitrage (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X				
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X		X				
7 Has the organization established written procedures to monitor the requirements of section 148?	X		X					

Part V Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X		X					

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. (See instructions).

Schedule L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No. 1545-0047

2020

Open to Public Inspection

Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury Internal Revenue Service

Name of the organization Southern Baptist Hospital of Florida Inc

Employer identification number 59-0747311

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

Table with 5 columns: (a) Name of disqualified person, (b) Relationship between disqualified person and organization, (c) Description of transaction, (d) Corrected? (Yes/No)

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958. \$
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization. \$

Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

Table with 9 columns: (a) Name of interested person, (b) Relationship with organization, (c) Purpose of loan, (d) Loan to or from the organization (To/From), (e) Original principal amount, (f) Balance due, (g) In default? (Yes/No), (h) Approved by board or committee? (Yes/No), (i) Written agreement? (Yes/No)

Total \$

Part III Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

Table with 5 columns: (a) Name of interested person, (b) Relationship between interested person and the organization, (c) Amount of assistance, (d) Type of assistance, (e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) HARDEN & ASSOCIATES INC	DIRECTOR of filing organization	466,912	EMPLOYEE BENEFITS INSURANCE COMMISSIONS		No
(2) HARDEN & ASSOCIATES INC	DIRECTOR of filing organization	363,434	INSURANCE CONSULTING FEES		No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

Return Reference	Explanation

SCHEDULE O
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020**Open to Public Inspection**

Department of the Treasury

Name of the organization

Southern Baptist Hospital of Florida Inc

Employer identification number

59-0747311

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 6 Classes of members or stockholders	The organization has a sole corporate member, Baptist Health System, Inc.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 7a Members or stockholders electing members of governing body	The Board of Directors of Baptist Health System, Inc., the sole corporate member, of the organization, elects the members of the governing body of the organization.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 7b Decisions requiring approval by members or stockholders	The Board of Directors of Baptist Health System, Inc., the sole corporate member of the filing organization, has the right to remove Directors of the Organization and must approve any amendments to the governing documents of the Organization.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 11b Review of form 990 by governing body	Form 990 and accompanying schedules are prepared internally and then provided to Baptist Health System, Inc. who is the sole corporate member of Southern Baptist Hospital of Florida, Inc. The board of directors of Baptist Health System, Inc. are provided a copy of the form 990 and all accompanying schedules prior to filing with the internal revenue service center.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 12c Conflict of interest policy	THE BOARD OF DIRECTORS OF THE ORGANIZATION'S SOLE MEMBER, BAPTIST HEALTH SYSTEM, INC., HAS APPOINTED A CONFLICTS OF INTEREST COMMITTEE WHICH REGULARLY REVIEWS THE REQUIRED DISCLOSURES OF POTENTIAL CONFLICTS OF INTEREST BY THE DIRECTORS AND OFFICERS OF THE ORGANIZATION AND ITS AFFILIATES AND RECOMMENDS ANY ACTION TO BE TAKEN WITH REGARD TO SUCH DISCLOSURES. IN ACCORDANCE WITH THE CONFLICTS OF INTEREST POLICY, DURING MEETINGS OF THE ORGANIZATION'S GOVERNING BODY, A DIRECTOR WHO MAY HAVE A CONFLICT OF INTEREST IS EXCUSED FROM DISCUSSION BY THE GOVERNING BODY ABOUT ANY TRANSACTION OR MATTER THAT MAY HAVE GIVEN RISE TO THE DIRECTOR'S ACTUAL OR POTENTIAL CONFLICT OF INTEREST.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 15a Process to establish compensation of top management official	IN ACCORDANCE WITH THE EXECUTIVE COMPENSATION POLICY OF BAPTIST HEALTH SYSTEM, INC. (BHS), THE ORGANIZATION'S SOLE MEMBER, THE LEADERSHIP & COMPENSATION COMMITTEE (THE COMMITTEE) OF BHS (MADE UP OF INDEPENDENT DIRECTORS OF BHS) ANNUALLY ENGAGES A THIRD PARTY EXECUTIVE COMPENSATION CONSULTANT WHO PROVIDES COMPARABLES FOR EXECUTIVE COMPENSATION BASED ON CURRENT DATA REGARDING COMPENSATION PAID TO SIMILAR EXECUTIVES AT SIMILARLY-SITUATED TAX EXEMPT HEALTH SYSTEMS IN THE U.S. SUCH CONSULTANT USES THESE COMPARABLE HEALTH SYSTEMS , WHICH ARE GENERALLY THE SAME SIZE AS BHS (CONSIDERING REVENUE AND OTHER APPROPRIATE INDICATORS), TO ESTABLISH AN APPROPRIATE MARKET. WHEN THE COMMITTEE MEETS WITH SUCH CONSULTANT, THE CONSULTANT PROVIDES TO COMMITTEE MEMBERS EXECUTIVE COMPENSATION TARGET LEVELS THAT ARE COMPETITIVE WITH THE MARKET. GENERALLY, THE MEDIAN OF THE MARKET IS TARGETED. THE ACTUAL AMOUNT THAT BHS EXECUTIVES RECEIVE AS COMPENSATION MAY BE HIGHER OR LOWER THAN THE MEDIAN, DEPENDING ON BHS'S AND THE INDIVIDUAL'S PERFORMANCE. ONE OBJECTIVE OF THE COMMITTEE IS TO HAVE A STRONG LINK BETWEEN BHS AND INDIVIDUAL PERFORMANCE AND EXECUTIVE COMPENSATION SUCH THAT IF BHS AND THE INDIVIDUAL PERFORM AT AN OPTIMAL LEVEL, HIS OR HER COMPENSATION IS IN THE HIGHER RANGE OF THE MARKET. CONVERSELY, IF EITHER BHS OR INDIVIDUAL PERFORMANCE IS BELOW EXPECTATION, COMPENSATION MAY BE IN THE LOWER RANGE OF THE MARKET. OTHER FACTORS THAT INFLUENCE EXECUTIVE COMPENSATION RELATIVE TO THE MARKET INCLUDE THE EXECUTIVE'S EXPERIENCE AND BHS'S NEED TO ATTRACT AND RETAIN TOP EXECUTIVE TALENT. MINUTES OF THIS ANNUAL COMPENSATION REVIEW BY THE COMMITTEE ARE RECORDED BY SUCH CONSULTANT AND ARE APPROVED PROMPTLY BY THE CHAIR OF THE COMMITTEE.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 15b Process to establish compensation of other employees	All officers and key employees of the organization were included in the Executive Compensation policy described on Form 990, Part VI, Line 15a. This process is used to establish compensation for these individuals for each calendar year.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 19 Required documents available to the public	The organization makes its governing documents, conflict of interest policy, financial statements, and three most recent forms 990 available to the public upon request.

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VIII, Line 2f ALL OTHER PROGRAM SERVICE REVENUE	SEMINAR REVENUE - 611430: \$19,371

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VIII, Line 2f Other Program Service Revenue	SEMINAR REVENUE - Total Revenue: 19371, Related or Exempt Function Revenue: 19371, Unrelated Business Revenue: 0, Revenue Excluded from Tax Under Sections 512, 513, or 514: 0;

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part XI, Line 9 Other changes in net assets or fund balances	Transfers FROM affiliated organizations - -13893308;

990 Schedule O, Supplemental Information

Return Reference	Explanation
Page 1, Line C Doing Business as Name	Baptist Medical Center South, Baptist Medical Center Clay, Baptist Medical Center Jacksonville, Baptist MD Anderson Cancer Center, Baptist Emergency Town Center, Baptist Emergency Center North, Baptist Emergency Center Oakleaf, Baptist Emergency Center Clay, Wolfson Children's Hospital

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
Southern Baptist Hospital of Florida Inc

Employer identification number
59-0747311

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) Baptist Behavioral Health LLC 841 Prudential Dr Ste 1601 Jacksonville, FL 32207 46-4629700	Provide medical and healthcare services	FL	-4,655,317	2,199,711	Southern Baptist Hospital of Florida Inc

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(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	(g) Section 512 (b)(13) controlled entity?	
						Yes	No
(1) BAPTIST MEDICAL CENTER OF THE BEACHES INC 1350 13TH AVE S JACKSONVILLE BEACH, FL 32250 59-2980620	HOSPITAL	FL	501(c)(3)	3	BAPTIST HEALTH SYSTEM INC		No
(2) BAPTIST MEDICAL CENTER OF NASSAU INC 1250 S 18TH ST FERNANDINA BEACH, FL 32034 59-3234721	HOSPITAL	FL	501(c)(3)	3	BAPTIST HEALTH SYSTEM INC		No
(3) BAPTIST HEALTH SYSTEM INC 841 PRUDENTIAL DR STE 1602 JACKSONVILLE, FL 32207 59-2487136	Financial/management assistance for health system	FL	501(c)(3)	Type II	Coastal Community Health Inc		No
(4) BAPTIST HEALTH SYSTEM FOUNDATION INC 841 PRUDENTIAL DR 13TH FLR JACKSONVILLE, FL 32207 59-2487135	FUNDRAISING FOR tax-exempt entities controlled by BHS	FL	501(c)(3)	7	BAPTIST HEALTH SYSTEM INC		No
(5) BAPTIST HEALTH PROPERTIES INC 1660 Prudential Dr Ste 101 JACKSONVILLE, FL 32207 59-2487133	Owns/manages real estate properties for health system	FL	501(c)(3)	Type I	BAPTIST HEALTH SYSTEM INC		No
(6) BAPTIST HEALTH AMBULATORY SERVICES INC 1660 Prudential Dr Ste 203 JACKSONVILLE, FL 32207 59-3410739	Medical Research and Education	FL	501(c)(3)	Type I	BAPTIST HEALTH SYSTEM INC		No
(7) Coastal Community Health Inc 841 Prudential Dr Ste 1450 Jacksonville, FL 32207 47-1322041	Regional affiliation of BHS with 1 other 501(c)(3) healthcare system	FL	501(c)(3)	Type I	na		No

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 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) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) PAVILION ASSOCIATES LTD 841 Prudential Dr Ste 1602 JACKSONVILLE, FL 32207 59-2505491	NON-RESIDENTIAL PROPERTY MANAGEMENT	FL	SOUTHERN BAPTIST HOSPITAL OF FLORIDA INC	Excluded	147,413	0		No		Yes		98.5 %
(2) Corporate Health LLC 841 Prudential Dr Ste 1602 Jacksonville, FL 32207 82-0790996	Development/ operation of a medically-based wellness program for the northeast Florida community	FL	Baptist Health Ambulatory Services Inc	N/A								
(3) BAYBAP LLC 3563 PHILIPS HIGHWAY STE 202 JACKSONVILLE, FL 32207 85-3852455	HOME HEALTH	FL	PAVILION HEALTH SERVICES INC	N/A								

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.

(a) Name, address, and EIN of related organization	(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	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(1) PAVILION HEALTH SERVICES INC 1660 Prudential Dr STE 203 JACKSONVILLE, FL 32207 59-2059710	PHYSICIAN PRACTICES	FL	BAPTIST HEALTH SYSTEM INC	C Corporation					No
(2) Baptist Specialty Physicians Inc 1660 Prudential Dr Ste 203 Jacksonville, FL 32207 86-1126946	Physician Practices	FL	Southern Baptist Hospital of Florida Inc	C Corporation	-8,632,000	403,000	100 %		No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		No
b	Gift, grant, or capital contribution to related organization(s)		No
c	Gift, grant, or capital contribution from related organization(s)	Yes	
d	Loans or loan guarantees to or for related organization(s)		No
e	Loans or loan guarantees by related organization(s)		No
f	Dividends from related organization(s)		No
g	Sale of assets to related organization(s)		No
h	Purchase of assets from related organization(s)		No
i	Exchange of assets with related organization(s)		No
j	Lease of facilities, equipment, or other assets to related organization(s)		No
k	Lease of facilities, equipment, or other assets from related organization(s)	Yes	
l	Performance of services or membership or fundraising solicitations for related organization(s)		No
m	Performance of services or membership or fundraising solicitations by related organization(s)	Yes	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	Yes	
o	Sharing of paid employees with related organization(s)	Yes	
p	Reimbursement paid to related organization(s) for expenses	Yes	
q	Reimbursement paid by related organization(s) for expenses	Yes	
r	Other transfer of cash or property to related organization(s)	Yes	
s	Other transfer of cash or property from related organization(s)	Yes	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

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	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R. (see instructions).

Return Reference	Explanation