

Detailed Application for Property Tax Exemption Under G.S. 105-

A facility may be granted a total exclusion under Section 1, G.S. 105-278.6A, (c), provided that conditions (1) through (5) are met AND condition (6) a. OR (6) b. is met.

If the facility qualifies under (6) a. AND meets conditions (1) through (5), check this box to obtain a total exemption. Only complete identifying information and signature. Do not complete the rest of the form. (Provide relevant documentation.)

If the facility qualifies under (6) b. AND meets conditions (1) through (5), complete the rest of the form below.

Provide all relevant attachments as noted under each category.

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FEB 04 2009

NC MEDICAL CARE COMMISSION

REVENUE

Total Resident Revenue - As Disclosed in Most Recent Audited Financial Statement

(Includes all monthly service fees, fee for service charges, amortized entry fee income for the year, and any fees collected that would not otherwise be amortized into income for the year associated with living in the facility. Excludes investment income, contributions and income from non-resident sources.) Attach Relevant Sections of Most Recent Audited Financial Statements.

SEE STATEMENT 1 (1) 9,786,524

CHARITY CARE

(A) Unreimbursed Health Care

(From Medicare/Medicaid or Third Party cost reports, internal resident assistance data certified by the facility or audited financial statements which show amount of unreimbursed costs) Attach Applicable Pages of Cost Reports

(B) Unreimbursed Housing and Services

(From internal assistance reports (Lyons software or spreadsheet) certified by the facility and/or audited statements which show amount of unreimbursed costs and/or as disclosed in most recent audited financial statement)

Total Charity Care SEE STATEMENT 2 (2) 1,972,910

COMMUNITY BENEFITS

(Amounts claimed are to be taken from audited financial statements which either footnote the amount or disclose the amount in the statement of operations as a line item and/or can be taken from documented receipt letters from entities receiving the service, donation or volunteer service, and/or as documented in the Lyons Software or similar spreadsheet program certified by the facility. The amounts are limited to actual expenses incurred by the facility to perform the service or provide the donation.)

(A) Services

(Verifiable unreimbursed expenses incurred by the facility to provide health, recreation, community research, and education activities to the community at large, including the elderly - DOES NOT include resident volunteer time.)

(B) Charitable Donations

(Actual cash outlay or equivalent dollar amount of donated items originally acquired by the facility and documented in facility community benefit report (Lyons software or spreadsheet and/or noted in audited financial statements.)

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NC MEDICAL
CARE COMMISSION

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SEE STATEMENT 1

(1) 9,786,524

CHARITY CARE

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Total Charity Care

SEE STATEMENT 2

(2) 1,972,910

COMMUNITY BENEFITS

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(C) Donated Volunteer Services

(Cost to the facility for allowing employees to volunteer in community service projects or organizations and/or actual unreimbursed facility material, space and volunteer time as documented based on wages paid by the facility for the volunteer during the service period/project)

(D) Donations and Voluntary Payments to Government Agencies

(Amounts to be taken from Receipted donations/payments from government agency receiving donation/payment when the facility would otherwise not have to pay the agency – goodwill.)

Total Community Benefits SEE STATEMENT 3 (3) 0

Total Community Benefits and Charity Care (2) + (3) (4) 1,972,910

Percentage of Resident Revenue

Total Community Benefits and Charity Care Divided by (4) 1,972,910
Total Resident Revenue (1) 9,786,524

Percentage of Resident Revenue (4) divided by (1) 20.16 %

Exclusion Percentage Based on Percent of Resident Revenue Above

% of Revenue	Exclusion %	
5%	100%	
4%	80%	
3%	60%	
2%	40%	
1%	20%	
		Exclusion % <u>100%</u>

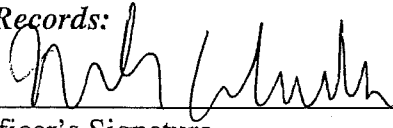
Facility

Name MASONIC AND EASTERN STAR HOME OF NC County GUILFORD

Facility

Address 700 S. HOLDEN ROAD; GREENSBORO, NC 27407

By Signing Below We Hereby Certify the Information Stated Above is Correct and True as Supported by Our Financial and Facility Records:

 Date 1/30/09

Officer's Signature

(Exhibit A)

**North Carolina Medicare Care Commission
Executive Summary of the CCRCs Community Improvement Relationships
Continuing Care Retirement Community (CCRC)**

Organization: MASONIC AND EASTERN STAR HOME OF NC Date: 1/28/09

1. Statement of the CCRCs mission and commitment to charity care/community benefit.

SEE STATEMENT 4

2. Describe geographic service area and target populations for community benefits.

SEE STATEMENT 4

3. Describe the relationships with agencies and organization with in the community.

SEE STATEMENT 4

4. List current community benefit programs.

SEE STATEMENT 4

**Masonic and Eastern Star Home
NC Medical Care Commission - Reporting for Community Improvement
and Charity Care/Community Benefit by a CCRC Form
For the Year Ending December 31, 2007**

Statement 1 - Total Resident Revenue Computation

Resident Services Revenue	1,928,206
Net Patient Health Care Revenue	5,311,429
Amortization of Advanced Fees	1,034,625
Add Back Contractual Adj. and Benevolent Support	1,512,264
Total Resident Revenue	<u><u>9,786,524</u></u>

Statement 2 - Total Charity Care Computation

Contractual Adjustments and Benevolent Support	1,512,264
Bad Debt	<u>460,646</u>
Total Charity Care	<u><u>1,972,910</u></u>

Statement 3 - Community Benefits Computation

Non-Cash Contributions	0
Volunteer Services	<u>0</u>
Total Charity Care	<u><u>0</u></u>

**Masonic and Eastern Star Home
NC Medical Care Commission - Reporting for Community Improvement
and Charity Care/Community Benefit by a CCRC Form
For the Year Ending December 31, 2007**

Note pertaining to Statements 1 and 2

Following this page we have provided the relevant pages of MESH's audited financial statements and the program revenue that pertain to both statements.

**Masonic and Eastern Star Home
Executive Summary of the CCRC's Community Improvement Relationships**

1. The mission of the Masonic and Eastern Star Home is to provide a nurturing home where order, truth, love, and happiness and security are evident. Each resident will have the opportunity to observe and participate in a spiritual, moral, and culturally enriching lifestyle. MESH has established a charitable endowment fund, the income of which may be used to assist financially restricted residents.
2. Geographic service area includes but is not limited to all of North Carolina. Primary target population includes Masonic and Eastern Star members within Guilford County.
3. MESH works with several local and statewide Masonic Lodges and Eastern Star chapters to provide lodging and financial support to members who cannot afford MESH otherwise.
4. MESH charitable endowment fund. MESH has established a charitable endowment fund, the income of which may be used to assist residents who would otherwise not be able to afford to live at the home.