Year 1 Information: (Year 2 information will be updated once enrollment for Year 2 is complete)

Name of the Health Care-Related Provider Tax / Assessment (enter each on a separate line)	Identify the permissible class for this tax / assessment	Is the tax / assessment broad- based?	Is the tax / assessment uniform?	Is the tax / assessment under the 6% indirect hold harmless limit?	If not under the 6% indirect hold harmless limit, does it pass the "75/75" test?	Does it contain a hold harmless arrangement that guarantees to return all or any portion of the tax payment to the tax payer?
Bell County	Inpatient Hospital Services	Yes	Yes	Yes	N/A	No
Dallas County	Inpatient Hospital Services	Yes	Yes	Yes	N/A	No
Nueces County Hospital District	Inpatient Hospital Services	Yes	Yes	Yes	N/A	No
Smith County	Inpatient Hospital Services	Yes	Yes	Yes	N/A	No
Tarrant County	Inpatient Hospital Services	Yes	Yes	Yes	N/A	No
Lubbock County Hospital	Inpatient Hospital Services	Yes	Yes	Yes	N/A	No
Bexar County Hospital District	Inpatient Hospital Services	Yes	Yes	Yes	N/A	No
Harris County Hospital District	Inpatient Hospital Services	Yes	Yes	Yes	N/A	No
El Paso County Hospital District	Inpatient Hospital Services	Yes	Yes	Yes	N/A	No