

Children's Hospital Medical Center and Affiliates

Title 2 U.S. Code of Federal Regulations
Part 200 (Uniform Guidance) Reports for the
Year Ended June 30, 2024

CHILDREN'S HOSPITAL MEDICAL CENTER AND AFFILIATES

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INDEPENDENT AUDITOR'S REPORT

To the Board of Trustees
Children's Hospital Medical Center and Affiliates
Cincinnati, Ohio

Report on the Audit of the Financial Statements

Opinion

We have audited the consolidated financial statements of Children's Hospital Medical Center and Affiliates (the "Company"), which comprise the consolidated balance sheets as of June 30, 2024 and 2023, and the related consolidated statements of operations and changes in net assets, and cash flows for the years then ended, and the related notes to the consolidated financial statements (collectively referred to as the "financial statements").

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Company as of June 30, 2024 and 2023, and the results of its operations and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS) and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States (*Government Auditing Standards*). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Company and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Company's ability to continue as a going concern for one year after the date that the financial statements are issued.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS and *Government Auditing Standards* will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS and *Government Auditing Standards*, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Company's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Company's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated September 30, 2024 on our consideration of the Company's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Company's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Company's internal control over financial reporting and compliance.

Deloitte + Touche LLP

September 30, 2024

Children's Hospital Medical Center and Affiliates

Consolidated Balance Sheets

June 30, 2024 and 2023 (dollars in thousands)

	2024	2023
CURRENT ASSETS:		
Cash and cash equivalents	\$ 189,507	\$ 200,381
Marketable securities	1,335,526	1,298,639
Cash, cash equivalents and marketable securities	1,525,033	1,499,020
Patient receivables, net	704,875	588,455
Other receivables	236,163	165,009
Inventories and prepaid expenses	93,336	86,765
Total current assets	2,559,407	2,339,249
ASSETS LIMITED AS TO USE - Funds in trust	40,186	36,482
PROPERTY AND EQUIPMENT, net of accumulated depreciation	1,650,130	1,556,549
GOODWILL	5,579	6,437
OPERATING LEASE RIGHT-OF-USE ASSETS	20,696	15,926
PENSION BENEFIT ASSET	132,504	185,998
OTHER LONG-TERM ASSETS	126,626	92,995
INTEREST IN NET ASSETS OF SUPPORTING ORGANIZATIONS	5,527,851	4,869,148
Total assets	<u>\$ 10,062,979</u>	<u>\$ 9,102,784</u>
CURRENT LIABILITIES:		
Accounts payable and accrued expenses	\$ 532,445	\$ 483,353
Current portion of long-term debt and lease obligations	20,063	18,856
Commercial paper	100,000	100,000
Bonds payable subject to remarketing, net	70,023	78,270
Total current liabilities	722,531	680,479
SELF-INSURANCE RESERVES	17,443	31,020
LONG-TERM DEBT:		
Tax-exempt bonds payable	301,036	315,187
Taxable bonds payable	596,637	596,407
Finance lease obligations	41,202	48,275
Operating lease obligations	18,484	13,439
OTHER LONG-TERM LIABILITIES	15,283	15,095
Total liabilities	1,712,616	1,699,902
COMMITMENTS AND CONTINGENCIES (Note 11)	-	-
NET ASSETS:		
Without donor restrictions	2,602,373	2,310,909
With donor restrictions	5,747,990	5,091,973
Total net assets	8,350,363	7,402,882
Total liabilities and net assets	<u>\$ 10,062,979</u>	<u>\$ 9,102,784</u>

See accompanying notes to Consolidated Financial Statements.

Children's Hospital Medical Center and Affiliates

Consolidated Statements of Operations and Changes in Net Assets
For the Years Ended June 30, 2024 and 2023 (dollars in thousands)

	2024	2023
OPERATING REVENUES, GAINS AND OTHER SUPPORT:		
Net patient service revenue	\$ 2,765,941	\$ 2,508,408
Net assets released from restriction used for operations-		
Grant revenue	254,163	247,146
Other restricted net assets used to support operations	160,880	139,133
Other revenue	196,719	207,854
Total operating revenues, gains and other support	3,377,703	3,102,541
OPERATING EXPENSES:		
Salaries	1,668,703	1,510,665
Employee benefits	431,024	388,496
Supplies, drugs and other	599,215	570,020
Purchased services	376,866	339,535
Depreciation and amortization	152,764	149,767
Utilities	22,028	21,615
Interest	32,860	32,531
Total operating expenses	3,283,460	3,012,629
Operating income	94,243	89,912
NONOPERATING GAINS:		
Net investment return	127,935	42,160
Net benefit gain other than service cost	37,863	14,674
Net nonoperating gains	165,798	56,834
Revenue and gains in excess of expenses	260,041	146,746
OTHER CHANGES IN NET ASSETS WITHOUT DONOR RESTRICTIONS:		
Receipts and receipts due from supporting organizations	53,292	3,272
Net assets released from restrictions used for purchase of property and equipment	21,585	12,844
Consolidation of sole member entity	4,017	-
Transfers to supporting organizations	(4,185)	(3,269)
Pension and post-retirement health liability adjustment	(43,286)	(61,577)
Increase in net assets without donor restrictions	\$ 291,464	\$ 98,016

(Continued on next page)

Children's Hospital Medical Center and Affiliates

Consolidated Statements of Operations and Changes in Net Assets
For the Years Ended June 30, 2024 and 2023 (dollars in thousands)

	<u>2024</u>	<u>2023</u>
NET ASSETS WITH DONOR RESTRICTIONS:		
Contributions and investment income-		
Grant receipts	\$ 255,744	\$ 247,837
Gifts and contributions of financial assets and other income	176,011	160,507
	<u>431,755</u>	<u>408,344</u>
Net assets released from restriction-		
Grant expenditures	(254,163)	(247,146)
Net assets with donor restrictions used to support operations	(160,880)	(139,133)
Net assets with donor restrictions used for purchase of property and equipment	(21,585)	(12,844)
	<u>(436,628)</u>	<u>(399,123)</u>
Gain in interest in net assets of supporting organizations	658,703	406,357
Consolidation of sole member entity	2,187	-
Increase in net assets with donor restrictions	<u>656,017</u>	<u>415,578</u>
INCREASE IN NET ASSETS	947,481	513,594
NET ASSETS, beginning of year	<u>7,402,882</u>	<u>6,889,288</u>
NET ASSETS, end of year	<u>\$ 8,350,363</u>	<u>\$ 7,402,882</u>

See accompanying notes to Consolidated Financial Statements.

Children's Hospital Medical Center and Affiliates

Consolidated Statements of Cash Flows

For the Years Ended June 30, 2024 and 2023 (dollars in thousands)

	2024	2023
CASH FLOWS FROM OPERATING ACTIVITIES:		
Increase in net assets	\$ 947,481	\$ 513,594
Adjustments to reconcile increase in net assets to net cash provided by operating activities-		
Depreciation and amortization	151,914	149,340
Loss on disposal of property and equipment	752	1,031
Proceeds from sale of donated securities	466	874
Receipts from supporting organizations	(3,292)	(3,272)
Contributions of financial assets to supporting organizations	4,185	3,269
Contributions of financial assets restricted for purchase of property and equipment	(21,585)	(12,844)
Gain in interest in net assets of supporting organizations	(658,703)	(406,357)
Unrealized and realized gains on marketable securities, net	(84,076)	(1,288)
Loss (gain) on interest rate swap	1,013	(1,182)
Increase in receivables	(187,574)	(99,774)
Increase in inventories and prepaid expenses and other assets	(41,215)	(25,841)
Decrease in pension benefit asset	53,494	95,045
Increase in accounts payable and accrued expenses, net	33,818	7,833
Decrease in operating lease obligations	(3,062)	(2,847)
(Decrease) increase in self-insurance reserves and other long-term liabilities	(4,889)	1,354
Net cash provided by operating activities	188,727	218,935
CASH FLOWS FROM INVESTING ACTIVITIES:		
Expenditures for property and equipment	(239,464)	(257,602)
Purchases of marketable securities	(1,079,864)	(944,601)
Sales and maturities of marketable securities	1,126,586	905,586
Cash withdrawn from funds in trust	3,620	5,813
Cash invested in funds in trust	(8,673)	(9,427)
Net cash used in investing activities	(197,795)	(300,231)
CASH FLOWS FROM FINANCING ACTIVITIES:		
Issuance of bonds and notes payable	66,155	-
Repayment of bonds, notes payable, and finance lease obligations	(90,002)	(23,938)
Contributions restricted for purchase of property and equipment	21,585	12,844
Receipts from supporting organizations	3,292	3,272
Contributions to supporting organizations	(4,185)	(3,269)
Net cash used in financing activities	(3,155)	(11,091)
Net decrease in cash, cash equivalents, and restricted cash	(12,223)	(92,387)
CASH, CASH EQUIVALENTS, AND RESTRICTED CASH, beginning of year	209,959	302,346
CASH, CASH EQUIVALENTS, AND RESTRICTED CASH, end of year	\$ 197,736	\$ 209,959
SUPPLEMENTAL DISCLOSURE OF NON-CASH INVESTING ACTIVITIES:		
Capital expenditures in accounts payable and accrued expenses	\$ 36,409	\$ 29,635
Acquisition of property through finance leases	-	7,192
Acquisition of property through operating leases	7,897	1,540

See accompanying notes to Consolidated Financial Statements.

Children's Hospital Medical Center and Affiliates

Consolidated Financial Statements

For the Years Ended June 30, 2024 and 2023, respectively (dollars in thousands)

(1) Accounting Policies –

- (a) Basis of Consolidation – Children's Hospital Medical Center (Cincinnati Children's), River City Insurance Limited (River City), CHMC Community Health Services Network (CHSN), HealthVine LLC (HealthVine), Every Child Succeeds (ECS), and other investment holding entities are included in the accompanying Consolidated Financial Statements and are collectively referred to as Cincinnati Children's. The previously named entities are all wholly own subsidiaries of Cincinnati Children's whose intercompany transactions and balances have been eliminated.

Cincinnati Children's is an Ohio not-for-profit corporation providing pediatric healthcare services, education, and research. River City is a captive insurance company. CHSN's purpose is to manage primary care practices in a community setting. HealthVine supports the population health and care coordination initiatives of Cincinnati Children's. ECS is a not-for-profit organization designed to optimize child development for first-time, at-risk mothers.

Effective August 2023, Cincinnati Children's became the sole member of ECS with no consideration paid. Consequently, Cincinnati Children's assumed the fair value of assets of \$7,920 and the fair value of associated liabilities of \$1,716 resulting in an increase in Net assets without donor restrictions of \$4,017 and an increase in Net assets with donor restrictions of \$2,187.

- (b) Supporting Organizations – The Children's Hospital (TCH) and Convalescent Hospital Fund for Children (CHFC) are both Ohio not-for-profit corporations that provide financial support to Cincinnati Children's. The TCH and CHFC purpose clauses both specify the support of Cincinnati Children's as the organization's sole purpose. Additionally, certain endowment funds of these supporting organizations are restricted by the donors for specific operating purposes of Cincinnati Children's. As such, the assets of TCH and CHFC are recorded in Cincinnati Children's Consolidated Financial Statements as Interest in net assets of supporting organizations and as Net assets with donor restrictions. Changes in the fair value of Interest in net assets of supporting organizations are recorded as a Gain in interest in net assets of supporting organizations in the accompanying Consolidated Statements of Operations and Changes in Net Assets.

The majority of receipts are from TCH and CHFC donor-restricted endowment funds or are other receipts that are designated by the supporting organizations' Boards of Trustees for specific operating purposes. The receipts are reflected in Gifts and contributions of financial assets and other income with donor restrictions in the accompanying Consolidated Statements of Operations and Changes in Net Assets. Upon spending, such funds are reflected in Other restricted net assets used to support operations in the Consolidated Statements of Operations and Changes in Net Assets.

Other receipts from TCH are designated by the supporting organization's Board of Trustees to provide general support. The receipts are reflected in Receipts and receipts due from supporting organizations without donor restriction in the accompanying Consolidated Statements of Operations and Changes in Net Assets.

- (c) Support Received from Supporting Organizations – TCH and CHFC provide annual support to Cincinnati Children's through transfers of dividend and interest earnings on investments, net of investment management fees, administrative expenses, and donor-required income reinvestments.

The supporting organizations' respective Boards of Trustees may also make certain pledges of principal without donor restriction in support of key projects or initiatives at Cincinnati Children's. In January 2020, CHFC's Board of Trustees made a gift in the amount of \$36,000 to support the

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construction of a new facility at the College Hill Campus and programmatic support of Cincinnati Children's *Pursuing our Potential in Mental Health* initiative. The agreement has certain criteria that represent donor-imposed conditions that must be overcome before Cincinnati Children's is entitled to the assets promised. Contributions of \$10,000 were made for each of the years ended June 30, 2024 and June 30, 2023. The receipts are reflected in Gifts and contributions of financial assets and other income with donor restrictions and in Net assets released from restrictions used for purchase of property and equipment in the Consolidated Statements of Operations and Changes in Net Assets.

During fiscal year 2024, TCH's Board of Trustees approved a request from Cincinnati Children's for \$200,000. This represents a return of funds previously transferred to TCH from Cincinnati Children's Net assets without donor restrictions. The commitment will be distributed over four years in the amount of \$50,000 each year and is intended to support research capital projects. The first \$50,000 distribution was approved by TCH's Board of Trustees prior to June 30, 2024, and the transfer was made subsequent to year-end. At June 30, 2024, the transaction was recorded as an Other receivable and as a Receipt due from supporting organizations without donor restrictions. The remainder of the commitment is revocable at the discretion of TCH's Board of Trustees, and therefore a receivable is not recorded to the Consolidated Balance Sheet for such amounts.

The following table details transfers between Cincinnati Children's and Supporting Organizations in the Consolidated Statements of Operations and Changes in Net Assets:

	2024	2023
Transfers of net assets with donor restrictions included in		
Gifts and contributions of financial assets and other income:		
Cincinnati Children's from TCH	\$ 125,215	\$ 116,861
Cincinnati Children's from CHFC	16,360	15,585
Total	<u>\$ 141,575</u>	<u>\$ 132,446</u>
Transfers of net assets without donor restrictions included in		
Receipts from (Transfers to) supporting organizations:		
Cincinnati Children's from TCH	\$ 3,292	\$ 3,272
Cincinnati Children's due from TCH	50,000	-
Cincinnati Children's to TCH (1)	(4,185)	(3,269)
Total	<u>\$ 49,107</u>	<u>\$ 3</u>

(1) The purpose of this transfer is to establish funds designated to support divisional activities and strategic priorities.

(d) **Revenue Recognition** – The following revenue streams are subject to the revenue recognition guidance in Accounting Standards Codification No. 606 (ASC 606) "Revenue from Contracts with Customers":

	2024	2023
Net patient service revenue	\$ 2,765,941	\$ 2,508,408
Other revenue	196,719	207,854
	<u>\$ 2,962,660</u>	<u>\$ 2,716,262</u>

Net Patient Service Revenue

Cincinnati Children's net patient service revenue generally relates to contracts with patients in which the performance obligations are to provide health care services to patients. As patients simultaneously

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For the Years Ended June 30, 2024 and 2023, respectively (dollars in thousands)

receive and consume the benefits of health care provided by Cincinnati Children's, the performance obligations meet the criteria to be satisfied over time. Net patient service revenue is recorded as services are provided. Payment for such services is due between thirty to forty-five days from payer receipt of claim. Consideration for patient service revenue is variable. Agreements with payers typically provide for payments at amounts less than established charges.

Cincinnati Children's has an agreement with an Ohio Medicaid managed care company in which performance obligations are to stand-ready to provide care for approximately 98,000 children. The performance obligation to stand-ready is satisfied over time. Cincinnati Children's is reimbursed under a variable capitation methodology for hospital services. All physician and home care services are reimbursed based on provider fee schedules. The hospital services are reimbursed through a variable capitation payment which represents the amount remaining after payment has been made for (a) Cincinnati Children's physician services, (b) Cincinnati Children's home care services, (c) services provided to members by facilities outside the Cincinnati Children's network, and (d) an actuarially determined accrual for incurred but not reported claims (see Note 1h). Under delegation agreements, Cincinnati Children's receives fixed payments to perform the required medical management, care management and care coordination functions. Medicaid managed care organizations retain risk for payments to providers. The amount of net patient service revenue recorded under this arrangement in fiscal year 2024 and 2023 was \$98,311 and \$121,666, respectively.

Laws and regulations concerning government programs, including Medicaid and Medicare, are complex and subject to varying interpretation. As a result of investigations by governmental agencies, various health care organizations have received requests for information and notices regarding alleged noncompliance with those laws and regulations, which, in some instances, have resulted in organizations entering into significant settlement agreements. Compliance with such laws and regulations may also be subject to future government review and interpretation as well as significant regulatory action, including fines, penalties, and potential exclusion from related programs. There can be no assurance that regulatory authorities will not challenge Cincinnati Children's compliance with these laws and regulations, and it is not possible to determine the impact (if any) such claims or penalties would have upon Cincinnati Children's. In addition, the contracts Cincinnati Children's has with third party payers also provide for retroactive audit and review of claims. At June 30, 2024, Cincinnati Children's has settled all Medicaid cost reports through 2018 and all Medicare cost reports through 2021.

Settlements with third party payers for retroactive adjustments due to audits, reviews or investigations are considered variable consideration and are included in the determination of estimated transaction price for providing patient care. These settlements are based on the terms of the payment agreement with the payer, correspondence from the payer, and Cincinnati Children's historical settlement activity, including an assessment to ensure that it is probable that a significant reversal in the amount of cumulative revenue recognized will not occur. Estimated settlements are adjusted in future periods as adjustments become known based on new information or as years are settled and no longer subject to such audits, reviews, and investigations. Adjustments arising from a change in transaction price were not material in fiscal years 2024 and 2023.

Generally, patients who are covered by third party payers are responsible for related deductibles and coinsurance, which vary in amount. Cincinnati Children's also provides services to uninsured patients and offers those uninsured patients a discount, either by policy or law, from standard charges. Cincinnati Children's estimates the transaction price for patients with deductibles and coinsurance and from those who are uninsured based on historical experience and current market conditions. The initial estimate of the transaction price is determined by reducing the standard charge by established

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For the Years Ended June 30, 2024 and 2023, respectively (dollars in thousands)

contractual adjustments, discounts, and implicit price concessions. Subsequent changes to the estimate of the transaction price are generally recorded as adjustments to patient service revenue in the period of change.

Consistent with Cincinnati Children's mission, care is provided to patients regardless of their ability to pay. Therefore, Cincinnati Children's has determined it has provided implicit price concessions to uninsured patients and patients with other uninsured balances. The implicit price concessions included in estimating the transaction price represent the difference between the amounts billed to patients and the amounts Cincinnati Children's expects to collect based on its collection history with those patients.

Patients who meet Cincinnati Children's criteria for charity care are provided care without charge or at amounts less than established rates. Amounts determined to qualify as charity care are not reported as net patient service revenue.

Because the majority of its performance obligations relate to contracts with a duration of less than one year, Cincinnati Children's has elected to apply the optional exemption provided in FASB ASC 606-10-50-14(a) and, therefore, is not required to disclose the aggregate amount of the transaction price allocated to performance obligations that are unsatisfied or partially unsatisfied at the end of the fiscal year. The unsatisfied or partially unsatisfied performance obligations referred to above are primarily related to inpatient acute care services at the end of the fiscal year. The performance obligations for these contracts are generally completed when patients are discharged, which generally occurs shortly after the end of the fiscal year.

In both fiscal years 2024 and 2023, substantially all net patient service revenue is derived from third-party payment programs (Medicaid, insurance companies and various managed care agreements). Cincinnati Children's classifies its patients by payer. The following table disaggregates Cincinnati Children's net patient service revenue by payer categories for the fiscal year ended June 30, 2024 and 2023:

		2024		2023
Managed care and commercial insurers	63%	\$ 1,743,742	64%	\$ 1,605,381
Government (HMO and third party)	30%	821,469	30%	752,522
International	4%	116,154	3%	75,252
Specialty contracts ¹	2%	55,898	2%	50,168
Self-pay	1%	28,678	1%	25,085
		<u>\$ 2,765,941</u>		<u>\$ 2,508,408</u>

The following details the percentage of accounts receivable by payer category as of June 30, 2024 and 2023:

	2024	2023
Managed care and commercial insurers	52%	58%
Government (HMO and third party)	25%	23%
International	17%	14%
Specialty contracts ¹	3%	2%
Self-pay	3%	3%

¹ Specialty contracts are single case agreements or contracts for specialty services, such as transplants.

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For the Years Ended June 30, 2024 and 2023, respectively (dollars in thousands)

Other Revenue

Cincinnati Children's other revenue generally relates to contracts with external organizations in which the performance obligations are to provide research services or other various fee-for-service arrangements outside the scope of healthcare services.

Revenue from industry contracts and certain government contracts is earned based on performance obligations to provide research services to the external organizations. License and royalty revenue relates to contracts with other organizations in which our performance obligations are to provide intellectual property to the organization. Revenue is also earned for various other contracted fee-for-service arrangements where services are performed for external organizations outside the scope of healthcare services for Cincinnati Children's patients. Performance obligations for industry and government contracts, license and royalty contracts, and various other fee-for-service arrangements are satisfied over time. Consideration is fixed based on contracted price, and there is no significant variable consideration related to these agreements.

A contract liability exists when an entity has an obligation to transfer goods or services to a customer. Cincinnati Children's has contract liabilities of \$67,954 and \$66,354 recorded within Accounts payable and accrued expenses for the years ended June 30, 2024 and 2023, respectively. The balance of contract liabilities on July 1, 2022 was \$60,289.

- (e) Graduate Medical Education – Cincinnati Children's receives Federal graduate medical education funding. Other revenue of \$12,532 and \$12,111 was recognized for the years ended June 30, 2024 and 2023, respectively.
- (f) Tax Exempt Status – Cincinnati Children's, CHSN and ECS are exempt from federal income taxes under Section 501(a) of the Internal Revenue Code as organizations described in Section 501(c)(3). HealthVine is a single-member LLC wholly owned by Cincinnati Children's treated as a disregarded entity of Cincinnati Children's for income tax purposes. River City is a captive insurance corporation wholly owned by Cincinnati Children's. Cincinnati Children's, CHSN, ESC, HealthVine and River City are generally not subject to federal or state income tax obligations. Other investment holding entities' income is taxable to Cincinnati Children's. The income tax provisions recorded in the accompanying Consolidated Financial Statements are immaterial for the years ended June 30, 2024 and 2023.

Cincinnati Children's accounts for income taxes in accordance with Accounting Standards Codification Topic (ASC) 740 "Income Taxes". It is Cincinnati Children's policy to classify the expense related to interest and penalties, if any, to be paid on underpayments of income taxes within other expenses. There were no material penalties or interest recognized in fiscal years 2024 and 2023. Cincinnati Children's paid \$852 and \$2,171 in income taxes for unrelated business income during the year ended June 30, 2024 and 2023, respectively.

Fiscal years 2021 through 2024 are subject to examination by both the Federal and State tax jurisdictions.

- (g) Cash Equivalents – Cash equivalents consist primarily of money market and money market mutual funds, demand deposits, and commercial paper investments with maturities of three months or less. Cash is held primarily in two financial institutions.
- (h) Inventories and Prepaid Expenses – Inventories consist primarily of medical supplies and pharmaceuticals and are valued on an average cost method.

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For the Years Ended June 30, 2024 and 2023, respectively (dollars in thousands)

As part of Cincinnati Children's variable capitation agreement, reimbursement is reduced by an actuarially determined estimate for incurred but not reported claims. Cincinnati Children's recorded incurred but not reported claims of approximately \$20,555 and \$19,441 for the years ended June 30, 2024 and 2023, respectively. The estimate is recorded as an increase in Prepaid expenses and an increase in Accounts payable and accrued expenses.

- (i) Marketable Securities – Cincinnati Children's accounts for its investments under ASC 958-320 "Not-for-Profit Entities – Investments – Debt Securities" and ASC 958-321 "Not-for-Profit Entities – Investments – Equity Securities." Cincinnati Children's carries its marketable securities at fair value with unrealized gains and losses included in Net investment return in the accompanying Consolidated Statements of Operations and Changes in Net Assets.
- (j) Property and Equipment – Property and equipment are stated at cost. Depreciation is computed on a straight-line basis over the estimated useful lives of the assets, ranging from three to forty years, as follows:

Land Improvements	3-25 years
Buildings and Building Improvements	5-40 years
Equipment	3-25 years

Cincinnati Children's evaluates long-lived assets under the provisions of ASC 360 "Property Plant and Equipment." During fiscal years 2024 and 2023, Cincinnati Children's did not incur any losses related to impairment of property and equipment.

- (k) Goodwill – Goodwill is the excess of the purchase price over the fair value of the net assets of an entity acquired. Cincinnati Children's elected to apply the accounting alternatives available for not-for-profit entities. Goodwill is amortized over a 10-year period and tested for impairment at the entity level when a triggering event occurs. During the years ended June 30, 2024 and 2023, no amounts were recorded to goodwill and no impairment losses were recognized. During fiscal year 2024 and 2023, \$858 and \$859 of amortization expense was recognized to Depreciation and amortization, respectively.
- (l) Leases – Cincinnati Children's leases property and equipment under finance and operating leases. Cincinnati Children's determines if an arrangement is a lease at inception. Right-of-use assets and lease obligations are recognized for leases with terms greater than 12 months based on the net present value of the future minimum lease payments over the lease term at commencement date. When readily determinable, Cincinnati Children's uses the interest rate implicit in the lease to determine the present value of future minimum lease payments. However, most of Cincinnati Children's leases do not have a readily determinable implicit interest rate. For these leases, Cincinnati Children's uses a collateralized incremental borrowing rate based on the period and cash payment stream comparable with that of each lease. The right-of-use asset and lease obligations include a value for options to extend a lease if it is reasonably certain that the option will be exercised.

The current portion of operating lease obligations is included in the Current portion of long-term debt and lease obligations and the non-current portion is separately stated as Operating lease obligations on the Consolidated Balance Sheets. The related right-of-use assets are included in Operating lease right-of-use assets on the Consolidated Balance Sheets. Operating lease expense is recognized on a straight-line basis over the lease term and is included in Purchased services in the Consolidated Statements of Operations and Changes in Net Assets.

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The current portion of finance lease obligations is included in Current portion of long-term debt and lease obligations and the non-current portion is separately broken out as Finance lease obligations on the Consolidated Balance Sheets. The related finance lease right-of-use assets are included in Property and equipment, net on the Consolidated Balance Sheets. Finance lease right-of-use assets are amortized using the straight-line method over the shorter period of the lease term or the estimated useful life of the property or equipment. Such amortization expense is included in Depreciation in the Consolidated Statements of Operations and Changes in Net Assets.

- (m) Costs of Borrowing – Interest incurred on borrowed funds, net of interest earned on restricted bond funds, during the period of construction of capital assets is capitalized as a component of the cost of acquiring those assets. In fiscal years 2024 and 2023, Cincinnati Children's capitalized \$6,032 and \$5,759 of interest related to construction in progress, respectively. Total cash paid for interest was approximately \$38,046 and \$37,210 in fiscal years 2024 and 2023, respectively.

Deferred bond issuance costs and issuance premiums are amortized using the effective interest method over the period the related obligation is outstanding.

- (n) Interest Rate Swap Agreement – Cincinnati Children's has an interest rate swap agreement to manage interest rate risk associated with the variable rate 2018Z and 2018AA bonds. The swap agreement is measured at fair value and recognized in the Consolidated Balance Sheets within Other long-term assets. Cincinnati Children's recognizes gains and losses from the changes in fair value of the interest rate swap agreement as Non-operating gains within Net investment return on the Consolidated Statements of Operations and Changes in Net Assets.
- (o) Net Asset Classifications – Cincinnati Children's reports its financial position and activities according to the following net asset classifications:

Net assets without donor restrictions – Net assets that are not subject to donor-imposed restrictions and may be expended for any purpose in performing the primary objective of the organization are classified as Net assets without donor restrictions. These net assets may be used at the discretion of Cincinnati Children's management.

Net assets with donor restrictions – Net assets subject to stipulations imposed by donors or supporting organizations are classified as Net assets with donor restrictions. Some restrictions are temporary in nature; those restrictions will be met by fulfilling a certain purpose or by the passage of time. Other donor restrictions are perpetual in nature, whereby the donor has stipulated the principal be maintained in perpetuity.

Net assets with donor restrictions are comprised of the following:

	2024	2023
Subject to expenditure for specified purpose:		
Clinical	\$ 42,014	\$ 43,299
Research	94,949	99,297
Education	19,165	16,305
General Administration and Other	32,054	37,020
	<u>188,182</u>	<u>195,921</u>

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	2024	2023
Subject to expenditure for specified purpose, held at supporting organizations:		
Research	16,850	15,295
Education	1,242	1,127
General Administration and Other	5,000	4,539
	23,092	20,961
Subject to expenditure based on Board discretion of the supporting organization, held at supporting organizations	2,664,502	2,372,530
	2,664,502	2,372,530
Investment in perpetuity, the income from which is expendable for specified purpose, held at Cincinnati Children's:		
Clinical	1,676	1,410
Research	23,800	19,971
Education	1,789	1,521
General Administration and Other	4,692	4,002
	31,957	26,904
Investment in perpetuity, the income from which is expendable for specified purpose, held at supporting organizations:		
Clinical	68,357	60,003
Research	2,560,685	2,232,474
Education	112,747	97,242
General Administration and Other	96,405	83,649
	2,838,194	2,473,368
Subject to appropriation and expenditure when a specified event occurs:		
Upon death of insured party	2,063	2,289
	2,063	2,289
Total net assets with donor restrictions	\$ 5,747,990	\$ 5,091,973

- (p) Revenue and Gains in Excess of Expenses – The Consolidated Statements of Operations and Changes in Net Assets subtotals operating revenues, gains and other support, operating expenses and nonoperating gains as Revenue and gains in excess of expenses. Other changes in net assets without donor restrictions are receipts from and transfers to supporting organizations, pension and post-retirement health liability adjustments, and Net assets released from restrictions used for purchase of property and equipment, which are excluded from Revenue and gains in excess of expenses.
- (q) Use of Estimates – The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.
- (r) New Accounting Pronouncements – In June 2016, the FASB issued ASU 2016-13, “Measurement of Credit Losses on Financial Instruments” which amends “Financial Instruments—Credit Losses”

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(Topic 326). ASU 2016-13 provides guidance for measuring credit losses on financial instruments. Early adoption is permitted. The amendments in this ASU should be applied retrospectively. This ASU is effective for annual and interim periods in fiscal years beginning after December 15, 2022. The standard has been adopted and there are no material impacts to our Consolidated Financial Statements.

In October 2021, the FASB issued ASU No. 2021-08, Business Combinations (Topic 805): Accounting for Contract Assets and Contract Liabilities from Contracts with Customers.” The ASU amends ASC 805 to require acquiring entities to apply Topic 606 to recognize and measure contract assets and contract liabilities in a business combination and is intended to improve the accounting for acquired revenue contracts with customers in a business combination by addressing diversity in practice and inconsistency. The ASU is effective for fiscal years beginning after December 15, 2022, including interim periods within those years, with early adoption permitted. The amendments should be applied prospectively to business combinations occurring on or after the effective date of the amendments. The standard has been adopted and there are no material impacts to our Consolidated Financial Statements.

In August 2023, the FASB issued ASU No 2023-05, “Business Combinations — Joint Venture Formations” (Subtopic 805-60). The amendments in this ASU are effective prospectively for all joint ventures with a formation date on or after January 1, 2025, and early adoption is permitted. Additionally, a joint venture that was formed before the effective date of the ASU may elect to apply the amendments retrospectively if it has sufficient information. The standard’s impact to the Consolidated Financial Statements is currently being evaluated.

(2) Liquidity and Availability –

Financial assets available for general expenditure within one year of the balance sheet date consist of the following:

	2024	2023
Amounts available for general expenditure		
Cash and cash equivalents	\$ 189,507	\$ 200,381
Marketable securities	1,335,526	1,298,639
Patient receivables, net	704,875	588,455
Other receivables	236,163	165,009
	<u>2,466,071</u>	<u>2,252,484</u>
Less: Board-designated assets	150,000	150,000
Financial assets available for general expenditure	<u>\$ 2,316,071</u>	<u>\$ 2,102,484</u>

Cincinnati Children’s has cash and cash equivalents, marketable securities (more fully described in Note 4), patient receivables and certain other receivables which are liquid and available for general expenditure within one year in the normal course of operations. Accordingly, these assets have been included in the quantitative information above. During fiscal year 2021, the Board of Trustees designated \$100,000 plus interest and earnings from net assets without donor restrictions to be used to support Cincinnati Children’s community pillar of the *Pursuing Our Potential Together* strategic plan. During fiscal year 2023, the Board of Trustees designated \$50,000 for employee benefit initiatives. Cincinnati Children’s has other assets limited to use for professional liability, self-insurance health care and debt service, as well as perpetual endowments with donor restrictions. These assets limited to use, which are more fully described in Notes 4 and 6, are not available for general expenditure within the next year and are not reflected in the amounts above.

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Cincinnati Children's has \$170,023 in outstanding obligations for which liquid funds must be available for payment in the event of a failed remarketing. Cincinnati Children's maintains certain balances in cash and investments and has access to a \$100,000 line of credit, as discussed in more detail in Note 9.

Additionally, Cincinnati Children's is required to maintain certain liquidity ratios as outlined in bond covenants. As of June 30, 2024 and 2023, Cincinnati Children's was in compliance with all such covenants.

Cincinnati Children's forecasts its future cash flows and monitors liquidity on an ongoing basis.

(3) Reconciliation of Cash, Cash Equivalents, and Restricted Cash –

The following table provides a reconciliation of cash, cash equivalents, and restricted cash reported within the Consolidated Balance Sheets that sum to the total of the same such amounts shown in the Consolidated Statement of Cash Flows for the fiscal years ending June 30, 2024 and 2023:

	<u>2024</u>	<u>2023</u>
Cash and cash equivalents	\$ 189,507	\$ 200,381
Restricted cash included in assets limited as to use	8,229	9,578
Total cash, cash equivalents, and restricted cash shown in the statement of cash flows	<u>\$ 197,736</u>	<u>\$ 209,959</u>

(4) Fair Value Measurements –

Cincinnati Children's accounts for its assets and liabilities under ASC 820 "Fair Value Measurements." As defined in ASC 820, fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. To increase consistency and comparability in fair value measurements and related disclosures, ASC 820 establishes a fair value hierarchy that prioritizes inputs to valuation techniques used to measure fair value into three broad levels, which are described below:

Level 1: Quoted Prices (unadjusted) in active markets for identical assets or liabilities that are accessible at the measurement date for assets and liabilities. The fair value hierarchy gives the highest priority to Level 1 inputs.

Level 2: Inputs other than quoted prices included within Level 1 that are observable for the assets or liabilities, either directly or indirectly. These include quoted prices for identical or similar assets or liabilities in markets that are not active, that is, markets in which there are a few transactions for the asset or liability, the prices are not current, or price quotations vary substantially either over time or among market makers, or in which little information is released publicly and inputs that are derived principally from or corroborated by observable market data by correlation or other means.

Level 3: Unobservable inputs, developed using Cincinnati Children's estimates and assumptions, which reflect those that the market participants would use. Such inputs are used when little or no market data is available. The fair value hierarchy gives the lowest priority to Level 3 inputs.

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Determining where an asset or liability falls within the hierarchy depends on the lowest level input that is significant to the fair value measurement as a whole. In determining fair value, Cincinnati Children's utilizes valuation techniques that maximize the use of observable inputs and minimize the use of unobservable inputs to the extent possible and considers counterparty credit risk in the assessment of fair value.

The table below includes the major categorization for financial instruments on the basis of the nature and risk of the investments at June 30, 2024.

	Level 1	Level 2	Level 3	Total
Marketable Securities:				
U.S. Government and agency securities	\$ -	\$ 193,301	\$ -	\$ 193,301
Foreign bonds	-	56,915	-	56,915
Municipal bonds	-	3,173	-	3,173
Common stock	300,187	-	-	300,187
Corporate obligations	-	349,932	-	349,932
ETFs	219,084	-	-	219,084
Commercial paper	-	35,259	-	35,259
Total marketable securities measured in the fair value hierarchy	519,271	638,580	-	1,157,851
Full discretion fixed income ²	-	-	-	177,675
	519,271	638,580	-	1,335,526
Assets Limited As To Use:				
Money market mutual funds	8,267	-	-	8,267
Common stock	31,919	-	-	31,919
	40,186	-	-	40,186
Deferred Compensation Plans (included in Other Receivables and Other Long-term Assets):				
Common stock	11,351	-	-	11,351
Mutual funds:				
Money market	247	-	-	247
Equity	1,097	-	-	1,097
International equity	356	-	-	356
Bond	633	-	-	633
Lifecycle	6,514	-	-	6,514
Variable annuities	-	25	-	25
Guaranteed insurance contract	-	-	718	718
	20,198	25	718	20,941
Derivative Investments (included in Other-Long-term Assets):				
Interest rate swap agreement	-	4,500	-	4,500
Total investments at fair value	\$ 579,655	\$ 643,105	\$ 718	\$ 1,401,153

² Certain investments that are measured at fair value using the net asset value per share (or its equivalent) practical expedient have not been categorized in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the Consolidated Balance Sheets.

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The table below includes the major categorization for financial instruments on the basis of the nature and risk of the investments at June 30, 2023.

	Level 1	Level 2	Level 3	Total
Marketable Securities:				
U.S. Government and agency securities	\$ -	\$ 327,874	\$ -	\$ 327,874
Foreign bonds	-	42,895	-	42,895
Municipal bonds	-	19,131	-	19,131
Common stock	254,333	-	-	254,333
Corporate obligations	-	408,148	-	408,148
ETFs	76,600	-	-	76,600
Total marketable securities measured in the fair value hierarchy	330,933	798,048	-	1,128,981
Full discretion fixed income ³	-	-	-	169,658
	330,933	798,048	-	1,298,639
Assets Limited As To Use:				
Money market mutual funds	9,753	-	-	9,753
Common stock	26,729	-	-	26,729
	36,482	-	-	36,482
Deferred Compensation Plans (included in Other Receivables and Other Long-term Assets):				
Common stock	8,933	-	-	8,933
Mutual funds:				
Money market	297	-	-	297
Equity	736	-	-	736
International equity	319	-	-	319
Bond	697	-	-	697
Lifecycle	4,877	-	-	4,877
Variable annuities	-	28	-	28
Guaranteed insurance contract	-	-	1,032	1,032
	15,859	28	1,032	16,919
Derivative Investments (included in Other-Long-term Assets):				
Interest rate swap agreement	-	5,603	-	5,603
Total investments at fair value	\$ 383,274	\$ 803,679	\$ 1,032	\$ 1,357,643

The valuation methods described below may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although management believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in different fair value measurement at the reporting date.

The carrying amount and fair value of cash and cash equivalents, accounts receivable, and accounts payable approximate fair value.

³ Certain investments that are measured at fair value using the net asset value per share (or its equivalent) practical expedient have not been categorized in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the Consolidated Balance Sheets.

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Cincinnati Children’s uses quoted market prices in active markets to determine the fair value of common stock, mutual funds and ETFs; such items are classified as Level 1 in the fair value hierarchy.

Cincinnati Children’s primarily bases fair value for investments in fixed income securities, including U.S. government securities, municipal bonds and corporate obligations on a calculation using interest rate curves and credit spreads applied to the terms of the debt instrument (maturity and coupon interest rate). Commercial paper is valued using broker quotes that utilize observable market inputs. Consideration is also given to the counterparty credit rating. Such items are classified as Level 2 in the fair value hierarchy.

Cincinnati Children’s interest rate swap agreement (Note 14) is a derivative instrument valued using the income approach, which uses market inputs to discount future cash flows to a single present amount based on market expectations.

Cincinnati Children’s investment in Full Discretion Fixed Income is an investment in a limited liability company whose investment objective is to invest in marketable and non-marketable securities with issue and industry diversification. As set forth in the LLC agreement, the LLC will dissolve on May 22, 2047, but may dissolve earlier under certain conditions. Any Investing Member may elect to withdraw, in whole or in part from the LLC if the Member notifies of intent to withdraw sixty calendar days in advance. The Full Discretion Fixed Income is measured at fair value using the net asset value per share practical expedient.

The guaranteed insurance contract is recorded based on discounted cash flows, which is an approximation of fair value, and is classified as Level 3 based on time restrictions for redemption.

Activity and transfers into and out of Level 3 and the reasons for those transfers are as follows:

<u>2024</u>	<u>Guaranteed Insurance Contracts</u>
Purchases	\$ 117
Issues	-
<u>2023</u>	<u>Guaranteed Insurance Contracts</u>
Purchases	\$ 118
Issues	-

Cincinnati Children’s policy is to recognize transfers in and out as of the actual date of the event or change in circumstances that caused the transfer. For the years ended June 30, 2024 and 2023, there were no material transfers in or out of Levels 1, 2 or 3.

(5) Losses on the Provision of Uncompensated Care –

In accordance with its mission and purpose, Cincinnati Children’s maintains a policy of providing medically necessary services to pediatric patients within its primary service area regardless of ability to pay. This primary service area has been defined to include the four counties in Ohio, three counties in Kentucky and one county in Indiana that geographically surround Cincinnati. Under certain circumstances, Cincinnati Children’s accepts patients from outside the primary service area regardless of their ability to pay. Cincinnati Children’s defines uncompensated care as services rendered to patients whose families’ annual income or net worth falls below certain minimum standards. As such, losses absorbed by Cincinnati Children’s in rendering services to patients who are covered under governmental programs which are designed to aid low-income families (primarily the Medicaid program) are considered uncompensated care.

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The following information summarizes uncompensated care provided during the years ended June 30, 2024 and 2023:

CHARGES	2024	2023
Charges under Medicaid and other entitlement programs	\$ 2,562,854	\$ 2,489,227
Charity care not eligible for Medicaid assistance, at established charges	25,803	21,928
Other uncollectible self-pay, at established charges	33,346	28,060
Total Medicaid, charity care and other uncollectible self-pay charges	<u>\$ 2,622,003</u>	<u>\$ 2,539,215</u>
COSTS/LOSSES		
Estimated costs to provide uncompensated care	\$ (1,144,535)	\$ (1,101,844)
Reimbursement from Medicaid programs	724,594	692,387
Losses on the provision of uncompensated care	(419,941)	(409,457)
Funds received from Hospital Care Assurance Program (HCAP) ⁴ and tax levy	67,801	55,751
Losses on provision of uncompensated care, net of HCAP and tax levy	<u>\$ (352,140)</u>	<u>\$ (353,706)</u>

The 2024 and 2023 cost amounts reflected in the tables above are calculated using cost to charge ratios calculated from preliminary cost reports because the current year cost report is not yet available. Management does not believe the use of preliminary data would have a material impact on the amounts calculated above.

(6) Funds in Trust –

Cincinnati Children's has certain funds, which are invested and held in trust for various specified purposes. Funds are carried at fair value with unrealized gains and losses included in Net investment return in the accompanying Consolidated Statements of Operations and Changes in Net Assets. The amounts of such funds, at carrying value, and the specified purposes for which such funds may be used, are set forth below:

	June 30,	
	2024	2023
Self-insurance Funds:		
Professional liability	\$ 158	\$ 159
Employee health and workers' compensation	453	140
Bond interest and principal escrow funds	7,618	9,279
Endowment funds held in perpetual trust	31,957	26,904
	<u>\$ 40,186</u>	<u>\$ 36,482</u>

⁴ The Hospital Care Assurance Program (HCAP) is a State of Ohio program created to financially assist hospitals that care for a disproportionate share of low-income patients who are unable to pay for their own care.

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(7) Property and Equipment –

Property and equipment consists of the following:

	June 30,	
	2024	2023
Land	\$ 47,033	\$ 45,663
Land improvements	37,636	37,826
Buildings and building improvements	2,232,333	2,033,672
Equipment	829,528	794,350
Construction in progress	144,998	247,228
	<u>3,291,528</u>	<u>3,158,739</u>
Accumulated depreciation	(1,641,398)	(1,602,190)
Property and equipment, net	<u>\$ 1,650,130</u>	<u>\$ 1,556,549</u>

(8) Professional Liability –

Cincinnati Children's insurance program includes a self-insured retention for losses arising out of healthcare professional liability claims. The current self-insured retention for asserted claims is \$10,000 (\$25,000 in aggregate). Cincinnati Children's regularly purchases excess healthcare professional liability insurance on a claims made basis at varying levels.

The actuarial present value of expected costs (including incurred, but not reported claims) for the healthcare professional liability program of \$25,943 and \$31,020 for 2024 and 2023, respectively, is accrued in the accompanying Consolidated Balance Sheets. At June 30, 2024, \$8,500 of the total accrued liability is reported in Accounts payable and accrued expenses as the current portion. Accrued healthcare professional liability losses are discounted at a rate of 4% at June 30, 2024 and 2023. The costs of Cincinnati Children's healthcare professional liability program, including premiums paid for excess re-insurance, legal fees, settlements, judgments, and other administrative costs are included in Supplies, drugs and other in the accompanying Consolidated Statements of Operations and Changes in Net Assets. Accrued losses funding levels are actuarially determined based on management's estimation of potential outstanding loss liabilities, payout patterns, and various other assumptions, and then adjusted to reflect its best estimate of the present value of expected costs for the healthcare professional liability claims. Healthcare professional liability expense is \$13,034 and \$13,964 for fiscal years 2024 and 2023, respectively.

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(9) Debt –

Debt at June 30, 2024 and 2023 is summarized as follows:

	<u>2024</u>	<u>2023</u>
Series 2018BB commercial paper, variable interest 5.42% to 5.45% at June 30, 2024), taxable	\$ 100,000	\$ 100,000
Bonds payable:		
Series 2014S, 3.0% to 5.0% due through 2034, net of unamortized premium of \$1,407 in 2023	-	75,932
Series 2014T, 4.268% due 2044, taxable	298,090	297,995
Series 2016X, 5.00%, due through 2032, net of unamortized premium of \$6,208 in 2024 and \$7,078 in 2023	57,546	58,367
Series 2016Y, 2.853% due 2026, taxable	99,817	99,730
Series 2018Z*, variable interest (3.93% at June 30, 2024), due through 2037	27,517	30,759
Series 2018AA*, variable interest (3.87% at June 30, 2024), due through 2037	42,506	47,511
Series 2019CC, 5.0% due through 2049, net of unamortized premium of \$53,062 in 2024 and \$55,494 in 2023	187,565	189,948
Series 2020DD, 2.82% due 2050, taxable	198,730	198,681
Series 2024EE, 2.934% due 2034	66,155	-
Total	<u>1,077,926</u>	<u>1,098,923</u>
Less:		
Current portion of bonds and notes payable	(10,230)	(9,059)
Commercial paper notes	(100,000)	(100,000)
Bonds payable subject to remarketing, net	(70,023)	(78,270)
Bonds payable and notes payable - long-term	<u>\$ 897,673</u>	<u>\$ 911,594</u>

*Denotes variable rate bonds subject to remarketing agreements

- (a) Bonds Payable – Cincinnati Children's has pledged gross revenues to secure the payment of 2014T, 2016X, 2016Y, 2018Z, 2018AA, 2019CC, 2020DD, and 2024EE bonds. Cincinnati Children's is bound by certain financial covenants included in the bond indentures, and related agreements, including a requirement to maintain a minimum Debt Service Coverage Ratio.

The 2018Z and 2018AA tax-exempt bonds are subject to mandatory tender purchase seven days after notice from bondholders and may be remarketed. If the bonds are not remarketed, Cincinnati Children's must repay the bonds. The 2018Z and 2018AA bonds are classified as Current liabilities in Bonds payable subject to remarketing, net in the accompanying Consolidated Balance Sheets. The interest rates on the 2018Z and 2018AA variable rate bonds are reset weekly by a rate-setting agent.

Cincinnati Children's refunded and retired the outstanding principal of its Series 2014S bonds of \$65,820 through the issuance of hospital facilities bond Series 2024EE of \$66,155. The new bond series is issued through Hamilton County, Ohio at a fixed rate of 2.934%. The closing of the refunding and issuance occurred on May 15, 2024.

- (b) Commercial Paper – The Series 2018BB taxable commercial paper was issued in the original aggregate principal amount of \$100,000 and outstanding at any one time in a principal amount not to exceed \$100,000. The notes shall mature no later than May 15, 2048. The commercial paper notes have a maximum maturity period of 270 days and are resold at maturity. In the event the notes have not been

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resold, Cincinnati Children's must repay the notes. The 2018BB commercial paper is recorded in Current liabilities in the accompanying Consolidated Balance Sheets. The interest rates on the 2018BB commercial paper are reset with each remarketing by a rate-setting agent.

- (c) Future Debt Maturities – The following is a schedule of future debt maturities, excluding discounts/premiums and deferred issuance costs:

2024	\$ 180,620
2025	10,295
2026	110,160
2027	10,120
2028	16,270
Thereafter	696,355
	<u>\$ 1,023,820</u>

- (d) Line of Credit – Cincinnati Children's maintains an agreement for a line of credit of \$100,000. The line of credit agreement was amended in May 2024 to extend the maturity date to May 2027. The line of credit bears interest at the greater of the Overnight Bank Funding Rate plus 50 basis points, the Prime Rate or the Daily Simple SOFR Rate plus 100 basis points. \$2,550 of the line of credit has been committed to secure letters of credit as required by a payer arrangement, leaving \$97,450 available. There were no draws on the line of credit during fiscal year 2024 or 2023.

- (10) Employee Benefit Plans –

Cincinnati Children's maintains non-contributory retirement plans covering substantially all employees. Among these plans is a defined benefit plan where benefits are based on a formula which reflects years of service and salary levels. Cincinnati Children's funding policy for its defined benefit plan meets the funding standards established by the Employee Retirement Income Security Act of 1974 (ERISA).

Cincinnati Children's investment strategy with respect to pension assets is designed to achieve a moderate level of overall portfolio risk in keeping with desired risk objective, which is established through careful consideration of plan liabilities, plan funded status, and corporate financial condition. Cincinnati Children's adopted an Investment Policy that adjusts allocations between return-seeking assets and liability-hedging assets based on the funded status of the Plan and prevailing yields. As the funded ratio improves, allocations to liability-hedging assets increase accordingly.

Cincinnati Children's seeks to maintain diversified portfolios and has adopted allocation targets within the return-seeking and liability hedging portfolios as follows:

Return-Seeking Allocation:	Min - Target - Max
Global Equity	60% - 70% - 80%
Private Equity	5% - 10% - 15%
Private Real Estate	5% - 10% - 15%
Multi-Asset Credit	5% - 10% - 15%
Opportunity Allocation	0% - 0% - 10%
Liability-Hedging Allocation:	
Long Credit	50% - 75% - 100%
STRIPS (Long Duration Treasury Instruments)	0% - 25% - 50%

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In order to maintain the portfolio's actual asset allocation in line with the target allocations specified above, rebalancing will occur periodically.

Cincinnati Children's defined benefit plan investment allocation at the actuarial measurement date of June 30, 2024 and 2023 by asset category is as follows:

	2024	2023
Cash and cash equivalents	3.1%	1.1%
Corporate bonds	13.7%	13.5%
Government bonds	2.4%	2.0%
Investment Partnerships:		
Equity	4.7%	5.0%
Real estate	2.5%	2.6%
Commingled Investment Funds:		
Equity	-	12.5%
Bond	51.4%	44.6%
Government	22.2%	18.0%
Real estate	-	0.7%
	100.0%	100.0%

The fair values of Level 1 investments are based on quoted prices in active markets.

The fair value for investments in fixed income securities, including U.S. government securities and corporate obligations, is based on a calculation using interest rate curves and credit spreads applied to the terms of the debt instrument (maturity and coupon interest rate) and considers the counterparty credit rating. Such items are classified as Level 2 in the fair value hierarchy.

Investments in partnerships – U.S. equities and real estate – are valued using the net asset value reported by the managers of the funds and as supported by the unit prices of actual purchase and sale transactions. The investments in investment partnerships generally are associated with liquidation restrictions that may range from 91 days to the life of the fund (up to fifteen years) and may require redemption penalties.

Commingled investment funds are private funds for institutional investors valued at net asset value. The commingled funds primarily invest in actively traded equity mutual funds, bond mutual funds, and US Treasury STRIPS with daily liquidity and no lockup period.

There were no transfers between levels in fiscal year 2024 or fiscal year 2023.

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At June 30, 2024, the fair value and its placement in the fair value hierarchy of the underlying assets of the Plan that are required to be measured at fair value are as follows (see Note 4 for further discussion on the fair value hierarchy and fair value principles):

	Level 1	Level 2	Level 3	Total
Cash and cash equivalents	\$ 38,616	\$ -	\$ -	\$ 38,616
Corporate bonds	-	169,040	-	169,040
Government bonds	-	29,668	-	29,668
Total assets in the fair value hierarchy	<u>38,616</u>	<u>198,708</u>	<u>-</u>	<u>237,324</u>
Investments measured at net asset value ⁵ :				
Investment Partnerships:				
Equity	-	-	-	57,968
Real estate	-	-	-	31,018
Commingled Investment Funds:				
Bond	-	-	-	636,962
Government	-	-	-	275,419
Total assets at fair value	<u>\$ 38,616</u>	<u>\$ 198,708</u>	<u>\$ -</u>	<u>\$ 1,238,691</u>

At June 30, 2023, the fair value and its placement in the fair value hierarchy of the underlying assets of the Plan that are required to be measured at fair value are as follows (see Note 4 for further discussion on the fair value hierarchy and fair value principles):

	Level 1	Level 2	Level 3	Total
Cash and cash equivalents	\$ 13,767	\$ -	\$ -	\$ 13,767
Corporate bonds	-	172,710	-	172,710
Government bonds	-	25,666	-	25,666
Total assets in the fair value hierarchy	<u>13,767</u>	<u>198,376</u>	<u>-</u>	<u>212,143</u>
Investments measured at net asset value ⁵ :				
Investment Partnerships:				
Equity	-	-	-	64,121
Real estate	-	-	-	32,792
Commingled Investment Funds:				
Equity	-	-	-	160,126
Bond	-	-	-	570,384
Government	-	-	-	230,646
Real estate	-	-	-	9,438
Total assets at fair value	<u>\$ 13,767</u>	<u>\$ 198,376</u>	<u>\$ -</u>	<u>\$ 1,279,650</u>

⁵ Certain investments that are measured at fair value using the net asset value per share (or its equivalent) practical expedient have not been categorized in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the Change in Plan Assets disclosure.

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As of June 30, 2024, Cincinnati Children's has made \$93,900 in funding commitments in nine investment partnerships, of which \$76,800 has been funded. Additionally, Cincinnati Children's has made \$72,500 in funding commitments in nine real estate investment partnerships, of which \$68,900 has been funded. It is anticipated that these commitments will be funded from liquid investments of the plan.

The following table reflects the weighted average assumptions utilized to determine benefit obligations:

	2024	2023
Discount rate used to determine actuarial present value of the projected benefit obligation	5.73%	5.53%
Assumed rate of increase in compensation levels	3.50%	4.00%
Long-term rate of return	6.00%	6.00%

The following table sets forth the funded status of the plan and amounts recognized in the accompanying Consolidated Balance Sheets as of June 30, 2024 and 2023, utilizing actuarial measurement dates as of June 30, 2024 and 2023.

	2024	2023
Change in projected benefit obligation:		
Projected benefit obligation at beginning of year	\$ 1,093,652	\$ 1,144,529
Service cost	48,165	48,122
Interest cost	58,430	56,318
Other actuarial gain	(39,608)	(12,082)
Benefits paid	(54,452)	(21,249)
Settlements	-	(121,986)
Projected benefit obligation at end of year	<u>\$ 1,106,187</u>	<u>\$ 1,093,652</u>
Change in plan assets:		
Fair value of plan assets at beginning of year	\$ 1,279,650	\$ 1,425,572
Actual return (loss) on plan assets	13,493	(2,687)
Benefits paid	(54,452)	(21,249)
Settlements	-	(121,986)
Fair value of plan assets at end of year	<u>1,238,691</u>	<u>1,279,650</u>
Funded status	132,504	185,998
Net accrued pension benefit asset in Consolidated Balance Sheets	<u>\$ 132,504</u>	<u>\$ 185,998</u>

For the Retirement Plan, the overall actuarial gain in plan obligation of \$39,608 is primarily attributable to an increase in the discount rate between June 30, 2023 and June 30, 2024. The discount rate increase of 20 basis points resulted in a decrease in benefit obligation of approximately \$31,471.

Pension benefit payments for the period July 1, 2022 to June 30, 2023 exceeded the threshold for which settlement accounting is required. As such, Cincinnati Children's recorded a charge representing accelerated recognition of certain net losses in fiscal year 2023. The settlement cost of \$28,468 is recorded in Net benefit gain other than service cost on the Consolidated Statements of Operations and Changes in Net Assets.

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In 2024 and 2023, the mortality tables utilized by actuaries to value the pension liability were updated based on current experience. The impact of the change in mortality assumptions is included in other actuarial gain in fiscal years 2024 and 2023.

Amounts included in Net Assets without donor restrictions but not yet recognized in pension cost consist of:

	2024	2023
Net actuarial loss	\$ 304,807	\$ 273,242
Net prior service credit	(41,788)	(53,539)
Accumulated other comprehensive loss	<u>\$ 263,019</u>	<u>\$ 219,703</u>

The table below reflects the following weighted average assumptions utilized to determine benefit costs were:

	2024	2023
Discount rate used to determine benefit costs:		
July – March	5.53%	5.06%
April – June	5.53%	5.38%
Assumed rate of increase in compensation levels	4.00%	4.00%
Expected long-term rate of return on plan assets	6.00%	5.50%

The Cincinnati Children's expected long-term rate of return on plan assets is based on the expected average returns based on the portfolio mix of plan assets and is reassessed on an annual basis.

Net periodic pension cost for 2024 and 2023 related to the defined benefit plan consisted of the following components:

	2024	2023
Service cost	\$ 48,165	\$ 48,122
Interest cost	58,430	56,318
Expected return on plan assets	(84,667)	(87,860)
Amortization of prior service credit	(11,751)	(11,751)
Net periodic pension cost	<u>\$ 10,177</u>	<u>\$ 4,829</u>

Based on preliminary estimates, we do not expect any required fiscal year 2024 contributions for the qualified defined benefit plan under the current funding regulations.

The accumulated benefit obligation for the pension plan was \$1,066,845 and \$1,042,259 at June 30, 2024 and 2023, respectively.

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Cincinnati Children's estimated benefit payments in each of the next five fiscal years and in aggregate for the five fiscal years thereafter are as follows:

2025	\$ 80,929
2026	78,432
2027	79,178
2028	79,434
2029	80,411
2030-2034	417,268

All other retirement plans maintained by Cincinnati Children's are defined contribution plans. Cincinnati Children's contributions to these plans are generally based on ten percent of salaries up to established ERISA limits. Total expense, net of forfeitures, related to these other plans was approximately \$35,876 and \$32,236 in fiscal years 2024 and 2023, respectively.

Cincinnati Children's provides individual nonqualified deferred compensation benefits to key employees with varying terms. Accounts are participant-directed, and the amounts are at a substantial risk of forfeiture and revert back to the Cincinnati Children's if the employee does not meet certain criteria as established by the plan. The amount of deferred compensation income and expense resulting from changes in market value of underlying investments are recognized in fiscal years 2024 and 2023 was \$3,420 and \$538, respectively. The current portion of plan accounts are included in Other receivables with a corresponding liability in Accounts payable and accrued expenses on the Consolidated Balance Sheets. The long-term portion of plan accounts are included in Other long-term assets with a corresponding liability in Other long-term liabilities on the Consolidated Balance Sheets.

The following table displays the nonqualified deferred compensation plans assets and liabilities as of June 30, 2024 and 2023:

	2024	2023
Current portion	\$ 52	\$ 1,009
Long-term portion	20,889	15,910
Total assets and liabilities	<u>\$ 20,941</u>	<u>\$ 16,919</u>

(11) Commitments and Contingencies –

- (a) Litigation – Cincinnati Children's is engaged from time to time in a variety of litigation and regulatory compliance matters in addition to professional and general liability matters. Management assesses the probable outcome of unresolved litigation and records estimated reserves consistent with ASC 450, "Contingencies." After consultation with legal counsel, management believes that all such currently existing matters will be resolved without material adverse impact to the consolidated financial position or results of operations of Cincinnati Children's.
- (b) Laws and Regulations – The healthcare industry is subject to numerous laws and regulations of federal, state and local governments. These laws and regulations guide the healthcare industry in many domains such as licensure, accreditation, government healthcare program participation requirements, reimbursement for patient service, and Medicare and Medicaid fraud and abuse to name a few. Compliance with these laws and regulations, specifically those relating to the Medicare and Medicaid programs, is complex and can be subject to future government review and interpretation, as well as regulatory actions unknown or unasserted at this time. Management believes that Cincinnati Children's is in compliance, in all material respects, with fraud and abuse as well as other applicable government

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laws and regulations. Cincinnati Children's has recorded reserves for routine regulatory compliance issues and believes these reserves are adequate to cover any potential repayment of previously billed and collected revenue from patient service.

- (c) Capital Commitments – Cincinnati Children's has entered into agreements with general contractors for several new construction projects, renovations, equipment, and information system technology projects. Approximately \$935,840 has been spent through June 30, 2024 and approximately \$479,555 is expected to be spent in connection with current active projects. The commitments have expected completion dates ranging from fiscal year 2025 through fiscal year 2029.
- (d) Funding Commitments – The Board of Trustees of Cincinnati Children's approved revocable commitments for up to \$20,000 in non-recourse loans to Uptown Consortium Inc. Cincinnati Children's has provided \$17,867 of funding in relation to these commitments through June 30, 2024. Management does not anticipate any additional funding. These funds are used to invest in commercial and residential projects in the uptown area. During fiscal year 2024, none of the loans were repaid. Cincinnati Children's expects to receive an additional \$3,773 related to the loans which is recorded to Other long-term assets.
- (e) Investment Commitments – Cincinnati Children's has made commitments to invest \$45,500 in nine limited partnerships that focus on investing in venture capital funds or provide venture capital for companies in the high-growth sectors of the economy, including life sciences, information technology, advanced manufacturing, and healthcare. Cincinnati Children's has made commitments to invest \$26,573 in fifteen limited liability companies that focus on investing in early-stage venture capital funds regionally and nationally with the goals of making the Cincinnati region the place for entrepreneurs and investors to launch new ideas and driving capital into scalable technology companies in southwest Ohio. Investment values are included in Other assets in the Consolidated Balance Sheets. Cincinnati Children's occasionally receives distributions from these investments which reduce investment values.

The following displays the amounts funded and investment values at June 30, 2024 and 2023:

	2024	Funded	Value
Investment in Limited Partnerships		\$ 29,670	\$ 15,286
Investments in Limited Liability Corporations		16,605	20,953
Total		<u>\$ 46,275</u>	<u>\$ 36,239</u>
	2023	Funded	Value
Investment in Limited Partnerships		\$ 23,499	\$ 10,882
Investments in Limited Liability Corporations		13,507	19,210
Total		<u>\$ 37,006</u>	<u>\$ 30,092</u>

(12) Leases –

Cincinnati Children's leases certain property and equipment. Cincinnati Children's determines if an arrangement is a lease at inception of a contract.

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The following table presents expenses recorded related to lease arrangements for the years ended June 30, 2024 and 2023:

	2024	2023
Operating lease expense	\$ 3,806	\$ 3,532
Finance leases:		
Amortization of right-of-use assets	8,150	7,431
Interest on finance lease obligations	1,871	1,890
Short-term and variable lease expense	5,461	5,153
Total lease expense	<u>\$ 19,288</u>	<u>\$ 18,006</u>

Other information related to leases for the years ended June 30, 2024 and 2023 is as follows:

Supplemental cash flow information

Cash paid for amounts included in the measurement of lease liabilities:

	2024	2023
Operating cash flows from operating leases	\$ 3,062	\$ 2,847
Financing cash flows from finance leases	6,827	6,772

Weighted average remaining lease term (in years)

	2024	2023
Operating leases	9.0	7.1
Finance leases	7.5	8.3

Weighted average discount rate

	2024	2023
Operating leases	5.55%	3.52%
Finance leases	3.61%	3.61%

The aggregate future lease payments for operating and finance leases as of June 30, 2024 are as follows:

	Operating	Finance
2025	\$ 3,898	\$ 8,698
2026	3,312	8,196
2027	2,688	7,107
2028	2,582	6,053
2029	2,594	5,351
Thereafter	12,808	19,803
Total lease payments	<u>27,882</u>	<u>55,208</u>
<u>Present values:</u>		
Current lease liabilities	2,760	7,073
Long-term lease liabilities	18,484	41,202
Total lease liabilities	<u>21,244</u>	<u>48,275</u>
Difference between undiscounted cash flows and discounted cash flows	<u>\$ 6,638</u>	<u>\$ 6,933</u>

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- (13) Functional Expenses – The costs of providing Cincinnati Children's services are summarized on a functional basis in the following tables. Accordingly, certain costs have been allocated among functions. Such allocations are determined by management on an equitable basis. The expenses that are allocated include the following:

<u>Expense</u>	<u>Method of Allocation</u>
Employee benefits	Full Time Equivalent
Depreciation	Square footage
Utilities	Square footage

The following presents expenses by both their nature and function for the year ended June 30, 2024:

	<u>Clinical</u>	<u>Research</u>	<u>Education</u>	<u>Fundraising</u>	<u>Management and General</u>	<u>TOTAL</u>
Salaries	\$ 1,089,638	\$ 221,048	\$ 69,932	\$ 4,641	\$ 283,444	\$ 1,668,703
Employee benefits	247,466	54,287	17,202	1,290	110,779	431,024
Supplies, drugs and other	457,823	42,980	3,613	568	94,231	599,215
Purchased services	132,109	61,566	3,018	737	179,436	376,866
Depreciation and amortization	82,879	35,140	168	375	34,202	152,764
Utilities	11,951	5,067	24	54	4,932	22,028
Interest	-	-	-	-	32,860	32,860
	<u>\$ 2,021,866</u>	<u>\$ 420,088</u>	<u>\$ 93,957</u>	<u>\$ 7,665</u>	<u>\$ 739,884</u>	<u>\$ 3,283,460</u>

The following presents expenses by both their nature and function for the year ended June 30, 2023:

	<u>Clinical</u>	<u>Research</u>	<u>Education</u>	<u>Fundraising</u>	<u>Management and General</u>	<u>TOTAL</u>
Salaries	\$ 981,042	\$ 211,292	\$ 63,169	\$ 4,380	\$ 250,782	\$ 1,510,665
Employee benefits	200,122	66,617	16,245	1,090	104,422	388,496
Supplies, drugs and other	433,579	42,851	4,116	525	88,949	570,020
Purchased services	122,956	57,022	3,054	753	155,750	339,535
Depreciation and amortization	83,249	32,404	86	373	33,655	149,767
Utilities	12,015	4,677	12	54	4,857	21,615
Interest	-	-	-	-	32,531	32,531
	<u>\$ 1,832,963</u>	<u>\$ 414,863</u>	<u>\$ 86,682</u>	<u>\$ 7,175</u>	<u>\$ 670,946</u>	<u>\$ 3,012,629</u>

- (14) Interest Rate Swap Agreement –

In August 2019, Cincinnati Children's entered into a 10-year interest rate swap agreement in which Cincinnati Children's and the counterparty agree to exchange the difference between fixed rate and variable rate interest amounts calculated by reference to specified notational principal amounts during the agreement period. The objective is to manage interest rate risk associated with the variable rate 2018Z and 2018AA bonds. Parties to interest rate swap agreements are subject to market risk for changes in interest rates and risk of credit loss in the event of nonperformance by the counterparty.

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The following table summarizes the general terms of Cincinnati Children's fixed payment swap agreement as of June 30, 2024:

<u>Effective</u>	<u>Expiration</u>	<u>Counterparty</u>	<u>Interest Rate Paid</u>	<u>Interest Rate Received</u>	<u>Notational Amount</u>
August 2019	August 2029	Fifth Third Bank	1.38%	USD-SIFMA Municipal Swap Index, 3.88% at June 30 th	\$ 70,390,000

As of June 30, 2024 and 2023 the swap fair value of \$4,500 and \$5,603 was recorded in Other long-term assets in the accompanying Consolidated Balance Sheets, respectively.

(15) Subsequent Events –

Cincinnati Children's announced an amendment to the defined benefit plan in September 2024. The amendment will freeze the defined benefit plan for new entrants effective January 1, 2025. The defined benefit plan will also be frozen to current participants effective December 31, 2025, at which time benefits will cease to accrue in the defined benefit plan. As such, a remeasurement is anticipated to occur in fiscal year 2025. New eligible employees will be offered a 401(a) defined contribution plan beginning January 1, 2025, while current defined benefit plan participants will be eligible to participate in the defined contribution plan beginning January 1, 2026.

Management reviewed subsequent events through September 30, 2024, the date the Consolidated Financial Statements were issued, noting no changes are required to the Consolidated Financial Statements or footnotes.

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Supplementary Schedule of Expenditure of Federal Awards
For the Year Ended June 30, 2024

Government Agency	Division	Government Branch	Award Title	Pass-Through Grantor	Subrecipient Name	Identifying Number	Federal Grant Number	ALN	Subrecipient Expenditure	Federal Expenditure	Total Expenditure	
Department of Defense	DOD	Military Medical Research and Development	Cardiac Rhabdomyomas as Biomar				HT94252310212	12.420	\$ -	\$ 93,767	\$ 93,767	
	DOD	Military Medical Research and Development	Regulating Together in Tuberou	Univ of North Carolina at Chapel Hill		5128118	HT94252310344	12.420	-	150,619	150,619	
	DOD	Military Medical Research and Development	Combinatorial targeting of hig				HT94252310453	12.420	-	89,468	89,468	
	DOD	Military Medical Research and Development	Spreading depolarizations as a	University of Cincinnati		015141-00002	HT94252310483	12.420	-	22,122	22,122	
	DOD	Military Medical Research and Development	Novel RAC Pathway Inhibitors f				HT94252310960	12.420	-	143,883	143,883	
	DOD	Military Medical Research and Development	Multicenter Randomized Trial of Everolimus in Pediatric Heart Transplantation	Children's Hospital Boston		RYAN_Children's Boston	W81XWH1710532	12.420	-	1,819	1,819	
	DOD	Military Medical Research and Development	Preemptive Rituximab to Preven	University of Minnesota		N006814103	W81XWH1810577	12.420	-	9,504	9,504	
	DOD	Military Medical Research and Development	Antioxidant Therapy with N-Ace				W81XWH2010139	12.420	-	305,968	305,968	
	DOD	Military Medical Research and Development	Merlin-ASPP2 Tumor Suppressor				W81XWH2010377	12.420	-	185,077	185,077	
	DOD	Military Medical Research and Development	Inflammatory vigor in heteroge				W81XWH2010392	12.420	-	538,672	538,672	
	DOD	Military Medical Research and Development	Inflammatory vigor in heteroge				W81XWH2010393	12.420	-	56,423	56,423	
	DOD	Military Medical Research and Development	Mitochondrial ALR protein defi		University of Cincinnati		W81XWH2010477	12.420	13,408	55,987	69,395	
	DOD	Military Medical Research and Development	The role of mitochondria in bo				W81XWH2010689	12.420	-	110,187	110,187	
	DOD	Military Medical Research and Development	Ribosome Biogenesis Defects As	The Univ of Texas Hlth Sci Ctr @ San Ant		172411-170516	W81XWH2110148	12.420	-	169,290	169,290	
	DOD	Military Medical Research and Development	Role of endoplasmic reticulum				W81XWH2110907	12.420	-	34,379	34,379	
	DOD	Military Medical Research and Development	CHIPS (CHILLED Platelet Study)	University of Pittsburgh		FY2022-18477-SVC	W81XWH2190014	12.420	-	116,520	116,520	
	DOD	Military Medical Research and Development	Regulating Together: Randomize		University of Alabama		W81XWH2210168	12.420	49,629	554,195	603,824	
	DOD	Military Medical Research and Development	Regulation of Translation by N				W81XWH2210196	12.420	-	78,482	78,482	
	DOD	Military Medical Research and Development	Trial of Indication-based Tran	Children's Hospital Boston		W81XWH2210301	W81XWH2210301	12.420	-	42,068	42,068	
	DOD	Military Medical Research and Development	Defects in the transition from		The University of TX Health Science		W81XWH2210410	12.420	79,880	112,545	192,425	
	DOD	Military Medical Research and Development	Is There a Point of Convergen				W81XWH2210533	12.420	-	356,827	356,827	
	DOD	Military Medical Research and Development	Establishing Network Connectiv				W81XWH2210633	12.420	-	203,994	203,994	
	DOD	Military Medical Research and Development	Human and mouse models of DDX4				W81XWH2210805	12.420	-	109,158	109,158	
	DOD	Military Medical Research and Development	Delayed outcome mechanisms in				W81XWH2211075	12.420	-	379,808	379,808	
	DOD	Military Medical Research and Development	Military Medical Research and Development	Neurofibromatosis Research Pro	University of Alabama-Birmingham		000533783-SC010	W81XWH2230001	93.RD	-	32,816	32,816
	Military Medical Research and Development Total									142,917	3,953,578	4,096,495
	DARPA	Research and Technology Development	Systems biological assessment	Stanford University Medical Center		63182657-245431	W91NF2320019	12.910	-	129,415	129,415	
	Research and Technology Development Total									-	129,415	129,415
	Department of Defense Total									142,917	4,082,993	4,225,910
	Department of Education	DOE	Education Research, Development and Dissemination	Longitudinal Evaluation of Slu				R305A200028	84.305	-	380,443	380,443
		Education Research, Development and Dissemination Total								-	380,443	380,443
	Department of Education Total									-	380,443	380,443
	Department of Justice	DOJ	Crime Victim Assistance	VOCA Mayerson 2023				2023-VOCA-135104917	16.575	-	59,945	59,945
DOJ		Crime Victim Assistance	VOCA 2024				15POVC-23-GG-00458-ASSI	16.575	-	172,225	172,225	
Crime Victim Assistance Total								-	232,170	232,170		
DOJ		Edward Byrne Memorial Justice Assistance Grant Program	BJA Police Response Training f	The Arc of The United States INC		BJA Police Response Riddl	BJA Police Response	16.738	-	36,972	36,972	
Edward Byrne Memorial Justice Assistance Grant Program Total								-	36,972	36,972		
Department of Justice Total									-	269,142	269,142	
National Science Foundation	NSF	Biological Sciences	NSF/MCB-BSF: Modeling the mec		University of Cincinnati		2114950	47.074	55,178	229,809	284,987	
	Biological Sciences Total								55,178	229,809	284,987	
	NSF	Engineering Grants	Collaborative Research: Unders				2140441	47.041	-	46,271	46,271	
	Engineering Grants Total								-	46,271	46,271	
	NSF	Social, Behavioral, and Economic Sciences	A Contextual Analysis of Peer	University of Buffalo		R1352161	2234666	47.075	-	52,900	52,900	
	Social, Behavioral, and Economic Sciences Total								-	52,900	52,900	
National Science Foundation Total									55,178	328,980	384,158	
Dept of Health and Human Serv	NIH	Aging Research	Role of skeletal muscle stem c				R01AG059605	93.866	-	14,478	14,478	
	NIH	Aging Research	Novel mechanism of intestinal				R01AG063967	93.866	-	487,785	487,785	
	NIH	Aging Research	Accelerating research to advan	Tulane University		TUL-HSC-560466-22/23	R01AG077497	93.866	-	577,446	577,446	
	NIH	Aging Research	Coordinated mechanisms to resc		Univer of Texas Medical Branch Galveston		R01AG078174	93.866	27,707	480,351	508,058	
	NIH	Aging Research	Myonuclear dynamics during ske				R01AG082697	93.866	-	294,154	294,154	
	NIH	Aging Research	Investigating the role of CSF	University of Cincinnati		015438-00002	R01AG083164	93.866	-	23,218	23,218	
	NIH	Aging Research	Mechanisms in Lamin A function				R33AG054770	93.866	-	158,441	158,441	
	NIH	Aging Research	Sub to Tulane -Transfer from R	Tulane University		TUL-HSC-558537-20/21	R33AG057983	93.866	-	300,578	300,578	
	NIH	Aging Research	Regulation and function of imm				R56AG065327	93.866	-	19,257	19,257	
	Aging Research Total									27,707	2,355,708	2,383,415
	NIH	Allergy, Immunology and Transplantation Research	Immunological identity redefined by genetically foreign				DP1AI131080	93.855	-	158,099	158,099	
	NIH	Allergy, Immunology and Transplantation Research	Silencer Control of T cell Hom				F30AI157421	93.855	-	40,794	40,794	
	NIH	Allergy, Immunology and Transplantation Research	Single cell analysis of allorc				F30AI167482	93.855	-	47,688	47,688	
	NIH	Allergy, Immunology and Transplantation Research	Adipose Tissue Inflammation in				F31AI169757	93.855	-	41,412	41,412	

Children's Hospital Medical Center and Affiliates

Supplementary Schedule of Expenditure of Federal Awards
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Government Agency	Division	Government Branch	Award Title	Pass-Through Grantor	Subrecipient Name	Identifying Number	Federal Grant Number	ALN	Subrecipient Expenditure	Federal Expenditure	Total Expenditure
	NIH	Allergy, Immunology and Transplantation Research	Maternal B cells enforce fetal				K08AI180350	93.855	\$ -	\$ 140,643	\$ 140,643
	NIH	Allergy, Immunology and Transplantation Research	Improving Anaphylaxis Outcomes				K23AI175525	93.855	-	1,166	1,166
	NIH	Allergy, Immunology and Transplantation Research	Combinatory Effects of Genetic				K99AI158660	93.855	-	930	930
	NIH	Allergy, Immunology and Transplantation Research	Molecular Mechanisms of the Dy	Univ of Texas Medical Branch-Galveston		21-85495-01	P01AI150585	93.855	-	176,596	176,596
	NIH	Allergy, Immunology and Transplantation Research	Combinatory Effects of Genetic				R00AI158660	93.855	-	210,540	210,540
	NIH	Allergy, Immunology and Transplantation Research	Genetic Linkage in Lupus		Cinti Foundatn Biomedical Resrch & Educ LaJolla Inst for Allergy and Immunology		R01AI024717	93.855	148,500	703,986	906,345
									53,859	-	-
	NIH	Allergy, Immunology and Transplantation Research	Regulation of Gastrointestinal				R01AI045898	93.855	-	642,564	642,564
	NIH	Allergy, Immunology and Transplantation Research	Epidemiologic Impact of HPV Va		Indiana University Univ of California		R01AI104709	93.855	45,151	327,121	393,681
									21,409	-	-
	NIH	Allergy, Immunology and Transplantation Research	Innate mechanisms of regulatio				R01AI123176	93.855	-	482,604	482,604
	NIH	Allergy, Immunology and Transplantation Research	Genetic and Immunological Diss				R01AI124355	93.855	-	613,049	613,049
	NIH	Allergy, Immunology and Transplantation Research	Functional immune tolerance to non-inherited maternal an				R01AI124657	93.855	-	93,058	93,058
	NIH	Allergy, Immunology and Transplantation Research	Role and Regulation of TSLP in Childhood Allergic Disease				R01AI127392	93.855	-	17,927	17,927
	NIH	Allergy, Immunology and Transplantation Research	Food Allergy Outcomes Related	Northwestern University Medical School		60061589 CC	R01AI130348	93.855	-	137,291	137,291
	NIH	Allergy, Immunology and Transplantation Research	Non-Invasive Diagnosis of Pedi	Arkansas Children's Hospital		#034146-006/R01AI139032	R01AI139032	93.855	-	2,968	2,968
	NIH	Allergy, Immunology and Transplantation Research	Early life factors, gene-envir	Wake Forest University Health Sciences		R01AI139126	R01AI139126	93.855	-	90,713	90,713
	NIH	Allergy, Immunology and Transplantation Research	Translational Regulation of CD				R01AI139675	93.855	-	232,166	232,166
	NIH	Allergy, Immunology and Transplantation Research	Role of TET1 in airway epithel	University of California-Davis		A20-0494S001	R01AI141569	93.855	-	54,567	54,567
	NIH	Allergy, Immunology and Transplantation Research	Progesterone induced immune mo				R01AI145840	93.855	162,566	1,110,942	1,273,508
	NIH	Allergy, Immunology and Transplantation Research	Rapid, safe suppression of IgE	University of Cincinnati		012329-00005	R01AI145991	93.855	-	90,476	90,476
	NIH	Allergy, Immunology and Transplantation Research	Targeting natural killer cells		Duke University		R01AI148080	93.855	121,990	345,254	467,244
	NIH	Allergy, Immunology and Transplantation Research	Roles of FFAR 3-SCFA axis in T				R01AI148138	93.855	-	407,979	407,979
	NIH	Allergy, Immunology and Transplantation Research	Genomics of Inflammatory Bowel		Emory University University of Cincinnati Brigham and Women's Hospital		R01AI148276	93.855	18,313	365,171	448,490
									17,616	-	-
									47,390	-	-
	NIH	Allergy, Immunology and Transplantation Research	Viral and Cellular Determinant				R01AI150486	93.855	-	135,365	135,365
	NIH	Allergy, Immunology and Transplantation Research	An experimentally-refined, dyn				R01AI153442	93.855	-	751,891	751,891
	NIH	Allergy, Immunology and Transplantation Research	Immunobiology of Influenza Vir	Children's Hospital Boston		GENFDD0002024871	R01AI154470	93.855	-	1,280	1,280
	NIH	Allergy, Immunology and Transplantation Research	Proteasome targeting for allor	University of Pennsylvania		580121	R01AI154932	93.855	-	306,316	306,316
	NIH	Allergy, Immunology and Transplantation Research	Regulation of TLR signaling, I		Univ of Texas Southwestern		R01AI155426	93.855	245,678	458,724	704,402
	NIH	Allergy, Immunology and Transplantation Research	Regulation of C. difficile col	University of Cincinnati		013939-00002	R01AI158451	93.855	-	10,443	10,443
	NIH	Allergy, Immunology and Transplantation Research	Pay-it-forward gonorrhea testi	University of North Carolina		5123479/1R01AI158826-01	R01AI158826	93.855	-	43,078	43,078
	NIH	Allergy, Immunology and Transplantation Research	Multi-Center Molecular Diagnos	Arkansas Children's Hospital		VIPER_ACRI_Danziger-Isako	R01AI159684	93.855	-	2,569	2,569
	NIH	Allergy, Immunology and Transplantation Research	Mechanisms of staphylococcal s	University of Nebraska Medical Center		34-5301-2210-201	R01AI162964	93.855	-	195,833	195,833
	NIH	Allergy, Immunology and Transplantation Research	Leveraging Health Information	Children's National Medical Center		30007046	R01AI163232	93.855	-	17,812	17,812
	NIH	Allergy, Immunology and Transplantation Research	Hyperhydration to Improve Kidn	University of Calgary		R01AI165327	R01AI165327	93.855	-	67,304	67,304
	NIH	Allergy, Immunology and Transplantation Research	Malaria associated pathogenesi	Indiana University		9671_CCHMC	R01AI165946	93.855	-	13,343	13,343
	NIH	Allergy, Immunology and Transplantation Research	Commensal Candida albicans pri		Brown University		R01AI168222	93.855	238,565	351,692	590,257
	NIH	Allergy, Immunology and Transplantation Research	Kruppel-like factor-2 CD4+ T c				R01AI172960	93.855	-	441,628	441,628
	NIH	Allergy, Immunology and Transplantation Research	Gene regulatory network modeli		University of California Irvine		R01AI173314	93.855	313,361	392,629	705,990
	NIH	Allergy, Immunology and Transplantation Research	Biochemical mehanisms for sust	University of Pennsylvania		587137	R01AI175185	93.855	-	26,044	26,044
	NIH	Allergy, Immunology and Transplantation Research	Pregnancy induced deacetylatio				R01AI175431	93.855	-	191,832	191,832
	NIH	Allergy, Immunology and Transplantation Research	Blocking granzyme-mediated imm		Emory University		R01AI176519	93.855	150,799	655,581	806,380
	NIH	Allergy, Immunology and Transplantation Research	The TNF Superfamily Control of				R01AI177359	93.855	-	604,447	604,447
	NIH	Allergy, Immunology and Transplantation Research	Sialylated antibody defense ag				R01AI181778	93.855	-	122,079	122,079
	NIH	Allergy, Immunology and Transplantation Research	Viral and Cellular Determinant				R01AI186611	93.855	-	16,943	16,943
	NIH	Allergy, Immunology and Transplantation Research	Genetic ancestry differences i				R21AI157363	93.855	-	67,370	67,370
	NIH	Allergy, Immunology and Transplantation Research	Decoding human T-cell allospec	University of Notre Dame		204631CCHMC	R21AI169863	93.855	-	101,929	101,929
	NIH	Allergy, Immunology and Transplantation Research	Early life dysbiosis, and skin	University of Cincinnati		015692-00002	R21AI176276	93.855	-	67,657	67,657
	NIH	Allergy, Immunology and Transplantation Research	Role of Innate Lymphocytes in				R21AI178517	93.855	-	48,046	48,046
	NIH	Allergy, Immunology and Transplantation Research	Copper tolerance and homeostas		University of Cincinnati..		R21AI143467	93.855	17,151	-	17,151
	NIH	Allergy, Immunology and Transplantation Research	USIDNET: A resource for clinic	Children's Hospital of Philadelphia		GRT-00002464	R24AI171055	93.855	-	37,702	37,702
	NIH	Allergy, Immunology and Transplantation Research	Biomarker-enhanced Artificial	Computer Technology Associates, Inc		STTR - Resubmission - 1	R41AI167224	93.855	-	10,230	10,230
	NIH	Allergy, Immunology and Transplantation Research	Dr. Ming Tan sub on an NIH STT	Scaled Microbiomics, LLC		SMB-CCHMC- 2023-001	R41AI172485	93.855	-	59,525	59,525
	NIH	Allergy, Immunology and Transplantation Research	A Nanoparticle-Based Multivale		Virginia Tech		R56AI148426	93.855	791	1,943	2,734
	NIH	Allergy, Immunology and Transplantation Research	Vaccinology Training Program				T32AI165396	93.855	-	269,540	269,540
	NIH	Allergy, Immunology and Transplantation Research	Gene therapy for SCID-X1 with	Children's Hospital Boston		GENFDD0002491271	U01AI125051	93.855	-	8,980	8,980
	NIH	Allergy, Immunology and Transplantation Research	A Phase II study by the Primar	Children's Hospital Los Angeles		1801	U01AI126612	93.855	-	5,437	5,437
	NIH	Allergy, Immunology and Transplantation Research	Controlling and Preventing Asthma Progression and Severi	Children's Hospital Boston		GENFDD0001867991	U01AI126614	93.855	-	264,895	264,895
	NIH	Allergy, Immunology and Transplantation Research	Impact of the Initial Influenz		Emory University University of Cincinnati		COVID-19 U01AI144673	93.855	1,309,301	3,498,130	5,161,258
									353,827	-	-
	NIH	Allergy, Immunology and Transplantation Research	SEAL: (Stopping Atopic dermati	Harvard and Fellows of Harvard College,		113159-5130587	U01AI147462	93.855	-	202,000	202,000
	NIH	Allergy, Immunology and Transplantation Research	Dynamic regulatory network mod	University of California, Irvine		2023-1986	U01AI150748	93.855	-	562,663	562,663
	NIH	Allergy, Immunology and Transplantation Research	Atopic dermatitis: mechanisms				U01AI152034	93.855	-	410,536	410,536
	NIH	Allergy, Immunology and Transplantation Research	Genomics of Nephrotic Syndrome	Duke University		UAI152585A	U01AI152585	93.855	-	408	408
	NIH	Allergy, Immunology and Transplantation Research	Randomized trial of viral spec				U01AI157620	93.855	-	668,573	668,573
	NIH	Allergy, Immunology and Transplantation Research	Multi-omics of the Frequent Ex				U01AI159087	93.855	-	444,261	444,261
	NIH	Allergy, Immunology and Transplantation Research	Advancing Transplantation Outc	Harvard Medical School		GENFDD0002098919/U01AI11630	U01AI163072	93.855	-	46,104	46,104
	NIH	Allergy, Immunology and Transplantation Research	Itacitinib to reduce lung infl	Duke University		A03-5348/U01AI163099-01	U01AI163099	93.855	-	47,101	47,101
	NIH	Allergy, Immunology and Transplantation Research	Comparison of High versus Stan	Vanderbilt University Medical Center		VUMC114005	U01AI167799	93.855	-	77,477	77,477
	NIH	Allergy, Immunology and Transplantation Research	HIPC-III ImmuneSignatures IOF	La Jolla Institute for Immunology		20012-01-156-284	U01AI167892	93.855	-	116,844	116,844
	NIH	Allergy, Immunology and Transplantation Research	Consortium of Food Allergy Res				U01AI181966	93.855	-	90,622	90,622
	NIH	Allergy, Immunology and Transplantation Research	Epithelial Genes in Allergic I				U19AI070235	93.855	-	1,598,217	1,598,217
	NIH	Allergy, Immunology and Transplantation Research	Systems biological assessment	Stanford University Medical Center		62927133-229950	U19AI167903	93.855	-	17,708	17,708
	NIH	Allergy, Immunology and Transplantation Research	i-AKC: Integrated AIRR Knowled	University of Texas at Dallas		GMO240908 PO000003119	U24AI177622	93.855	-	79,192	79,192
	NIH	Allergy, Immunology and Transplantation Research	Consortium of Eosinophilic Gas		Ann & Robert H Lurie Children's Hospital Arkansas Children's Hospital Baylor College of Medicine. Children's Hospital of Philadelphia ICAHN School of Medicine at Mount Sinai Mayo Clinic Arizona Northwestern University Research Inst. at Nationwide Hos		U54AI117804	93.855	48,895	473,222	1,748,319
									17,707	-	-
									22,581	-	-
									65,776	-	-
									73,648	-	-
									42,853	-	-
									321,378	-	-
									16,383	-	-

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Government Agency	Division	Government Branch	Award Title	Pass-Through Grantor	Subrecipient Name	Identifying Number	Federal Grant Number	ALN	Subrecipient Expenditure	Federal Expenditure	Total Expenditure
					University of Alabama at Birmingham			\$	21,845	\$	-
					University of California				28,104		-
					University of Colorado				293,552		-
					University of North Carolina-Chapel Hill				99,504		-
					University of Pennsylvania				95,216		-
					University of Utah				111,239		-
					Vanderbilt University Medical Center				11,512		-
					Wake Forest Univ School of Medicine				4,904		-
	NIH	Allergy, Immunology and Transplantation Research	Vaccine and Treatment Evaluati		Henry M. Jackson Foundation for the		UM1AI1148372	93.855	199,973	1,528,093	1,728,150
					Nationwide Childrens Hospital				84	-	-
					University of Cincinnati		COVID-19 UM1AI1148372		17,586	916,657	934,243
	NIH	Allergy, Immunology and Transplantation Research	Vaccine and Treatment Evaluati	Emory University		UM1AI1148684		93.855	-	96,293	96,293
	NIH	Allergy, Immunology and Transplantation Research	Leadership Group for an Infect	National Jewish Health		20123803-CCHMC		93.855	-	112,664	112,664
	NIH	Allergy, Immunology and Transplantation Research	ADRN - LEADS: Longitudinal End	The Board of Regents Univ of Wisconsin		0000001464		93.855	-	663,676	663,676
	NIH	Allergy, Immunology and Transplantation Research	Childhood Asthma in Urban Sett	Johns Hopkins University		2004813187		93.855	184,698	642,813	827,511
	CDC	Allergy, Immunology and Transplantation Research	New Horizons in the Prevention					93.RD	-	377,797	377,797
	CDC	Allergy, Immunology and Transplantation Research	A Prospective Observational St					93.RD	-	119,253	119,253
	CDC	Allergy, Immunology and Transplantation Research	Safety of Simultaneous versus					93.RD	-	61,699	61,699
	CDC	Allergy, Immunology and Transplantation Research	CISA Consult 1 year Bridge Con					93.RD	-	286,770	286,770
	CDC	Allergy, Immunology and Transplantation Research	Safety of simultaneous mRNA CO	Children’s Hospital Boston		GENF00002272664		93.RD	-	113,420	113,420
	CDC	Allergy, Immunology and Transplantation Research	Respiratory Virus Surveillance					93.RD	-	103,090	103,090
	CDC	Allergy, Immunology and Transplantation Research	Clinical Immunization Safety					93.RD	-	41,126	41,126
	CDC	Allergy, Immunology and Transplantation Research	CISA Clinical immunization Saf					93.RD	-	197,867	197,867
	NIH	Allergy, Immunology and Transplantation Research	A Molecular Atlas for Benchmar	Stanford University Medical Center		63008243-240857		93.RD	-	375,145	375,145
	NIH	Allergy, Immunology and Transplantation Research	Vaccine and Treatment Evaluation Units (VTEU) Protocol D					93.RD	-	1,370,267	1,370,267
	NIH	Allergy, Immunology and Transplantation Research	Vaccine and Treatment Evaluation Units (VTEU) Protocol D					93.RD	144,918	796,975	941,893
	NIH	Allergy, Immunology and Transplantation Research	Mouse and Guinea Pig Models f					93.RD	-	26,144	26,144
	NIH	Allergy, Immunology and Transplantation Research	Pharmacokinetics of Understudi	Duke University		278589		93.RD	-		
		Allergy, Immunology and Transplantation Research Total							5,088,623	28,448,598	33,537,221
	NIH	Arthritis, Musculoskeletal and Skin Diseases Research	Vega K23 - Resubmission - 1				K23AR081424	93.846	-	179,719	179,719
	NIH	Arthritis, Musculoskeletal and Skin Diseases Research	Mitochondrial regulation of ca				K99AR078253	93.846	-	20,235	20,235
	NIH	Arthritis, Musculoskeletal and Skin Diseases Research	Cincinnati Rheumatic Diseases				P30AR070549	93.846	-	649,224	649,224
	NIH	Arthritis, Musculoskeletal and Skin Diseases Research	Pediatric musculoSkeletal and		University of Cincinnati		P30AR076316	93.846	917	645,232	646,149
	NIH	Arthritis, Musculoskeletal and Skin Diseases Research	Deciphering mechanisms of myob				R01AR068286	93.846	-	716,336	716,336
	NIH	Arthritis, Musculoskeletal and Skin Diseases Research	Multi-site Randomized Clinical Trial of FIT Teens for Ju				R01AR070474	93.846	7,500	339,286	481,490
					Children’s Hospital Boston				32,575	-	-
					Children’s Mercy Hospital				20,775	-	-
					Connecticut Childrens Medical Center				30,383	-	-
					Emory University				29,507	-	-
					Indiana University				21,464	-	-
	NIH	Arthritis, Musculoskeletal and Skin Diseases Research	In vivo role of the fibroblast in muscular dystrophy				R01AR071301	93.846	-	87,516	87,516
	NIH	Arthritis, Musculoskeletal and Skin Diseases Research	Transcription Factor Genetics				R01AR073228	93.846	46,385	303,235	349,620
	NIH	Arthritis, Musculoskeletal and Skin Diseases Research	GSK3 beta study in patients wi		Boston University		R01AR073379	93.846	14,115	241,162	255,277
	NIH	Arthritis, Musculoskeletal and Skin Diseases Research	Identifying neural pathophysio		Universitat De Barcelona		R01AR074795	93.846	93,437	237,039	330,476
	NIH	Arthritis, Musculoskeletal and Skin Diseases Research	Epigenetic Determinants Influe		Children’s Hospital of Philadelphia		R01AR075857	93.846	12,896	261,870	343,247
					Duke University				11,636	-	-
					Johns Hopkins University				11,447	-	-
					Stanford University				45,398	-	-
	NIH	Arthritis, Musculoskeletal and Skin Diseases Research	The Pediatric Lupus Nephritis		Albert Einstein College of Medicine		R01AR079124	93.846	3,000	586,772	617,908
					Ann & Robert H Lurie Children’s Hospital				3,737	-	-
					Children’s Hospital Med Center of Akron				3,000	-	-
					Medical College of Wisconsin				3,000	-	-
					Medical University South Carolina				3,000	-	-
					Nationwide Childrens Hospital				7,119	-	-
					Seattle Children’s Hospital				5,280	-	-
					University of Colorado				3,000	-	-
	NIH	Arthritis, Musculoskeletal and Skin Diseases Research	Pathogenesis of Systemic Juven				R01AR079524	93.846	-	598,417	598,417
	NIH	Arthritis, Musculoskeletal and Skin Diseases Research	Development of Foundational Co	Children’s Hospital Boston		GENF00002512074		93.846	-	9,484	9,484
	NIH	Arthritis, Musculoskeletal and Skin Diseases Research	Improving delivery of therapeu				R33AR076771	93.846	-	32,788	32,788
	NIH	Arthritis, Musculoskeletal and Skin Diseases Research	Electrical Coupling of Circula				R33AR078060	93.846	-	220,706	220,706
	NIH	Arthritis, Musculoskeletal and Skin Diseases Research	Cincinnati Training Program in				T32AR069512	93.846	-	180,462	180,462
	NIH	Arthritis, Musculoskeletal and Skin Diseases Research	Towards personalized use of me	Oklahoma Medical Research Foundation		0352-02_CHMC_SH		93.846	-	86,772	86,772
		Arthritis, Musculoskeletal and Skin Diseases Research Total							409,571	5,396,255	5,805,826
	BARDA	Biomedical Advance Research and Development	Development, validation and us	University of Cincinnati		015548-00002:	75A50123C00052	93.RD	-	30,172	30,172
		Biomedical Advance Research and Development Total							-	30,172	30,172
	NIH	Biomedical Research and Research Training	Mechanisms of cardiomyocyte dy				K08GM148957	93.859	-	192,463	192,463
	NIH	Biomedical Research and Research Training	Developing a Precision Medicin				K23GM151444	93.859	-	194,555	194,555
	NIH	Biomedical Research and Research Training	Role of Vpu, Tetherin, and Sig		University of Wisconsin System		R01AI150475	93.859	26,245	70,353	96,598
	NIH	Biomedical Research and Research Training	Mechanisms of Homeodomain Tran		University of Cincinnati		R01GM079428	93.859	100,370	415,882	516,252
	NIH	Biomedical Research and Research Training	Age-Dependent Mechanisms of Me				R01GM115973	93.859	-	47,965	47,965
	NIH	Biomedical Research and Research Training	Role of STAT3 in sepsis-induced adipose tissue browning				R01GM126551	93.859	-	22,567	22,567
	NIH	Biomedical Research and Research Training	Functional characterization of		The Ohio State University- Spon Programs		R01GM134731	93.859	3,972	138,068	142,040
	NIH	Biomedical Research and Research Training	Dynamic regulation of lineage-				R01GM143161	93.859	-	296,006	296,006
	NIH	Biomedical Research and Research Training	Therapeutic resistance and agg	University of Cincinnati		014895-00002		93.859	-	17,637	17,637
	NIH	Biomedical Research and Research Training	Finding Appropriate Subtypes i	Children’s Hospital of Philadelphia		FAST BOLUS		93.859	-	229,501	229,501
	NIH	Biomedical Research and Research Training	Establishment of a multi-cente				R01GM150093	93.859	-	279,713	279,713
	NIH	Biomedical Research and Research Training	Leveraging multi-omics to maxi		Ann & Robert H Lurie Children’s Hospital		R21GM151703	93.859	10,710	165,699	201,062
					Emory University				24,653	-	-

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Government Agency	Division	Government Branch	Award Title	Pass-Through Grantor	Subrecipient Name	Identifying Number	Federal Grant Number	ALN	Subrecipient Expenditure	Federal Expenditure	Total Expenditure
NIH	Biomedical Research and Research Training	NIH	Biobank of small extracellular WE ENGAGE via Data and Stories to Improve Community Health		Miami University.. University of Cincinnati		R21GM151734	93.859	\$ -	\$ 200,482	\$ 200,482
							R25GM129808	93.859	2,659	149,307	154,840
NIH	Biomedical Research and Research Training	NIH	#MyHealth: Training the Next G	University of Michigan		SUBK00013637	R25GM137361	93.859	-	38,203	38,203
NIH	Biomedical Research and Research Training	NIH	Regulatory Mechanisms Governin				R35GM140805	93.859	-	355,173	355,173
NIH	Biomedical Research and Research Training	NIH	How CHAF1B maintains cell stat				R35GM142452	93.859	-	370,627	370,627
NIH	Biomedical Research and Research Training	NIH	Antibiotic Model-Informed Prec				R35GM146701	93.859	-	448,688	448,688
NIH	Biomedical Research and Research Training	NIH	Method Development for Single-				R35GM147283	93.859	-	26,585	26,585
NIH	Biomedical Research and Research Training	NIH	Novel regulators of macrophage	University of Cincinnati		015245-00002	R35GM149538	93.859	-	16,392	16,392
NIH	Biomedical Research and Research Training	NIH	Mechanisms regulating the bios				R35GM150691	93.859	-	334,074	334,074
Biomedical Research and Research Training Total									171,483	4,009,940	4,181,422
NIH	Blood Diseases and Resources Research	NIH	Sickle Cell Anemia, Splenic Pa	University of California		705973	K23HL153763	93.839	-	163,539	163,539
NIH	Blood Diseases and Resources Research	NIH	Validation of a pediatric thro	Children's Hospital Boston		GENFD0002269955	K23HL163330	93.839	-	96	96
NIH	Blood Diseases and Resources Research	NIH	Novel Strategies to Improve BI				P01HL158688	93.839	-	340,813	340,813
NIH	Blood Diseases and Resources Research	NIH	The racial disparity in platel				R00HL136784	93.839	-	86,031	86,031
NIH	Blood Diseases and Resources Research	NIH	Mechanisms of granulocyte home	The University of Chicago		FP066598-A	R01HL122661	93.839	-	448,824	448,824
NIH	Blood Diseases and Resources Research	NIH	Chronic thrombus ablation with				R01HL133334	93.839	-	51,092	51,092
NIH	Blood Diseases and Resources Research	NIH	Small molecules targeting RhoA				R01HL147536	93.839	-	119,638	119,638
NIH	Blood Diseases and Resources Research	NIH	Linking Endotypes and Outcomes	Children's Hospital of Philadelphia		3201710624	R01HL148054	93.839	-	66,074	66,074
NIH	Blood Diseases and Resources Research	NIH	The role of mitochondria in he		Johns Hopkins University		R01HL151654	93.839	17,536	840,177	857,713
NIH	Blood Diseases and Resources Research	NIH	The Role of Erythroblastic Isl		The Feinstein Institute Medical Research		R01HL152099	93.839	330,440	335,039	665,479
NIH	Blood Diseases and Resources Research	NIH	Mechanisms whereby IFN-gamma s	University of Pittsburgh		AWD00003978	R01HL153106	93.839	-	43,426	43,426
NIH	Blood Diseases and Resources Research	NIH	Spatial control of myeloid dif				R01HL153229	93.839	-	531,276	531,276
NIH	Blood Diseases and Resources Research	NIH	MIDAS: Microangiopathy, Endoth	The Ohio State University Research Fnd		60078812	R01HL153723	93.839	-	116,946	116,946
NIH	Blood Diseases and Resources Research	NIH	Functional characterization of	The University of Texas Southwestern		GMO231108	R01HL153963	93.839	-	1,113	1,113
NIH	Blood Diseases and Resources Research	NIH	Inflammatory Mechanisms in Pos	University of Cincinnati		014082-00002	R01HL155579	93.839	-	19,961	19,961
NIH	Blood Diseases and Resources Research	NIH	Transfusion and Organ Dysfunct	Nationwide Children's Hospital		700277-0223-00	R01HL157208	93.839	-	51,402	51,402
NIH	Blood Diseases and Resources Research	NIH	Role of the local vascular mic				R01HL158616	93.839	-	677,703	677,703
NIH	Blood Diseases and Resources Research	NIH	The role of contact pathway fa				R01HL160582	93.839	-	672,615	672,615
NIH	Blood Diseases and Resources Research	NIH	Thrombosis Risk in Transgender				R01HL161153	93.839	-	504,594	504,594
NIH	Blood Diseases and Resources Research	NIH	Hematopoietic Stem Cell engraft				R01HL162649	93.839	-	772,346	772,346
NIH	Blood Diseases and Resources Research	NIH	The Darbepoetin Kindergarten D	RTI International		3-312-0219253-67538L	R01HL166254	93.839	-	95,775	95,775
NIH	Blood Diseases and Resources Research	NIH	Preserving the bone marrow nic	University of Florida		SUB000003942	R01HL166512	93.839	-	48,087	48,087
NIH	Blood Diseases and Resources Research	NIH	Initiators of thrombotic micro				R01HL171046	93.839	-	131,352	131,352
NIH	Blood Diseases and Resources Research	NIH	The 11th Annual PTCTC Educatio				R13HL173950	93.839	-	22,000	22,000
NIH	Blood Diseases and Resources Research	NIH	Decoding innate immune signal				R35HL166430	93.839	-	1,237,633	1,237,633
NIH	Blood Diseases and Resources Research	NIH	Rho GTPase inhibitor for refri	Orange Grove Bio LLC		SBIR_OGB4_Zheng, Y	R44HL123103	93.839	-	88,588	88,588
NIH	Blood Diseases and Resources Research	NIH	Decoding the Paradox of DDX41-				R56HL169244	93.839	-	299,538	299,538
NIH	Blood Diseases and Resources Research	NIH	Realizing Effectiveness Across		Baylor College of Medicine.		U01HL133883	93.839	9,313	769,719	1,221,170
									83,527	-	-
									122,073	-	-
									135,384	-	-
									18,413	-	-
									19,975	-	-
NIH	Blood Diseases and Resources Research	NIH	Sickle Cell Improvement: ENhan	The Nemours Foundation		PO010597	U01HL159850	93.839	-	62,333	62,333
Blood Diseases and Resources Research Total									799,427	8,597,730	9,397,157
NIH	Cancer Biology Research	NIH	FA pathway activities in norma				R01CA223790	93.396	-	156,954	156,954
NIH	Cancer Biology Research	NIH	The role of transcription elon				R01CA234038	93.396	-	406,296	406,296
NIH	Cancer Biology Research	NIH	New activities of the human DE		University of Kentucky Research Fnd		R01CA239605	93.396	21,609	246,373	267,982
NIH	Cancer Biology Research	NIH	Defining genetic and metabolic			012828-002	R01CA239697	93.396	-	183,150	183,150
NIH	Cancer Biology Research	NIH	Patho-Genetic Analysis of Inva		Massachusetts General Hospital.		R01CA240317	93.396	98,817	262,826	632,865
									271,222	-	-
NIH	Cancer Biology Research	NIH	Modeling myelodysplasia		University of Utah		R01CA253981	93.396	56,636	311,838	689,897
									321,423	-	-
NIH	Cancer Biology Research	NIH	Dissecting innate immune signa		Johns Hopkins University		R01CA271455	93.396	320,766	524,324	845,090
NIH	Cancer Biology Research	NIH	Mechanisms underlying gastric	Columbia University		1(GG016956-01)	R01CA272903	93.396	-	431,127	431,127
NIH	Cancer Biology Research	NIH	The role of DNAJB1-PKAc-β-cate				R01CA278834	93.396	-	663,066	663,066
NIH	Cancer Biology Research	NIH	Mechanisms coupling DEK to onc				R37CA218072	93.396	-	421,491	421,491
NIH	Cancer Biology Research	NIH	Pathogenic Role of Foxl1 Hepa		Ann & Robert H Lurie Children's Hospital		R37CA225807	93.396	8,862	370,528	379,390
NIH	Cancer Biology Research	NIH	Therapeutic insights through p				R50CA211404	93.396	-	210,774	210,774
NIH	Cancer Biology Research	NIH	Understanding the immune respo	Washington University		WU-24-0236	U01CA275304	93.396	-	25,742	25,742
Cancer Biology Research Total									1,099,335	4,214,489	5,313,824
NIH	Cancer Cause and Prevention Research	NIH	Research Into Visual Endpoints	Vanderbilt University Medical Center		VUMV67585	R01CA225005	93.393	-	10,347	10,347
NIH	Cancer Cause and Prevention Research	NIH	Unbiased identification of spl				R01CA226802	93.393	-	92,074	92,074
NIH	Cancer Cause and Prevention Research	NIH	Strengthening epidermal defense				R01CA228113	93.393	-	105,708	105,708
NIH	Cancer Cause and Prevention Research	NIH	Investigating facilitator-driv	The University of Texas at Austin		UT AUS-SUB00001294	R01CA272757	93.393	-	15,490	15,490
NIH	Cancer Cause and Prevention Research	NIH	Re-Engaging AYA Survivors in C	Children's Hospital of Philadelphia		GRT-00003109	R01CA273328	93.393	-	93,854	93,854
NIH	Cancer Cause and Prevention Research	NIH	Towards an inclusive genomic r	Ohio State University Comprehensive Canc		SPC-1000012951 GR133524	R01CA284595	93.393	-	195,315	195,315
NIH	Cancer Cause and Prevention Research	NIH	A novel algorithm to compute a				R21CA263704	93.393	-	184,555	184,555
NIH	Cancer Cause and Prevention Research	NIH	A Pilot Feasibility Trial of a		Seattle Children's Hospital		R21CA268945	93.393	58,966	168,280	255,498
									28,252	-	-
Cancer Cause and Prevention Research Total									87,218	865,623	952,841

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Children's Hospital Medical Center and Affiliates

Supplementary Schedule of Expenditure of Federal Awards
For the Year Ended June 30, 2024

Government Agency	Division	Government Branch	Award Title	Pass-Through Grantor	Subrecipient Name	Identifying Number	Federal Grant Number	ALN	Subrecipient Expenditure	Federal Expenditure	Total Expenditure
	NIH	Cancer Detection and Diagnosis Research	Integrated Informatic and Expe	University of Pennsylvania		577035	R01CA227485	93.394	\$ -	\$ 297,566	\$ 297,566
	NIH	Cancer Detection and Diagnosis Research	Redefining hemophagocytic lym				R21CA256390	93.394	-	48,316	48,316
		Cancer Detection and Diagnosis Research Total							-	345,882	345,882
	NIH	Cancer Research Manpower	Targeting MBNLI-mediated alter				K08CA237753	93.398	-	155,383	155,383
	NIH	Cancer Research Manpower	Kinase-independent mechanism o				K08CA270305	93.398	-	208,704	208,704
	NIH	Cancer Research Manpower	Dissecting the role of clonal				R00CA252005	93.398	-	273,806	273,806
	NIH	Cancer Research Manpower	Pathways to Cancer Therapeutic	University of Cincinnati		1018713 & 1019848	T32CA117846	93.398	-	88,320	88,320
	NIH	Cancer Research Manpower	Training Grant Bogdanov	University of Cincinnati			1019596 T32CA236764	93.398	-	42,661	42,661
		Cancer Research Manpower Total							-	768,874	768,874
	NIH	Cancer Treatment Research	Linked regulation of tumor angiogenesis and chemo-resist				R01CA207068	93.395	-	78,047	78,047
	NIH	Cancer Treatment Research	(PQ10) Role of Gut Microbiota	The University of Texas Southwestern		PO: 000001910A GMO 201112	R01CA231303	93.395	-	147,513	147,513
	NIH	Cancer Treatment Research	Targeted Inhibition in Leukemi				R01CA237016	93.395	-	372,014	372,014
	NIH	Cancer Treatment Research	Co-targeting S6 and TAM kinas	University of Cincinnati		12653-002	R01CA239657	93.395	-	10,731	10,731
	NIH	Cancer Treatment Research	Mechanism of Therapy in high-r				R01CA250516	93.395	-	238,367	238,367
	NIH	Cancer Treatment Research	Therapeutic resistance and agg	University of Cincinnati		013734-00002	R01CA255331	93.395	-	16,007	16,007
	NIH	Cancer Treatment Research	Therapeutic targeting of IRAK4	Albert Einstein College of Medicine		312231	R01CA275007	93.395	-	364,999	364,999
	NIH	Cancer Treatment Research	Rational targeting of Cdc42 to				R01CA278756	93.395	-	273,575	273,575
	NIH	Cancer Treatment Research	Target the Dusp1 in Jak2 depen				R21CA280723	93.395	-	392,140	392,140
	NIH	Cancer Treatment Research	The Pediatric Brain Tumor Cons	St Jude's Children's Hospital		110068210-7947557	U01CA081457	93.395	-	61,906	61,906
	NIH	Cancer Treatment Research	PBTC-060: A Pilot Study of Saf	St Jude's Children's Hospital			U01CA081457	93.395	-	437	437
	NIH	Cancer Treatment Research	Norris PHI-COG Associate Medic	Public Health Institute		AR03186	U10CA180886	93.395	-	54,369	54,369
	NIH	Cancer Treatment Research	COMMITTEE LEADERSHIP: NIH Nati	Public Health Institute		AR03217	U10CA180886	93.395	-	30,176	30,176
	NIH	Cancer Treatment Research	O'Brien PHI-COG Study Chair AA	Public Health Institute		AR03402	U10CA180886	93.395	-	10,046	10,046
	NIH	Cancer Treatment Research	Study Chair	Public Health Institute		AR03413	U10CA180886	93.395	-	23,473	23,473
	NIH	Cancer Treatment Research	Study Chair	Public Health Institute		AR03426	U10CA180886	93.395	-	17,123	17,123
	NIH	Cancer Treatment Research	Study Chair AREN 1721 2021	Public Health Institute		AR03450	U10CA180886	93.395	-	8,562	8,562
	NIH	Cancer Treatment Research	Study Chair	Public Health Institute		AR03451	U10CA180886	93.395	-	9,215	9,215
	NIH	Cancer Treatment Research	COG NCTN Network Group Operati	Public Health Institute		AR04476	U10CA180886	93.395	-	5,539	5,539
	NIH	Cancer Treatment Research	AHEP 1531 (PHI managed)	Public Health Institute		AR04543/U10CA180886	U10CA180886	93.395	-	18,240	18,240
	NIH	Cancer Treatment Research	COG NCTN Network Group Operati	Public Health Institute		AR04575	U10CA180886	93.395	-	9,750	9,750
	NIH	Cancer Treatment Research	COG NCTN Network Group Operati	Public Health Institute		AR04579	U10CA180886	93.395	-	3,799	3,799
	NIH	Cancer Treatment Research	Biomarker, Imaging and Quality	Public Health Institute		AR04810	U10CA180886	93.395	-	8,833	8,833
	NIH	Cancer Treatment Research	COG Renal Tumor Committee Lead	Public Health Institute		AR10915	U10CA180886	93.395	-	26,365	26,365
	NIH	Cancer Treatment Research	COG NCTN Network Group Operati	Public Health Institute		AR61616	U10CA180886	93.395	-	4,609	4,609
	NIH	Cancer Treatment Research	PHI-COG Study Chair AALL2321	Public Health Institute		AR66192	U10CA180886	93.395	-	11,238	11,238
	NIH	Cancer Treatment Research	COG NCTN Network Group Operati	Public Health Institute		AR66195	U10CA180886	93.395	-	16,672	16,672
	NIH	Cancer Treatment Research	PHI-COG BIOSFP AHOD2131	Public Health Institute		AR67052	U10CA180886	93.395	-	1,794	1,794
	NIH	Cancer Treatment Research	COG Protocol Pathologist Revie	Public Health Institute		AR69799	U10CA180886	93.395	-	1,999	1,999
	NIH	Cancer Treatment Research	2023/24 STAR ACT Young Investi	Public Health Institute		AR70344	U10CA180886	93.395	-	25,000	25,000
	NIH	Cancer Treatment Research	PHI-COG PCR Work Order 2021	Public Health Institute		Norris R. PHI/NIH	U10CA180886	93.395	-	3,042	3,042
	NIH	Cancer Treatment Research	PHI-COG NCTN Work Order 2021	Public Health Institute		U10CA180886	U10CA180886	93.395	-	71,256	71,256
	NIH	Cancer Treatment Research	Childhood Cancer Survivor Stud	St Jude's Children's Hospital		RFA-CA-20-052	U24CA055727	93.395	-	243,183	243,183
	NIH	Cancer Treatment Research	Norris PHI-COG PEP-CTN WLI Cor	Public Health Institute		AR06748	UM1CA228823	93.395	-	19,276	19,276
		Cancer Treatment Research Total							-	2,579,295	2,579,295
	NIH	Cardiovascular Diseases Research	GDF10 in Neonatal Heart Develo				F31HL168819	93.837	-	4,585	4,585
	NIH	Cardiovascular Diseases Research	Effects of early Retinoic Acid				F31HL172346	93.837	-	3,521	3,521
	NIH	Cardiovascular Diseases Research	The role of dendritic cells in				F32HL168787	93.837	-	204	204
	NIH	Cardiovascular Diseases Research	The Role of PPARa in Cardiac Dysfunction in Sepsis				K08HL133377	93.837	-	8,810	8,810
	NIH	Cardiovascular Diseases Research	Immune Response-Mediated Reg	The University of Texas Southwestern		GMO241017 - 241018	P01HL160488	93.837	-	640,735	640,735
	NIH	Cardiovascular Diseases Research	Uncovering compensatory mechan				R00HL135258	93.837	-	22,798	22,798
	NIH	Cardiovascular Diseases Research	Thrombospondin 4 regulates ada				R01HL105924	93.837	-	96,125	96,125
	NIH	Cardiovascular Diseases Research	Venous Malformations (VM): A M				R01HL117952	93.837	-	648,134	648,134
	NIH	Cardiovascular Diseases Research	Using MRI to visualize regiona	Duke University	University of Cincinnati	A034671	R01HL126771	93.837	36,111	123,937	160,048
	NIH	Cardiovascular Diseases Research	Molecular examination of mitoc		Univ of Calif.-Davis-Mmrc		R01HL132831	93.837	218,921	340,383	559,304
	NIH	Cardiovascular Diseases Research	Molecular mechanisms of atrial				R01HL137766	93.837	-	495,669	495,669
	NIH	Cardiovascular Diseases Research	Cela1 in Lung Development and Disease				R01HL141229	93.837	-	189,585	189,585
	NIH	Cardiovascular Diseases Research	Predictive Molecular Markers o				R01HL142210	93.837	-	333,620	333,620
	NIH	Cardiovascular Diseases Research	Cardiac fibroblasts in postnat				R01HL142217	93.837	-	793,882	793,882
	NIH	Cardiovascular Diseases Research	Mechanisms of Congenital Heart Valve Disease				R01HL143881	93.837	-	84,271	84,271
	NIH	Cardiovascular Diseases Research	HDL composition/function and ca	University of Washington		UWSC10977	R01HL144558	93.837	-	5,109	5,109
	NIH	Cardiovascular Diseases Research	Molecular mechanisms underlyin				R01HL144774	93.837	-	349,352	349,352
	NIH	Cardiovascular Diseases Research	MRI Phenotyping of Early BPD a		University of Iowa		R01HL146689	93.837	84,418	75,618	160,036
	NIH	Cardiovascular Diseases Research	Impact of Well-Timed vs. Mis-t		Rush University Medical Center		R01HL147915	93.837	30,979	603,217	634,196
	NIH	Cardiovascular Diseases Research	Novel Methods to Grow the Impa				R01HL147957	93.837	-	298,286	298,286
	NIH	Cardiovascular Diseases Research	Ultrasound-Mediated Controlled	University of Cincinnati		012268-003	R01HL148451	93.837	-	203,548	203,548
	NIH	Cardiovascular Diseases Research	Accelerating research to advan		Children's Hospital Boston		R01HL151604	93.837	199,191	213,628	618,311
					Vanderbilt University Medical Center				205,492	-	-
	NIH	Cardiovascular Diseases Research	MINDS Imaging Ancillary Study	University of Pittsburgh		AWD00002377 (134596-9)	R01HL152740	93.837	-	14,207	14,207
	NIH	Cardiovascular Diseases Research	Mechanisms underlying myxomato				R01HL154522	93.837	-	580,881	580,881
	NIH	Cardiovascular Diseases Research	Hypertrophic Cardiomyopathy: U	Brigham & Women's Hospital		2020A015252	R01HL155568	93.837	-	5,608	5,608
	NIH	Cardiovascular Diseases Research	Endothelial subpopulations in				R01HL156270	93.837	-	481,560	481,560
	NIH	Cardiovascular Diseases Research	Coronary Atherosclerosis and I	University of Cincinnati		014604-00002	R01HL156779	93.837	-	117,710	117,710
	NIH	Cardiovascular Diseases Research	Innate immune response signali				R01HL156852	93.837	-	572,084	572,084
	NIH	Cardiovascular Diseases Research	Pathogenesis and Treatment of				R01HL156866	93.837	-	814,542	814,542
	NIH	Cardiovascular Diseases Research	Lipoprotein Interactions in th		University of Cincinnati		R01HL157260	93.837	120,488	261,660	382,148
	NIH	Cardiovascular Diseases Research	Effect of reproductive history		Kaiser Foundation Res Institute		R01HL158100	93.837	2,370	699,604	761,365
					University of Cincinnati				43,693	-	-
					University of Pittsburgh				15,698	-	-

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Supplementary Schedule of Expenditure of Federal Awards
For the Year Ended June 30, 2024

Government Agency		Division	Government Branch	Award Title	Pass-Through Grantor	Subrecipient Name	Identifying Number	Federal Grant Number	ALN	Subrecipient Expenditure	Federal Expenditure	Total Expenditure
NIH	Cardiovascular Diseases Research	Cardiovascular Diseases Research	Cardiovascular Diseases Research	Microprotein Regulation of Mit	Feinstein Institute for Medical Research University of Florida Univ of California	University of Cincinnati	AWD00001721_CR_Cincinnati	R01HL160569	93.837	\$ -	\$ 397,217	\$ 397,217
				Dissecting the role of the car				R01HL160765	93.837	-	636,606	636,606
				Thrombospondin1-regulated atro				R01HL162595	93.837	-	579,138	579,138
				Kids: Nocturnal Investigation				R01HL162912	93.837	-	58,280	58,280
				Role of SHE and ABL signaling				R01HL163161	93.837	-	105,353	105,353
				Racial/Ethnic Influences on Ea				R01HL164823	93.837	-	55,245	55,245
				Harnessing novel glucocorticoi				R01HL166356	93.837	-	457,275	457,275
				Role of apoE in HDL-mediated e				R01HL167200	93.837	74,940	425,522	500,462
				Pathogenesis of Vascular Anoma				R01HL167700	93.837	-	41,371	41,371
				Mechanisms governing the diffie				R01HL168790	93.837	-	392,782	392,782
				Developing DWORF gene therapy	Murdoch Childrens Research Institute Uganda Heart Institute University of Washington Children’s Research Institute Murdoch Childrens Research Institute The University of Melbourne University of Washington			R01HL171221	93.837	-	165,866	165,866
				Genetic Contributions to Valva				R03HL159537	93.837	-	180,640	180,640
				Finding the contribution of th				R21HL162572	93.837	-	58,505	58,505
				Intramuscular vs. Enteral Peni				R33HL166441	93.837	33,814	138,289	384,739
										210,214	-	-
										2,422	-	-
				Intramuscular vs. Enteral Peni				R61HL166441	93.837	369,736	277,136	811,184
										107,775	-	-
										17,037	-	-
										39,500	-	-
				Understanding Cardiovascular D	Children’s Hospital Boston Children’s Hospital Los Angeles Columbia University ICAHN School of Medicine at Mount Sinai The University of Texas Science Center University of California University of Michigan University of Pittsburgh University of Utah University of Virginia Yale University			T32HL125204	93.837	-	270,881	270,881
				Administrative Coordinating Ce				U01HL131003	93.837	65,918	4,332,754	5,015,073
										50,000	-	-
										52,537	-	-
										6,694	-	-
										34,482	-	-
										25,211	-	-
										85,889	-	-
										86,021	-	-
										75,029	-	-
										33,454	-	-
										167,084	-	-
				Lung Map submission with UC Sa	University of California San Diego New England Research Institutes New England Research Institutes New England Research Institutes New England Research Institutes/HealthCore	Indiana University		U01HL148867	93.837	-	43,964	43,964
				Vascular Core for Dyslipidemia of Obesity Intervention T				U24HL135691	93.837	-	5,524	5,524
				Single Institutional Review Bo				U24HL135691	93.837	-	261,963	261,963
				PHN COVID/MUSIC Study Subcontr				COVID-19 U24HL135691	93.837	-	4,500	4,500
				Impact of Race and Ethnicity o				U24HL135691	93.837	-	74,000	74,000
				Pediatric Heart Network Prairieland Consortium				UG1HL135678	93.837	141,085	117,563	258,648
				Multicenter Clinical Trial of				UH3HL148318	93.837	-	9,201	9,201
				Pediatric Influence of Cooling				UH3HL159134	93.837	-	49,373	49,373
				Pediatric Heart Network Joint				UM1HL172717	93.837	55,419	170,533	225,952
				Cardiovascular Diseases Research Total						2,691,622	18,392,354	21,083,976
				SMPD4: Role of a microcephaly	Midwestern University University of Colorado			F31HD104350	93.865	-	14,219	14,219
				Child Health Research Career D				K12HD028827	93.865	-	534,221	534,221
				Clinical Pharmacology K12 Trai				K12HD113190	93.865	30,517	24,497	144,409
										89,395	-	-
				Surviving and Thriving in the				K23HD094855	93.865	-	27,316	27,316
				Electrophysiological Biomarker				K23HD101416	93.865	-	123,787	123,787
				Tracking early emergence of so				K23HD109375	93.865	-	155,083	155,083
				CLEAR consortium: Discovering				P01HD093363	93.865	170,947	1,558,714	1,751,716
										22,055	-	-
				Pediatric HIV/AIDS Cohort Stud	Harvard Medical School Fralin Biomedical Research Institute Indiana University	University of Calgary		117267-0184-5119274	93.865	-	18,464	18,464
				C-Progress Pilot Grant for R03				P2CHD101912	93.865	-	9,264	9,264
				The Indiana University-Ohio St				P30HD106451	93.865	-	17,801	17,801
				Xenbase: a Xenopus Model Organ				P41HD064556	93.865	625,620	848,258	1,473,878
				Personalized Immunomodulation				PL1HD105462	93.865	-	11,409	11,409
				Establishment of the meiotic e				R00HD097285	93.865	-	303,319	303,319
				Genomic and functional analyse				R00HD104902	93.865	-	220,021	220,021
				Prenatal Genetic Diagnosis by				R01HD055651	93.865	-	88,961	88,961
				Molecular signaling in uterine				R01HD068524	93.865	-	430,134	430,134
				Long-Term Outcomes of Intervene				1-571918-CHMC	93.865	-	3,048	3,048
				A Cognitive Test Battery for I	Oklahoma State University University of California-Davis Children’s Hospital of Philadelphia Medical College of Wisconsin Colorado State University University of Michigan University of Florida Children’s National Medical Center University of California-Davis	Colorado State University		1580GYB180	93.865	-	188,700	188,700
				VIRTUUS Children’s Study-Valid				3200880522	93.865	-	4,321	4,321
				The Effect of Emergency Depart				R01HD091302	93.865	-	5,120	5,120
				Vocational Fit Assessment and				R01HD092474	93.865	-	59,025	59,025
				Disorders/Differences of Sex Development (DSD) translational research network.				SUBK00008039	93.865	-	26,154	26,154
				CES1 Genetic Variation Influen				R01HD093612	93.865	-	5,103	5,103
				A multicenter collaborative cl				30004927-01	93.865	-	8,856	8,856
				Early Childhood Communication				A19-0460-S002	93.865	-	394	394
				Cognitive Outcome Measures in				R01HD093754	93.865	44,792	108,014	152,806
				Improving the Detection of ST				R01HD094213	93.865	-	78,128	78,128
				Exploring vascular-mesenchymal	Connecticut Childrens Medical Center Nationwide Childrens Hospital The Broad Institute Inc. University of Cincinnati			R01HD094698	93.865	-	25,828	25,828
				Dosing and Pilot Efficacy of 2				R01HD094862	93.865	43,094	208,813	382,255
										3,661	-	-
										106,402	-	-
										20,285	-	-
				Stress Hydrocortisone In Pedia	Children’s Hospital Boston UCLA School of Public Health Colorado State University	University of Cincinnati	GENFD0001752112	R01HD096901	93.865	-	185,556	185,556
				Deciphering the pathophysiology				R01HD098280	93.865	-	238,293	238,293
				Discovery of Molecular Targets				R01HD098389	93.865	-	104,935	104,935
				Executive Function Outcome Mea				R01HD099150	93.865	-	104,063	104,063
				Improving the Effectiveness an				R01HD099775	93.865	71,636	25,078	96,714
				Genomics of bone and body comp				GRT-00000601	93.865	-	25,735	25,735

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Children's Hospital Medical Center and Affiliates

Supplementary Schedule of Expenditure of Federal Awards
For the Year Ended June 30, 2024

Government Agency	Division	Government Branch	Award Title	Pass-Through Grantor	Subrecipient Name	Identifying Number	Federal Grant Number	ALN	Subrecipient Expenditure	Federal Expenditure	Total Expenditure
	NIH	Child Health and Human Development Extramural Research	Enhancing Nursing Care Reliabi	Ohio State University		60077379	R01HD100455	93.865	\$ -	\$ 96,886	\$ 96,886
	NIH	Child Health and Human Development Extramural Research	Development and persistence of	North Carolina State University		2020-2189-01	R01HD101406	93.865	-	8,507	8,507
	NIH	Child Health and Human Development Extramural Research	Skeletal Health and Bone Marro	Children's Hospital Boston		Boston_Sub TBD	R01HD101421	93.865	-	313,816	313,816
	NIH	Child Health and Human Development Extramural Research	Pragmatic Pediatric Trial of B	Children's Hospital of Philadelphia		PO# 20302538/GRT-00000762	R01HD101528	93.865	-	41,483	41,483
	NIH	Child Health and Human Development Extramural Research	Integrating genomic studies of		University of California		R01HD101669	93.865	68,034	278,264	422,291
					University of Exeter				75,993	-	-
	NIH	Child Health and Human Development Extramural Research	An Injury Plausibility Assessm	Lurie Children's Hospital of Chicago		901615-CCHMC	R01HD102428	93.865	-	1,191	1,191
	NIH	Child Health and Human Development Extramural Research	A randomized controlled trial	University of California-Davis		A21-0255-S001	R01HD102571	93.865	-	72,813	72,813
	NIH	Child Health and Human Development Extramural Research	Endocannabinoid Signaling duri				R01HD103475	93.865	-	496,005	496,005
	NIH	Child Health and Human Development Extramural Research	Integration of spatiotemporal		University of Pittsburgh		R01HD103623	93.865	-	321,767	321,767
	NIH	Child Health and Human Development Extramural Research	Automated Risk Assessment for		Children's Hospital of Philadelphia		R01HD103630	93.865	193,947	466,596	660,543
	NIH	Child Health and Human Development Extramural Research	Leveraging the electronic heal		Tel Aviv Medical Center		R01HD103654	93.865	443	570,491	658,926
									87,992	-	-
	NIH	Child Health and Human Development Extramural Research	Enhancement of Newborn Screeni	University of Buffalo		R1304645	R01HD104814	93.865	-	17,940	17,940
	NIH	Child Health and Human Development Extramural Research	Obesity Prevention Targets for	Colorado State University		G-50243-01	R01HD105233	93.865	-	224,251	224,251
	NIH	Child Health and Human Development Extramural Research	Behavior Measure for Children		University of Colorado		R01HD105679	93.865	72,238	372,180	444,418
	NIH	Child Health and Human Development Extramural Research	Prevention of behavior problem		Johns Hopkins University.		R01HD105727	93.865	27,697	652,510	709,376
					The Ohio State University				29,169	-	-
	NIH	Child Health and Human Development Extramural Research	Evaluating additive effects of		Northeastern University		R01HD106353	93.865	115,003	410,390	639,258
					Research Inst. at Nationwide Hos				59,865	-	-
					University of Colorado				54,000	-	-
	NIH	Child Health and Human Development Extramural Research	Using Dogs to Promote Therapeu				R01HD106416	93.865	-	322,213	322,213
	NIH	Child Health and Human Development Extramural Research	Precision Alemtuzumab Therapy				R01HD107690	93.865	-	270,956	270,956
	NIH	Child Health and Human Development Extramural Research	FX ENTRAIN: Perturbation of ne		Brown University		R01HD108222	93.865	23,633	577,384	601,017
	NIH	Child Health and Human Development Extramural Research	Human Milk as a Biological Sys	University of Cincinnati		014666-00003	R01HD109915	93.865	-	85,613	85,613
	NIH	Child Health and Human Development Extramural Research	Screen to Prevent (S2P): Using		Children's Hospital of Philadelphia		R01HD110321	93.865	120,790	214,062	546,926
					Children's National Medical Center				32,548	-	-
					Medical College of Wisconsin				66,605	-	-
					Nationwide Childrens Hospital				31,807	-	-
					University of Utah				81,114	-	-
	NIH	Child Health and Human Development Extramural Research	Endotypes in Children with Sev	University of Michigan		SUBK00010627	R01HL149910	93.865	-	8,214	8,214
	NIH	Child Health and Human Development Extramural Research	ROR Plus: Randomized Trial of				R21HD102702	93.865	-	66,585	66,585
	NIH	Child Health and Human Development Extramural Research	Developmental Pharmacology of	Hasbro Children's Hospital		7137746	R21HD107675	93.865	-	72,344	72,344
	NIH	Child Health and Human Development Extramural Research	Addressing Sleep in Adolescent				R21HD110653	93.865	-	190,155	190,155
	NIH	Child Health and Human Development Extramural Research	Pediatric Injury: Modules to Manage Medical Stress	University of Utah		1046978	R24HD096350	93.865	-	70,618	70,618
	NIH	Child Health and Human Development Extramural Research	Evaluating Assessment and Medi		Univ of California-Davis-Mmrce		R33HD100934	93.865	41,741	604,450	691,850
					University of Pittsburgh				45,659	-	-
	NIH	Child Health and Human Development Extramural Research	HEAL Initiative: Antenatal Opi	RTI International			RL1HD104254	93.865	6,964	700,275	707,239
	NIH	Child Health and Human Development Extramural Research	Enhancing Pediatric Treatment		Emory University		T32HD068223	93.865	-	185,504	185,504
	NIH	Child Health and Human Development Extramural Research	T32 Cincinnati Pediatric Clini				T32HD069054	93.865	-	169,387	169,387
	NIH	Child Health and Human Development Extramural Research	dGTEX BPC Participation	The Nat'l Disease Research Interchange		141143/1U24HD106537-01	U24HD106537	93.865	-	52,085	52,085
	NIH	Child Health and Human Development Extramural Research	Translational medicine and mec		University of California, Riverside		U54HD104461	93.865	407,368	779,101	1,910,741
					University of Cincinnati				41,212	-	-
					University of Oklahoma				21,304	-	-
					University of Texas Southwestern				661,756	-	-
	NIH	Child Health and Human Development Extramural Research	NICHD Neonatal Research Networ				UG1HD027853	93.865	-	504,022	504,022
	NIH	Child Health and Human Development Extramural Research	HEAL initiative: Neonatal Opi				UG1HD107616	93.865	-	296,036	296,036
	NIH	Child Health and Human Development Extramural Research	Capitation - HEAL initiative:	RTI International		1U24HD107621	UG1HD107616	93.865	-	19,470	19,470
	NIH	Child Health and Human Development Extramural Research	Adolescent Medicine Trials Net	Florida State University		R000003155	UM2HD111102	93.865	-	137,333	137,333
		Child Health and Human Development Extramural Research Total							3,595,286	15,461,529	19,056,815
	ACL	Developmental Disabilities Basic Support and Advocacy Grants	Empowering Families	Ohio Coalition for the Education of Chil		Riddle_OCECD		93.630	-	21,857	21,857
	ACL	Developmental Disabilities Basic Support and Advocacy Grants	Accommodations and Adaptations	Florida Develop Disabil Council, Inc		FDDC #5045EM21	Project Search	93.630	-	14,627	14,627
		Developmental Disabilities Basic Support and Advocacy Grants Total							-	36,484	36,484
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Identification of the genetic				F30DK123841	93.847	-	16,990	16,990
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Global Lipidomics Analysis Tec				F31DK131885	93.847	-	18,878	18,878
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Elizabeth Coffey F32 Transfer				F32DK128979	93.847	-	65,621	65,621
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	The Role of DDX41 in Inherited				K01DK121733	93.847	-	136,180	136,180
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Role of VPS4A and ESCRT-III in				K01DK129270	93.847	-	147,592	147,592
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Microbial regulation of intest				K01DK135647	93.847	-	168,638	168,638
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Bridging the gap of late gesta				K08DK131259	93.847	-	170,117	170,117
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Commensal bacterial metabolism				K08DK134884	93.847	-	168,681	168,681
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Disrupted sleep architecture i				K23DK135797	93.847	-	215,253	215,253
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Digestive Health Center (DHC):				P30DK078392	93.847	-	1,452,060	1,452,060
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Personalized Cystic Fibrosis T		University of Cincinnati		P30DK117467	93.847	18,387	808,983	827,370
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Critical Translational Studies in Pediatric Nephrology				P50DK096418	93.847	-	111,140	111,140
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Pediatric Kidney Single Cell A	Washington University		WU-PCEN-03	P50DK133943	93.847	-	41,684	41,684
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Immunologic Dysfunction in Bil		Univ of Texas Southwestern		R01DK064008	93.847	200,382	19,061	219,443
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Adolescent Bariatric Surgery:		Sanford Research North		R01DK080020	93.847	10,380	340,059	352,029
					The CDM Group, Inc				1,590	-	-
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Genetic basis of virus induced				R01DK091566	93.847	-	85,096	85,096
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Immunopathogenesis of non-alco				R01DK099222	93.847	-	456,875	456,875
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	On the regulation of hepatic g	University of Cincinnati		014965-00002	R01DK106364	93.847	-	59,509	59,509
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Advancing Treatment for Pancre	University of Minnesota		N005115002	R01DK109124	93.847	-	36,559	36,559
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Epigenomic control of antimicrobial immunity in the intestine				R01DK114123	93.847	-	166,245	166,245
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Host integration of commensal				R01DK116868	93.847	-	452,392	452,392
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Molecular targets in cholestas				R01DK117266	93.847	-	212,870	212,870
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Manipulating DNA Damage-respon				R01DK117632	93.847	-	79,853	79,853
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Biomarkers for Urinary Tract I	University of Pittsburgh		AWD00000120 (132569-2)	R01DK118033	93.847	-	130,586	130,586
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Surgical or Medical Treatment		Ann & Robert H Lurie Children's Hospital		R01DK119450	93.847	-	403,503	719,815
					University of Colorado				5,714	-	-
									310,598	-	-

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For the Year Ended June 30, 2024

Government Agency	Division	Government Branch	Award Title	Pass-Through Grantor	Subrecipient Name	Identifying Number	Federal Grant Number	ALN	Subrecipient Expenditure	Federal Expenditure	Total Expenditure
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Molecular regulation of hepatic				R01DK120765	93.847	\$ -	\$ 145,229	\$ 145,229
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Regulation of functionally dis				R01DK121062	93.847	-	280,277	280,277
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Diabetes Journey: From systema		University of Florida		R01DK121295	93.847	154,595	132,406	287,001
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Sox Proteins Modulate Genomic				R01DK123092	93.847	-	442,314	442,314
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Role of extracellular vesicle		Vanderbilt University		R01DK123181	93.847	41,279	693,169	734,448
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Regulation of Niche Cell Diffie	Case Western University		RES516540	R01DK123299	93.847	-	17,800	17,800
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Microbiota-mediated fibrotic r	University of North Carolina		5117429	R01DK124617	93.847	-	13,852	13,852
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Host and viral determinants of	Children’s Hospital of Philadelphia		25460-GRT-00000414	R01DK125418	93.847	-	317,634	317,634
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Extracellular vesicle cargo an	Translational Genomics Research Institut		DISTEFANO-22-01-CCHMC	R01DK127015	93.847	-	6,291	6,291
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Determinants of inception of i	Massachusetts General Hospital		239459	R01DK127171	93.847	-	79,964	79,964
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Changing Health And Lifestyle		University of Delaware		R01DK128525	93.847	12,060	282,814	294,874
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Structure, function, and modul				R01DK131542	93.847	-	1,694	1,694
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Contributions of the enterocyt	The University of Chicago		AWD102456SUB00000571	R01DK132043	93.847	-	300,754	300,754
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Role of Etv4 and Etv5 in the s		Northwestern University		R01DK132052	93.847	16,391	385,365	401,756
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Multi-parametric quantitative				R01DK132346	93.847	-	617,062	617,062
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Precise Infliximab Exposure an		Indiana University		R01DK132408	93.847	43,736	669,496	860,146
					Medical College of Wisconsin				7,442	-	-
					Nationwide Childrens Hospital				38,266	-	-
					Nemours Children’s Clinic				50,963	-	-
					Stanford University				50,243	-	-
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Targeting POGlut1 to promote b				R01DK132751	93.847	-	121,785	121,785
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Diabetic Memory in Hematopoiet				R01DK133145	93.847	-	525,973	525,973
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Cutaneous biomarkers of pediat		University of California, San Diego		R01DK133198	93.847	395,212	452,442	847,654
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Artificial Intelligence to Pre	University of Alabama-Birmingham		000537127-SC002	R01DK133539	93.847	-	22,122	22,122
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Oral Feeding Difficulty in Lar	The Nemours Foundation		R01DK134499	R01DK134499	93.847	-	17,491	17,491
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	RNA silencing machinery in ext				R01DK134646	93.847	-	238,433	238,433
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Organoid-guided Precision Hepa				R01DK135478	93.847	-	137,383	137,383
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Genetic and Small Molecule Reg				R01DK135479	93.847	-	67,094	67,094
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	A Novel Obesity Prevention Pro				R01DK135497	93.847	-	298,072	298,072
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Liver-Gut-Microbiome Axis in P	Baylor College of Medicine		R01DK135602	R01DK135602	93.847	-	10,343	10,343
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	The role of serpins and LRP1 i				R01DK136512	93.847	-	22,704	22,704
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Mechanistic and Therapeutic Ro	University of California-Davis		A24-0282-S001	R01DK136815	93.847	-	155,949	155,949
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	ROLE OF CIRCADIAN RHYTHM AND I				R03DK130908	93.847	-	76,188	76,188
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Diabetes Timing and Types and				R03DK131156	93.847	-	254,619	254,619
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Fibrosis Beyond the Core: A Ne				R21DK133562	93.847	-	94,333	94,333
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	PAINED: Project Addressing Inc	Children’s National Medical Center		30007384-01	R01DK135406	93.847	-	23,724	23,724
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Systems Biology of Bone Marrow	Children’s Hospital Boston		GENFD0001792995	RC2DK122533	93.847	-	17,654	17,654
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	A generalizable framework for		University of Pittsburgh		RC2DK122376	93.847	148,177	905,321	1,385,025
					Yale University				331,527	-	-
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Protein biomarkers to predict	University of Minnesota		N010838401	R01DK138809	93.847	-	25,697	25,697
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Research Training in Pediatric				T32DK007695	93.847	-	210,462	210,462
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Pediatric Gastroenterology and				T32DK007727	93.847	-	557,409	557,409
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Research Training in Child Beh				T32DK063929	93.847	-	423,819	423,819
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Non Alcoholic Steatohepatitis	Cleveland Clin Lerner Col of Med of CWRU		1324-SUB	U01DK061732	93.847	-	208,934	208,934
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Clinical Center for Cholestati				U01DK062497	93.847	-	608,984	608,984
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	CKID IV (patient care and sala	Children’s Mercy Hospital		18-0007	U01DK066143	93.847	-	37,077	37,077
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Limited Competition for Contin	Children’s Mercy Kansas City		42189124	U01DK066143	93.847	-	50,369	50,369
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	CUREGN 2.0 - Midwest Pediatric	Nationwide Children’s Hospital		700198-0620-00	U01DK100866	93.847	-	37,444	37,444
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Defining the intestinal stem c				U01DK103117	93.847	-	518,637	518,637
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	INSPPIRE: A Longitudinal Cohor	University of Iowa		S02042-03	U01DK108334	93.847	-	101,073	101,073
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Phosphate binder therapy and c	UCLA School of Public Health		1652 G YA029	U01DK122013	93.847	-	21,731	21,731
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Pediatric Acute Liver Failure	Lurie Children’s Hospital of Chicago		901628-CCH	U01DK127995	93.847	-	33,900	33,900
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Clinical, imaging, and endosco				U01DK134356	93.847	-	261,254	261,254
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Cincinnati Children’s Clinical				U01DK134976	93.847	-	130,889	130,889
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Limited Competition for the Co	City of Hope		63054.2008523.669201	U24DK085532	93.847	-	7,326	7,326
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Cincinnati Cooperative Center				U54DK126108	93.847	-	991,144	991,144
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Modeling diabetes using an int		University of Illinois at Chicago		UH3DK119982	93.847	184,837	194,686	651,519
					University of North Texas				271,996	-	-
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Teen Longitudinal Assessment o	Lurie Children’s Hospital of Chicago		901645-CHMC	UM1DK072493	93.847	-	32,135	32,135
	NIH	Diabetes, Digestive, and Kidney Diseases Extramural Research	Teen Longitudinal Assessment of Bariatric Surgery (Teen-	University of Cincinnati		010577-009	UM1DK095710	93.847	-	87,196	87,196
		Diabetes, Digestive, and Kidney Diseases Extramural Research Total							2,293,775	18,332,342	20,626,117
	NIH	Discovery and Applied Research for Technological Innovations to Improve Human Health	MRI and Deep Learning for Earl				R01EB029944	93.286	-	560,993	560,993
	NIH	Discovery and Applied Research for Technological Innovations to Improve Human Health	Quantification of Liver Fibros		New York University School of Medicine		R01EB030582	93.286	25,206	450,323	488,032
					Univ of Michigan				12,503	-	-
	NIH	Discovery and Applied Research for Technological Innovations to Improve Human Health	MRI-Compatible Robot for Real-	Children’s National Medical Center		30006761-01	R01EB031084	93.286	-	89,841	89,841
	NIH	Discovery and Applied Research for Technological Innovations to Improve Human Health	Center for Innovative Diagnost	Johns Hopkins University		2006251659	U54EB007958	93.286	-	77,900	77,900
		Discovery and Applied Research for Technological Innovations to Improve Human Health Total							37,709	1,179,057	1,216,766
	NIH	Drug Abuse and Addiction Research Programs	Role of Siglec-1 in HIV Intera		University of Cincinnati		R01DA051895	93.279	14,728	482,713	497,441
	NIH	Drug Abuse and Addiction Research Programs	Modeling HIV and methamphetami		University of Cincinnati		R01DA056903	93.279	19,515	780,905	800,420
	NIH	Drug Abuse and Addiction Research Programs	Automated Substance Use Detect				R03DA054256	93.279	-	50,634	50,634
	NIH	Drug Abuse and Addiction Research Programs	Omics analysis of HIV during s	University of Cincinnati		014150-00002	R33DA048439	93.279	-	25,143	25,143
	NIH	Drug Abuse and Addiction Research Programs	SPRINT: Signature for Pain Rec	Stanford University		63308247-144386	R33NS114926	93.279	-	188,790	188,790
	NIH	Drug Abuse and Addiction Research Programs	4/6 HBCD Prenatal Experiences		University of Cincinnati		U01DA055342	93.279	122,274	1,068,440	1,190,714
	NIH	Drug Abuse and Addiction Research Programs	HEALTHy Brain and Child Develo	University of California San Diego		KR 705046	U24DA055325	93.279	-	65,947	65,947
	NIH	Drug Abuse and Addiction Research Programs	A cohort study of pain, psycho	Yale		CON-80004834 (GR122619)	UG1DA015831	93.279	-	48,014	48,014
		Drug Abuse and Addiction Research Programs Total							156,517	2,710,586	2,867,103

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Children’s Hospital Medical Center and Affiliates

Supplementary Schedule of Expenditure of Federal Awards
For the Year Ended June 30, 2024

Government Agency	Division	Government Branch	Award Title	Pass-Through Grantor	Subrecipient Name	Identifying Number	Federal Grant Number	ALN	Subrecipient Expenditure	Federal Expenditure	Total Expenditure
	HRSA	Emergency Medical Services for Children	Emergency Medicine Services fo		Medical College of Wisconsin Washington University		U0322684	93.127	\$ 119,299 168,605	\$ 447,325 -	\$ 735,229 -
		Emergency Medical Services for Children Total							287,904	447,325	735,229
	NIH	Environmental Health	Internalizing Behaviors and Neuroimaging Outcomes: Impa				R01ES027224	93.113	-	189	189
	NIH	Environmental Health	Contribution of Thirdhand Smoke to Overall Tobacco Smoke		San Diego St. Univ. Research Foundation University of Cincinnati		R01ES027815	93.113	214,574 12,208	43,096 -	269,878 -
	NIH	Environmental Health	Developmental neurotoxicity of	University of Pennsylvania		Chen NewFR R01	R01ES028277	93.113	-	44,764	44,764
	NIH	Environmental Health	Investigating the Impact of Ph	University of North Carolina		5129474	R01ES030078	93.113	-	33,665	33,665
	NIH	Environmental Health	Effects of DDE exposure on adi	University of Southern California		129965417	R01ES030364	93.113	-	14,548	14,548
	NIH	Environmental Health	ADVOCATE: Prevalence and Clini		San Diego St. Univ. Research Foundation University of Cincinnati		R01ES030743	93.113	171,762 12,453	450,287 -	634,502 -
	NIH	Environmental Health	Epigenetics, Air Pollution, an	University of Cincinnati		1R01ES031054-01A1	R01ES031054	93.113	-	157,809	157,809
	NIH	Environmental Health	Maternal Exposure to Low Level	Johns Hopkins University		2005604948	R01ES031272	93.113	-	3,047	3,047
	NIH	Environmental Health	Longitudinal Impact of Air Pol		Brown University University of Cincinnati		R01ES031621	93.113	47,887 32,863	1,125,686 -	1,206,436 -
	NIH	Environmental Health	Gene-pesticide interactions an				R01ES032270	93.113	-	569,852	569,852
	NIH	Environmental Health	Gestational PFAS Mixture Expos	Brown University		1R01ES032836-01	R01ES032836	93.113	-	63,992	63,992
	NIH	Environmental Health	Impact of pre- and postnatal c	University of Pennsylvania		582722	R01ES033054	93.113	-	173,276	173,276
	NIH	Environmental Health	OPEs and Adolescent Adiposity	University of Nevada, Las Vegas		GR16780	R01ES033200	93.113	-	141,848	141,848
	NIH	Environmental Health	Investigating the Impact of Ph	University of North Carolina		5129586	R01ES033252	93.113	-	399,677	399,677
	NIH	Environmental Health	Childhood and In-Utero Exposur	University of Cincinnati		014646-00002	R01ES034049	93.113	-	64,777	64,777
	NIH	Environmental Health	Pre- and postnatal chemical mi	University of Cincinnati		ULRF 22-1005-02	R01ES035133	93.113	-	25,872	25,872
	NIH	Environmental Health	A Residential Dust Control Int	University of Louisville		00002114	R21ES034187	93.113	-	27,047	27,047
	NIH	Environmental Health	Research Innovations using Sen	Brown University			R25ES034592	93.113	46,412	78,110	124,522
	NIH	Environmental Health	Early Warning Systems for Chil				R35ES030435	93.113	-	33,496	33,496
	NIH	Environmental Health	Training Grant	Icahn School of Medicine at Mount Sinai		0001147	T32ES007250	93.113	-	128,682	128,682
	NIH	Environmental Health	Environmental Carcinogenesis a	University of Cincinnati		1019779	T32ES007250	93.113	-	85,771	85,771
	NIH	Environmental Health	Training Grant	University of Cincinnati		1019541	T32ES010957	93.113	-	93,693	93,693
	NIH	Environmental Health	David Ohayon T32 Billing Agree	University of Cincinnati		1018979	T32ES010957	93.113	-	66,832	66,832
	NIH	Environmental Health	Prenatal inflammatory exposures and neonatal immune deve		Univ of Calif.-Davis-Mmrcc		U01ES029234	93.113	272,653	-	272,653
		Environmental Health Total							810,812	3,826,016	4,636,828
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Electrical Stimulation of Indu	Kennedy Krieger Research Institute		113126-0723-33B	K12NS098482	93.853	-	200,827	200,827
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Towards biomarkers of resilien				K23NS117734	93.853	-	208,204	208,204
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Mitogenic Activities in Neurof				R01NS028840	93.853	-	608,407	608,407
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Comparison of Hemorrhagic and	University of Cincinnati		012830-00013	R01NS030678	93.853	-	106,322	106,322
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Supraspinal Processing of Sens		Universitat De Barcelona		R01NS039426	93.853	10,207	565,585	575,792
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Identification and reversal of				R01NS065020	93.853	-	278,288	278,288
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	A New Model to Identify Preter				R01NS094200	93.853	-	1,003,247	1,003,247
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders					R01NS096053	93.853	-	58,140	58,140
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	MiR-155 and RUNX function in n		The University of TX Health Science		R01NS097233	93.853	54,196	533,856	588,052
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Binding of Epstein Barr Virus		Univ of Pennsylvania		R01NS099068	93.853	48,297	490,366	538,663
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Mechanisms of Biguanide Sensit		University of Cincinnati		R01NS099162	93.853	34,778	352,074	386,852
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Distinct Mechanisms of Cognitive Behavioral Therapy Effects in Youth with								
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Migraine: Insights from Neuroimaging and Quantitative Sensory Testing								
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	(The How and Why Youth with Headaches Get Better Study)								
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Assessing Population-based Rad	University of Cincinnati		011815-003	R01NS101321	93.853	-	233,262	233,262
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Progranulin:A Novel Gene in Gaucher Diseases	New York University			R01NS103824	93.853	-	1,924	1,924
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	A novel smart patch for the f	University of Cincinnati		012058-002	R01NS103931	93.853	-	8,105	8,105
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Sensitization of developing sc				R01NS103992	93.853	-	48,265	48,265
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Targeting the Hippo Signaling	University of Houston		R200017	R01NS105715	93.853	-	363,219	363,219
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Mechanisms linking hemostatic				R01NS105787	93.853	-	12,347	12,347
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Functional analysis of the mic				R01NS107258	93.853	-	246,601	246,601
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Headache Assessment of Childre	The Trustees of Columbia University		PECARN Headache	R01NS107453	93.853	-	300,365	300,365
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Neonatal Seizure Registry Deve	UCSF Human Research Program		11997sc	R01NS110826	93.853	-	14,669	14,669
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Spinal circuitry for ventilato				R01NS111166	93.853	-	33	33
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Mechanisms of muscle afferent				R01NS112255	93.853	-	268,494	268,494
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Bystander gene deletions in ca				R01NS113965	93.853	-	383,505	383,505
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Uncovering treatment targets f	University of Minnesota		P008296601	R01NS114074	93.853	-	276,670	276,670
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	CNS in congenital DMI1: pathoge				R01NS115438	93.853	-	295,084	295,084
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Diagnostic validity and safety	Johns Hopkins University		R01NS115929-01	R01NS115662	93.853	-	429,459	429,459
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Polyomic Predictors of Symptom	Pennsylvania State University		CCHMCNS115942	R01NS115929	93.853	-	254,523	254,523
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Role of mTOR in Circadian and	University of Florida		SUB00003646	R01NS115942	93.853	-	48,420	48,420
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Circuit defects underlying in	Univ of California Los Angeles		1580 G YB180	R01NS117457	93.853	-	126,644	126,644
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Seizures and Children’s Outcom	Univ of California San Francisco			R01NS117597	93.853	-	152,286	152,286
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	ROSE-LAWN	University of Cincinnati		013382-002	R01NS119896	93.853	-	425	425
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Identification of novel pathwa				R01NS120493	93.853	-	13,834	13,834
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Anti-epileptogenic role of mTO				R01NS120892	93.853	-	491,912	491,912
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	NSR-GENE (Neonatal Seizure Reg	Ntl Inst of Neuro Disorders & Stroke		R01NS121042	R01NS121042	93.853	-	634,209	634,209
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Roles of Gsx factors in basal	University of California, San Francisco		13439sc	R01NS124051	93.853	-	3,340	3,340
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Understanding the Impact of Yo				R01NS124660	93.853	-	666,623	666,623
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	CMRO2 and Uncoupling of Oxidat	University of Virginia		AWD-004172.GR101205	R01NS125316	93.853	-	608,429	608,429
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Midbrain pathways for visual h				R01NS125677	93.853	-	34,102	34,102
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders					R01NS126108	93.853	-	338,244	338,244
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders					R01NS126289	93.853	-	323,039	323,039
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Self-Management Intervention f	Makerere Institute of Social Research		11V2	R01NS129041	93.853	-	28,120	28,120
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Defining the remote effects of	University of Cincinnati		014891-00002	R01NS129922	93.853	-	38,641	38,641
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	The title is Role of mningeal	Yale University School of Medicine		CON-80004496	R01NS130057	93.853	-	61,509	61,509
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Advancing CNS drug delivery vi		Indiana University		R01NS132504	93.853	50,727	412,499	463,226
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	AT1C is a novel molecular targ		University of Cincinnati University of North Carolina-Chapel Hill		R01NS132884	93.853	13,814 13,379	134,320 -	161,513 -
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Epigenetic mechanisms of disru				R03NS133727	93.853	-	47,830	47,830

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Children’s Hospital Medical Center and Affiliates

Supplementary Schedule of Expenditure of Federal Awards
For the Year Ended June 30, 2024

Government Agency	Division	Government Branch	Award Title	Pass-Through Grantor	Subrecipient Name	Identifying Number	Federal Grant Number	ALN	Subrecipient Expenditure	Federal Expenditure	Total Expenditure
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	A new human iPSC model of ALS: Distinguishing TLE and TLE us		The University of Arizona		R21NS122169	93.853	\$ 27,409	\$ -	\$ 27,409
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Genetic approaches to address Impact of Lztr1 mutations on o				R21NS123630	93.853	-	166,055	166,055
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Cell type-specific functions o				R21NS123974	93.853	-	158,481	158,481
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Ablating choroid plexus epithe	University of Cincinnati		014796-00002	R21NS125347	93.853	-	233,214	233,214
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	A Mobile Health Application to	Eysz, Inc		Eysze - Aungaroon, Gewali	R21NS126740	93.853	-	189,497	189,497
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Disrupted Spatial and Temporal				R21NS127177	93.853	-	98,358	98,358
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	SPRINT: Signature for Pain Rec	Stanford University Medical Center			R43NS129363	93.853	-	32,476	32,476
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Developing novel biomarkers of	Ann & Robert H Lurie Children’s Hospital			R56NS126289	93.853	-	59,962	59,962
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Assessing the contribution of				R61NS114926	93.853	-	25,676	25,676
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Cerebrovascular Fellowship Tra - Sucharew left 7/30/2022 - See 400501				R61NS122094	93.853	-	365,185	365,185
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Perinatal Arterial Stroke: A M	University of Cincinnati		013104-002	RNS121644A	93.853	-	173,062	173,062
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Pediatric Dose Optimization fo	University of Cincinnati		011961-136901	T32NS047996	93.853	-	7,317	7,317
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Cincinnati Neuroscience Clinic	Baylor College of Medicine		0001625	U01NS106655	93.853	-	36,355	36,355
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Brain Vascular Malformation Co	University of Cincinnati		015327-0003	U01NS114042	93.853	-	22,738	22,738
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	Developmental Synaptopathies A	University of California, San Francisco		11614sc	U24NS107200	93.853	-	70,454	70,454
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	FOcal Cerebral Arteriopathy St	Children’s Hospital Boston		GENFD0002120879	U54NS065705	93.853	-	37,238	37,238
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders	A Phase 3 clinical trial of an	University of Cincinnati		014851-136901	UG3NS119702	93.853	-	638	638
	NIH	Extramural Research Programs in the Neurosciences and Neurological Disorders					UG3NS129558	93.853	-	160,454	160,454
		Extramural Research Programs in the Neurosciences and Neurological Disorders Total							252,807	13,683,790	13,936,597
	FDA	Food and Drug Administration_Research	Midwest Pediatric Device Conso	Nationwide Children’s Hospital		710092-0824-00	P50FD007961	93.103	-	9,780	9,780
	FDA	Food and Drug Administration_Research	Quercetin Chemoprevention for		University of North Carolina-Chapel Hill		R01FD006353	93.103	40,904	396,333	437,237
	FDA	Food and Drug Administration_Research	Abatacept for the treatment of		Duke University		R01FD007267	93.103	22,896	284,300	331,965
					Labey Clinic, Inc.				21,053	-	-
					Mayo Clinic Rochester				783	-	-
	FDA	Food and Drug Administration_Research	Sirolimus TSC Epilepsy Prevent		University of California				2,933	-	-
					Children’s Hospital Boston		R01FD007275	93.103	182,832	492,755	901,293
					Stanford University				39,001	-	-
					University of Texas Science Center				8,148	-	-
					University of California				28,116	-	-
					University of Alabama at Birmingham				134,048	-	-
					University of North Carolina-Chapel Hill				16,393	-	-
	FDA	Food and Drug Administration_Research	CONNECT 2007: Phase I/II Study	Nationwide Children’s Hospital		710078-0523-00	R01FD007532	93.103	-	142,114	142,114
	FDA	Food and Drug Administration_Research	Retrospective Autoimmune PAP N		University of South Florida		R01FD007604	93.103	19,821	188,534	208,355
		Food and Drug Administration_Research Total							516,928	1,513,816	2,030,744
	NIH	International Research and Research Training	Wits-UNC Partnership: Expandin	University of North Carolina		5123999	D43TW009774	93.989	-	21,902	21,902
	NIH	International Research and Research Training	Reducing the Impact of Rheumat	Makerere Institute of Social Research		MakCHS06042022	D43TW012255	93.989	-	55,224	55,224
		International Research and Research Training Total							-	77,126	77,126
	NIH	Lung Diseases Research	CD8+ tissue-resident immunity				F30HL165594	93.838	-	43,756	43,756
	NIH	Lung Diseases Research	The role of transcription fact				F31HL162470	93.838	-	18,076	18,076
	NIH	Lung Diseases Research	Mucosal Associated Invariant T				F31HL167596	93.838	-	38,855	38,855
	NIH	Lung Diseases Research	Personalized Model Systems to				K08HL144825	93.838	-	167,591	167,591
	NIH	Lung Diseases Research	TGF-Beta Regulates CFTR-Mediat				K08HL151762	93.838	-	182,924	182,924
	NIH	Lung Diseases Research	Using technology-assisted step				K23HL139992	93.838	-	191,590	191,590
	NIH	Lung Diseases Research	The RECOVER Post-Acute Sequela	Children’s Hospital of Philadelphia		EHR-02-21	OT2HL161847	93.838	-	201,833	201,833
	NIH	Lung Diseases Research	Pathogenesis-Based Diagnostics				R01HL085453	93.838	-	378,363	378,363
	NIH	Lung Diseases Research	Pediatric Respiratory Illness	Kaiser Foundation Research Institute		RNG211577-CCHMC	R01HL121067	93.838	-	65,540	65,540
	NIH	Lung Diseases Research	Regional monitoring of CF lung				R01HL131012	93.838	-	546,900	546,900
	NIH	Lung Diseases Research	WT1 Regulation of Pulmonary Fi	University of Cincinnati		014530-0002	R01HL134801	93.838	-	41,907	41,907
	NIH	Lung Diseases Research	R01- Mapping environmental con	Erasmus MC			R01HL141286	93.838	18,900	262,575	281,475
	NIH	Lung Diseases Research	Development of neonatal innate				R01HL142708	93.838	-	137,574	137,574
	NIH	Lung Diseases Research	Validating Quantitative Magnet	University of Cincinnati			R01HL143011	93.838	62,080	503,302	565,382
	NIH	Lung Diseases Research	Sleep-Disordered Breathing in	University of Michigan		SUBK00015153	R01HL147261	93.838	-	42,755	42,755
	NIH	Lung Diseases Research	Bedside Exclusion of Pulmonary	Wayne State University		WSU22071	R01HL148247	93.838	-	45,326	45,326
	NIH	Lung Diseases Research	Perinatal Dysbiosis, Lung Deve		National Jewish Health		R01HL149366	93.838	26,462	346,498	372,960
	NIH	Lung Diseases Research	Molecular Mechanisms Regulated	University of Arizona		736528	R01HL149631	93.838	-	121,210	121,210
	NIH	Lung Diseases Research	Obesity and Childhood Asthma:	Indiana University		9941	R01HL149693	93.838	-	16,550	16,550
	NIH	Lung Diseases Research	Role of GM-CSF in Alveolar Mac		University of Washington		R01HL149743	93.838	168,225	535,711	703,936
	NIH	Lung Diseases Research	Role of IGF Axis in Pulmonary	Johns Hopkins School of Medicine		2004833966	R01HL150070	93.838	-	74,457	74,457
	NIH	Lung Diseases Research	Genetic and hypoxic control of	University of Pittsburgh		AWD00008090 (139597-2)	R01HL151228	93.838	-	15,282	15,282
	NIH	Lung Diseases Research	Imaging and Molecular Phenotyp				R01HL151588	93.838	-	1,030,936	1,030,936
	NIH	Lung Diseases Research	A Role for EYA3 in Vascular Re				R01HL152094	93.838	-	387,956	387,956
	NIH	Lung Diseases Research	Development of novel therapeut	University of Arizona		734140	R01HL152973	93.838	-	136,754	136,754
	NIH	Lung Diseases Research	Uterine signaling networks in		University of Cincinnati		R01HL153045	93.838	623,122	386,984	1,010,106
	NIH	Lung Diseases Research	Penetrating the “Black box”:	The Ohio State University			R01HL153108	93.838	49,762	394,707	530,081
				University of Minnesota					85,612	-	-
	NIH	Lung Diseases Research	ASCEND (ARDS in Children and E	University of Michigan		SUBK00014564	R01HL153519	93.838	-	826	826
	NIH	Lung Diseases Research	Tissue niches for LLC3 develop			R01HL155611	R01HL155611	93.838	-	472,834	472,834
	NIH	Lung Diseases Research	Epigenetic Regulation of the M			R01HL156860	R01HL156860	93.838	-	353,339	353,339
	NIH	Lung Diseases Research	Sox9 Regulation of Fibroblast	University of Cincinnati		014532-00002	R01HL157176	93.838	-	103,722	103,722
	NIH	Lung Diseases Research	TRANSPIRE: A Prospective Cohor		Baylor College of Medicine.		R01HL157392	93.838	89,874	725,129	1,607,827
					Children’s Hospital of Philadelphia				312,775	-	-
					Dana Farber Cancer Institute				1,540	-	-
					Fred Hutchinson Cancer Research Center				82,414	-	-
					Seattle Children’s Hospital				72,808	-	-
					University of California				69,792	-	-
					University of Minnesota				253,495	-	-
	NIH	Lung Diseases Research	Uterine signaling networks in	Indiana University		9295_CH	R01HL158108	93.838	-	20,827	20,827
	NIH	Lung Diseases Research	NAD-dependent Signaling and Pu						-		

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Government Agency	Division	Government Branch	Award Title	Pass-Through Grantor	Subrecipient Name	Identifying Number	Federal Grant Number	ALN	Subrecipient Expenditure	Federal Expenditure	Total Expenditure
NIH	Lung Diseases Research		Role of lung endothelial cells Risk stratification in pulmona DLL4 in the Developing Lung an Derivation and Validation of t Prdm3/16 Regulate Chromatin Ac Trajectories of Regional Cardi Defining PRC2 complex epigenom Elucidating the FOXF1 gene reg Early detection of pulmonary c Lung developmental defects cau Role of alveolar fibroblasts i Human gene transfer and macrop	Children's Mercy Hospital Lurie Children's Hospital of Chicago	Indiana University	42094127 A23-0051-S002-CHMC	R01HL158659	93.838	\$ -	\$ 166,521	\$ 166,521
							R01HL160941	93.838	225,398	242,177	467,575
							R01HL162937	93.838	-	12,158	12,158
							R01HL163692	93.838	-	85,584	85,584
							R01HL164414	93.838	-	650,688	650,688
							R01HL164420	93.838	-	666,146	666,146
							R01HL166245	93.838	-	566,631	566,631
							R01HL166283	93.838	-	631,591	631,591
							R01HL166335	93.838	-	656,373	656,373
							R01HL166748	93.838	-	60,149	60,149
							R01HL167030	93.838	-	620,688	620,688
							R33HL156888	93.838	30,532	1,430,203	1,721,264
									260,529	-	-
									47,041	103,661	255,057
									26,916	-	-
					77,439	-	-				
					-	-	-				
					93.838	-	196,182	196,182			
					93.838	-	3,865	3,865			
					93.838	-	9,779	9,779			
					93.838	-	299,649	299,649			
					93.838	-	101,723	101,723			
					93.838	-	394,513	394,513			
					93.838	35,638	20,263	69,606			
					873	-	-	-			
					65	-	-	-			
					2,687	-	-	-			
					10,080	-	-	-			
					2,351	701,659	812,471	812,471			
					108,461	-	-	-			
					93.838	-	51,322	51,322			
					93.838	50,000	1,063,738	1,420,095			
					75,122	-	-	-			
					104,890	-	-	-			
					50,000	-	-	-			
					26,345	-	-	-			
					50,000	-	-	-			
					3200930818	-	74,934	74,934			
					653083	-	137,180	137,180			
					2006287179	-	11,909	11,909			

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					Univ of Michigan				\$ 154,382	\$ -	\$ -
					University of Southern California				236,658	-	-
									2,059,471	1,459,176	3,518,647
	HRSA	National Center on Sleep Disorders Research Total							-	568,498	568,498
		National Research Service Award in Primary Care Medicine	General Pediatrics Research Fe				T3210027	93.186	-	568,498	568,498
		National Research Service Award in Primary Care Medicine Total							-	568,498	568,498
	NIH	Nursing Research	A mixed methods approach to ex	Emory University		A567559	K23NR020037	93.361	-	513	513
	NIH	Nursing Research	Self-Management of Adolescent	Children’s Hospital of Philadelphia		3201511123	R01NR017429	93.361	-	14,925	14,925
	NIH	Nursing Research	Fostering medication adherence		CHOC Children’s Hospital		R01NR017794	93.361	84,083	244,081	483,882
					Medical University South Carolina		R01NR017794	93.361	79,625	-	-
					North Carolina State University		R01NR017794	93.361	11,219	-	-
					Research Inst. at Nationwide Hos		R01NR017794	93.361	60,222	-	-
					University of Florida		R01NR017794	93.361	4,652	-	-
					University of Virginia		R01NR019426	93.361	46,977	501,617	548,594
	NIH	Nursing Research	Randomized Controlled Trial of	Akron Children’s Hospital		23-0001-A0001-SUB02	R01NR020608	93.361	-	108,559	108,559
	NIH	Nursing Research	Integrating clinician, caregiv		Children’s Hospital of Philadelphia		R01NR020781	93.361	12,036	379,841	401,047
	NIH	Nursing Research	A socio-ecological approach fo		Nemours Children’s Clinic, Jacksonville				9,170	-	-
	NIH	Nursing Research	Reducing Health Disparities th	University of Cincinnati		013513-002	R21NR019126	93.361	-	26,068	26,068
		Nursing Research Total							307,984	1,275,604	1,583,588
	NIH	Oral Diseases and Disorders Research	Role of the Ciliary Protein C2				F31DE030664	93.121	-	40,581	40,581
	NIH	Oral Diseases and Disorders Research	Developmental roles of Nr2f1 a				F31DE032261	93.121	-	37,249	37,249
	NIH	Oral Diseases and Disorders Research	The role of Sonic hedgehog sig	Nationwide Children’s Hospital		700262-0622	F31DE033565	93.121	-	21,791	21,791
	NIH	Oral Diseases and Disorders Research	Stottmann R01 Subaward from Na				R01DE027091	93.121	-	61,342	61,342
	NIH	Oral Diseases and Disorders Research	Regulation of Craniofacial Dev				R01DE029417	93.121	-	758,009	758,009
	NIH	Oral Diseases and Disorders Research	Development and evaluation of	Indiana University		9352-CHMC	R01DE031259	93.121	-	34,512	34,512
	NIH	Oral Diseases and Disorders Research	Predicting Gli3 regulatory act	The Jackson Laboratory		210391-0323-02	R01DE031750	93.121	-	353,354	353,354
	NIH	Oral Diseases and Disorders Research	Molecular Regulation of Palate				R01DE033890	93.121	-	147,403	147,403
	NIH	Oral Diseases and Disorders Research	Tracing the origins of craniof				R03DE030200	93.121	-	180,717	180,717
	NIH	Oral Diseases and Disorders Research	Function and Regulation of Sem				R21DE030193	93.121	-	6,951	6,951
	NIH	Oral Diseases and Disorders Research	Molecular Basis of SIX2-relate				R21DE032877	93.121	-	231,886	231,886
	NIH	Oral Diseases and Disorders Research	Harnessing the therapeutic potential of neural crest cel	Phoenix Children’s Hospital	Nationwide Childrens Hospital	SITZMAN-20-03	R35DE027557	93.121	20,805	927,250	948,055
	NIH	Oral Diseases and Disorders Research	Velopharyngeal insufficiency f		Brigham and Women’s Hospital		U01DE029750	93.121	-	49,008	49,008
	NIH	Oral Diseases and Disorders Research	Reduction of bloodstream infec		Dana Farber Cancer Institute		UH3DE030401	93.121	25,246	377,034	505,562
					University of Colorado				56,101	-	-
									47,181	-	-
		Oral Diseases and Disorders Research Total							149,333	3,227,087	3,376,420
	AHRQ	Research on Healthcare Costs, Quality and Outcomes	The Patient and Parent Perspec				K08HS026763	93.226	-	140,370	140,370
	AHRQ	Research on Healthcare Costs, Quality and Outcomes	AHRQ Mentored Clinical Scienti	Stanford University		63291150-306760	K08HS026975	93.226	-	138,785	138,785
	AHRQ	Research on Healthcare Costs, Quality and Outcomes	Diagnosis and management of pe				R01HS027619	93.226	-	32,620	32,620
	AHRQ	Research on Healthcare Costs, Quality and Outcomes	Achieving Pediatric Health Equ				R01HS027996	93.226	-	484,895	484,895
	AHRQ	Research on Healthcare Costs, Quality and Outcomes	Examining the impact of health				R01HS028589	93.226	-	387,804	387,804
	AHRQ	Research on Healthcare Costs, Quality and Outcomes	Developing and Validating an A		Children’s Hospital of Philadelphia		R01HS028976	93.226	5,690	408,860	429,902
					Massachusetts General Hospital.				15,352	-	-
	AHRQ	Research on Healthcare Costs, Quality and Outcomes	Comparing Family Decision Maki		University of Pittsburgh		R01HS029152	93.226	6,534	280,798	287,332
	AHRQ	Research on Healthcare Costs, Quality and Outcomes	Standardization of Evaluation	University of Michigan		SUBK00017768	R01HS029313	93.226	-	35,920	35,920
	AHRQ	Research on Healthcare Costs, Quality and Outcomes	Ambulatory Pediatric Safety Le	Children’s Hospital Boston		RHS026644B	R18HS026644	93.226	-	37,066	37,066
	AHRQ	Research on Healthcare Costs, Quality and Outcomes	Spread of Safety Interventions	Children’s Hospital Boston		RHS027401A	R18HS027401	93.226	-	81,521	81,521
	AHRQ	Research on Healthcare Costs, Quality and Outcomes	Re-engineering Patient and Fam	Children’s Hospital Boston		GENFD0002282084	R18HS029346	93.226	-	237,743	237,743
	AHRQ	Research on Healthcare Costs, Quality and Outcomes	Digital Innovation, Simulation		Children’s Hospital Boston		R18HS029626	93.226	11,113	338,729	349,842
	AHRQ	Research on Healthcare Costs, Quality and Outcomes	SAMURAI PICU: Situation Awaren		Seattle Children’s Hospital		R18HS029630	93.226	1,930	109,256	144,773
					The University of Chicago				11,921	-	-
					Univ of Pennsylvania				17,575	-	-
					Virginia Commonwealth University				4,091	-	-
	AHRQ	Research on Healthcare Costs, Quality and Outcomes	Inform shared decision-making	Seattle Children’s		13080SUB	R21HS029399	93.226	-	77,200	77,200
		Research on Healthcare Costs, Quality and Outcomes Total							74,206	2,791,567	2,865,773
	NIH	Research Related to Deafness and Communication Disorders	Clinical factors in aminoglyco	Creighton University		270753-7326	R01DC016680	93.173	-	22,829	22,829
	NIH	Research Related to Deafness and Communication Disorders	Prevention of Ototoxicity with		Oregon Health & Science University		R01DC017867	93.173	258,516	285,246	572,770
					Portland VA Research Foundation				29,008	-	-
	NIH	Research Related to Deafness and Communication Disorders	Technology-assisted language i		University of Colorado		R01DC018550	93.173	247,655	366,335	613,990
	NIH	Research Related to Deafness and Communication Disorders	Earliest predictors of languag		University of Cincinnati		R01DC018734	93.173	49,549	683,283	732,832
	NIH	Research Related to Deafness and Communication Disorders	Neuroimaging Reveals Treatment	University of Toronto		2-515357	R01DC019337	93.173	-	73,562	73,562
	NIH	Research Related to Deafness and Communication Disorders	Society of Ears, Nose, and Thr	Mayo Clinic Arizona		CIN-312896	R13DC021115	93.173	-	13,936	13,936
	NIH	Research Related to Deafness and Communication Disorders	Mobile technologies for delive		University of Pretoria		R21DC019598	93.173	33,175	177,752	210,927
	NIH	Research Related to Deafness and Communication Disorders	Investigating the contribution	University of Cincinnati	University of Illinois at Chicago	015911-00003	R21DC020242	93.173	2,810	53,119	59,394
					University of North Carolina-Chapel Hill				3,465	-	-
	NIH	Research Related to Deafness and Communication Disorders	Effects of Hypoglossal Nerve S	Massachusetts Ear & Eye Infirmary		MassEyeEar_Heubi	U01DC019279	93.173	-	7,248	7,248
		Research Related to Deafness and Communication Disorders Total							624,178	1,683,310	2,307,488
	SAMHSA	Substance Abuse and Mental Health Services_Projects of Regional and National Significance	Pediatric Integrated Post-Trau	University of Utah		10060285-03-CCHMC	H79SM085051	93.243	-	8,559	8,559
			Implementation of Screening, Brief		University of Cincinnati		H79TI084035	93.243	23,427	701,649	725,076
		Substance Abuse and Mental Health Services_Projects of Regional and National Significance Total							23,427	710,208	733,635

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CDC	Training and Clinical Skills Improvement Projects		Advancing the Epidemiology and	Indiana University		9782-CHMC	NU58IP000004	93.185	\$ -	\$ 68,327	\$ 68,327
CDC	Training and Clinical Skills Improvement Projects		US Enhanced Surveillance Netwo				U01IP001155	93.185	-	2,489,278	2,489,278
CDC	Training and Clinical Skills Improvement Projects		US Enhanced Surveillance Netwo				COVID-19 U01IP001155	93.185	-	7,518	7,518
	Training and Clinical Skills Improvement Projects Total								-	2,565,123	2,565,123
NIH	Trans-NIH Research Support		Engineering multi-organs in a	University of Wisconsin-Madison		0000003023	DP2DK128799	93.310	-	604,269	604,269
NIH	Trans-NIH Research Support		ReSET: Restarting Safe Educati				OT2HD107558	93.310	-	87,528	87,528
NIH	Trans-NIH Research Support		Cloud implementation of Xenbas				P41HD064556	93.310	-	32,754	32,754
NIH	Trans-NIH Research Support		COVID-19 Network of Networks -	Rutgers		SUB000002754	COVID-19 R33HD105619	93.310	-	42,386	42,386
NIH	Trans-NIH Research Support		NYU Pediatric Obesity, Metabolism and Kidney Cohort Cent	NYU Sponsored Programs Administration		16-A0-00-006256	UG30D023305	93.310	-	27,099	27,099
NIH	Trans-NIH Research Support		Children's Respiratory Research and Environment Workgrou	University of Wisconsin-Madison		0000002430	UG30D023282	93.310	-	314,248	314,248
NIH	Trans-NIH Research Support		Childhood Allergy and the NeOn	University of Wisconsin-Madison		0000003219	UG30D035509	93.310	-	22,768	22,768
NIH	Trans-NIH Research Support		Capitation- Merhar - Developme	Northwell Health		AWD00001795_Cincinnati_ CR	UG30D035513	93.310	-	90,453	90,453
NIH	Trans-NIH Research Support		Developmental Impact of NICU E	Albert Einstein College of Medicine		311397	UH30D023320	93.310	-	59,145	59,145
	Trans-NIH Research Support Total								-	1,280,650	1,280,650
NIH	Vision Research		Predicting uveitis onset in ch		Children's Hospital of Philadelphia		R01EY030521	93.867	380	319,947	422,713
NIH	Vision Research				Children's Mercy Hospital				9,200	-	-
NIH	Vision Research				Emory University				9,450	-	-
NIH	Vision Research				Univ. of California				75	-	-
NIH	Vision Research				University of Utah				455	-	-
NIH	Vision Research				Wake Forest Univ School of Medicine				83,206	-	-
NIH	Vision Research		Light regulated vascular devel				R01EY032029	93.867	-	341,045	341,045
NIH	Vision Research		dopamine/LKB1 project	Baylor College of Medicine		5R01EY032566	R01EY032566	93.867	-	213,797	213,797
NIH	Vision Research		Mechanisms of intrinsic light		University of Alabama at Birmingham		R01EY032752	93.867	134,323	114,140	248,463
NIH	Vision Research		Genomic analysis of microphtha				R01EY032976	93.867	-	482,389	482,389
NIH	Vision Research		Melanopsin-dependent light-evo				R01EY034456	93.867	-	289,335	289,335
NIH	Vision Research		Optimizing methotrexate use fo		Children's Mercy Hospital		R01EY034565	93.867	365	403,467	404,363
NIH	Vision Research				Children's Hospital Boston				531	-	-
NIH	Vision Research		Microphthalmia, anophthalmia a				R01EY035500	93.867	-	194,554	194,554
NIH	Vision Research		Cataract Surgery Outcome Registry	Jacob Center for Health Res Fdn., Inc.		U10EY011751	U10EY011751	93.867	-	59,553	59,553
NIH	Vision Research		Adalimumab in Juvenile Idiopat	The Univ of California, San Francisco		11309sc_FEX	UG1EY029658	93.867	-	22,276	22,276
	Vision Research Total								237,985	2,440,503	2,678,488
NIH	Human Genome Research		Engaging adolescents in decis		Mayo Clinic Rochester		R01HG010166	93.172	63,695	908,014	971,709
NIH	Human Genome Research		Virus-driven human gene misreg		Brigham and Women's Hospital		R01HG010730	93.172	146,339	265,730	453,985
NIH	Human Genome Research				University of Cincinnati				41,916	-	-
NIH	Human Genome Research		Epigenome-wide variations and		University of Cincinnati		R01HG011411	93.172	13,337	1,008,143	1,021,480
NIH	Human Genome Research		Post-Transcriptional Regulator	Memorial Sloan Kettering Cancer Center		PO #C22420604	R01HG013328	93.172	-	72,459	72,459
NIH	Human Genome Research		Single-cell and single-molecul	The University of Chicago		AWD103412 (SUB00000762)	R21HG012423	93.172	-	102,657	102,657
NIH	Human Genome Research		SciDAP: next generation platfo	Datirium LLC			R42HG011219	93.172	-	173,256	173,256
NIH	Human Genome Research		Inferring 1D and 3D epigenomes		University of Pittsburgh		R56HG012360	93.172	20,560	35,707	56,267
NIH	Human Genome Research		Polygenic Risk Scores for Heal		Children's Hospital Boston		U01HG011172	93.172	39,968	1,521,151	1,719,259
	Human Genome Research Total				University of Cincinnati				158,140	-	-
	Alcohol Research Programs Total								483,955	4,087,117	4,571,072
NIH	Alcohol Research Programs		Therapeutic and mechanistic si	University of Cincinnati		014707-00002	R01AA030486	93.273	-	32,554	32,554
	Alcohol Research Programs Total								-	32,554	32,554
CDC	Injury Prevention and Control Research and State and Community Based Programs		Evaluation of Return to School	University of Oregon		282080C	U01CE003163	93.136	-	34,775	34,775
CDC	Injury Prevention and Control Research and State and Community Based Programs		Development of a Mental health				U01CE003570	93.136	-	263,382	263,382
	Injury Prevention and Control Research and State and Community Based Programs Total								-	298,157	298,157
NIH	National Center for Advancing Translational Sciences		NIH KL2TR001426 KL2	University of Cincinnati		012846-000011	KL2TR001426	93.350	-	392,906	392,906
NIH	National Center for Advancing Translational Sciences		Urinary Lipidomic profile in F				R03TR003916	93.350	-	64,329	64,329
NIH	National Center for Advancing Translational Sciences		Modeling Progressive Familial				R03TR004601	93.350	-	69,565	69,565
NIH	National Center for Advancing Translational Sciences		Structure-function analysis of	University of Cincinnati		015695-00002	R03TR004875	93.350	-	16,285	16,285
NIH	National Center for Advancing Translational Sciences		Clinical Trial Readiness - Pri	Seattle Children's		12874SUB	R21TR004057	93.350	-	8,238	8,238
NIH	National Center for Advancing Translational Sciences		Precision Medicine in the Diag	Tufts Medical Center		5016131-SERV	U01TR002271	93.350	-	17,316	17,316
NIH	National Center for Advancing Translational Sciences		Instrumenting the Delivery Sys	Children's Hospital Boston		GENFD0001706578	U01TR002623	93.350	-	258,811	258,811
NIH	National Center for Advancing Translational Sciences		Engaging Cooperative Sites for	Vanderbilt University Medical Center		VUMC116723	U24TR004437	93.350	-	100,022	100,022
NIH	National Center for Advancing Translational Sciences		Data Management and Coordinati		University of Colorado		U2CTR002818	93.350	25,071	5,609,173	5,634,244
NIH	National Center for Advancing Translational Sciences		Primary Immune Deficiency Trea	Baylor College of Medicine		UG3TR003908	UG3TR003908	93.350	-	5,866	5,866
NIH	National Center for Advancing Translational Sciences		Center for Clinical and Transl	University of Cincinnati		2UL1TR001425-05A1	UL1TR001425	93.350	-	2,566,290	2,566,290
	National Center for Advancing Translational Sciences Total								25,071	9,108,801	9,133,872
CDC	Occupational Safety and Health Program		Workplace Violence in Outpatie	Baylor College of Medicine		Giambra-Baylor College of	R01OH011930	93.262	-	249,074	249,074
CDC	Occupational Safety and Health Program		Enhanced injury surveillance u				R01OH011996	93.262	-	742,150	742,150
CDC	Occupational Safety and Health Program		Defining the Role and Occupati	University of Cincinnati		0001253	R21OH012679	93.262	-	120,227	120,227
CDC	Occupational Safety and Health Program		Newman UC sub T42 ERC Renewal				T42OH008432-16-00	93.262	-	10,217	10,217
	Occupational Safety and Health Program Total								-	1,121,668	1,121,668
NIH	Research and Training in Complementary and Alternative Medicine		Dissecting Neural Mechanisms S	Wake Forest University			R01AT010171	93.213	-	616,531	616,531
NIH	Research and Training in Complementary and Alternative Medicine		Online Techniques and Educatio				R01AT011502	93.213	-	48,320	48,320
NIH	Research and Training in Complementary and Alternative Medicine		RELAXaHEAD: A Behavioral Appro	NYU Langone Health		119664	R01AT011875	93.213	-	46,236	46,236

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NIH	Research and Training in Complementary and Alternative Medicine	Research and Training in Complementary and Alternative Medicine	Feasibility and acceptability Integrative Training Program f	The Research Instit at Nationwide Hosp Emory University	University of Colorado	700266-0622-00	R34AT011218	93.213	\$ -	\$ 26,645	\$ 26,645					
						A730969	R61AT012421	93.213	-	182,830	182,830					
							U01AT010132	93.213	118,301	522,020	640,321					
						RC115611CCHMC	UG3AT012521	93.213	-	37,947	37,947					
	Research and Training in Complementary and Alternative Medicine Total										118,301	1,480,529	1,598,830			
	Cancer Control	Norris PHI-COG NCORP PCR Work	Public Health Institute	UG1CA189955-08	UG1CA189955	93.399	-	260	260							
						Cancer Control Total										-
	Healthy Start Initiative	Healthy Start Initiative Total	University of Cincinnati	H49MC27823	93.926	184,978	1,010,412	1,195,390								
					Healthy Start Initiative Total										184,978	1,010,412
	Research Infrastructure Programs	Establish a novel mouse model Development of a mouse model o A new mouse model to study GBA	New York University School of Medicine	R21OD031906	93.351	-	551	551								
				R21OD031907	93.351	-	193,432	193,432								
				R21OD033660	93.351	69,610	134,343	203,953								
	Research Infrastructure Programs Total										69,610	328,326	397,936			
	Rare Disorders: Research, Surveillance, Health Promotion, and Education	Woodward CDC NSBPR Registry 20		U01DD001279	93.315	-	65,604	65,604								
					Rare Disorders: Research, Surveillance, Health Promotion, and Education Total										-	65,604
	Minority Health and Health Disparities Research	Model-Informed Evaluation of H Linking pre- and post-natal psychosoc Growing and Sustaining Communi	University of Cincinnati	015322-0003	University of California	K01MD017289	93.307	-	59,952	59,952						
						R01MD013006	93.307	15,457	497,139	512,596						
						R25MD019150	93.307	-	8,317	8,317						
	Minority Health and Health Disparities Research Total										15,457	565,408	580,865			
	National Research Service Awards_Health Services Research Training	Describing ventilator weaning Toward Patient-Centered Clinic	Children's Hospital of Philadelphia Children's Hospital of Philadelphia	3201350921 PO 20269160 3201350923	K12HS026393 K12HS026393	93.225	-	32,923	32,923							
						93.225	-	141,420	141,420							
	National Research Service Awards_Health Services Research Training Total										-	174,343	174,343			
	Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health	Parents Empowering Parents: Na Accessible Pregnancy Action Pl Enhancing Parenting Skills: Application of a web-based three-tiered model Setting Families on a Positive	Brandeis University Brandeis University University of Oregon	Nationwide Childrens Hospital Xavier University	404244	90DPCP0012	93.433	-	17,393	17,393						
					404234	90DPHF0011	93.433	-	18,011	18,011						
					239530A	90DPHF003-01-00	93.433	-	30,191	30,191						
						90IFRE0055	93.433	8,666	92,621	127,713						
								26,426	-	-						
					90IFRE0062	93.433	-	173,481	173,481							
90IFRE0075					93.433	-	57,331	57,331								
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health Total										35,092	389,028	424,120				
Translation and Implementation Science Research for Heart, Lung, Blood Diseases, and Sleep Disorders					Accelerating Delivery of rheum	Children's Research Institute Uganda Heart Institute University of Washington	R01HL164615	93.840	32,278	368,834	713,881					
									287,805							
		24,964	-	-												
Translation and Implementation Science Research for Heart, Lung, Blood Diseases, and Sleep Disorders Total										345,047	368,834	713,881				
Autism Collaboration, Accountability, Research, Education, and Support	DBPNet ADHD Node CHOP SubIN RE	Children's Hospital of Philadelphia	GRT-00001441	UT5MC42432-01-00	93.877	-	17,009	17,009								
					Autism Collaboration, Accountability, Research, Education, and Support Total										-	17,009
Chronic Diseases: Research, Control, and Prevention	Improving Pediatric Lupus Care	University of Utah	10064135-04-CCHMC	U01DP006702	93.068	-	6,231	6,231								
					Chronic Diseases: Research, Control, and Prevention Total										-	6,231
Dept of Health and Human Serv Total										26,284,219	190,386,066	216,670,285				
Office of Personnel Management	Intergovernmental Personnel Act (IPA) Mobility Program	Mechanisms of liver failure Mechanisms of liver failure Fadden IPA Ho IPA Tripathi IPA		VA IPA Verma VA IPA Subrumaniyam VA IPA Fadden, Cather VA IPA Ho, Danielle VA IPA Tripathi, Pulak	27.011	-	5,728	5,728								
						-	9,191	9,191								
						-	20,001	20,001								
						-	24,276	24,276								
						-	63,577	63,577								
						-										
Intergovernmental Personnel Act (IPA) Mobility Program Total										-	122,773	122,773				
Office of Personnel Management Total										-	122,773	122,773				
Research and Development Total										26,482,314	195,570,397	222,052,711				
State and Community Highway Safety	Occupant Protection Regional C Occupant Protection Regional C	Ohio Department of Health (ODH) Ohio Department of Health (ODH)	03130014BB0623 03130014BB0124	20.600	-	17,596	17,596									
				20.600	-	24,046	24,046									
State and Community Highway Safety Total										-	41,642	41,642				
Highway Safety Cluster Total										-	41,642	41,642				

(Continued)

Children's Hospital Medical Center and Affiliates

Supplementary Schedule of Expenditure of Federal Awards
For the Year Ended June 30, 2024

Government Agency	Division	Government Branch	Award Title	Pass-Through Grantor	Subrecipient Name	Identifying Number	Federal Grant Number	ALN	Subrecipient Expenditure	Federal Expenditure	Total Expenditure
Department of Agriculture	USDA	Special Supplemental Nutrition Program for Women, Infants, and Children	Application Digital Accessibil	Food Research & Action Center	University of Cincinnati	238DC001M2003	238DC001M2003	10.557	\$ 51,761	\$ 84,857	\$ 136,618
Department of the Treasury	TREAS	Coronavirus State and Local Fiscal Recovery Funds	Enhancing Public Health Data S	Board of County Commissioners, Hamilton County, OH	The Health Collaborative	Hamilton County ARPA_Hart	COVID-19 Hamilton County ARPA	21.027	99,422	232,848	332,270
Department of the Treasury	TREAS	Coronavirus State and Local Fiscal Recovery Funds	ARPA funding coming from OHMHA	State of Ohio		OMHAS - Promoting Wellnes	COVID-19 OMHAS	21.027	-	252,486	252,486
Department of the Treasury	TREAS	Coronavirus State and Local Fiscal Recovery Funds	ECS-Maternal, Infant, and Early Childhood Home Visiting (MIECHV)	Northern Kentucky Ind Health Dis	St. Elizabeth Medical Center	COVID-19 X11MC45273	COVID-19 X11MC45273	21.027	135,677	-	135,677
Dept of Health and Human Serv	CDC	Public Health Emergency Preparedness	Poison Center Bioterrorism Pre	ODH Asthma Home Assessment Pro	Nationwide Children's Hospital	720441-0623-00	34225-A4	93.069	-	67,126	67,126
Dept of Health and Human Serv	CDC	Environmental Public Health and Emergency Response	ODH Asthma Home Assessment Pro	Ohio Department of Health	ODH Newman	NUE1EH001385-02-00		93.070	-	31,814	31,814
Dept of Health and Human Serv	CDC	Blood Disorder Program: Prevention, Surveillance and Research	Community Counts: Public Healt	Hemophilia Foundation of Michigan		NU27DD000020	NU27DD000020	93.080	-	26,615	26,615
Dept of Health and Human Serv	ACF	Personal Responsibility Education Program	Evaluation of Using the Connec	Texas A & M		M2200564	90AP2702	93.092	-	215,649	215,649
Dept of Health and Human Serv	HRSA	Maternal and Child Health Federal Consolidated Programs	Region V East Comprehensive Care Network for Bleeding D	Hemophilia Foundation of Michigan		H30MC24047	H30MC24047	93.110	-	23,107	23,107
Dept of Health and Human Serv	HRSA	Maternal and Child Health Federal Consolidated Programs	IDF Severe Combined Immunodef	University of California, San Francisco		12689sc	SC1MC31881	93.110	-	1,939	1,939
Dept of Health and Human Serv	HRSA	Maternal and Child Health Federal Consolidated Programs	Leadership Education in Neurod	University of Cincinnati		013719-0003	T73MC00032	93.110	-	703,782	703,782
Dept of Health and Human Serv	HRSA	Maternal and Child Health Federal Consolidated Programs	Cincinnati Developmental-Behav				T7749098	93.110	-	277,743	277,743
Dept of Health and Human Serv	HRSA	Maternal and Child Health Federal Consolidated Programs	HRSA Central Region Thalassemi	Ann & Robert H Lurie Children's Hospital		901639-CCHMC	U1AMC41738	93.110	-	13,501	13,501
Dept of Health and Human Serv	HRSA	Maternal and Child Health Federal Consolidated Programs	Center for Pediatric Everyday	University Hospital of Cleveland		DHHS HRSA-21-104 Regional	U11MC43532	93.110	-	36,900	36,900
Dept of Health and Human Serv	HRSA	Maternal and Child Health Federal Consolidated Programs	Ohio Department of Health (ODH	Ohio State University/ODH	University Hospitals of Cleveland	SPC-1000012488 GR133169	U7A50515	93.110	68,761	33,076	101,837
Dept of Health and Human Serv	HRSA	Maternal and Child Health Federal Consolidated Programs	Newborn Screening Systems Qual	Association of Public Health Laboratorie	Nationwide Childrens Hospital	56300-600-158-22-24	UG8MC31893	93.110	1,238	14,309	15,547
Dept of Health and Human Serv	CDC	Health Program for Toxic Substances and Disease Registry	Pediatric Environmental Health	Univ of Illinois @ Chicago		17852-00	NU61TS000296	93.161	-	38,784	38,784
Dept of Health and Human Serv	CDC	Disabilities Prevention	Improving the Health of People	Ohio State University		SPC - 1000005432	NU27DD000032	93.184	-	40,902	40,902
Dept of Health and Human Serv	HRSA	Poison Center Support and Enhancement Grant Program	Cincinnati Drug and Poison Inf				H4BHS15468	93.253	-	400,622	400,622
Dept of Health and Human Serv	HRSA	Sickle Cell Treatment Demonstration Program	Sickle Treatment and Outcomes		Children's Hosp & Clinics of Minnesota		U1E27863	93.365	66,515	659,769	1,136,701
Dept of Health and Human Serv	HRSA	Sickle Cell Treatment Demonstration Program			Five Rivers Health Centers				8,510	-	-
Dept of Health and Human Serv	HRSA	Sickle Cell Treatment Demonstration Program			Indiana Hemophilia & Thrombosis Ctr, Inc				69,025	-	-
Dept of Health and Human Serv	HRSA	Sickle Cell Treatment Demonstration Program			Medical College of Wisconsin				51,047	-	-
Dept of Health and Human Serv	HRSA	Sickle Cell Treatment Demonstration Program			Sanford Research				15,952	-	-
Dept of Health and Human Serv	HRSA	Sickle Cell Treatment Demonstration Program			Sickle Cell Disease Assoc of America				30,438	-	-
Dept of Health and Human Serv	HRSA	Sickle Cell Treatment Demonstration Program			University of Michigan				56,928	-	-
Dept of Health and Human Serv	HRSA	Sickle Cell Treatment Demonstration Program			University of Illinois at Chicago				178,517	-	-
Dept of Health and Human Serv	HRSA	Congressional Directives Discretionary	Cincinnati Children's 129Xe Hy				CE146670	93.493	-	462,375	462,375
Dept of Health and Human Serv	HRSA	Congressional Directives Discretionary	High End Cell Sorter				CE152338	93.493	-	630,000	630,000
Dept of Health and Human Serv	HRSA	Family to Family Health Information Centers	Family Professional Partnership/CSHCN				H8428443	93.504	-	85,511	85,511
Dept of Health and Human Serv	ACL	Developmental Disabilities Projects of National Significance	National Center for Disability		Autistic Self Advocacy Network Inc		90NCDE0001	93.631	18,750	208,592	276,389
Dept of Health and Human Serv	ACL	Developmental Disabilities Projects of National Significance			Kennedy Krieger Institute, Inc.				24,058	-	-
Dept of Health and Human Serv	ACL	Developmental Disabilities Projects of National Significance			Morehouse School of Medicine Inc				24,989	-	-
Dept of Health and Human Serv	ACL	University Centers for Excellence in Developmental Disabilities Education, Research, and Service	University Centers for Excell	University of Cincinnati		014723-00002	90DDUC0111	93.632	-	589,051	589,051
Dept of Health and Human Serv	ACL	University Centers for Excellence in Developmental Disabilities Education, Research, and Service	Expanding the Public Health Wo	University of Cincinnati		014340-00002	90UCPH0030	93.632	-	30,760	30,760
Dept of Health and Human Serv	HRSA	Maternal, Infant, and Early Childhood Home Visiting (MIECHV)	ECS-Maternal, Infant, and Early Childhood Home Visiting (MIECHV)	Ohio Department of Health	Best Point Edu & Behavioral Heath	03160191MH0523	03160191MH0523	93.870	126,264	1,408	127,672
Dept of Health and Human Serv	HRSA	Maternal, Infant, and Early Childhood Home Visiting (MIECHV)	ECS-Maternal, Infant, and Early Childhood Home Visiting (MIECHV)	Ohio Department of Health	Best Point Edu & Behavioral Heath	03160191MH0724	03160191MH0724	93.870	393,340	7,094	400,434
Dept of Health and Human Serv	HRSA	Maternal, Infant, and Early Childhood Home Visiting (MIECHV)	ECS-Maternal, Infant, and Early Childhood Home Visiting (MIECHV)	Northern Kentucky Ind Health Dis	St. Elizabeth Medical Center	X10MC46867	X10MC46867	93.870	528,253	-	528,253
Dept of Health and Human Serv	HRSA	Grants for Training in Primary Care Medicine and Dentistry	Dental Faculty Loan Repayment Program Funding Opportun				D87HP31252	93.884	-	201,276	201,276
Dept of Health and Human Serv	ASPR	National Bioterrorism Hospital Preparedness Program	Bureau of Health Preparedness, Hospital	Ohio Department of Health		6U3REP190583-04-01/6NU90T	U3REP190583	93.889	-	50,000	50,000
Dept of Health and Human Serv	ASPR	National Bioterrorism Hospital Preparedness Program	Eastern Great Lakes Pediatric	University Hospital of Cleveland		U3REP190615	U3REP190615	93.889	-	118,135	118,135
Dept of Health and Human Serv	CDC	Cooperative Agreements to Support State-Based Safe Motherhood and Infant Health Initiative Programs	OPQC: Addressing gaps and equi		The Ohio State University		NU58DP007264	93.946	63,171	151,759	289,552
Dept of Health and Human Serv	CDC	Cooperative Agreements to Support State-Based Safe Motherhood and Infant Health Initiative Programs			University Hospitals of Cleveland				28,745	-	-
Dept of Health and Human Serv	CDC	Cooperative Agreements to Support State-Based Safe Motherhood and Infant Health Initiative Programs			University of Iowa				45,877	-	-
Dept of Health and Human Serv	SAMHSA	Block Grants for Community Mental Health Services	Suicide Prevention Caring Contacts		Nationwide Children's Hospital/OMHAS						
Dept of Health and Human Serv	HRSA	Block Grants for Prevention and Treatment of Substance Abuse	Substance Abuse Prevention and Treatment			720711-0623-00	B09SM084002	93.958	-	20,000	20,000
Dept of Health and Human Serv	HRSA	Maternal and Child Health Services Block Grant to the States	Community Breastfeeding Ambass	Ohio Department of Health		03130011BH0224	MHRSB Hamilton County	93.959	-	202,623	202,623
Dept of Health and Human Serv	HRSA	Maternal and Child Health Services Block Grant to the States	Compassionate, Respectful, and	Ohio Department of Health		53702		93.994	-	116,481	116,481
Dept of Health and Human Serv	HRSA	Maternal and Child Health Services Block Grant to the States	Ohio Department of Health Cont	Ohio Department of Health		49688/0000215557-1	B04MC40155-01-01	93.994	-	136,759	136,759
Dept of Health and Human Serv	HRSA	Maternal and Child Health Services Block Grant to the States							-	8,941	8,941
Grand Total									\$ 28,569,552	\$ 201,788,633	\$ 230,358,185

(Concluded)

Children's Hospital Medical Center and Affiliates

Notes To Supplementary Schedule of Expenditures of Federal Awards For The Year Ended June 30, 2024

1. SCOPE OF AUDIT

All federal grant operations of Children's Hospital Medical Center and Affiliates ("Cincinnati Children's", or the "Company") are included in the scope of Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance). Single audits under the Uniform Guidance are performed in accordance with the provisions of the Office of Management and Budget (OMB)'s Compliance Supplement for Single Audits of Higher Learning Institutions and other Non-Profit Institutions (the "Compliance Supplement"). The Department of Health and Human Services has been designated as Cincinnati Children's cognizant agency for the Single audit.

2. DE MINIMIS COST RATE

Cincinnati Children's did not elect to use the 10% de minimis indirect cost rate as allowed under the Uniform Guidance.

3. SUMMARY OF SIGNIFICANT ACCOUNTING PRONOUNCEMENTS

Basis of Presentation—The accompanying Supplemental Schedule of Expenditures of Federal Awards (the "Schedule") includes the federal grant activity of Cincinnati Children's under programs of the federal government for the year ended June 30, 2024, and is presented on the accrual basis of accounting. This is consistent with the basis of accounting used in the preparation of the basic consolidated financial statements. The information in this Schedule is presented in accordance with the requirements of Title 2 U.S. Code of Federal Regulations Part 200, Uniform Guidance. Because the Schedule presents only a selected portion of the operations of Cincinnati Children's, it is not intended to and does not present the financial position, changes in net assets or cash flows of Cincinnati Children's.

Negative Balances—Negative amounts represent grants with deficit balances which were closed during fiscal 2024.

REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH *GOVERNMENT AUDITING STANDARDS*

INDEPENDENT AUDITOR'S REPORT

To the Board of Trustees of
Children's Hospital Medical Center and Affiliates
Cincinnati, Ohio

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States ("*Government Auditing Standards*"), the consolidated financial statements of Children's Hospital Medical Center and Affiliates (the "Company"), which comprise the Company's consolidated balance sheet as of June 30, 2024, and the related consolidated statements of operations and changes in net assets, and cash flows for the year then ended, and the related notes to the consolidated financial statements (collectively referred to as the "financial statements"), and have issued our report thereon dated September 30, 2024.

Report on Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered the Company's internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Company's internal control. Accordingly, we do not express an opinion on the effectiveness of the Company's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. *A material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the Company's financial statements will not be prevented, or detected and corrected, on a timely basis. *A significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses or significant deficiencies may exist that were not identified.

Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Company's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the financial statements. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Purpose of This Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Company's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Company's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Deloitte + Touche LLP

September 30, 2024

REPORT ON COMPLIANCE FOR EACH MAJOR FEDERAL PROGRAM; REPORT ON INTERNAL CONTROL OVER COMPLIANCE; AND REPORT ON SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS REQUIRED BY THE UNIFORM GUIDANCE

INDEPENDENT AUDITOR'S REPORT

To the Board of Trustees
Children's Hospital Medical Center and Affiliates
Cincinnati, Ohio

Report on Compliance for Each Major Federal Program

Opinion on Each Major Federal Program

We have audited Children's Hospital Medical Center and Affiliates' (the "Company") compliance with the types of compliance requirements identified as subject to audit in the OMB *Compliance Supplement* that could have a direct and material effect on each of the Company's major federal programs for the year ended June 30, 2024. The Company's major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

In our opinion, the Company complied, in all material respects, with the compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended June 30, 2024.

Basis for Opinion on Each Major Federal Program

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America (GAAS); the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States (*Government Auditing Standards*); and the audit requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Our responsibilities under those standards and the Uniform Guidance are further described in the Auditor's Responsibilities for the Audit of Compliance section of our report.

We are required to be independent of the Company and to meet our other ethical responsibilities, in accordance with relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion on compliance for each major federal program. Our audit does not provide a legal determination of the Company's compliance with the compliance requirements referred to above.

Responsibilities of Management for Compliance

Management is responsible for compliance with the requirements referred to above and for the design, implementation, and maintenance of effective internal control over compliance with the requirements of laws, statutes, regulations, rules and provisions of contracts or grant agreements applicable to the Company's federal programs.

Auditor's Responsibilities for the Audit of Compliance

Our objectives are to obtain reasonable assurance about whether material noncompliance with the compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on the Company's compliance based on our audit. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS, *Government Auditing Standards*, and the Uniform Guidance will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Noncompliance with the compliance requirements referred to above is considered material, if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about Company's compliance with the requirements of each major federal program as a whole.

In performing an audit in accordance with GAAS, *Government Auditing Standards*, and the Uniform Guidance, we

- exercise professional judgment and maintain professional skepticism throughout the audit
- identify and assess the risks of material noncompliance, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the Company's compliance with the compliance requirements referred to above and performing such other procedures as we considered necessary in the circumstances
- obtain an understanding of the Company's internal control over compliance relevant to the audit in order to design audit procedures that are appropriate in the circumstances and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of the Company's internal control over compliance. Accordingly, no such opinion is expressed.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weaknesses in internal control over compliance that we identified during the audit.

Report on Internal Control Over Compliance

A *deficiency in internal control over compliance* exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A *material weakness in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of

compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A *significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the Auditor's Responsibilities for the Audit of Compliance section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance. Given these limitations, during our audit we did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above. However, material weaknesses or significant deficiencies in internal control over compliance may exist that were not identified.

Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

Report on Schedule of Expenditures of Federal Awards Required by the Uniform Guidance

We have audited the financial statements of the Company as of and for the year ended June 30, 2024, and have issued our report thereon dated September 30, 2024, which contained an unmodified opinion on those financial statements. Our audit was performed for the purpose of forming an opinion on the financial statements as a whole. The accompanying schedule of expenditures of federal awards is presented for purposes of additional analysis as required by the Uniform Guidance and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the schedule of expenditures of federal awards is fairly stated in all material respects in relation to the financial statements as a whole.

Deloitte + Touche LLP

March 18, 2025

Children's Hospital Medical Center and Affiliates

Schedule Of Findings and Questioned Costs
For The Year Ended June 30, 2024

SECTION I. SUMMARY OF AUDITOR'S RESULTS

Financial Statements:

Type of report the auditor issued on whether the
financial statements audited were prepared in
accordance with GAAP:

Unmodified

Internal control over financial reporting:

- | | | |
|--|-------------------|----------------------------|
| • Material weakness(es) identified? | <u> </u> Yes | <u> X </u> No |
| • Significant deficiency(ies) identified? | <u> </u> Yes | <u> X </u> None reported |
| • Noncompliance material to financial
statements noted? | <u> </u> Yes | <u> X </u> No |

Federal Awards:

Internal control over major programs:

- | | | |
|---|-------------------|----------------------------|
| • Material weakness(es) identified? | <u> </u> Yes | <u> X </u> No |
| • Significant deficiency(ies) identified? | <u> </u> Yes | <u> X </u> None reported |

Type of auditor's report issued on compliance for
major programs:

Unmodified

Any audit findings disclosed that are required to be
reported in
accordance with 2 CFR 200.516(a)?

 Yes X No

Identification of Major Programs:

ALN Number

Name of Federal Program or Cluster

Various

Research and Development Cluster (R&D)

Dollar threshold used to distinguish between Type A and Type B
programs?

\$ 3,000,000

Auditee qualified as low-risk auditee?

 X Yes No

SECTION II. FINANCIAL STATEMENT FINDINGS

None

SECTION III. FEDERAL AWARD FINDINGS AND QUESTIONED COSTS

None

SECTION IV. SUMMARY SCHEDULE OF PRIOR YEAR AUDIT FINDINGS

None