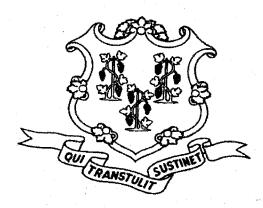
State of Connecticut



Annual Report of Long-Term Care Facility

Cost Year 2016

Name of Facility (as licensed)		
Fairview Health of Southport, LLC		
Address (No. & Street, City, State, Zip Code)		
930 Mill Hill Terrace, Southport, CT 06890		
Type of Facility		
Chronic and Convalescent	Rest Home with Nursing	
☑ Nursing Home only □	Supervision only	□ (Specify)
(CCNH)	(RHNS)	
Report for Year Beginning	Report for Year Ending	······································
10/1/2015	9/30/2016	

License Numbers:	CCNH 2307-C	RHNS	(Specify)	Medicare Provider 07-5200
Medicaid Provider Numbers:	CC 000008508	NH	RHNS	ICF-IID

For Department Use Only

Sequence Number Assigned	Signed and Notarized	Date Received	Sequence Number Assigned	Signed and Notarized	Date Received

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Name of Facility (as licensed)	License N	0.	Report for Year Ended	Page	of	
Fairview Health of Southport, LL	.C	2307-C		9/30/2016	1	37
	Admini	strator's/Ow	ner's Certifica	tion		
				FION CONTAINED IN SIONMENT UNDER S		
Cost Report and support the cost report period	orting schedules beginning Octob lief, it is a true, c	prepared for Fa er 1, 2015 and correct, and corr	irview Health of S ending September uplete statement pr	we examined the accom southport, LLC [facility 30, 2016, and that to th repared from the books	name], for e best of	
Schedule of Resident St	atistics, Statement cility in accordan	ts of Reported Ex	cpenditures, Stateme	formation and Questionnal ents of Revenues and the of the State of Connection	related	
my knowledge under t presented in this Reported in this Reported in the second	the penalty of pe ort as a basis for s of to provide resi	rjury. I also cen securing reimbu dent care in this	rtify that all salary ursement for Title s Facility. All sup	is true and correct to th and non-salary expense XIX and/or other State porting records for the e made available to audit	es assisted expenses	
{a} Subject to Desk A	udit Review					
Signed (Administrator)	,,,,,,,,	Date	Signed (Own	er)	Date	
Printed Name (Administrator) Jason Mervin			Printed Name Eliyahu Mirli	· /		
Subscribed and Sworn to before me:	State of	Signed (Notar	ry Public)	Comm. Ex	pires	
					L. /	
Address of Notary Public						

(Notary Seal)

State of Connecticut Department of Social Services

55 Farmington Avenue, Hartford, Connecticut 06105

Data Required for Real Wage Adjus	Page	of		
-			1A	37
Name of Facility	Period Cov	ered:	From	То
Fairview Health of Southport, LLC	<u></u>		10/1/2015	9/30/2016
Address of Facility 930 Mill Hill Terrace, Southport, CT 06890				
Report Prepared By	Phone Nun		Date	
Marcum LLP	203-781-96	500	2/2/2017	
Item	 Total	CCNH	RHNS	(Specify)
1. Dietary wages paid	\$ ļ			
2. Laundry wages paid	\$			
3. Housekeeping wages paid	\$ 			
4. Nursing wages paid	\$			
5. All other wages paid	\$ 			
6. Total Wages Paid	\$			
7. Total salaries paid	\$			
8. Total Wages and Salaries Paid (As per page 10 of Report)	\$ 			

Wages - Compensation computed on an hourly wage rate.

Salaries - Compensation computed on a weekly or other basis which does not generally vary, based on the number of hours worked.

DO NOT include Fringe Benefit Costs.

General Information and Questionnaire

			ility	Report for Yea	ar Ended	Page	of
	203	3-259-7894		9/30/2016		2	37
Name of Facility (as shown on license)		1		Street, City, Stat			
Fairview Health of Southport, LLC			ll Tei	rrace, Southport	t, CT 068		
CCNH		RHNS		(Specify)			Provider No.
License Numbers: 2307-C						07-5200	
Type of Facility (Check appropriate box(es))							
Chronic and Convalescent Nursing Home only (CCNH)		st Home with pervision only			(Specify))	
Type of Ownership (Check appropriate box)							
O Proprietorship O LLC O Partnership	0	Profit Corp.	0	Non-Profit Corp	p. O	Government	O Trust
If this facility opened or closed during report year prov	vide:		Date	e Opened	Date Clo	osed	
Has there been any change in ownership or operation during this report year?	0	Yes		No	If "Yes."	explain full	v.
Administrator				·····			
Name of Administrator				Nursing Ho			
Jason Mervin				Administrate		002041	
	(6	11 4 4 1 1 2	- 64	License N	0.:		
Other Operators/Owners who are assistant administrate	ors (tu	Il or part time) 01 U	License N			
Name N/A				License			
							

General Information and Questionnaire Partners/Members

Name of Facility		License No.		r Year Ended	Page of
Fairview Health of Southport, LLC		2307-C	9/30/2016		3 37
Legal Name of Partnership/LLC Fairview Health of Southport, LLC		Business 930 Mill Hill 7 Southport, CT			d/or Town(s) in Registered
Name of Partners/Members	Business A	ess Address		Title	% Owned
See Attached Schedule					
		<u></u>			

Fairview Healthcare Center of Fairfield Org Chart

Yaakov (Jacob) Sod	13.50%
Eliyahu Mirlis	2.00%
Shalom Auerbach	12.00%
Benjamin Landa	23.85%
Lori Fensterman	9.90%
Stuart Serota	3.00%
Matthew Serota	3.00%
Jack Jaffa	9.00%
Baruch Klien	10.00%
Miriam Taub	8.75%
Aliza Beer	5.00%
a	



Fairview Health of Southport, LLC (OE)

Į

Fairview Healthcare Center of Fairfield (d/b/a)

General Information and Questionnaire Corporate Owners

Name of Facility	License No. Report for Year Ended		Page of	
Fairview Health of Southport, LLC	2307-C	9/30/2016		3A 37
If this facility is owned or operated as a corp	oration, provide th	e following informa	tion:	· · · · · · · · · · · · · · · · · · ·
Legal Name of Corporation	Busines	ss Address	State(s) in Whi	ch Incorporated
N/A				•
Name of Directors, Officers	Busines	Business Address		No. Shares Held by Each
N/A				-
Names of Stockholders Owning at Least 10% of Shares				
N/A				

General Information and Questionnaire Individual Proprietorship

Name of Facility	License No.	Report for Year Ended	Page of
Fairview Health of Southport, LLC	2307-С	9/30/2016	3B 37
If this facility is owned or operated as an individua	al proprietorship,	provide the following inform	ation:
Ow	ner(s) of Facility		
N/A			
	··· ····	<u></u>	
		<u> </u>	
		· · · · ·	
		·	
	<u> </u>		
	••••		

State of Connecticut Annual Report of Long-Term Care Facility CSP-4 Rev. 10/2005

General Information and Questionnaire Related Parties*

Name of Facility Fairview Health of Southport, LLC	hport, LLC	License No 23(e No. 2307-C	Report for Year Ended 9/30/2016		Page 4	of 37
Are any individuals rece	Are any individuals receiving compensation from the facility related through	cility rel	roug		If "Yes," provide the Name/Address and	le Name/Add	iress and
marriage, ability to cont	marriage, ability to control, ownership, family or business association?	ss assoc		0 Yes O No	complete the information on Page 11 of the report.	nation on Pa	ge 11 of the report.
Are any individuals or c	Are any individuals or companies which provide goods or services,	or servic	ces,				
including the rental of p related through family a	including the rental of property or the loaning of funds to this facility, related through family association, common ownership, control, or business	this factories of the control,	cility, or business	• Yes O No			
association to any of the	association to any of the owners, operators, or officials of this facility?	of this fa	cility?		If "Yes," provide the following information:	le following	information:
		Also	Also Provides		Indicate Where		
		Goods	Goods/Services to		Costs are Included		
Name of Related	Business	Non-Re		Description of Goods/Services	in Annual Report	Cost	Actual Cost to the
Individual or Company	Address	Yes	No %**	Provided	Page # / Line #	Reported	Related Party
Fairview Healthcare Management	930 Mill Hill Terrace, Southport, CT	0	0	Management Fee	Pg. 16 / Line m12	284,478	284,478
930 Mill Hill Terrace, LLC	930 Mill Hill Terrace, Southport, CT	0	0	Rental Property	Pg. 22 / Line 9	487.203	487.203
Regal Care Rehabilitation, LLC	26 Firemens Memorial Drive Suite 205, Pomona, NY 10970	0	0	Physical Therapy	Pg. 13 / B5a	22,120	22,120
Regal Care Rehabilitation, LLC	26 Firemens Memorial Drive Suite 205, Pomona, NY 10970	0	0	Speech Therapy	Pg. 13 / B9a	6,546	6,546
Regal Care Rehabilitation, LLC	26 Firemens Memorial Drive Suite 205, Pomona, NY 10970	0	•	Occupational Therapy	Pg. 13 / B10a	22,702	22,702
		0	0				
		0	0				
		0	0				
		0	0				

Use additional sheets if necessary.
 ** Provide the percentage amount of revenue received from non-related parties.

General Information and Questionnaire Basis for Allocation of Costs

Name of Facility	License No	•	Report for Year Ended	Page		of
Fairview Health of Southport, LLC	2307-C		9/30/2016	5		37
If the facility is licensed as CDH and/or RCH o	-	IDS or TB	I services with special Medicai	d rates, o	costs	3
must be allocated to CCNH and RHNS as follo	ws:					
Item			Method of Allocation			
Dietary			meals served to residents			
Laundry			pounds processed			
Housekeeping			square feet serviced			
			hours of routine care provided	-		
Nursing			classification, i.e., Director (or	-		-
		÷	Nurses, Licensed Practical Nu	rses, Aid	les a	nd
		Attendants				
Direct Resident Care Consultants			hours of resident care provided	d by EA	CH	
		•	(See listing page 13)			
Maintenance and operation of plant		Square fee				
Property costs (depreciation)		Square fee				
Employee health and welfare		Gross salar				
Management services			te cost center involved			
All other General Administrative expenses			irect and Allocated Costs			
The preparer of this report must answer the foll	lowing quest	tions applic				
1. In the preparation of this Report, were all	O Yes	• No	If "No," explain fully why suc	h allocat	ion	was
costs allocated as required?	U 105		not made.			
N/A - One Level of Care						
2. Explain the allocation of related company ex	kpenses and	attach copy	y of appropriate supporting data	ı		<u></u> .
N/A - One Level of Care						
3. Did the Facility appropriately allocate and se				ome cost	cen	ters?
(e.g., Assisted Living, Home Health, Outpat	ient Services	s, Adult Da	y Care Services, etc.)			
	O V	0 N-	If "No," explain fully why suc	h allocat	tion	was
	O Yes	⊙ No	not made.			
N/A - One Level of Care						

Annual Report of Long-Term Care Facility State of Connecticut CSP-6 Rev. 9/2002

General Information and Questionnaire Leases (Excluding Real Property)

Operating Leases - Include all long-term leases for motor vehicles and equipment that have not been capitalized. Short-term leases or as needed rentals

should not be included in these amounts.							
Name of Facility			License No.	Report for Year Ended	ear Ended		Page of
Fairview Health of Southport, LLC			2307-C	9/30/2016			6 37
	Related * to	d * to					
	Owners,	ers,					
	Operators,	itors,		90 040 U	T _c m, _o f	Annual	+====
		Cers					
Name and Address of Lessor	Yes	No	Description of Items Leased	Lease	Lease	01 Lease	Llaimed
Great America Financial Services	0	0	Copier	Monthly	Monthly	2,887	2,887
Pitney Bowes, Inc.	0	•	Postage Meter	Monthly	Monthly	343	343
Eagle Leasing	0	0	Storage Rental	Monthly	Monthly	3,512	3,512
	0	0					
	0	0					
	0	0					
	0	0					
	0	0				:	
	0	0					
	0	0					
Is a Mileage Log Book Maintained for All Leased Vehicles ?	Leased V	ehicles	? O Yes	O No	No	Total ***	6,742

Is a Mileage Log Book Maintained for All Leased Vehicles ?

* Refer to Page 4 for definition of related. If "Yes," transaction should be reported on Page 4 also.

** Attach copies of newly acquired leases.

*** Amount should agree to Page 22, Line 6e.

General Information and Questionnaire Accounting Basis

·····			
Name of Facility License No.	Report for Year Ended		Page of
Fairview Health of Southport, LLC 2307-C	9/30/2016		7 37
The records of this facility for the period covered by this rep	port were maintained on the following basis:		
• Accrual O Cash O Modified Cash			
Is the accounting basis for this			
period the same as for the • Yes	If "No," explain.		
previous period? O No			
Independent Accounting Firm			
Name of Accounting Firm	Address (No. & Street, City, State, Zip Code)		
1 Marcum LLP	555 Long Wharf Drive, New Haven, CT (06511	
2 Roth & Co, LLP	1428 36th St #200, Brooklyn, NY 11218		
3			
4			
Services Provided by This Firm (describe fully)			
1 Annual Review and Preparation of Cost Reports		\$	10,550
2 Preparation of Tax Returns		\$	4,750
3		\$	
4		\$	
		Charge for S	Services Provided
		s s	15,300
Are These Charges Reflected in the Expenditure Portion of This Report	? If Yes, Specify Expense Classification and Line No.	L	
• Yes O No Page 15, Line 1d			
Legal Services Information			· · · · ·
Name of Legal Firm or Independent Attorney		Telephone N	lumber
1 Robinson & Cole LLP		203-462-75	18
2 Murtha Cullina LLP		860-240-600	00
3 Jacobi & Case, PC		203-874-71	10
4 Naness, Chaiet & Naness, LLC		516-827-430	00
5 See Attached Page 7a		See Attache	d Page 7a
Address (No. & Street, City, State, Zip Code)			
1 280 Trumbull St., Hartford, CT 06103			
2 185 Asylum St., Hartford, CT 06103			
3 57 Plains Road, Suite 2B, Milford, CT 06461			
4 375 North Broadway, Suite 202, Jericho, NY 11753			
5 See Attached Page 7a			
Services Provided by This Firm (describe fully)			
1 Union negotiations		\$	9,447
2 General legal and issues regarding CHOW (Disallowed 660 on Pg.	28)	\$	4,178
3 General legal	· · · · · · · · · · · · · · · · · · ·	\$	1,223
4 General legal	2	\$	4,308
5 See Attached Page 7a		\$	4,875
	<u> </u>	T	Services Provided
		-	
		\$	24,031
Are These Charges Reflected in the Expenditure Portion of This Report	? If Yes, Specify Expense Classification and Line No.		
• Yes O No Page 15, Line 1e			

State of Connecticut Annual Report of Long-Term Care Facility CSP-7 Rev. 6/95

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General Information and Questionnaire Accounting Basis

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Legal Services Information Name of Legal Firm or Independent Attorney Telephone Number 1 Case & Case, PC 860-678-1434 2 Earl M. Temchin, Esq. 203-239-6699 3 4 203-239-6699 4 5 6 7 8 8 Address (No. & Street, City, State, Zip Code) 1 10 Tower Lane, Avon, CT 06001 2 18 Peck St, North Haven, CT 06473 3 3 4 5 6 7 8 Services Provided by This Firm (describe fully) 1 General legal \$ 3,975 2 General legal \$ 900 3 3 4 \$ 900 5 6 \$ 900 5 5 6 \$ 900 5 5 7 \$ 900 5 5 6 \$ 5 5 5 6 \$ 5 5 5 7 \$ 5 \$ 5 5 6 \$ 5 5 5 7 \$ 5 \$ 5 5 <	Name of Facility	License No.	Report for Year Ended		Page	of
Name of Legal Firm or Independent Attorney Telephone Number 1 Case & Case, PC 860-678-1434 2 Earl M. Temchin, Esq. 203-239-6699 3 4 5 6 7 8 Address (No. & Street, City, State, Zip Code) 1 1 10 Tower Lane, Avon, CT 06001 2 18 Peck St, North Haven, CT 06473 3 4 5 6 6 7 8 900 3 900 3 5 6 5 7 8 Services Provided by This Firm (describe fully) 1 General legal 3 5 6 5 5 5 6 \$ 7 \$ 8 \$ 900 3 4 \$ 5 \$ 6 \$ 7 \$ 8 \$ 900 \$ 3 \$ 6 \$ 7 \$ 8 \$ 6 \$ 7 \$ 8 \$<	Fairview Health of Southport LLC	2307-С	9/30/2016		7a	37
1 Case & Case, PC \$60-678-1434 2 Earl M. Temchin, Esq. 203-239-6699 3 4 5 6 7 8 Address (No. & Street, City, State, Zip Code) 1 10 Tower Lane, Avon, CT 06001 2 18 Peck St, North Haven, CT 06473 3 3 4 5 6 7 8 Services Provided by This Firm (describe fully) 1 General legal \$ 3,975 2 General legal \$ 900 3 3 4 \$ 900 3 4 \$ 900 \$ 900 3 4 \$ 900 \$ 900 \$ 900 3 \$ \$ 900 \$ \$ 900 \$ \$ 900 3 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Legal Services Information					
2 Earl M. Temchin, Esq. 203-239-6699 3 4 5 6 7 8 Address (No. & Street, City, State, Zip Code) 1 1 10 Tower Lane, Avon, CT 06001 2 18 Peck St, North Haven, CT 06473 3 4 5 5 6 7 7 8 Services Provided by This Firm (describe fully) 1 General legal 5 5 6 5 7 8 4 5 5 5 6 5 7 8 8 5 8 5 8 5 8 5 8 5 8 5 8 5 8 5 8 5 8 5 8 5 8 5 8 5 900 5 10	Name of Legal Firm or Independent Attorney		Te	elephone Ni	ımber	
3 4 5 6 7 8 Address (No. & Street, City, State, Zip Code) 1 1 10 Tower Lane, Avon, CT 06001 2 18 Peck St, North Haven, CT 06473 3 4 5 6 7 8 Services Provided by This Firm (describe fully) 1 1 General legal \$ 3,975 2 General legal \$ 900 3 \$ \$ 4 \$ \$ 900 3 \$ \$ 4 \$ \$ 5 \$ \$ 6 \$ \$ 7 \$ \$ 8 \$ \$ 8 \$ \$ 7 \$ \$ 8 \$ \$ 7 \$ \$ 8 \$ \$ 6 \$ \$ 7 \$ \$ 8 \$ \$ 6 \$ \$ </td <td>1 Case & Case, PC</td> <td></td> <td>86</td> <td>50-678-1434</td> <td>1</td> <td></td>	1 Case & Case, PC		86	5 0-678- 1434	1	
4 5 6 7 8 8 Address (No. & Street, City, State, Zip Code) 1 1 10 Tower Lane, Avon, CT 06001 2 18 Peck St, North Haven, CT 06473 3 4 5 6 7 8 Services Provided by This Firm (describe fully) 1 1 General legal \$ 3,975 2 General legal \$ 900 3 \$ 4 5 \$ \$ 900 3 \$ \$ 4 \$ \$ 5 \$ \$ 900 3 \$ \$ 4 \$ \$ 5 \$ \$ 6 \$ \$ 7 \$ \$ 8 \$ \$ 6 \$ \$ 7 \$ \$ 8 \$ \$ 6 \$ \$ 7 \$ \$ 8 \$ <td< td=""><td>2 Earl M. Temchin, Esq.</td><td></td><td>20</td><td>3-239-6699</td><td>)</td><td></td></td<>	2 Earl M. Temchin, Esq.		20	3-239-6699)	
6 7 8 Address (No. & Street, City, State, Zip Code) 1 10 Tower Lane, Avon, CT 06001 2 18 Peck St, North Haven, CT 06473 3 4 5 6 7 8 Services Provided by This Firm (describe fully) 1 1 General legal \$ 2 General legal \$ 3 4 \$ 4 \$ 900 3 \$ \$ 4 \$ \$ 5 \$ \$ 6 \$ \$ 7 \$ \$ 8 \$ \$ 6 \$ \$ 7 \$ \$ 8 \$ \$ 6 \$ \$ 7 \$ \$ 8 \$ \$ 8 \$ \$ 8 \$ \$ 8 \$ \$ 8 \$ \$ 8 <	3					
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7 8 Address (No. & Street, City, State, Zip Code) 1 1 10 Tower Lane, Avon, CT 06001 2 18 Peck St, North Haven, CT 06473 3 4 5 6 7 8 Services Provided by This Firm (describe fully) 1 1 General legal \$ 2 General legal \$ 3 4 \$ 4 \$ 900 3 \$ \$ 4 \$ \$ 5 \$ \$ 6 \$ \$ 7 \$ \$ 8 \$ \$ 7 \$ \$ 8 \$ \$ 7 \$ \$ 8 \$ \$ 8 \$ \$ 8 \$ \$ 8 \$ \$ 8 \$ \$ 8 \$ \$ 8 \$ \$ 4 <t< td=""><td>5</td><td></td><td></td><td></td><td></td><td></td></t<>	5					
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1 10 Tower Lane, Avon, CT 06001 2 18 Peck St, North Haven, CT 06473 3 4 5 6 6 7 2 General legal 3,975 2 General legal \$ 3 \$ 900 3 \$ \$ 4 \$ \$ 5 \$ \$ 6 \$ \$ 7 \$ \$ 8 \$ \$ 7 \$ \$ 8 \$ \$ Charge for Services Provided \$ 4,875 Are These Charges Reflected in the Expenditure Portion of This Report? If Yes, Specify Expense Classification and Line No. \$				<u> </u>		
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3 4 5 6 7 8 Services Provided by This Firm (describe fully) 1 General legal 5 3,975 2 General legal 5 900 3 \$ 4 \$ 5 \$ 6 \$ 7 \$ 8 \$ 7 \$ 8 \$ 7 \$ 8 \$ 8 \$ 8 \$ 8 \$ 8 \$ 8 \$ 8 \$ 8						
4 5 6 7 8 5 6 7 8 3,975 2 General legal \$ 3,975 2 6 900 3 3 3 4 5 4 5 4 5 <td>2 18 Peck St, North Haven, CT 06473</td> <td></td> <td></td> <td></td> <td></td> <td></td>	2 18 Peck St, North Haven, CT 06473					
6 7 8 Services Provided by This Firm (describe fully) 1 General legal \$ 3,975 2 General legal \$ 900 3 \$ \$ 4 \$ \$ 5 \$ \$ 6 \$ \$ 7 \$ \$ 8 \$ \$ 7 \$ \$ 8 \$ \$ Charge for Services Provided \$ 4,875 Are These Charges Reflected in the Expenditure Portion of This Report? If Yes, Specify Expense Classification and Line No.	3					
6 7 8 Services Provided by This Firm (describe fully) 1 General legal \$ 3,975 2 General legal \$ 900 3 \$ \$ 4 \$ \$ 5 \$ \$ 6 \$ \$ 7 \$ \$ 8 \$ \$ 7 \$ \$ 8 \$ \$ Charge for Services Provided \$ 4,875 Are These Charges Reflected in the Expenditure Portion of This Report? If Yes, Specify Expense Classification and Line No.	4					
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Services Provided by This Firm (describe fully) 1 General legal \$ 3,975 2 General legal \$ 900 3 \$ \$ 4 \$ \$ 5 \$ \$ 6 \$ \$ 7 \$ \$ 8 \$ \$ Charge for Services Provided \$ 4,875 Are These Charges Reflected in the Expenditure Portion of This Report? If Yes, Specify Expense Classification and Line No.						
1 General legal \$ 3,975 2 General legal \$ 900 3 \$ \$ 4 \$ \$ 5 \$ \$ 6 \$ \$ 7 \$ \$ 8 \$ \$ Charge for Services Provided \$ 4,875 Are These Charges Reflected in the Expenditure Portion of This Report? If Yes, Specify Expense Classification and Line No.						
2 General legal \$ 900 3 \$ \$ 4 \$ \$ 5 \$ \$ 6 \$ \$ 7 \$ \$ 8 \$ \$ Charge for Services Provided \$ 4,875 Are These Charges Reflected in the Expenditure Portion of This Report? If Yes, Specify Expense Classification and Line No.			,			
3 \$ 3 \$ 4 \$ 5 \$ 6 \$ 7 \$ 8 \$ Charge for Services Provided \$ 4,875 Are These Charges Reflected in the Expenditure Portion of This Report? If Yes, Specify Expense Classification and Line No.			<u> </u>			
4 \$ 5 \$ 6 \$ 7 \$ 8 \$ Charge for Services Provided \$ 4 \$ \$ Charge for Services Provided \$ \$ Are These Charges Reflected in the Expenditure Portion of This Report? If Yes, Specify Expense Classification and Line No.					900	
5 \$ 6 \$ 7 \$ 8 \$ Charge for Services Provided \$ \$ Charge for Services Provided \$ \$ Are These Charges Reflected in the Expenditure Portion of This Report? If Yes, Specify Expense Classification and Line No.						
6 \$ 7 \$ 8 \$ Charge for Services Provided \$ 4,875 Are These Charges Reflected in the Expenditure Portion of This Report? If Yes, Specify Expense Classification and Line No.						
7 \$ 8 \$ Charge for Services Provided \$ 4,875 Are These Charges Reflected in the Expenditure Portion of This Report? If Yes, Specify Expense Classification and Line No.			<u> </u>			
8 S Charge for Services Provided \$ Are These Charges Reflected in the Expenditure Portion of This Report? If Yes, Specify Expense Classification and Line No.						
Charge for Services Provided \$ 4,875 Are These Charges Reflected in the Expenditure Portion of This Report? If Yes, Specify Expense Classification and Line No.						
\$ 4,875 Are These Charges Reflected in the Expenditure Portion of This Report? If Yes, Specify Expense Classification and Line No.	<u> </u>				ruices P	rovided
Are These Charges Reflected in the Expenditure Portion of This Report? If Yes, Specify Expense Classification and Line No.				-		
	Are These Charges Deflected in the Expenditure Portion of This	Report? If Ves Speci	fy Expense Classification and Lin		4,075	
	• Yes O No	Page 15, Line 1e	ry Expense Classification and En	iv 110,		

State of Connecticut Annual Report of Long-Term Care Facility CSP-8 Rev. 9/2002

Schedule of Resident Statistics

Name of Facility			License No.	ło.			Report fo	Report for Year Ended	p		Page	of
Fairview Health of Southport, LLC			23	2307-C			9/30/2016				8	37
						Period 10/1 Thru 6/30	1 Thru 6/	30		Period 7/1 Thru 9/30	Thru 9/3	0
		Total	Total									
	Total All Levels	CCNH Level	RHNS Level	Total (Specify)	Total	CCNH	RHNS	(Specify)	Total	CCNH	RHNS	(Specify)
 Certified Bed Capacity A On last day of DRFVIOUS report period 	120	120			120	120			001	120		
B. On last day of THIS report period	120	120			120	120			120	120		
2. Number of Residents												
A. As of midnight of PREVIOUS report period	102	102			102	102			66	66		
B. As of midnight of THIS report period	102	102			66	99			102	102		
3. Total Number of Days Care Provided During Period												
A. Medicare	3,795	3,795			2,723	2,723			1,072	1,072		
B. Medicaid (Conn.)	30,241	30,241			22,029	22,029			8,212	8,212		
C. Medicaid (other states)												
D. Private Pay	2,311	2,311			1,814	1,814			497	497		
E. State SSI for RCH												
F. Other (Specify) Managed Care	551	551	1		477	477			74	74		
G. Total Care Days During Period (3A thru F)	36,898	36,898			27,043	27,043			9,855	9,855		
Total Number of Days Not Included in Figures in 3G 4 for Which Revenue Was Received for Reserved												
					·				•			
A. Medicaid Bed Reserve Days												
B. Other Bed Reserve Days												
5. Total Resident Days (3G + 4A + 4B)	36,898	36,898			27,043	27,043			9,855	9,855		

Schedule of Resident Statistics (Cont'd) Report for Year Ended Name of Facility License No. Page of 9 2307-C 9/30/2016 37 Fairview Health of Southport, LLC 4. Were there any changes in the certified bed capacity during the report year? O Yes O No If "YES", provide the following information: Capacity After Change Place of Change Change in Beds Date of CCNH RHNS (Specify) Lost Gained Change (3) (2) (3) CCNH RHNS (Specify) Reason for Change (1)(2)(1) (1) (2)(3)5. If there was any change in certified bed capacity during the report year (as reported in item 4 above) provide the number of RESIDENT DAYS for 90 days following the change. (Specify) CCNH RHNS Change in Resident Days 1st change 2nd change 3rd change 4th change 6. Number of Residents and Rates on September 30 of Cost Year Self-Pay Other State Assisted Medicaid Medicare R.C.H. ICF-MR RHNS (Specify) CCNH CCNH CCNH RHNS Item No. of Residents 10 87 Per Diem Rate a. One bed rm. Various 251.83 500.00 460.00 b. Two bed rms. Various 251.83 c. Three or more bed rms. RHNS (Specify) TOTAL CCNH 7. Total Number of Physical Therapy Treatments 3,765 3,765 A. Medicare - Part B B. Medicaid (Exclusive of Part B) 253 253 1. Maintenance Treatments 2. Restorative Treatments 2,273 2,273 10,558 C. Other 10,558 16,849 16.849 **D.** Total Physical Therapy Treatments 8. Total Number of Speech Therapy Treatments 590 590 A. Medicare - Part B B. Medicaid (Exclusive of Part B) 1. Maintenance Treatments 45 45 2. Restorative Treatments 402 402 1.808 C. Other 1,808 D. Total Speech Therapy Treatments 2,845 2,845 9. Total Number of Occupational Therapy Treatments 3,329 3,329 A. Medicare - Part B B. Medicaid (Exclusive of Part B) 179 179 1. Maintenance Treatments 1,612 1,612 2. Restorative Treatments 10,656 10,656 C. Other D. Total Occupational Therapy Treatments 15,776 15,776

State of Connecticut Annual Report of Long-Term Care Facility CSP-10 Rev. 9/2002

Report of Expenditures - Salaries & Wages

Name of Facility	License No.		Report for Yes	ar Ended	Page	of
Fairview Health of Southport, LLC	2307-C		9/30/2016		10	37
Are time records maintained by all individuals receiving con	mpensation?	0	Yes	0	No	
			Total Cost			
Item	CCNH	Hours	RHNS	Hours	(Specify)	Hours
A. Salaries and Wages*						
1. Operators/Owners (Complete also Sec. 1						
of Schedule A1)						
2. Administrator(s) (Complete also Sec. III						
of Schedule A1)	107,362	2,104	•	29 80 100 - 7800 100 100 100		i minimum in
3. Assistant Administrator (Complete also Sec. IV			E A B			
of Schedule A1)		ale: Specification				
4. Other Administrative Salaries (telephone operator, clerks, receptionists, etc.)	451,234	14,197				
5. Dietary Service		17,191				
a. Head Dietitian						
b. Food Service Supervisor						
c. Dietary Workers	534,110	33,196				
 Housekeeping Service a. Head Housekeeper 			Contraction of the second		dian-	
b. Other Housekeeping Workers	349,526	24,372				
7. Repairs & Maintenance Services	549,520	21,572		101	298	
a. Engineer or Chief of Maintenance						
b. Other Maintenance Workers	100,368	4,474				<u> </u>
8. Laundry Service						
a. Supervisor	104.004	10.500				
b. Other Laundry Workers 9. Barber and Beautician Services	194,064	13,500	//			
10. Protective Services						
11. Accounting Services			5. S. SE 11			
a. Head Accountant						
b. Other Accountants		anananana - Ana ila d		A		
12. Professional Care of Residents			le al an			
a. Directors and Assistant Director of Nurses	118,205	2,200			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
b. RN	506 (64	15 201	E L			
1. Direct Care 2. Administrative**	596,664 142,710					
c. LPN	142,710	5,700		1228	- 14 A	
1. Direct Care	949,066	35,078	;			
2. Administrative**						
d. Aides and Attendants	1,672,226	108,633				
e. Physical Therapists	281,256	3,854			<u> </u>	
f. Speech Therapists g. Occupational Therapists	1,734 140,819	41 4,120				<u> </u>
g. Occupational Therapists h. Recreation Workers	74,313	3,758				t
i. Physicians			Sec. Con.	Sec. Sec.		Sector.
1. Medical Director						ļ
2. Utilization Review			ļ		<u> </u>	
3. Resident Care***						
4. Other (Specify)						
j. Dentists				1		<u> </u>
k. Pharmacists						
1. Podiatrists						
m. Social Workers/Case Management	110,121	4,372	2			<u> </u>
n. Marketing		State of State				
o. Other (Specify) See Attached Schedule						
A-13. Total Salary Expenditures	5,823,778	273,188	.t			

* Do not include in this section any expenditures paid to persons who receive a fee for services rendered or who are paid on a contract basis. ** Administrative - costs and hours associated with the following positions: MDS Coordinator, Inservice Training Coordinator and

Infection Control Nurse. Such costs shall be included in the direct care category for the purposes of rate setting.

*** This item is not reimbursable to facility. For Title 19 residents, doctors should bill DSS directly. Also, any costs for Title 18 and/or other private pay residents must be removed on Page 28.

Fairview Health of Southport, LLC 9/30/2016

Schedule of Other Salaries and Wages (Page 10)

	CCN	NH	RH	NS	(Spe	cify)
Position	\$	Hours	\$	Hours	\$	Hours
	-					
No. No. N.						
		1				
	2. 224					
		<u> </u>	-			
理论上方 美国教教 化二乙基基苯				1		
		2.4				
Total	S -	-	<u>s</u> -	-	\$ -	-

Schedule of Other Fees (Page 13)

	CCI	н	RH	NS	(Spec	cify)
Service	\$	Hours	S	Hours	S	Hours
Respiratory Therapist	\$ 510	8		-		
						1
ALC: NEWSFILM						2
				8.8		Čr.
						1
		1993 (1993) (1993) (1993) (1993) (1993) (1993) (1993) (1993) (1993) (1993) (1993) (1993) (1993) (1993) (1993) (1993) (1993) (1993) (1993)				
	na seconda de la companya de la comp					
				- EU		
	e 610	<u>8</u>				
Total	S 510	8	<u> </u>	-	S -	

Attachment Page 10/13

State of Connecticut Annual Report of Long-Term Care Facility CSP-11 Rev. 10/2005

Compensation 45,762 Received 37 of Hours Worked Page Total Π N/A Name and Address of All Other Employment** Fairview Health of Greenwich Assistant Administrators and Other Related Parties* Claimed on Line Where Report for Year Ended Page 10 A4 Hours Worked Total 9/30/2016 N/A Full Description of Oversee the financial Services Rendered operation of facility (describe fully) Fringe Benefits and/or Other Payments 2307-C Non Discrim License No. (Specify) Salary Paid RHNS 63,024 CCNH Fairview Health of Southport, LLC Assistant Administrators who Section I - Operators/Owners parties of Operators/Owners facility (EXCEPT those who may be the Administrator or are identified on Page 12). Section II - Other related employed in and paid by Name Name of Facility Eliyahu Mirlis

Schedule A1 - Salary Information for Operators/Owners; Administrators,

* No allowance for salaries will be considered unless full information is provided. Use additional sheets if required.

** Include all employment worked during the cost year.

State of Connecticut Annual Report of Long-Term Care Facility CSP-12 Rev. 10/2005

Schedule A1 - Salary Information for Operators/Owners; Administrators, Assistant Administrators and Other Related Parties*

		A	VSSIStalit	AUIIIIIISUA	Assistatil Autituisuators and Outer Actaicu Falues	Nelaleu	r al ues -			
Name of Facility (as licensed)				License No.		Report for Year Ended	ear Ended		Page	of
Fairview Health of Southport, LLC				2307-C		9/30/2016			12	37
		Salary Paid	9							
				Fringe Benefits and/or Other	-	Total			Total	•
Name	CCNH	RHNS	(Specify)	Payments (describe fully)	Full Description of Services Rendered	Hours Worked	Claimed on Page 10	Name and Address of All Other Employment**	Hours Worked	Compensation Received
Section III - Administrators***										
Marjorie Simpson (10/1/2015 - 1/12/2016)	43,115			Non Discrim	Administrator	590 A2	A2			
Jenna M Rose (1/13/2016 - 5/13/2016)	33,848			Non Discrim	Administrator	708 A2	A2			
See Attachment Page 12a	30,399			Non Discrim	Administrator	806 A2	A2			
Section IV - Assistant Administrators										
]:	-			J	 - .				

*No allowance for salaries will be considered unless full information is provided. Use additional sheets if required.

****** Include $\underline{\mathbf{all}}$ other employment worked during the cost year.

******* If more than one Administrator is reported, include dates of employment for each.

State of Connecticut Annual Report of Long-Term Care Facility CSP-11 Rev. 10/2005

		ASSIS	ant Adn	ninistrators a	tant Administrators and Other Related Parties*	Parties*				
Name of Facility				License No.		Report for Year Ended	r Ended		Page	of
Fairview Health of Southport, LLC				2307-C		9/30/2016			12a	37
		Salary Paid								
				Fringe Benefits and/or Other			ine Where	Line Where Name and Address of		
Name	CCNH	RHNS	(Specify)	(Specify) Payments (Specify)	Full Description of Services Total Hours Claimed on Rendered Worked Page 10	Total Hours Claimed on Worked Page 10	laimed on Page 10	All Other Employment**	Total Hours Worked	Total Hours Compensation Worked Received
Israel Wulliger (5/17/2016 - 7/29/2016)	15,885			Non Discrim	Administrator	407 A2	2			
lason Mervin (7/26/2016 - Present)	14,514			Non Discrim	Administrator	399 A2	2			

Schedule A1 - Salary Information for Operators/Owners; Administrators,

* No allowance for salaries will be considered unless full information is provided. Use additional sheets if required. ** Include all employment worked during the cost year.

State of Connecticut Annual Report of Long-Term Care Facility CSP-13 Rev. 9/2002

B. Report of Expenditures - Professional Fees

Name of Facility Fairview Health of Southport, LLC	License No. 230	7-0	Report for Y 9/30/2016	ear Ended	Page 13	of 37
	230	/-0	Total Cost	and Uaura	15	<u> </u>
		1	Total Cost		1	1
Item	CCNH	Hours	RHNS	Hours	(Specify)	Hours
B. Direct care consultants paid on a fee						
for service basis in lieu of salary						
(For all such services complete Schedule B1)						
1. Dietitian						
2. Dentist	4,050	Contracted				
3. Pharmacist	5,778	Contracted				
4. Podiatrist						
5. Physical Therapy	te de L		. T			
a. Resident Care	267,312	4,784				
b. Other						
6. Social Worker						
7. Recreation Worker						
8. Physicians						
a. Medical Director (entire facility)	51,820	Contracted				
b. Utilization Review						
(Title 18 and 19 only) monthly meeting						
c. Resident Care**						
d. Administrative Services facility						
1. Infection Control Committee						
(Quarterly meetings) 2 Pharmaceutical Committee	 			+		<u> </u>
(Quarterly meetings)						
3. Staff Development Committee						
(Once annually)				1 1 1000 / A 100 1 100 1 100 10000000000		
e. Other (Specify)					L. C. C. LEW	
		and the state of the		10 10 10 10 10 10 10 10 10 10 10 10 10 1		-
9. Speech Therapist					Silken A.	
a. Resident Care	7,641	113				
b. Other		A traching to a subscription of the			Party State State	
10. Occupational Therapist			10 CONTRACTOR			
a. Resident Care	32,233	480				ļ
b. Other		n P. 04.4.14.4.14.14.14.14.14.14.14.14.14.14.1		and the second se		
11. Nurses and aides and attendants						
a. RN						9
1. Direct Care	21,525	Contracted				
2. Administrative***		 				
b. LPN				<u>i</u> .		R
1. Direct Care	15,245	Contracted	<u> </u>			ļ
2. Administrative***	ļ	ļ	ļ	_		
c. Aides		ļ		<u> </u>		
d. Other					<u> </u>	
12. Other (Specify)	2012 .		3			
See Attached Schedule	510	8				
I-13 Total Fees Paid in Lieu of Salaries	406,114	5,385			<u> </u>	

* Do not include in this section management consultants or services which must be reported on Page 16 item M-12 and supported by required information, Page 17.

** This item is not reimbursable to facility. For Title 19 residents, doctors should bill DSS directly. Also, any costs for Title 18 and/or other private pay residents must be removed on Page 28.

*** Administrative - costs and hours associated with the following positions: MDS Coordinator, Inservice Training Coordinator and Infection Control Nurse. Such costs shall be included in the direct care category for the purposes of rate setting.

Report of Expenditures Schedule B1 - Information Required for Individual(s) Paid on Fee for Service Basis*

Name of Facility	License No.		Report for	Year Ended	Page	of
Fairview Health of Southport, LLC	2307-С		9/30/2016		14	37
Name & Address of Individual	Full Explanation of Service		* to Owners, ors, Officers	-		ationship
LTC Management, 174 Scott Road, Prospect, CT 06712	Dentist	0	0	N/A		
Prime Choice Dental, Corp.	Dentist	0	٥	N/A		
Accuscript Consulting Service / Allscripts LLC	Pharmacist	0	٥	N/A		
Regal Care Rehabilitation, LLC, 26 Firemens Memorial Drive Suite 205, Pomona, NY 10970	Physical, Occupational & Speech Therapy	0	0	Common Own	ership	
Grandison Management, 1413 38th Street, Brooklyn, NY 11218	Physical Therapy	0	٥	N/A		
Stern Therapy Consultants, 50 Lyncrest Drive, NY 10952	Physical Therapy	0	۲	N/A		
Dr. Wayne Levin MD of North End Medical Group, LLC, 3690 Main Street, Bridgeport, CT	Medical Director	0	٥	N/A	<u></u>	
Cavallo Orthopedics and Sports Medicine, LLC, 945 Summer Street 2nd Floor, Stamford, CT	Medical Director	0	٥	N/A		
Iran Gomez, MD	Medical Director	0	۲	N/A		
SDX Swallowing	Speech Therapy	0	٥	N/A		
Ardor Health Solutions, Pox 203436, Dallas TX 75320	Occupational Therapy	0	0	N/A		
Towne Nursing, 1413 38th St., Brooklyn, NY 11218	Nursing Agency	0	۲	N/A		
Technical Gas Products, 101 North Plains Industrial Road Suite 1B, Wallingford, CT 06492	Respiratory Therapist	0	0	N/A		
		0	0			·· ·
		0	0			
		0	0			
	119479 - yr,	0	0		.	
		0	0			
		0	0			
		0	0		<u> </u>	<u></u>
		0	0			
		0	0			

* Use additional sheets if necessary.

** Refer to Page 4 for definition of related.

C. Expenditures Other Than Salaries - Administrative and General

Name of Facility Lic	ense No.		Report for Y	ear Ended	Page	of
Fairview Health of Southport, LLC	2307-С		9/30/2016		15	37
			-			
Item			Total	CCNH	RHNS	(Specify)
1. Administrative and General			Total		Idin (b	
a. Employee Health & Welfare Benefits		1				
1. Workmen's Compensation		\$	100,671	100,671		
2. Disability Insurance		\$				
3. Unemployment Insurance		\$	88,252	88,252		
4. Social Security (F.I.C.A.)		\$	442,386	442,386		
5. Health Insurance		\$	852,273	852,273		
6. Life Insurance (employees only)				C. C		
(not-owners and not-operators)		\$				
7. Pensions (Non-Discriminatory)		\$	200,480	200,480		
(not-owners and not-operators)						
8. Uniform Allowance		\$				
9. Other (Specify)		\$	27,636	27,636		
See Attached Schedule					19 No. 14	
b. Personal Retirement Plans, Pensions, and		\$				
Profit Sharing Plans for Owners and					語於物化表	
Operators (Discriminatory)*						
c. Bad Debts*		\$	776,100	776,100		
d. Accounting and Auditing		\$	15,300	15,300		
e. Legal (Services should be fully described on	Page 7)	\$	24,031	24,031		
f. Insurance on Lives of Owners and		\$				
Operators (Specify)*						
g. Office Supplies		\$	108,503	108,503		
h. Telephone and Cellular Phones						
1. Telephone & Pagers		\$	22,381	22,381		
2. Cellular Phones		\$	3,129	3,129		
i. Appraisal (Specify purpose and		\$				
attach copy)*						
j. Corporation Business Taxes (franchise tax)		\$				
k. Other Taxes (Not related to property - See P	age 22)					
1. Income*		\$				
2. Other (Specify)		\$	754	754		
See Attached Schedule					11 () () () () () () () () () ()	
3. Resident Day User Fee		\$		990,407		
Subtotal		\$	3,652,303	3,652,303	tals forward t	

* Facility should self-disallow the expense on Page 28 of the Cost Report.

(Carry Subtotals forward to next page)

*** DO NOT Include Holiday Parties / Awards / Gifts to Staff

Fairview Health of Southport, LLC 9/30/2016

Attachment Page 15

Schedule of Other Employee Benefits

Description		CCNH	RHNS	(Specify)
		-		
Background Checks	\$	527		
Union Training	\$	20,794		
Training & Education	\$	3,115		
Background Checks	\$	493		
Employee Relations	\$	2,597		
Misc. Employee Benefits	\$.	110		
	and the second			
			Post of the	
Total	\$	27,636	\$ -	\$-

Schedule of Other Taxes

Description	CCNH	RHNS	(Specify)
	-		
Sales & Use Tax	\$ 754		
Total	\$ 754	\$ -	\$ -

C. Expenditures Other Than Salaries (cont'd) - Administrative and General

Name of Facility	License No.		Report for Y	ear Ended	Page	of
Fairview Health of Southport, LLC	2307-C		9/30/2016		16	37
Item			Total	CCNH	RHNS	(Specify)
Subtota	ls Brought Forwar	d:	3,652,303	3,652,303		
1. Travel and Entertainment						
1. Resident Travel and Entertainment		\$				
2. Holiday Parties for Staff		\$				
3. Gifts to Staff and Residents		\$				
4. Employee Travel		\$	8,742	8,742		
5. Education Expenses Related to Seminars and	nd Conventions	\$	100	100		
6. Automobile Expense (not purchase or depr	eciation)	\$				
7. Other (<i>Specify</i>)		\$				
See Attached Schedule						
m. Other Administrative and General Expenses						
1. Advertising Help Wanted (all such expense		\$	523	523		
2. Advertising Telephone Directory (all such	expenses)***	\$				
3. Advertising Other (Specify)***		\$	32,407	32,407		
See Attached Schedule						
4. Fund-Raising***		\$				
5. Medical Records		\$	520	520		
6. Barber and Beauty Supplies (if this service		\$				
directly and not by contract or fee for servi	ce)***			prot Provide		
7. Postage		\$	5,873	5,873		
* 8. Dues and Membership Fees to Professional	l	\$				
Associations (Specify)						
See Attached Schedule					調整する	
8a. Dues to Chamber of Commerce & Other Non-A	llowable Org.***	\$				
9. Subscriptions		\$	1,528	1,528		
10. Contributions***		\$				
See Attached Schedule			1.18	調整 ・	重要	
11. Services Provided by Contract (Specify and		\$	118,087	118,087		
Schedule C-2, Page 21 for each firm or ina	lividual)					
12. Administrative Management Services**		\$	417,506	417,506		ļ
13. Other (Specify)		\$	109,896	109,896		
See Attached Schedule		-				
C-14 Total Administrative & General Expenditures	· · · · · · · · · · · · · · · · · · ·	\$	4,347,485	4,347,485		

* Do not include Subscriptions, which should go in item 9.

** Schedule C-1, Page 17 must be fully completed or this expenditure will not be allowed.

*** Facility should self-disallow the expense on Page 28 of the Cost Report.

Fairview Health of Southport, LLC 9/30/2016

Attachment Page 16

Schedule of Other Travel and Entertainment

CCNH	RHNS	(Specify)
	100	
\$-	ş -	s -
	ССКН 	• • • • • • • • • • • •

Schedule of Other Advertising

Description	CCNH	RHNS	(Specify)
	-		121
Marketing & Advertising	\$ 32,407		
Total Other Advertising	\$ 32,407	S -	s -

Schedule of Dues

Description	CCNH	RHNS	(Specify)
	•		
		1.04	
			÷
Total Dues	s -	s -	<u>s</u> .

Schedule of Contributions

Description	CCNH	RHNS	(Specify)
	-		
Total Contributions	s -	<u>s</u> -	\$ -

Schedule of Other Administrative and General

Description	CCNH	RHNS	(Specify)
	-		
Licenses	\$ 1,873		
Fines & Penalties	\$ 2,427		
Late Fees	\$ 4,094		18
Bank Fees	\$ 6,187	12	
ACH Fees	\$ 95,282		
Employee Food	\$ 33		
	1.		
Total Other Administrative and General	\$ 109,896	S -	<u>s</u> -

Schedule C-1	- Management	Services*
--------------	--------------	-----------

Name of Facility	License No.	Report for Year Ended	Page of
Fairview Health of Southport, LLC	2307-C	9/30/2016	17 37
Name & Address of Individual or Company Supplying Service	Cost of Management Service	Full Description of Mgmt. Service Provided	Indicate Where Costs are Included in Annual Report Page #/Line #
Fairview Healthcare Management	284,478	Oversee operations of the facility	Page 16 / Line m12
ASP Accounting Svcs	4,750	Bookkeeping Svcs	Page 16 / Line m12
Caretech	27,300	Purchaser	Page 16 / Line m12
LTC Consulting Services	100,978	Billing & Financial Svcs	Page 16 / Line m12

* In addition to management fees reported on page 16, line m12 include any additional management company charges or allocations of home office overhead costs reported elsewhere in the Annual Report.

C. Expenditures Other Than Salaries (cont'd) - Dietary Basis for Allocation of Costs (See Note on Page 5)

		N		Page 5)					
Nan	ne of Facility		License	No.	Re	eport for Y	ear Ended	Page	of
Fair	view Health of Southport, LLC			2307-C		9/30/2016		18	37
	Item			Total		CCNH	RHNS	(Sp	ecify)
2.	Dietary								
	a. In-House Preparation & Service		_						
	1. Raw Food		\$	92,281		92,281			
<u> </u>	2. Non-Food Supplies		\$	18,916	+	18,916			
	3. Other (<i>Specify</i>)		\$						
				100.000		100.000			
	b. Purchased Services (by contract other		\$	129,293		129,293			
	than through Management Services)								
	(Complete Schedule C-2 att. Page 21)		đ						
	c. Management Services**		\$ \$						
	d. Other (Specify)		. Ъ	-1244			and the second		
2E.	Total Dietary Expenditures $(2a + b + c + d)$		\$	240,490		240,490			
		<u></u>			+				
2F.	Dietary Questionnaire			Total		CCNH	RHNS	(Sp	ecify)
G.	Resident Meals: Total no. of meals served per	r day	/:*						
Н.	Is cost of employee meals included in 2E?	0	Yes	0	N	0			
I.	Did you receive revenue from employees?	0	Yes	٥	N	0	If yes, specify amt.		
J.	Where is the revenue received reported in the	Cos	st Report	t? (Page/Line	Ite	m)			
	Is cost of meals provided to persons other	~					If yes, specify		
К.	than employees or residents (i.e., Board	Ο	Yes	0	N	0	cost.		
	Members, Guests) included in 2E?	0	Vee		.		If yes, specify		\$1,646
L.	Is any revenue collected from these people?	U	Yes	0	N	0	amt.		\$1,040
М.	Where is the revenue received reported in the	e Cos	st Repor	t? (Page/Line	Ite	m)		30 IV1	
	Is cost of food (other than meals, e.g.,						T C C		
N.	snacks at monthly staff meetings, board	0	Yes	\odot	N	0	If yes, specify		
-	meetings) provided to employees included						cost.		
	in 2E?						10 10		
0.	Is any revenue collected from employees?	0	Yes	0	N	0	If yes, specify amt.		
Ρ.	Where is the revenue received reported in the	Co	st Repor	t? (Page/Line	Ite	m)			
			-						

* Count each tray served to a resident at meal time, but do not count liquids or other "between meal" snacks.

** Schedule C-1, Page 17 must be fully completed or this expenditure will not be allowed.

C. Expenditures Other Than Salaries (cont'd) - Laundry Basis for Allocation of Costs (See Note on Page 5)

	ne of Facility	License			Year Ended	Page of
Fair	view Health of Southport, LLC	2	307 - C	9/30/2016	5	19 37
	Item		Total	CCNH	RHNS	(Specify)
3.	Laundry a. In-House Processing* 1. Bed linens, cubicle curtains, draperies,	Lbs.				
	gowns and other resident care items washed, ironed, and/or processed.***	Amt. \$				
	2. Employee items including uniforms, gowns, etc. washed, ironed and/or	Lbs.				
	processed.***	Amt. \$				
	3. Personal clothing of residents	Lbs.				
	washed, ironed, and/or processed.***	Amt. \$				
	4. Repair and/or purchase of linens.***	Lbs. Amt. \$				
	b. Purchased Services (by contract other than through Management Services) (Complete Schedule C-2 att. Page 21)	\$				
	c. Management Services**d. Other (<i>Specify</i>)	\$				
3E.	Total Laundry Expenditures (3a + b + c + d)	\$				
3F. G.	Laundry Questionnaire Is cost of employee laundry included in 3E? O	Yes	۲	No	If yes, specify cost.	
Н.	Did you receive revenue from employees? O	Yes	O	No	If yes, specify amt.	
I.	Where is the revenue received reported in the Cos	t Report?		(Page/Lin	e Item)	
J.	Is Cost of laundry provided to persons other	Yes		No	If yes, specify cost.	
К.	Did you receive revenue from these people? O	Yes	0	No	If yes, specify amt.	
L.	Where is the revenue received reported in the Cos	t Report?		(Page/Lin	e Item)	

* Do not include salaries from page 10 as part of dollar values recorded in 1, 2, 3, and 4. All allocations should add to total recorded in 3E.

** Schedule C-1, Page 17 must be fully completed or this expenditure will not be allowed.

*** Pounds of Laundry only required for multi-level facilities.

C. Expenditures Other Than Salaries (cont'd) - Housekeeping and Resident Care Basis for Allocation of Costs (See Note on Page 5)

Nar	ne of Facility	License No.	Repo	ort for Year E	nded	Page	of
Fair	view Health of Southport, LLC	2307-С		9/30/2016		20	37
	Item			Total	CCNH	RHNS	(Specify)
4.	Housekeeping	Sq. Ft. Serviced					
	a. In-House Care	by Personnel					
	1. Supplies - Cleaning (Mops,	Amt.	\$	45,003	45,003		
	pails, brooms, etc.)						
	b. Purchased Services (by contract other	Sq. Ft. Serviced					
	than through Management Services)	by Personnel					
	(Complete Schedule C-2 att.	Amt.	\$				
	Page 21)						
	c. Management Services*		\$				
	d. Other (Specify)		\$				
4E.	Total Housekeeping Expenditures (4a +	b + c + d)	\$	45,003	45,003		
5.	Resident Care (Supplies)**			お 金融		水潮影漫调	
	a. Prescription Drugs***			<u>2.1</u>			
	1. Own Pharmacy		\$				
	2. Purchased from		\$	150,140	150,140		
	Pharmacy			ま 通知部門		按 举 动	
	b. Medicine Cabinet Drugs		\$	943	943		
	c. Medical and Therapeutic Supplies	=	\$	204,044	204,044		
	d. Ambulance/Limousine***		\$		_		- Brown and a state of the state of the
	e. Oxygen						
	1. For Emergency Use		\$				
	2. Other***		\$	3,748	3,748		
	f. X-rays and Related Radiological		\$	(9,682)	(9,682)		
	Procedures***				Alter and a state of the second		
	g. Dental (Not dentists who should be inc	iuded under	\$				
<u> </u>	salaries or fees)	<u>.</u>		6.000	6.000		
	h. Laboratory***		\$	6,900	6,900		
<u> </u>	i. Recreation		\$	15,345	15,345		·
	j. Other (Specify)****		\$	600	600		
5V	See Attached Schedule	':)	<u>م</u>	272.029	272.020		
JK.	Total Resident Care Expenditures (5a - 5	J)	\$	372,038	372,038		

* Schedule C-1, Page 17 must be fully completed or this expenditure will not be allowed.

** Do not include any fees to professional staff, these should be reported on Page 13, or, if paid on salary basis, on Page 10.

*** Facility should self-disallow the expense on Page 29 of the Cost Report.

**** ICFMR's should provide a detailed schedule of all Day Program Costs.

Fairview Health of Southport, LLC 9/30/2016

Schedule of Other Resident Care

Description	ССИН	RHNS	(Specify)
	-		
Incontinence Supplies	\$ 600		
			4
Total Other Resident Care	\$ 600	\$ -	\$ -

State of Connecticut Annual Report of Long-Term Care Facility CSP-21 Rev. 10/2001

Schedule C-2 - Individuals or Firms Providing Services by Contract * **Report of Expenditures**

Name of Facility Fairview Health of Southport, LLC	, LLC			License No. 2307-C	Report for Year Ended 9/30/2016				Page 21	of 37
		Related ** to Owners Operators, Officers	** to Owners, tors, Officers				Total Cost/	Total Cost/Page Ref.***		
		-								
Name of Individual or Company	Address	Yes	No	Explanation of Relationship	Full Explanation of Service Provided*	CCNH	RHNS	(Specify)	Pg I	Line
Point Click Care	PO Box 674802, Detroit, MI 48267	0	•	N/A	Computer Services	16,759			16 m11	nll
Zimmet Healthcare Group	4006 U.S. 9, Morganville, NJ 07751	0	٥	N/A	Business Managent Consultant	24,620			16 m11	n11
		0	٥							
		0	٥							
		0	0							
		0	0							
		0	0							
		0	0							
		0	0							
		0	0							
		0	0							
		0	0							
		0	0							
		0	0							

* List all contracted services over \$10,000. Use additional sheets if necessary.

****** Refer to Page 4 for definition of related. ******* Please cross-reference amount to the appropriate page in the Annual Report (Pages 16, 18, 19, 20 or 22).

C. Expenditures Other Than Salaries (cont'd) - Maintenance and Property

Name of Facility	License No.	Report for Ye	ear Ended		Page	of
Fairview Health of Southport, LLC	2307-C	9/30/2016			22	37
Item		Total	CCNH	RHNS	(Spe	cify)
6. Maintenance & Operation of Plant						
a. Repairs & Maintenance	\$	55,478	55,478			
b. Heat	\$	31,635	31,635			
c. Light & Power	\$	137,059	137,059			
d. Water	\$	19,252	19,252			
e. Equipment Lease (Provide detail on p	page 6) \$	6,742	6,742			
f. Other (<i>itemize</i>)	\$	40,874	40,874			
See Attached Schedule						
6g. Total Maint. & Operating Expense (6a -	- 6f) \$	291,040	291,040			
7. Depreciation (complete schedule page 23	·*)					
a. Land Improvements	\$					
b. Building & Building Improvements	\$	5,170	5,170			
c. Non-Movable Equipment	\$	6,000	6,000			
d. Movable Equipment	\$	16,525	16,525			
*7e. Total Depreciation Costs (7a + b + c + d	l) \$	27,695	27,695			
8. Amortization (Complete att. Schedule Pa	age 24*)					
a. Organization Expense	\$	·				
b. Mortgage Expense	\$					
c. Leasehold Improvements	\$					
d. Other (Specify)	\$					
*8e. Total Amortization Costs (8a + b + c + c	i) \$					
9. Rental payments on leased real property l	less					
real estate taxes included in item 10b	\$	487,203	487,203			
10. Property Taxes						-
a. Real estate taxes paid by owner	\$					
b. Real estate taxes paid by lessor	\$	71,443	71,443			
c. Personal property taxes	\$	6,522	6,522			
11. Total Property Expenses (7e + 8e + 9 +	10) \$	592,863	592,863			

* Amounts entered in these items must agree with detail on Schedule for Depreciation and Amortization Page 23 and Page 24.

Fairview Health of Southport, LLC 9/30/2016

Schedule of Other Repairs and Maintenance

Description	CCNH	RHNS	(Specify)
	-		
Supplies	\$ 3,631		
Sanitation & Incineration	\$ 7,112		
Extermination	\$ 319		
Landscaping	\$ 3,412		
Fire Drill	\$ 1,068		
Contracted Service	\$ 25,332		
	and the second sec		
	-		
		la de la companya de	
Total Other Repairs and Maintenance	\$ 40,874	\$ -	s -

				Depree	Depreciation Schedule	hedule					
Name of Facility Fairview Health of Southport, LLC				License No. 2307-C	7-C		Report for Year Ended 9/30/2016	nded		Page 23	of 37
Property Item				Historical Cost Exclusive of Land	Less Salvage Value	Cost to Be Depreciated	Accumulated Depreciation to Beginning of Year's Operations	Method of Computing Depreciation	Useful Life	Depreciation for This Year	Totals
A. Land Improvements 1. Acquired brior to this report period							4				
2. Disposals (attach schedule)											
3. Acquired during this report period (attach schedule)	ch schedu	ıle)						ya na			
A-4. Subtotal										ate and a constant	
B. Building and Building Improvements 1 Accurited where to this second meriod				207 80		207 30	5 508	л	Vorious	029 0	
 Acquired pitor to this report period Disposals (attach schedule) 				20,02		C 40'07	ouc'c	3/L	V arrous	2,0/0	
3. Acquired during this report period (attach schedule)	ch schedt	le)		32,385		32,385		S/L	Various	2,300	
B-4. Subtotal					- Contraction	and the second se	and the second se				5,170
C. Non-Movable Equipment											No. of Concession, Name
1. Acquired prior to this report period				18,000		18,000	12,000 S/L	S/L	Various	6,000	
2. Disposals (attach schedule)											
3. Acquired during this report period (attach schedule)	ch schedı	ıle)									
C-4. Subtotal											6,000
	Is a mileage	age									
	logbook	, ¥	Date of	Historical	,		Accumulated				
	maintained?	ed?	Acquisition	Cost			Depreciation to	Method of			
	Yes	No	Month	Exclusive of Land	Salvage	Cost to Be Depreciated	Beginning of Year's Operations	Computing	Useful Life	Depreciation for This Year	Totals
D Movable Equipment		1000	1000				ALL CONTRACTOR				
				and a second second							
and year of cash villed											
P.											
c.											
d.											
2. Movable Equipment											
a. Acquired prior to this report period		N	Var Var	73,772		73,772	21,253 S/L	S/L	Various	11,909	
b. Disposals (attach schedule)											
c. Acquired during this report period	ķ				4.00 Med 200						
(attach schedule)			Var Var	42,493		42,493		S/L	Various	4,616	
e.											16,525
E. Total Depreciation											27,695

State of Connecticut Annual Report of Long-Term Care Facility CSP-23 Rev. 10/2006

Fairview Health of Southport, LLC 9/30/2016

Schedule of Land Improvements Acquired during this report period

	mprovements Acquired during tins report period		Useful	
Acquisition Date	Description of Item	Cost	Life	Depreciation
Additions:				
Fotal additions for	Land Improvements	S -		<u>s</u> -
Deletions:	• 			
	a di gu i e antici trinde accontor ac contre e en ge			
	A MARKEN AND A MARK OF A MARK AND			
				-
Lotal deletions for	Land Improvements	\$-		s -

*Ties to Page 23, Line A3

**Ties to Page 23, Line A2

Schedule of Building Improvements Acquired during this report period

Acquisition Date	Description of Item	Cost	Useful Life	Depreciation
Additions:				
11/11/2015	Allied Construction Mgmt, Inc.	\$ 10,500	15	\$ 700
1/18/2016	Current Technologies Electronics	3,500	15	233
9/6/2016	Replacement of exhaust fans	14,144	15	943
8/15/2016	Sign	1,370	10	137
9/7/2016	Roof Repairs	2,871	10	287
Total additions for	Building Improvements	\$ 32,385		\$ 2,300
Deletions:				
Total deletions for	Building Improvements	\$ -		\$-

*Ties to Page 23, Line B3

**Ties to Page 23, Line B2

Schedule of Non-Movable Equipment Acquired during this report period

Acquisition Date	Description of Item	Cost	Useful Life	Depreciation
Additions:				
	a de la companya de l			
	the second s			
				5 (J.).
Fotal additions for N	on-Movable Equipment	S -		s -
Deletions:				
1				and Hursey
Total deletions for No	on-Movable Equipment	\$ -		\$ -
*Ties to Page 23, Lin **Ties to Page 23, Lin		<u></u>		

Schedule of Movable Equipment Acquired during this report period

Acquisition Date	Description of Item	Cost	Useful Life	Depreciation
Additions:				
10/7/2015	Technologies Electronics	\$ 1,350	5	\$ 270
10/29/2015	Technologies Electronics	686	5	137
11/9/2015	Patient Wander System	7,000	10	700
2/3/2016	Technologies Electronics	1,616	5	323
11/17/2015	Tower Furniture	6,500	10	650
7/11/2016	Chairs/Couch (Quantity = 5)	4,700	15	313
9/25/2016	Card Printer	1,069	5	214
9/22/2016	Scale, Frame, Mattress, Side Cover, Wheelchair, Desk Arm	17,463	10	1,746
9/12/2016	Bariatric Mattress	1,590	10	159
8/3/2016	Lenovo Computer	519	5	104
	Movable Equipment	\$ 42,493		\$ 4,616
Deletions:				
Fotal deletions for	Movable Equipment	<u>s</u> -		\$ -

*Ties to Page 23, Line D2c

**Ties to Page 23, Line D2b

Schedule of Leasehold Improvements Acquired during this report period

		Useful	Dennesistion
Description of Item	Cost	Lite	Depreciation
			1
d Improvement	\$ -		\$ -
	-		
		м.	
		25	
d Improvement	<u>s</u> -		\$ -
	Description of Item	id Improvement	Description of Item Cost Life Image: State

*Ties to Page 24, Line C3

**Ties to Page 24, Line C2

Fairview Health of Southport, LLC Asset /Depreciation Schedule - Page 23, 23a & 24 September 30, 2016

BUILDING IMPR	OVEMENTS			Monthly	9/30/2015 Accum	9/30/2016	9/30/2016 Accum	Net Book
DATE	DESCRIPTION	Life	<u>Cost</u>	Deprec	Depreciation	Depreciation	Depreciation	Value
12/10/13	AC Units Rooftop	10	26,375	220	5,276	2,638	7,914	18,461
2014 Building Imp	rovements		26,375	220	5,276	2,638	7,914	18,461
04/30/15	Return Ducts	10	2,320	19	232	232	464	1,856
2015 Building Imp	rovements		2,320	19	232	232	464	1,856
11/11/2015	Allied Construction Mgmt, Inc.	15	10,500	58	-	700	700	9,800
1/18/2016	Current Technologies Electronics	15	3,500	19	-	233	233	3,267
9/6/2016	Replacement of exhaust fans	15	14,144	79	-	943	943	13,201
8/15/2016	Sign	10	1,370	11	-	137	137	1,233
9/7/2016	Roof Repairs	10	2,871	24	•	287	287	2,584
2016 Building Imp	rovements		32,385	191		2,300	2,300	30,085

NON-MOVABLE EQUIPMENT				Monthly	9/30/2015 Accum	9/30/2016	9/30/2016 Accum	Net Book
DATE	DESCRIPTION	Life	Cost	Deprec	Depreciation	Depreciation	Depreciation	Value
3/1/2014	Balance Call System	3	18,000	500	12,000	6,000	18,000	-
2014 Non-Movable Equipment		· ·	18,000	500	12,000	6,000	18,000	

EQUIPMENT MOVEABI	LE				9/30/2015	0.00.001.6	9/30/2016	Net
DATE	DESCRIPTION	Life	Cost	Monthly Deprec	Accum Depreciation	9/30/2016 <u>Depreciation</u>	Accum Depreciation	Book <u>Value</u>
DATE								
01/09/13	Computers	5	3,457	58	1,901	691	2,592	865
01/17/13	Broda - Sling	5	1,200	20	660	240	900	300
01/31/13	televisions	5	1,477	25	812	295	1,107	370
05/01/13	Pressure Mattress	3	2,297	64	1,851	446	2,297	-
05/04/13	Water Cooler	10	1,290	11	312	129	441	849
07/31/13	Freezer	10	4,965	41	1,118	497	1,615	3,350
08/22/13	Pressure Mattress	3	1,043	29	754	289	1,043	-
09/30/13	Beds - Electric	12	30,000	208	5,208	2,500	7,708	22,292
2013 Movable Equipment			45,729	455	12,615	5,087	17,702	28,027
1/31/2014	Med Essentials	3	2,851	24	1,900	951	2,851	
1/31/2014	Pressure Mattress	10	1,375	11	276	138	414	961
3/9/2014	Wheel Chair Ramp Scale	3	1,073	30	716	357	1,073	-
5/31/2014	Pump	3	1,114	31	742	372	1,114	-
2014 Movable Equipment			6,413	96	3,634	1,818	5,452	961
6/30/2014	Pressure Mattress	3	7,200	60	2,400	2,400	4,800	2,400
6/29/2015	Cardio Stress Software	3	3,137	26	1,046	1,046	2,092	1,045
7/26/2015	Wander system Alarm	5	907	8	181	181	362	545
8/18/2015	Patient Wander System	10	7,000	194	700	700	1,400	5,600
	Wander guard tags	5	3,386	94	677	677	1,354	2,032
9/28/2015		_		<u>.</u>				
2015 Movable Equipment			21,630	382	5,004	5,004	10,008	11,622
10/7/2015	Technologies Electronics	5	1,350	23	•	270	270	1,080
10/29/2015	Technologies Electronics	5	686	11	-	137	137	549
11/9/2015	Patient Wander System	10	7,000	58	•	700	700	6,300
2/3/2016	Technologies Electronics	5	1,616	27	-	323	323	1,293
11/17/2015	Tower Furniture	10	6,500	54	-	650	650	5,850
7/11/2016	Chairs/Couch (Quantity = 5)	15	4,700	26	-	313	313	4,387
9/25/2016	Card Printer	5	1,069	18	-	214	214	855
9/22/2016	Scale, Frame, Mattress, Side Cover, Wheelchair, Desk Arm	10	17,463	146	-	1,746	1,746	15,717
9/12/2016	Bariatric Mattress	10	1,590	13	-	159	159	1,431
8/3/2016	Lenovo Computer	5	519	9	-	104	104	415
2016 Movable Equipment			42,493	385		4,616	4,616	37,877
Total Assets			195,346		38,761	27,695	66,456	128,890
Per Trial Balance			195,346			429,687	37,438	195,346
Variance			-			(401,992)	29,018	(66,456)
Paulation							1.	

F/S vs C/R NBV - Page 31, Line B9 F/S vs C/R Depreciation - Page 36, Line F1

Rounding

29,019 401,992

Annual Report of Long-Term Care Facility CSP-24 Rev. 10/2006 State of Connecticut

Amortization Schedule*

Manua of Facilite.		I incure Mo		Damout for Voo	- Endad		Dece	J.
INAME OF FACILITY		LICENSE NO.		Report IOF I car Enueu	L Ended		rage	10
Fairview Health of Southport, LLC		2307-C		9/30/2016			24	37
				Accumulated				
	Date of			Amort. to				
	Acquisition			Beginning of	Basis for			
		Length of	Cost to Be	Year's	Computing	Rate	Rate Amortization	
Item	Month Year	Amortization	Amortized	Operations	Amortization**	%	for This Year	Totals
A. Organization Expense								
2.								
3.								
A-4. Subtotal			South States of the second	1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	STATES AND		AND A CONTRACTOR OF A CONTRACTOR A	
B. Mortgage Expense								
1.	-							
2.								
3.								
B-4. Subtotal		and the second second	المعرجين ومعالية					
C. Leasehold Improvements and Other								The second se
1. Acquired prior to this report period								
2. Disposals (attach schedule)								
3. Acquired during this report period					ALC: NOT THE REAL PROPERTY.			
(attach schedule)								
C-4. Subtotal								
D. Total Amortization								

* Straight-line method must be used.** Specify which of the following bases were used:

A. Minimum of 5 years or 60 months.

B. Life of mortgage; ORC. Remaining Life of Lease; ORD. Actual Life if owned by Related Party.

C. Expenditures Other Than Salaries (cont'd) - Property Questionnaire

Name of Facility Fairview Health of Southport, LLC	License No. 2307-C	Report for Year Ei 9/30/2016	nded		Page of 25 37
	2307 C	7/30/2010			
11. Property Questionnaire Part A				. .	
Is the property either owned by th	e Facility				If "Yes," complete Part B.
or leased from a Related Party?*	(• Yes	0	No	If "No," complete Part C.
*If any owner or operator of this fac	ulity is coloted by family	marriage ownership ab	ility to control or		n No, complete i art e.
business association to any person of					
a related party transaction.					
Description		Total			
1. Date Land Purchased		11/26/13			
2. Date Structure Completed					
3. If NOT Original Owner, Date	of Purchase				
4. Date of Initial Licensure					
5. Total Licensed Bed Capacity		120			
6. Square Footage					
7. Acquisition Cost		1.4.44			
a. Land					
b. Building					
Part B - Owner and Related Pa	rties	1st Mortgage	2nd Mortgage	3rd Mortgage	4th Mortgage
1. Financing			"你"我说:"你		
a. Type of Financing (e.g., fi	xed, variable)				
b. Date Mortgage Obtained					
c. Interest Rate for the Cost Year					
d. Term of Mortgage (number of years)			ļ		
e. Amount of Principal Borr					
f. Principal balance outstand	ling as of				
Complete if Mortgage was I	Refinanced				
During Current Cost Ye			相 考 词 ()		
g. Type of Financing (e.g., fi	xed, variable)				
h. Date of Refinancing					
i. New Interest Rate			<u></u>		
j. Term of Mortgage (number					
k. Amount of Principal Borr					
1. Principal Outstanding on 1		<u></u>			
Part C - Arms-Length Leas					
Name and Address of Lesso	the second se	roperty Leased			Annual Amount of Lease
930 Mill Hill Terrace, LLC		Hill Terrace,	11/26/13	10 years	487,203
	Southpor	t, CT 06890			
	Ì]		

Note: Be sure required copies of leases are attached to Page 25 and real estate taxes paid by lessor are included on Page 22, Item 10b.

C. Expenditures Other Than Salaries (cont'd) - Interest

Name of Facility	License No.		Report for Ye	Page	of		
Fairview Health of Southport, LLC	2307-C	<u> </u>	9/30/2016			26	37
Item			Total	CCNH	RHNS	(Spe	cify)
12. Interest							
A. Building, Land Improvem	ent & Non-Movab	le					
Equipment		¢					
1. First Mortgage Name of Lender		Rate					
Iname of Lender		Rate					
Address of Lender							
2. Second Mortgage		\$					
Name of Lender		Rate					
Address of Lender							
3. Third Mortgage		<u> </u>					
Name of Lender		Rate					
Address of Lender		_ I					- 19 A.
4. Fourth Mortgage			5				
Name of Lender		Rate					
Address of Lender							
B. CHEFA Loan Information]						
1. Original Loan Amount	;	\$	6				
2. Loan Origination Date							
3. Interest Rate %							
4. Term	,						
5. CHEFA Interest Expension	ıse						
12 B7. Total Building Interest Expe) 9	S				

(Carry Subtotals forward to next page)

C. Expenditures Other Than Salaries (cont'd) - Interest and Insurance

			Report for Y 9/30/2016		Page of 27 37		
······································				CONT		(6	
Item	tala Daar	acht Famuand	Total	CCNH	RHNS	(Specify)	
12. C. Movable Equipment	tals Brou	ight Forward:					
1. Automotive Equipment		\$					
A. Item	Rate	Amount					
	1.000	1 1110 0110					
Lender		1					
Address of Lender							
2. Other (<i>Specify</i>)		\$					
A. Item	Rate	Amount					
A. Iuli	Rate	Amount					
Lender							
Address of Lender							
B. Item Rate Amount							
T an dan					教育 傳		
Lender							
Address of Lender							
12. C. 3. Total Movable Equipment Intere	st						
Expense $(C1 + 2)$		\$					
12. D. Other Interest Expense (Specify)		\$	136,275	136,275			
Late Payments = \$1,317 & Loan Int	erest = \$	5134,958	1				
		<u>`````````````````````````````````````</u>					
13. Total All Interest Expense (12B7 + 12C	3 + 12D) \$	136,275	136,275			
14. Insurancea. Insurance on Property (buildings on	1 v)	\$	5 109,105	109,105			
a. Insurance on Property (buildings on b. Insurance on Automobiles	<u> </u>	\$		107,105			
c. Insurance other than Property (as sp	ecified a		, 				
1. Umbrella (Blanket Coverage)	•••••	\$	5				
2. Fire and Extended Coverage		\$	5				
3. Other (Specify)	·		3				
			are detail			WIEL -	
14d. Total Insurance Expenditures (14a + b)15. Total All Expenditures (A-13 thru C-14)		\$		109,105 12,364,191	·	<u> </u>	
15. Total All Expenditures (A-13 thru C-14	ワ	4	12,304,191	12,304,191			

D. Adjustments to Statement of Expenditures

	e of Fa	•		License No. Report for Year Er		r Ended	Page 28	of	
Fairv	iew H	ealth	of Southport, LLC		2307-C	9/30/2016	9/30/2016		37
					Total				
	Page				Amount of				
	No.		Item Description		Decrease	CCNH	RHNS	(Spe	ecify)
Page	10 - S	Salarie	es and Wages						
1.			Outpatient Service Costs	\$					
2.			Salaries not related to Resident Care	\$					
3.	10	A12g	Occupational Therapy	\$	140,819	140,819			
4.			Other - See attached Schedule	\$	63,024	63,024			
Page	13 - F	Profes	sional Fees						
5.			Resident Care Physicians **	\$					
6.	13	B10a	Occupational Therapy	\$	32,233	32,233			
7.			Other - See attached Schedule	\$	510	510			
Page	s 15 &	16 -	Administrative and General						
8.			Discriminatory Benefits	\$					
9.	15	1c	Bad Debts	\$	776,100	776,100			
10.	15	1e	Accounting & Legal	\$	660	660			
11.			Telephone	\$					
12.	15	1h2	Cellular Telephone	\$	1,689	1,689			
13.			Life insurance premiums on the life		A. BASIS				
			of Owners, Partners, Operators	\$					
14.			Gifts, flowers and coffee shops	\$					
15.			Education expenditures to colleges or						
101			universities for tuition and related costs						
			for owners and employees	\$					
16.			Travel for purposes of attending		Reality and a				÷.
10.			conferences or seminars outside the				羅 :		
			continental U.S. Other out-of-state		「「「「「「「」」 現地				
			travel in excess of one representative	\$					
17.	16	L4	Automobile Expense (e.g. personal use)	\$	7,113	7,113		-	
18.			Unallowable Advertising *	\$	32,407	32,407			
19.	10	111275	Income Tax / Corporate Business Tax	\$			-		
20.			Fund Raising / Contributions	Ŝ					
20.	16	m12	Unallowable Management Fees	\$	136,519	136,519			
21.	10		Barber and Beauty	\$		150,015			
23.			Other - See attached Schedule	\$	24,369	24,369			
	<u> </u>	l	y Expenditures		21,309	21,009			
24.			Meals to employees, guests and others				16 (H		
24.	50	1 1 1	who are not residents	\$	1,646	1,646			
Daga	10 1	aund	ry Expenditures	Ψ	1,040	1,010			
25.	17 - L		Laundry services to employees, guests						
25.			and others who are not residents	\$					
	20 7	Jours	keeping Expenditures	Φ		Western Hannes and			
Dann	20 - I	ionze							
	· · · · ·		Unusal saming convises to amployees, guests						1000 Contraction (1997)
<i>Page</i> 26.			Housekeeping services to employees, guests and others who are not residents	\$					

* All except "Help Wanted".

(Carry Subtotal forward to next page)

** Physicians who provide services to Title 19 residents are required to bill the Department of Social Services directly for each individual resident.

Fairview Health of Southport, LLC 9/30/2016

Schedule of Other Salaries Adjustment

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
	Ă4	Owner's Salary	\$ 63,024		
	<u> </u>				
				1925 - C	201
Total Othe	r Salaries	Adjustment	\$ 63,024	5 -	s -

Schedule of Fees Adjustments

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
Encoded and an		Respiratory Therapist	\$ 510		
Total Othe	r Fees Adj	ustments	\$ 510	\$-	s -

Schedule of Other A&G Adjustments

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
15	Var	Owner's Benefits	\$ 14,966		
15	1a9	Misc. Employee Benefits	\$ 110		
15	1a9	Employee Relations	\$ 2,597		
16	m13	Fines & Penalties	\$ 2,427		
16	m13	Lates Fees	\$ 4,094		
16	m13	Non-Allowable Bank Charges	\$ 142		
16	m13	Employee Food	\$ 33		
Total Othe	r A&G Ad	ljustments	\$ 24,369	<u>s</u> -	<u>s</u> -

Fairview Health of Southport, LLC September 30, 2016 Benefits Disallowance

<u>Owner</u>	
Owner's Salary	63,024 Page 11
Total Salaries	5,823,778 TB Linked
Percent to Total Salaries	1.08%
Total Benefits (Pg 15, Line 1a3 - 1a6)	1,382,911 TB Linked
Owner's Benefits Disallowed	14,966 Page 28 attachment

Amount			
36,898	Page 8 of (C/R	
		7.07 3.66% 7.11	_J.01a _
	\$	3.4537 39,528	_Greater of Actual or 90%
	417,506 36,898 39,528	417,506 TB Linked 36,898 Page 8 of C 39,528 Calculatio Days) \$	417,506 TB Linked 36,898 Page 8 of C/R 39,528 Calculation Days) \$ 10.5623 7.07 3.66% 7.11 \$ 3.4537

Fairview Health of Southport, LLC Disallowance Schedule for Cell Phones September 30, 2016

	Amount
Total Cell Phone Expense	3,129 TB Linked
Cell Phone Allowed Based on Bed Capacity	4
Monthly Allowable amount per Cell Phone	\$ 30
Months in Cost Report Year	12
Total Allowable Cost	\$ 1,440
Disallowed Cell Phone (Page 28, Line 12)	\$ 1,689

State of Connecticut Annual Report of Long-Term Care Facility CSP-29 Rev. 10/2006

	D. Adjustments to Statement of Expenditures (cont'd)								
Name	e of Fa	acility		Lic	ense No.	Report for Y	ear Ended	Page	of
Fairv	iew H	ealth	of Southport, LLC		2307-С	9/30/2016		29	37
					Total				
Item	Page	Line			Amount of				
No.	No.	No.	Item Description		Decrease	CCNH	RHNS	(Sp	becify)
			Subtotals Brought Forward	\$	1,217,089	1,217,089			
Page	20 - K	Reside	nt Care Supplies***						
27.	20	5a1/2	Prescription Drugs	\$	150,140	150,140			
28.			Ambulance/Limousine	\$					
29.	20	5f	X-rays, etc	\$	(9,682)	(9,682)			
30.	20	5h	Laboratory	\$	6,900	6,900			
31.			Medical Supplies	\$					
32.	20	5e2	Oxygen (non emergency)	\$	3,748	3,748			
33.			Occupational Therapy	\$					
34.			Other - See Attached Schedule	\$					1
Page	22 - N	Mainte	enance and Property						Sec.
35.			Excess Movable Equipment Depreciation						
			See Attached Schedule	\$			anna ta a anna daana		·····
36.			Depreciation on Unallowable						1.1
			Motor Vehicles	\$					
37.			Unallowable Property and Real	-					
			Estate Taxes	\$					
38.			Rental of Building Space or Rooms	\$					
39.			Other - See Attached Schedule	\$	1,317	1,317	······································		
Page	27 - I	nsura	ince			2×118			
40.			Mortgage Insurance	\$					
41.			Property Insurance	\$					
Othe	r - Mi	scella							27. of:
42.			Research or Experimental Activities	\$					
43.			Radio and Television Revenue	\$					
44.			Vending Machine Revenue	\$					
45.			Purchase Discounts and Allowances	\$					
46.			Duplications of functions or services	\$					n and the second second second
47.			Expenditures made for the protection,						
			enhancement or promotion of the						
			providers interest	\$					
48.			Interest Income on Accounts Rec	\$				6	
49.			Other (include personnel and other						
			costs unrelated to resident care) - See						
			Attached Schedule	\$	25,879	25,879			
Not 1	For Pr	ofit P	roviders Only						
50.			Building/Non Movable Eq. Depreciation						
			Unallowable Building Interest -						
			See Attached Schedule	\$					
51.	Total	Amo	unt of Decrease (Items 1 - 50)	\$	1,395,391	1,395,391			

D. Adjustments to Statement of Expenditures (cont'd)

*** Items billed directly to Department of Social Services and/or Health Services in CT, or other states, Medicare, and private-pay residents. Identify separately by category as indicated on Page 20.

Fairview Health of Southport, LLC 9/30/2016

Schedule of Other Ancillary Costs

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
Total Othe	r Ancillary	Costs	S -	\$-	s -

Schedule of Excess Movable Equipment Depreciation

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
	1				
	211				
	122				
	83) î.				
Total Exce	ss Movable	Equipment Depreciation	\$-	s -	s -

Schedule of Other Property Adjustments

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
27			\$ 1,317		
			£		
					1.12
					10 M M
1					
Total Othe	r Property	Adjustments	\$ 1,317	\$-	\$ -

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
30	IV 8	Misc. Income	\$ 25,879		
Total Othe	r Adjustm	ents	\$ 25,879	\$-	\$-

Schedule of Unallowable Building Interest

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
	etk.				
Total Unal	lowable Bi	uilding Interest	•	\$-	s -

State of Connecticut Annual Report of Long-Term Care Facility CSP-30 Rev.10/2005

F. Statement of Revenue

r. Statement of Re	VUL				T
Name of FacilityLicense No.Fairview Health of Southport, LLC2307-C		Report for Y 9/30/2016	ear Ended		Page of 30 37
Parview Health of Southport, ELC 2307-C		9/30/2010			30 37
Item		Total	CCNH	RHNS	(Specify)
I. Resident Room, Board & Routine Care Revenue					
1. a. Medicaid Residents (CT only)	\$	7,201,950	7,201,950		
b. Medicaid Room and Board Contractual Allowance **	\$				
2. a. Medicaid (All other states)	\$				
b. Other States Room and Board Contractual Allowance **	\$				
3. a. Medicare Residents (all inclusive)	\$	2,154,822	2,154,822		
b. Medicare Room and Board Contractual Allowance **	\$				
4. a. Private-Pay Residents and Other	\$	1,704,452	1,704,452		
b. Private-Pay Room and Board Contractual Allowance **	\$				
II. Other Resident Revenue					1. 微
1. a. Prescription Drugs - Medicare	\$	144,603	144,603		
b. Prescription Drugs - Medicare Contractual Allowance **	\$	(31,391)	(31,391)		
c. Prescription Drugs - Non-Medicare	\$	16,063	16,063		
d. Prescription Drugs - Non-Medicare Contractual Allowance **	\$				
2. a. Medical Supplies - Medicare	\$				
b. Medical Supplies - Medicare Contractual Allowance **	\$				
c. Medical Supplies - Non-Medicare	\$				
d. Medical Supplies - Non-Medicare Contractual Allowance **	\$				
3. a. Physical Therapy - Medicare	\$	502,741	502,741		
b. Physical Therapy - Medicare Contractual Allowance **	\$	(595,824)	(595,824)		
c. Physical Therapy - Non-Medicare	\$	156,524	156,524		
d. Physical Therapy - Non-Medicare Contractual Allowance **	\$	(23,904)	(23,904)		
4. a. Speech Therapy - Medicare	\$	94,956	94,956		
b. Speech Therapy - Medicare Contractual Allowance **	\$	(39,639)	(39,639)		
c. Speech Therapy - Non-Medicare	\$	68,571	68,571		
d. Speech Therapy - Non-Medicare Contractual Allowance **	\$	(6,827)	(6,827)		
5. a. Occupational Therapy - Medicare	\$	476,594	476,594		
b. Occupational Therapy - Medicare Contractual Allowance **	\$	(435,850)	(435,850)		
c. Occupational Therapy - Non-Medicare	\$	129,737	129,737		
d. Occupational Therapy - Non-Medicare Contractual Allowance **	\$	(13,778)	(13,778)		
6. a. Other (Specify) - Medicare	\$	1,932	1,932		
b. Other (Specify) - Non-Medicare	\$	14,606	14,606		ļ
III. Total Resident Revenue (Section I. thru Section II.)	\$	11,520,338	11,520,338		
IV. Other Revenue*					
1. Meals sold to guests, employees & others	\$	1,646	1,646		
2. Rental of rooms to non-residents	\$				
3. Telephone	\$				
4. Rental of Television and Cable Services	\$				<u> </u>
5. Interest Income (Specify)	\$	29	29		
6. Private Duty Nurses' Fees	\$				
7. Barber, Coffee, Beauty and Gift shops	\$				
8. Other (Specify)	\$	25,879	25,879		ļ
V. Total Other Revenue (1 thru 8)	\$	27,554	27,554		ļ
VI. Total All Revenue (III +V)	\$	11,547,892	11,547,892		

* Facility should off-set the appropriate expense on Page 28 or Page 29 of the Cost Report.

** Facility should report all contractual allowances and/or payer discounts.

Schedule of Other Resident Revenue - Medicare

Related Exp

	Description	CCNH	RHNS	(Specify)
		÷.		
30 II 6a	Lab Revenue>Med A	\$ 1,932		
Total Oth	er Resident Revenue - Medicare	\$ 1,932	\$ -	\$ -

Schedule of Other Non-Medicare Resident Revenue

Related Exp

HNS (Specify)
- S -
Construction 00000000 (Second Second Seco

Interest Income

Account

Page Ref	Account	Balance	CCNH	RHNS	(Specify)
			-	an a	
30 IV-5	Interest Income	N/A	\$ 29		
Total Inte	rest Income		\$ 29	\$-	s -

Schedule of Other Revenue

Page Ref	Description			CCNH	RHNS	(Specify)
		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		-		
30 IV 8	Misc. Income		(安) (1997)	\$ 25,879		
					200	
		1995 - N.				
			- E K			
			1999 B. (199			
		(c)				
Total Oth	er Revenue	1		\$ 25,879		\$ -

G. Balance Sheet

Name of Facility	License No.	Report for Year Ended	Page	
Fairview Health of Southport	t, LLC 2307-C	9/30/2016	31	37
	Account	÷		Amount
Assets				
A. Current Assets				<i>(</i> , , , , , , , , , ,
1. Cash (on hand and			\$	623,488
	Receivable (Less Allowanc		\$	2,131,707
	ceivable (Excluding Owners	s or Related Parties)	\$	
4 Inventories			\$	
5. Prepaid Expenses			\$	50,635
a. Prepaid Expense		47,388		
b. Prepaid Expense	es>Taxes	3,247		
c				
d				
6. Interest Receivable	· · · · · · · · · · · · · · · · · · ·		\$	
7. Medicare Final Set			\$	
8. Other Current Asse	ts (<i>itemize</i>)		\$	
		<u></u>	- 推測	
· · · · · · · · · · · · · · · · · · ·				
A-9. Total Current Assets (Lines A1 thru 8)		\$	2,805,830
B. Fixed Assets				
1. Land	·····		\$	
2. Land Improvement			\$	
	Accum. Depreci			
3. Buildings	*Historical Cost		\$	50,402
	Accum. Depreci			
4. Leasehold Improve	ments *Historical Cost		\$	
	Accum. Depreci			
5. Non-Movable Equi	pment *Historical Cost		\$	
	Accum. Depreci			
6. Movable Equipmer	nt *Historical Cost		\$	78,487
	Accum. Deprect	iation 37,778 Net		·
7. Motor Vehicles	*Historical Cost	t	\$	
	Accum. Depreci	iation Net		
8. Minor Equipment-1	Not Depreciable		\$	
9. Other Fixed Assets	(itemize)		\$	35,219
Construction in	Progress	6,200		
F/S vs C/R NBV		29,019		
B-10. Total Fixed Assets	(Lines B1 thru 9)		\$	164,108

* Historical Costs must agree with Historical Cost reported in Schedules on Depreciation and Amortization (Pages 23 and 24).

(Carry Total forward to next page)

State of Connecticut Annual Report of Long-Term Care Facility CSP-32 Rev. 6/95

G. Balance Sheet (cont'd)

Nam	e of	Facility	License No.	Report for Year Ended		Page	of
Fairv	view	Health of Southport, LLC	2307-С	9/30/2016		32	37
			Account			An	nount
				Total Brought Forward	l: \$		2,969,938
C.	Le	asehold or like property recor					
	1.	Land			\$		
	2.	Land Improvements	*Historical Cost				
			Accum. Depreciati	on Net	\$		
	3.	Buildings	*Historical Cost				
			Accum. Depreciation	on Net	\$		<u> </u>
	4.	Non-Movable Equipment	*Historical Cost				
			Accum. Depreciati	on Net	\$		
	5.	Movable Equipment	*Historical Cost				
			Accum. Depreciati	on Net	\$		
	6.	Motor Vehicles	*Historical Cost				
			Accum. Depreciati	on Net	\$		
		Minor Equipment-Not Depre			\$		
C-8		tal Leasehold or Like Proper	ties (C1 thru 7)	- · · · · · · · · · · · · · · · · · · ·	\$		
D.		vestment and Other Assets					
		Deferred Deposits			\$		6,792
		Escrow Deposits			\$	<u></u>	1,799
	3.	Organization Expense	*Historical Cost				
			Accum. Depreciati	on Net	\$		
		Goodwill (Purchased Only)			\$		1,414,318
	5.	Investments Related to Resid	lent Care (<i>itemize</i>)		\$		and a second second
					-		
	6.	Loans to Owners or Related			\$		754
		Name and Address	Amount	Loan Date			
,					899. 1997 -		
		Fairview Mgmt	75	4			
	7	Other Assets (<i>itemize</i>)	1 13	<u>' L</u>	\$		395,007
ŀ	7.	Due From>Holdings		11,665	Ŷ		
		Due From>Vendor		383,342			
D-8	То	tal Investments and Other As	sets (Lines D1 thru 7	7)	\$		1,818,670
		tal All Assets (Lines A9 + B)	· · · · · · · · · · · · · · · · · · ·		\$		4,788,608

* Historical Costs must agree with Historical Cost reported in Schedules on Depreciation and Amortization (Pages 23 and 24).

G. Balance Sheet (cont'd)

Fairview Healt Liabilities A.	Cur 1.	f Southport, LLC rrent Liabilities Trade Accounts Payable	Account	9/30/2016		<u>33</u>	37 Amount
	1.	Trade Accounts Payable	Account			A	mount
	1.	Trade Accounts Payable					
A.	1.	Trade Accounts Payable					· · · · ·
	2.					\$	3,280,358
		Notes Payable (itemize)				\$	278,392
		Note Payable - Misc.		278,392			
1							
	3.	Loans Payable for Equipm	ent (Current portion) (itemize)		\$	·
		Name of Lender	Purpose	Amount	Date Due		
						推 推	
	4.	Accrued Payroll (Exclusiv	a of Owners and/or S	Stockholders only)		\$	187,956
· · · · · · · · · · · · · · · · · · ·	4 . 5.	Accrued Payroll (<i>Exclusiv</i> Accrued Payroll (<i>Owners</i>	<u>\$</u> \$	107,930			
	<u>5.</u> 6.	Accrued Payroll Taxes Pa		<i>omy</i>)		\$	(837
		Medicare Final Settlement				\$	(0)7
	7. 8.	Medicare Current Financi		- <u>-</u>		\$	
	<u>o.</u> 9.	Mortgage Payable (Curren	· · · · · · · · · · · · · · · · · · ·			\$	
		Interest Payable (Exclusive		alated Dartian)		<u>\$</u>	10,312
			\$	10,312			
		Accrued Income Taxes* Other Current Liabilities (itomize)			\$ \$	392,299
	12.			279 A comed Evenences Has		φ 61.32	<i>372,299</i>
		Accrued Expenses		378 Accrued Expenses>Hea 331 Deferred Revenue>R&		2. Q.	
		Accrued Expenses>Prior	······································	42 Due To>Patient Spend			
		Accrued Expenses>RE Taxes Accrued Expenses>Water/Sewer	116,2	·	D 22,791		
A-13.	Tot	tal Current Liabilities (Lin				\$	4,148,480

* Business Income Tax (not that withheld from employees). Attach copy of owner's Federal Income Tax Return.

(Carry Total forward to next page)

State of Connecticut Annual Report of Long-Term Care Facility CSP-34 Rev. 6/95

G. Balance Sheet (cont'd)

Name of Facility		License No.	Report for Year	r Ended	Page	of
Fairview Health of So	outhport, LLC	2307-C	9/30/2016		34	37
	I	Account			Am	ount
			Total Broug	ht Forward:		4,148,480
Liabilities (cont'd)						
	rm Liabilities					
	s Payable-Equipment		·····	\$		
Name of Lender		Purpose	Amount	Date Due		
2. Mort	gages Payable		· · · · · · · · · · · ·	\$		
	s from Owners or Rel	ated Parties (itemize)		\$		495,713
	dress of Lender	Amount	Loan I	Date		10. H
	· · · · · · · · · · · · · · · · · · ·					
						選ぶ
Emp	lovee	552				
				15 -		
Gree	nwich	495,161				
		, , , , , , , , , , , , , , , , , , , ,				
4. Othe	r Long-Term Liabiliti	es (itemize)	J	\$		569,231
1	To>Facility		569,231			
		<u> </u>				
			······································			
B-5. Total Lo.	ng-Term Liabilities (Lines B1 thru 4)	· · · · · · · · · · · · · · · · · · ·	\$		1,064,944
C. Total All	Liabilities (Lines A-	13 + B-5)		\$		5,213,424

G. Balance Sheet (cont'd) Reserves and Net Worth

	ne of Facility	License No. 2307-C	Report for Y 9/30/2016	ear Ended	Page 35	of 37
Fair	view Health of Southport, LLC	Account	9/30/2010	<u> </u>		nount 37
A.	Reserves	Account				
	1. Reserve for value of leased	land			\$	
	 Reserve for depreciation va to be amortized 	lue of leased build	ings and appurte	nances	\$	
	3. Reserve for depreciation va	lue of leased perso	nal property (<i>Eq</i>	uity)	\$	
	4. Reserve for leasehold real p	roperties on which	fair rental value	is based	\$	
	5. Reserve for funds set aside	as donor restricted			\$	
	6. Total Reserves				\$	- <u>-</u>
B.	Net Worth 1. Owner's Capital				\$	1,261,771
	2. Capital Stock				\$	
	3. Paid-in Surplus				\$	
	4. Treasury Stock				\$	
	5. Cumulated Earnings				\$	(468,296)
	6. Gain or Loss for Period	10/1/20	15 thru	9/30/2016	\$	(1,218,291)
	7. Total Net Worth	<u></u>			\$	(424,816)
C.	Total Reserves and Net Worth	<u> </u>			\$	(424,816)
D.	Total Liabilities, Reserves, and	Net Worth			\$	4,788,608

H. Changes in Total Net Worth

Name of Facility	License No.	Report for Year	Ended	Page	of	
Fairview Health of Southport, LLC	2307-С	9/30/2016		36	37	
	Account	······································		A	mount	
A. Balance at End of Prior Period as	shown on Report of	09/30/2015		\$	798,036	
B. Total Revenue (From Statement of	f Revenue Page 30))		\$	11,547,892	
C. Total Expenditures (From Stateme	ent of Expenditures	Page 27)		\$	12,766,183	
D. Net Income or Deficit				\$	(1,218,291)	
E. Balance				\$	(420,255)	
F. Additions						
1. Additional Capital Contribute	d (<i>itemize</i>)					
Page 27 Expenses	\$12,364,191					
F/S vs C/R Depreciation	401,992					
Expenses Per F/S	\$12,766,183					
2. Other (<i>itemize</i>)						
Prior Period Adjustment	Prior Period Adjustment (4,561)					
F-3. Total Additions	· · · · · · · · · · · · · · · · · · ·			\$	(4,561)	
G. Deductions						
1. Drawings of Owners/Operator				\$		
Name and Address (No., City	y, State, Zip)	Title	Amount			
2. Other Withdrawings (Specify)				\$		
Purpose	Purpose Amount					
3. Total Deductions				\$	en en en en sen de ser en en ser de ser en ser ser en s	
H. Balance at End of Period	09/30/	/16		<u>\$</u>	(424,816)	

Name of Facility	License No.	Report for Year Ended	Page	of	
Fairview Health of Southport, LLC	2307-С	9/30/2016	37	37	
	Check appropriate category	-			
Chronic and Convalescent Nursing Home only (CCNH)	Rest Home with Nursing Supervision only (RHNS)	□ (Specify)			
	Preparer/Reviewer Certifica	ition			
I have prepared and reviewed this report and am familiar with the applicable regulations governing its preparation. I have read the most recent Federal and State issued field audit reports for the Facility and have inquired of appropriate personnel as to the possible inclusion in this report of expenses which are not reimbursable under the applicable regulations. All non-reimbursable expenses of which I am aware (except those expenses known to be automatically removed in the State rate computation system) as a result of reading reports, inquiry or other services performed by me are properly reported as such in this report on Pages 28 and 29 (adjustments to statement of expenditures). Further, the data contained in this report is in agreement with the books and records, as provided to me, by the Facility.					
Signature of Preparer Title Date Signed PRINCIPAL 2/11/7					
Printed Name of Preparer					
Matthew S. Bavolack Addres Addres		Phone Number			
Address					
555 Long Wharf Drive, New Haven, CT 06	511	203-781-9600		<u></u>	

I. Preparer's/Reviewer's Certification

Subject to the attached accountants' consulting report



ACCOUNTANTS' CONSULTING REPORT

Management is responsible for the accompanying Annual Report of Long-Term Care Facility (the "Cost Report") for Fairview Health of Southport, LLC for the year ended September 30, 2016, included in the accompanying prescribed form. We have prepared the Cost Report in accordance with the American Institute of Certified Public Accountants' Statements on Standards for Consulting Services. The Cost Report was prepared in conformity with regulations prescribed by The State of CT Department of Social Services (DSS) from data provided to us by the management of Fairview Health of Southport, LLC. We did not audit or review the Cost Report included in the accompanying prescribed form, nor were we required to perform any procedures to verify the accuracy or completeness of the information provided by management. Accordingly, we do not express an opinion, a conclusion, nor provide any form of assurance on the Cost Report included in the accompanying prescribed form.

Management is responsible for maintaining its records in accordance with accounting principles generally accepted in the United States of America and in accordance with reimbursement regulations set forth by DSS. Management is also responsible for designing, implementing, and maintaining internal control relevant to the preparation and fair presentation of the financial data and supplemental information included in the Cost Report.

This report is intended solely for the information and use of the management of Fairview Health of Southport, LLC and DSS and is not intended to be, and should not be, used by anyone other than these specified parties.

MARCUM LLP

New Haven, CT February 11, 2017



Annual Report of Long-Term Care Facility Cost Year 2016 Checklist

Facility Name_Fairview Health of Southport, LLC

Complete the following check list. **Provide an explanation for any "No" answers.** Attach additional sheets to explain further, if necessary.



1. Have all related parties been properly disclosed on Pages 4, 11, 12, 14, 17 and 21?

Explanation: _



2. Are the methods of allocating costs consistent with cost year 2015? If not, explain the reporting change.



3. Are costs allocated based on the methods prescribed on Page 5 of the Annual Report? If not, provide the basis of your allocation.

Explanation:



4. Do equipment leases listed on Page 6 agree with equipment leases reported on Page 22, Line 6e? If not, state where these costs are included in the Annual Report.

Yes No



5. Do accounting and legal fees reported on Page 7 agree with Page 15, Lines 1d and 1e, respectively?



6. During cost year 2016, did you report all certified bed changes on Page 9? Do the bed change dates agree to the license issued by the Department of Health?



7. If there has been a change in Administrators, have the dates of employment and applicable hours for each Administrator been reported on Page 12?



8. Have hours been reported for all expenses claimed on Page 13? Hours must be actual rather than estimated.

Explanation:



9. Has resident day user fee expense been properly reported on Page 15, Line 1k3?

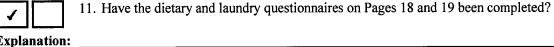
Explanation:



10. Have purchased services greater than \$10,000 reported on Pages 16, 18, 19, 20 and 22 been detailed on Page 21?

Explanation: _

Yes No



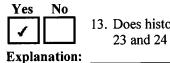
11. Have the dietary and laundry questionnaires on Pages 18 and 19 been completed?

Explanation:



12. Has the personal use portion of automobile expense been disallowed, including, depreciation, lease payments, insurance and taxes?





13. Does historical cost and accumulated depreciation of all assets reported on Pages 23 and 24 roll forward from cost year 2015?



14. Does the net book value of all assets reported on Pages 23 and 24 agree with the net book value reported on Pages 31 and 32?

Explanation: ____



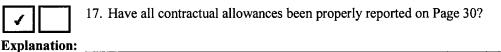
15. Has asset useful life been reported in accordance with the 2013 edition of the American Hospital Association guidelines?



16. Have all assets been categorized between movable and fixed in accordance with the 2013 edition of the American Hospital Association guidelines?

Explanation:

Yes No



Explanation:



18. If the automated cost report was used, were all discrepancies on the Error Page addressed? If not addressed, explain why.



19. Have Pages 1 and 37 been signed? Cost reports without a signed Page 1 and 37 will not be accepted.

Explanation: ____



20. Have detailed schedules been provided for all "other" line items, fixed asset and movable equipment additions? If detail is not provided, appropriate disallowances will be made.

Explanation:



21. Have all costs associated with non-nursing home businesses (i.e., Adult Daycare, Meals on Wheels, Outpatient Therapy Services, etc.) been disallowed on Pages 28 and/or 29 of the Annual Report?

Explanation:



22. Has all required documentation been submitted to the Annual Report review and audit contractor?

Explanation:

Page 4 of 4

Client: Fairview Health Cost Reports Engagement: Medicaid - Fairview Health of Southport, LLC 2016 Period Ending: 9/30/2016 Trial Balance: A.01 - TB-CCNH

Trial Balance:	A.01 - TB-CCNH				
Account	Description	ADJ	JE Ref #	RJE	FINAL
· ·	·	9/30/2016			9/30/2016
10-010-85	Cash>Operating>Southport	360,185.00			360,185.00
10-012-85	Cash>Operating2>Southport	232,752.00			232,752.00
10-014-00	Cash>Petty Cash Facility	865.00			865.00
10-060-85	Cash>Resident Trust>Southport	29,686.00			29,686.00
11-001-00	Accounts Receivable>Clearing	(60.00)			(60.00)
11-100-00	Accounts Receivable>Miscellaneous	13,070.00			13,070.00
11-102-00	Accounts Receivable>Medicare A Accounts Receivable>Medicare A>Old A/R	169,143.00 3,580.00			169,143.00 3,580.00
11-102-70 11-10 4 -00	Accounts Receivable>medicare A>Old A/R Accounts Receivable>Private	118,481.00			118,481.00
11-104-00	Accounts Receivable>Private>Litigation	267,860.00			267,860.00
11-104-70	Accounts Receivable>Private>Old A/R	995,854.00			995,854.00
11-105-00	Accounts Receivable>HMO	124,005.00			124,005.00
11-105-70	Accounts Receivable>HMO>Old A/R	657,116.00			657,116.00
11-109-00	Accounts Receivable>Hospice	28,546.00			28,546.00
11-109-70	Accounts Receivable>Hospice>Old A/R	15,640.00			15,640.00
11-111-00	Accounts Receivable>Medicaid	951,158.00			951,158.00
11-111-70	Accounts Receivable>Medicaid>Old A/R	256,372.00			256,372.00
11-111-93	Accounts Receivable>Medicaid>Rate Adjustment	9,858.00			9,858.00
11-112-00	Accounts Receivable>Income	23,694.00			23,894.00
11-112-70	Accounts Receivable>Income>Old A/R	(21,536.00)			(21,536.00)
11-113-70	Accounts Receivable>Out of State Medicaid>Old A/R	11,140.00			11,140.00
11-120-00	Accounts Receivable>Allow for Doubtful Accts	(1,525,259.00)			(1,525,259.00)
11-123-00	Accounts Receivable>Ancillary	32,845.00			32,845.00
12-000-00	Prepaid Expenses	47,388.00			47,388.00
12-126-00	Prepaid Expenses>Taxes	3,247.00			3,247.00
13-128-00	Due From>Vendor Security Deposits	6,792.00			6,792.00
14-131-00	Fixed Assets>Leasehold Improvements	34,706.00			34,706.00
14-132-00	Fixed Assets>Furniture, Fixtures and Equipment	141,068.00			141,068.00
14-133-00	Fixed Assets>Medical Equipment	19,053.00			19,053.00
14-134-00	Fixed Assets>Computer Hardware	519.00			519.00
14-136-00	Fixed Assets Construction in Progress	6,200.00			6,200.00
15-131-00	Accum Depn>Leasehold improvements	(754.00)			(754.00)
15-132-00	Accum Depn>Furniture, Fixtures and Equipment Accum Depn>Medical Equipment	(36,440.00)			(36,440.00) (227.00)
15-133-00 15-134-00	Accum Depn>Computer Hardware	(227.00) (17.00)			(17.00)
17-283-06	Other Assets>Tax Escrow>Other	1,799.00			1,799.00
18-000-00	Acquisition Costs	1,414,318.00			1,414,318.00
20-000-00	Accounts Payable	(3,191,790.00)			(3,191,790.00)
20-000-01	Accounts Payable>Other	366,656.00			366,656.00
20-000-70	Accounts Payable>Old	153,176.00			153,176.00
21-101-00	Other Current Payables>Provider Tax	(641,378.00)			(641,378.00)
21-150-00	Other Current Payables>Union Dues W/H	(4,962.00)			(4,962.00)
21-152-06	Other Current Payables>Employee>Other	56,165.00			56,165.00
21-156-06	Other Current Payable>Union Dues W/H>Other	1,973.00			1,973.00
21-350-00	Other Current Payables>Resident Funds	(43,123.00)			(43,123.00)
21-353-00	Other Current Payables>Resident Refunds	23,269.00			23,269.00
21-884-00	Other Current Payable>Disability & Other Insurance	(344.00)			(344.00)
22-310-00	Note Payable>Misc	(278,392.00)			(278,392.00)
23-000-00	Accrued Wages & Related	(187,956.00)			(187,956.00)
23-156-00	Accrued Wages & Related>PR Taxes	837.00			837.00
24-000-00	Accrued Expenses	(186,378.00)			(186,378.00)
24-000-03	Accrued Expenses>Prior	(26,331.00)			(26,331.00)
24-160-00	Accrued Expenses>Interest	(10,312.00)			(10,312.00)
24-161-00	Accrued Expenses>RE Taxes	(116,442.00) (10,872.00)			(116,442.00) (10,872.00)
24-229-00 24-882-00	Accrued Expenses>Water/Sewer Accrued Expenses>Health Insurance	(18,502.00)			(18,502.00)
25-154-00	Deferred Revenue>R&B Prepayment	(10,983.00)			(10,983.00)
27-000-93	Due To/(From)>Holdings	11,665.00			11,665.00
27-152-00	Due To/(From)>Employee	(552.00)			(552.00)
27-172-00	Due To/(From)>Vendor	383,342.00			383,342.00
27-176-00	Due To/(From)>Facility	(569,231.00)			(569,231.00)
27-199-00	Due To>Patient Spend Down	(22,791.00)			(22,791.00)
27-316-00	Due To/(From)>Greenwich	(495,161.00)			(495,161.00)
27-317-00	Due To/(From)>Fairview Management	754.00			754.00
30-000-00	Retained Earnings	468,296.00			468,296.00
31-401-00	Partners' Equity>Partner #2	(1,261,771.00)			(1,261,771.00)
40-102-00	Room & Board Revenue>Medicare A	(2,179,880.00)			(2,179,880.00)
40-102-14	Room & Board Revenue>Medicare A>Sequester	25,058.00			25,058.00
40-104-00	Room & Board Revenue>Private	(1,017,120.00)			(1,017,120.00)
40-105-00	Room & Board Revenue>HMO	(450,518.00)			(450,518.00)
40-105-14	Room & Board Revenue>HMO>Sequester	5,483.00			5,483.00
40-109-00	Room & Board Revenue>Hospice	(242,297.00)			(242,297.00)
40-111-00	Room & Board Revenue>Medicaid	(7,201,950.00)			(7,201,950.00)
41-102-00	Pharmacy Rev>Medicare A	(144,603.00)			(144,603.00)
41-102-01	Pharmacy Rev>Medicare A>C/A	31,391.00			31,391.00
41-114-00	Pharmacy Revenue>Other Payor	(16,063.00)			(16,063.00) (394,018.00)
42-102-00	PT Revenue>Medicare A	(394,018.00) 595,824.00			595,824.00
42-102-01	PT Revenue>Medicare A>C/A PT Revenue>Medicare B	(108,723.00)			(108,723.00)
42-103-00 42-105-00	PT Revenue>IMO	(45,152.00)			(45,152.00)
42-105-00	PT Revenue>Medicaid	(111,372.00)			(111,372.00)
42-111-00	PT Revenue>Medicaid>C/A	23,904.00			23,904.00
43-102-00	OT Revenue>Medicare A	(381,368.00)			(381,368.00)
43-102-00	OT Revenue>Medicare A>C/A	435,850.00			435,850.00
		••••			

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Account	Description	ADJ	JE Ref # RJE	FINAL
		9/30/2016		9/30/2016
43-103-00	OT Revenue>Medicare B	(95,226.00)		(95,226.00)
43-105-00	OT Revenue>HMO	(42,854.00)		(42,854.00)
43-111-00 43-111-01	OT Revenue>Medicaid OT Revenue>Medicaid>C/A	(86,883.00) 13,778.00		(86,883.00) 13,778.00
44-102-00	ST Revenue>Medicare A	(183,334.00)		(183,334.00)
44-102-01	ST Revenue>Medicare A>C/A	39,639.00		39,639.00
44-103-00 44-105-00	ST Revenue>Medicare B ST Revenue>HMO	88,378.00 (14,039.00)		88,378.00 (14,039.00)
44-111-00	ST Revenue>Medicaid	(54,532.00)		(54,532.00)
44-111-01	ST Revenue>Medicaid>C/A	6,827.00		6,827.00
46-102-00 46-114-00	Lab Revenue>Med A Lab Revenue>Other Payor	(1,932.00) (1,357.00)		(1,932.00) (1,357.00)
50-4100	Professional Fees	0.00	17,322.00	17,322.00
51-100-00	Other Revenue>Misc	(25,879.00)		(25,879.00)
51-160-00 51-178-00	Other Rev>Interest Other Rev>Food	(29.00) (1,646.00)		(29.00) (1,646.00)
51-818-00	Other Rev>Medical Records	520.00		520.00
52-109-00	Revenue Adjustments>Hospice	(751.00)		(751.00)
52-111-00 52-114-00	Revenue Adjustments>Medicaid Revenue Adjustments>Other Payor	(9,975.00) (2,523.00)		(9,975.00) (2,523.00)
55-5386	Pharmacy Consultant	0.00	5,778.00	5,778.00
55-5387	Other Consultant	0.00	2,400.00	2,400.00
55-5540 55-5550	Other Consultant Medical Director	0.00 0.00	1,650.00 600.00	1,650.00 600.00
60-183-00	Nursing Expense>Supplies	161,931.00	000.00	161,931.00
60-184-00	Nursing Expense>Minor Equip & Supplies	19,740.00		19,740.00
60-185-00	Nursing Expense>Incontinence Supplies	600.00 2,050.00	(1,800.00)	600.00 250.00
60-206-00 60-208-00	Nursing Expense>Clinical Services Nursing Expense>Equip-Rental	22,373.00	(1,000.00)	22,373.00
60-212-00	Nursing Expense>Clinical Consultants	6,638.00	(6,378.00)	260.00
60-213-00	Nursing Expense>Transportation	802.00 76,356.00	(73,145.00)	802.00 3,211.00
60-700-06 60-700-18	Nursing Expense>Contracted Service>Other Nursing Expense>Contracted Service>RN	21,525.00	(73,145.00)	21,525.00
60-700-19	Nursing Expense>Contracted Service>LPN	15,245.00		15,245.00
60-801-80	Nursing Expense>CNA>Wages	1,672,226.00		1,672,226.00
60-805-80 60-808-80	Nursing Expense>LPN>Wages Nursing Expense>RN>Wages	949,066.00 596,664.00		949,066.00 596,664.00
61-750-00	Nursing Admin Expense>Medical Director	51,220.00		51,220.00
61-811-80	Nursing Admin Expense>Director>Wages	118,205.00		118,205.00
61-819-80 61-880-00	Nursing Admin Expense>Nurse Admin>Wages Nursing Admin Expense>Payroll Taxes	142,710.00 80,258.00		142,710.00 80,258.00
61-881-00	Nursing Admin Expense>Workers Comp	52,109.00		52,109.00
61-882-00	Nursing Admin Expense>Health Insurance	34,975.00	(140.070.00)	34,975.00
61-883-00 62-000-00	Nursing Admin Expense>Other Benefits Pharmacy Expense	140,273.00 25.00	(140,273.00)	0.00 25.00
62-145-00	Pharmacy Expense>RX	150,115.00		150,115.00
62-222-00	Pharmacy Expense>OTC	943.00		943.00 3,748.00
64-223-00 64-224-00	Other Ancillary Expense>Oxygen Other Ancillary Expense>Lab	3,748.00 6,900.00		6,900.00
64-225-00	Other Ancillary Expense>Radiology	(9,682.00)		(9,682.00)
65-000-00 65-700-00	PT Expense PT Expense>Contracted Service	53,266.00 199,662.00		53,266.00 199,662.00
65-829-80	PT Expense>Staff>Wages	281,256.00		281,256.00
66-000-00	OT Expense	22,702.00		22,702.00
66-700-00 66-829-80	OT Expense>Contracted Service OT Expense>Staff>Wages	9,531.00 140,819.00		9,531.00 140,819.00
67-000-00	ST Expense	6,546.00	1,095.00	7,641.00
67-829-80	ST Expense>Staff>Wages	1,734.00		1,734.00
68-700-00 68-880-00	Therapy Expense>Contracted Service Therapy Expense>Payroll Taxes	11,173.00 4,024.00		11,173.00 4,024.00
68-881-00	Therapy Expense>Workers Comp	2,944.00		2,944.00
68-882-00	Therapy Expense>Health Insurance	1,855.00		1,855.00
68-883-00 69-811-80	Therapy Expense>Other Benefits Social Services Expense>Director>Wages	8,122.00 110,121.00	(8,122.00)	0.00 110,121.00
69-880-00	Social Services Expense>Payroll Taxes	2,134.00		2,134.00
69-881-00	Social Services Expense>Workers Comp	1,379.00		1,379.00
69-882-00 69-883-00	Social Services Expense>Health Insurance Social Services Expense>Other Benefits	926.00 3,696.00	(3,696.00)	926.00 0.00
70-177-00	Dietary Expense>Supplements	7,971.00	(0,000.00)	7,971.00
70-178-00	Dietary Expense>Food	84,310.00		84,310.00
70-183-00 70-700-00	Dietary Expense>Supplies Dietary Expense>Contracted Service	18,916.00 129,293.00		18,916.00 129,293.00
70-831-80	Dietary Expense>Aide>Wages	534,110.00		534,110.00
70-880-00	Dietary Expense>Payroll Taxes	11,245.00		11,245.00
70-881-00 70-882-00	Dietary Expense>Workers Comp Dietary Expense>Health Insurance	7,331.00 4,917.00		7,331.00 4,917.00
70-883-00	Dietary Expense>Other Benefits	19,791.00	(19,791.00)	0.00
71-178-00	Activity Expense>Food	8.00		8.00
71-183-00 71-700-00	Activity Expense>Supplies Activity Expense>Contracted Service	12,309.00 957.00		12,309.00 957.00
71-831-80	Activity Expense>Aide>Wages	74,313.00		74,313.00
71-880-00	Activity Expense>Payroll Taxes	1,799.00		1,799.00
71-881-00 71-882-00	Activity Expense>Workers Comp Activity Expense>Health Insurance	1,168.00 784.00		1,168.00 784.00
71-883-00	Activity Expense>Other Benefits	3,145.00	(3,145.00)	0.00
72-183-00	Housekeeping Expense>Supplies	45,003.00		45,003.00
72-831-80 73-831-80	Housekeeping Expense>Aide>Wages Laundry Expense>Aide>Wages	349,526.00 194,064.00		349,526.00 194,064.00

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Account	Description	ADJ	JE Ref # RJE	FINAL
		9/30/2016		9/30/2016
74-880-00	Housekeeping & Laundry Expense>Payroll Taxes	10,877.00		10,877.00
74-881-00	Housekeeping & Laundry Expense>Workers Comp	7,077.00		7,077.00
74-882-00	Housekeeping & Laundry Expense>Health Insurance	4,749.00	(10.000.00)	4,749.00
74-883-00	Housekeeping & Laundry Expense>Other Benefits	19,083.00	(19,083.00)	0.00 3,631.00
75-183-00 75-205-00	Maintenance Expense>Supplies Maintenance Expense>Sanitation & Incineration	3,631.00 7,112.00		7,112.00
75-207-00	Maintenance Expense>Repairs & Maint	55,478.00		55,478.00
75-217-00	Maintenance Expense>Extermination	319.00		319.00
75-219-00	Maintenance Expense>Landscaping	3,412.00		3,412.00
75-220-00 75-700-00	Maintenance Expense>Fire Drill Maintenance Expense>Contracted Service	1,068.00 52.632.00	(27,300.00)	1,068.00 25,332.00
75-829-80	Maintenance Expense>Staff>Wages	100,368.00	(27,000.00)	100,368.00
75-880-00	Maintenance Expense>Payroll Taxes	2,033.00		2,033.00
75-881-00	Maintenance Expense>Workers Comp	1,321.00		1,321.00
75-882-00	Maintenance Expense>Health Insurance Maintenance Expense>Other Benefits	886.00 3,558.00	(3,558.00)	886.00 0.00
75-883-00 76-227-00	Utility Expense>Gas	31,635.00	(0,000.00)	31,635.00
76-228-00	Utility Expense>Electric	137,059.00		137,059.00
76-229-00	Utility Expense>Water/Sewer	19,252.00		19,252.00
80-101-00	Admin Expense>Provider Tax	990,407.00		990,407.00 754.00
80-147-00 80-162-00	Admin Expense>Sales & Use Tax Admin Expense>Insurance - General Liability & Other	754.00 204,387.00	(95,282.00)	109,105.00
80-183-00	Admin Expense>Supplies	90,097.00	(00,101.00)	90,097.00
80-208-00	Admin Expense>Equip-Rental	25,148.00	(6,742.00)	18,406.00
80-209-00	Admin Expense>Postage	5,873.00		5,873.00
80-210-00	Admin Expense>Internet	755.00 50,344.00	5,059.00	755.00 55,403.00
80-230-00 80-231-00	Admin Expense>Data Processing Admin Expense>Telephone	25,510.00	(3,129.00)	22,381.00
80-232-00	Admin Expense>Cable TV	2,071.00	(-,,	2,071.00
80-233-00	Admin Expense>Seminars	100.00		100.00
80-234-00	Admin Expense>Licenses	1,873.00		1,873.00
80-235-00 80-236-00	Admin Expense>Dues & Subscriptions Admin Expense>Travel	1,528.00 7,940.00		1,528.00 7,940.00
80-238-00	Admin Expense>Legal Fees	6,709.00		6,709.00
80-239-00	Admin Expense>Accounting Fees	6,950.00	(4,750.00)	2,200.00
80-240-00	Admin Expense>Professional Fees	100,978.00	(61,600.00)	39,378.00
80-242-00	Admin Expense>Fines and Penalties	2,427.00 4,094.00		2,427.00 4,094.00
80-243-00 80-244-00	Admin Expense>Late Fees Admin Expense>Bank Fees	11,246.00	(5,059.00)	6,187.00
80-249-00	Admin Expense>Recruiting	523.00	(-,,	523.00
80-250-00	Admin Expense>Marketing & Advertising	32,407.00		32,407.00
80-251-00	Admin Expense>Bad Debt	776,100.00	133,028.00	776,100.00 417,506.00
80-279-00 80-700-00	Admin Expense>Management Fee Admin Expense>Contracted Service	284,478.00 22,551.00	133,020.00	22,551.00
80-811-80	Admin Expense>Director>Wages	170,386.00	(63,024.00)	107,362.00
80-840-80	Admin Expense>Business Office>Wages	388,210.00	63,024.00	451,234.00
80-880-00	Admin Expense>Payroll Taxes	11,886.00		11,886.00 7,753.00
80-881-00 80-882-00	Admin Expense>Workers Comp Admin Expense>Health Insurance	7,753.00 5,193.00		5,193.00
80-883-00	Admin Expense>Other Benefits	20,904.00	(20,904.00)	0.00
85-100-00	Employee Benefits Expense>Miscellaneous	527.00		527.00
85-156-61	Employee Benefits Expense>PR Taxes>Fica	318,130.00		318,130.00
85-156-62 85-156-63	Employee Benefits Expense>PR Taxes>SUI	69,979.00 18,273.00		69,979.00 18,273.00
85-200-79	Employee Benefits Expense>PR Taxes>FUI Employee Benefits Expense>Training Fund>Union	16,513.00	4,281.00	20,794.00
85-204-00	Employee Benefits Expense> Training & Education	3,115.00		3,115.00
85-245-00	Employee Benefits Expense>Background Checks	0.00	493.00	493.00
85-255-79	Employee Benefits Expense>Pension>Union	147,753.00 448,788.00		147,753.00 448,788.00
85-260-79 85-881-00	Employee Benefits Expense>Welfare>Union Employee Benefits Expense>Workers Comp	19,589.00		19,589.00
85-882-00	Employee Benefits Expense>Health Insurance	190,869.00		190,869.00
91-121-00	Property Expense>Rent	487,203.00		487,203.00
91-161-00	Property Expense>RE Taxes	71,443.00		71,443.00
91-261-00 92-000-00	Property Expense>Personal Prop Taxes Depreciation Expense	6,522.00 429,687.00		6,522.00 429,687.00
92-000-00	Interest Expense	136,275.00		136,275.00
Marcum 104	Accounting & Auditing Fees	0.00	13,100.00	13,100.00
Marcum 113	Cell Phone	0.00	3,129.00	3,129.00
Marcum 114 Marcum 115		0.00 0.00	95,282.00 6,742.00	95,282.00 6,742.00
Marcum 115 Marcum 116		0.00	158,331.00	158,331.00
Marcum 117	Union Pension	0.00	52,727.00	52,727.00
Marcum 118		0.00	2,597.00	2,597.00
Marcum 119	Employee Food	0.00	33.00 110.00	33.00 110.00
Marcum 120 Total	Misc. Employee Benefits	0.00 0.00	0.00	0.00

Client:	Fairview Health Cost Reports				
Engagement:	Medicaid - Fairview Health of Southport, LLC 2016				
Period Ending:	9/30/2016				
Trial Balance:	A.01 - TB-CCNH				
Workpaper:	A.03 - Grouping Report				
Account	Description	ADJ 9/30/2016	JE Ref #	RJE 9/30/2016	FINAL 9/30/2016
Group : [10-A]	Salaries and Wages				
Subgroup : [2]	Administrators				107 000 00
80-811-80	Admin Expense>Director>Wages	170,386.00		(63,024.00)	107,362.00
Subtotal [2]	Administrators	170,386.00	RJE - 9	(63,024.00) (63,024.00)	107,362.00
Subiotal [2]				(00/02/100/	
Subgroup : [4]	Other Administrative Salaries				
80-840-80	Admin Expense>Business Office>Wages	388,210.00		63,024.00	451,234.00
			RJE - 9	63,024.00	
Subtotal [4]	Other Administrative Salaries	388,210.00	_	63,024.00	451,234.00
Subgroup : [5C]	Dietary Workers				
70-831-80	Dietary Expense>Aide>Wages	534,110.00	_	0.00	534,110.00
Subtotal [5C]	Dietary Workers	534,110.00		0.00	534,110.00
Subgroup (ISP)	Other Housekeeping Workers				
Subgroup : [6B] 72-831-80	Housekeeping Expense>Aide>Wages	349,526.00		0.00	349,526.00
Subtotal [6B]	Other Housekeeping Workers	349,526.00		0.00	349,526.00
	• • • • • • • • • • • • • • • • • • •				
Subgroup : [7B]	Other Maintenance Workers	100 268 00		0.00	100,368.00
75-829-80 Subtotal [7B]	Maintenance Expense>Staff>Wages Other Maintenance Workers	<u>100,368.00</u> 100,368.00	<u> </u>	0.00	100,368.00
Subtotal [/ b]		100,000.00			
Subgroup : [8B]	Other Laundry Workers				
73-831-80	Laundry Expense>Aide>Wages	194,064.00		0.00	194,064.00
Subtotal [8B]	Other Laundry Workers	194,064.00	_	0.00	194,064.00
Subgroup : [12A]	Director of Nurses				
61-811-80	Nursing Admin Expense>Director>Wages	118,205.00		0.00	118,205.00
Subtotal [12A]	Director of Nurses	118,205.00		0.00	118,205.00
Subgroup : [12B1]	RNs - Direct Care				
60-808-80	Nursing Expense>RN>Wages	596,664.00		0.00	596,664.00
Subtotal [12B1]	RNs - Direct Care	596,664.00		0.00	596,664.00
Subgroup : [12B2] 61-819-80	RNs - Administrative Nursing Admin Expense>Nurse Admin>Wages	142,710.00		0.00	142,710.00
Subtotal [12B2]	RNs - Administrative	142,710.00		0.00	142,710.00
00010101 [1203]					
Subgroup : [12C1]	LPNs - Direct Care				a 40.000.00
60-805-80	Nursing Expense>LPN>Wages	949,066.00		0.00	949,066.00
Subtotal [12C1]	LPNs - Direct Care	949,066.00		0.00	949,066.00
Subgroup : [12D]	Aides and Attendants				
60-801-80	Nursing Expense>CNA>Wages	1,672,226.00	_	0.00	1,672,226.00
Subtotal [12D]	Aldes and Attendants	1,672,226.00	_	0.00	1,672,226.00
Subgroup : [12E]	Physical Therapists				
65-829-80	PT Expense>Staff>Wages	281,256.00		0.00	281,256.00
Subtotal [12E]	Physical Therapists	281,256.00	_	0.00	281,256.00
0.1	S Theresists				
Subgroup : [12F] 67-829-80	Speech Therapists ST Expense>Staff>Wages	1,734.00		0.00	1,734.00
Subtotal [12F]	Speech Therapists	1,734.00		0.00	1,734.00
			_		•••
Subgroup : [12G]	Occupational Therapists				
66-829-80	OT Expense>Staff>Wages	140,819.00	_	0.00	140,819.00
Subtotal [12G]	Occupational Therapists	140,819.00	<u> </u>	0.00	140,819.00
Subgroup : [12H]	Recreation Workers				
71-831-80	Activity Expense>Aide>Wages	74,313.00		0.00	74,313.00
Subtotal [12H]	Recreation Workers	74,313.00		0.00	74,313.00
Subarous · [42]41	Social Workers/Case Management				
Subgroup : [12M] 69-811-80	Social Workers/Case Management Social Services Expense>Director>Wages	110,121.00		0.00	110,121.00

Fairview Health Cost Reports

Client:

Subtotal [12M]	Social Workers/Case Management	110,121.00		0.00	110,121.00
Total [10-A]	Salaries and Wages	5,823,778.00		0.00	5,823,778.00
Group : [13-B]	Professional Fees				
Subgroup : [2]	Dentist				
55-5387	Other Consultant	0.00		2,400.00	2,400.00
			RJE - 6	600.00	
			RJE - 10	1,800.00	
55-5540	Other Consultant	0.00		1,650.00	1,650.00
			RJE - 8	1,650.00	
Subtotal [2]	Dentist	0.00		4,050.00	4,050.00
Subgroup : [3]	Pharmacist				
55-5386	Pharmacy Consultant	0.00		5,778.00	5,778.00
			RJE - 7	5,778.00	
Subtotal [3]	Pharmacist	0.00		5,778.00	5,778.00
Subgroup : [5A]	PT - Resident Care	70 000 00		(70.445.00)	0.011.00
60-700-06	Nursing Expense>Contracted Service>Other	76,356.00		(73,145.00)	3,211.00
	D.T. 6	50.000.00	RJE - 8	(73,145.00)	53 266 00
65-000-00	PT Expense	53,266.00		0.00 0.00	53,266.00 199,662.00
65-700-00	PT Expense>Contracted Service	199,662.00 11,173.00		0.00	11,173.00
68-700-00 Subtotal [5A]	Therapy Expense>Contracted Service PT - Resident Care	340,457.00		(73,145.00)	267,312.00
Subtoral [5A]				(73,140.00)	201,012.00
Subgroup : [8A]	Medical Director				
55-5550	Medical Director	0.00		600.00	600.00
			RJE - 1	600.00	
61-750-00	Nursing Admin Expense>Medical Director	51,220.00		0.00	51,220.00
Subtotal [8A]	Medical Director	51,220.00		600.00	51,820.00
Subgroup : [9A]	ST - Resident Care			4 005 00	7.044.00
67-000-00	ST Expense	6,546.00		1,095.00	7,641.00
Subtatal (9A)	ST - Resident Care	6,546.00	RJE - 8	1,095.00 1,095.00	7,641.00
Subtotal [9A]	SI - Resident Care	0,040.00		1,000.00	
Subgroup : [10A]	OT - Resident Care				
66-000-00	OT Expense	22,702.00		0.00	22,702.00
66-700-00	OT Expense>Contracted Service	9,531.00		0.00	9,531.00
Subtotal [10A]	OT - Resident Care	32,233.00		0.00	32,233.00
Subgroup : [11A1]	RN's - Direct Care				04 505 00
60-700-18	Nursing Expense>Contracted Service>RN	21,525.00		0.00	21,525.00
Subtotal [11A1]	RN's - Direct Care	21,525.00		0.00	21,525.00
Subgroup : [11B1]	LPN's - Direct Care				
60-700-19	Nursing Expense>Contracted Service>LPN	15,245.00		0.00	15,245.00
Subtotal [11B1]	LPN's - Direct Care	15,245.00		0.00	15,245.00
Subgroup : [12]	Other				
60-206-00	Nursing Expense>Clinical Services	2,050.00		(1,800.00)	250.00
			RJE - 10	(1,800.00)	
60-212-00	Nursing Expense>Clinical Consultants	6,638.00		(6,378.00)	260.00
			RJE - 6	(600.00)	
			RJE - 7	(5,778.00)	
Subtotal [12]	Other	8,688.00		(8,178.00)	510.00
Total [13-B]	Professional Fees	475,914.00		(69,800.00)	406,114.00
Group : [15]	Expenditures Other than Salarles				
Subgroup : [1A1]	Workmen's Compensation				50 400 00
61-881-00	Nursing Admin Expense>Workers Comp	52,109.00		0.00	52,109.00
68-881-00	Therapy Expense>Workers Comp	2,944.00		0.00	2,944.00
69-881-00	Social Services Expense>Workers Comp	1,379.00		0.00	1,379.00
70-881-00	Dietary Expense>Workers Comp	7,331.00		0.00 0.00	7,331.00
71-881-00	Activity Expense>Workers Comp	1,168.00		0.00	1,168.00 7,077.00
74-881-00	Housekeeping & Laundry Expense>Workers Comp	7,077.00		0.00	1,321.00
75-881-00	Maintenance Expense>Workers Comp	1,321.00		0.00	7,753.00
80-881-00	Admin Expense>Workers Comp	7,753.00 19,589.00		0.00	19,589.00
85-881-00 Subtotal (1A1)	Employee Benefits Expense>Workers Comp Workmen's Compensation	100,671.00		0.00	100,671.00
Subtotal [1A1]	tronunon a companation	100,071.00			

Subgroup : [1A3]	Unemployment insurance				
85-156-62	Employee Benefits Expense>PR Taxes>SUI	69,979.00		0.00	69,979.00
85-156-63	Employee Benefits Expense>PR Taxes>FUI	18,273.00		0.00	18,273.00
Subtotal [1A3]	Unemployment Insurance	88,252.00		0.00	88,252.00
6					
Subgroup : [1A4] 61-880-00	Social Security (FICA) Nursing Admin Expense>Payroll Taxes	80,258.00		0.00	80,258.00
68-880-00	Therapy Expense>Payroll Taxes	4,024.00		0.00	4,024.00
69-880-00	Social Services Expense>Payroll Taxes	2,134.00		0.00	2,134.00
70-880-00	Dietary Expense>Payroll Taxes	11,245.00		0.00	11,245.00
71-880-00	Activity Expense>Payroll Taxes	1,799.00		0.00	1,799.00
74-880-00	Housekeeping & Laundry Expense>Payroll Taxes	10,877.00		0.00	10,877.00
75-880-00	Maintenance Expense>Payroll Taxes	2,033.00		0.00	2,033.00
80-880-00	Admin Expense>Payroll Taxes	11,886.00		0.00	11,886.00
85-156-61	Employee Benefits Expense>PR Taxes>Fica	318,130.00		0.00	318,130.00
Subtotal [1A4]	Social Security (FICA)	442,386.00		0.00	442,386.00
Subgroup : [1A5]	Health Insurance	04.075.00		0.00	34,975.00
61-882-00	Nursing Admin Expense>Health Insurance	34,975.00		0.00	1,855.00
68-882-00	Therapy Expense>Health Insurance Social Services Expense>Health Insurance	1,855.00 926.00		0.00	926.00
69-882-00 70-882-00	Dietary Expense>Health Insurance	4,917.00		0.00	4,917.00
71-882-00	Activity Expense>Health Insurance	784.00		0.00	784.00
74-882-00	Housekeeping & Laundry Expense>Health Insurance	4,749.00		0.00	4,749.00
75-882-00	Maintenance Expense>Health Insurance	886.00		0.00	886.00
80-882-00	Admin Expense>Health Insurance	5,193.00		0.00	5,193.00
85-260-79	Employee Benefits Expense>Welfare>Union	448,788.00		0.00	448,788.00
85-882-00	Employee Benefits Expense>Health Insurance	190,869.00		0.00	190,869.00
Marcum 116	Union Health & Welfare	0.00		158,331.00	158,331.00
			RJE - 11	158,331.00	
Subtotal [1A5]	Health Insurance	693,942.00		158,331.00	852,273.00
Subgroup : [1A7]	Pensions				4 47 750 00
85-255-79	Employee Benefits Expense>Pension>Union	147,753.00		0.00	147,753.00 52,727.00
Marcum 117	Union Pension	0.00	RJE - 11	52,727.00 52,727.00	52,727.00
Subtatal [1 A7]	Pensions	147,753.00	RJE - II	52,727.00	200,480.00
Subtotal [1A7]	FUISIONS				
Subgroup : [1A9]	Other				
61-883-00	Nursing Admin Expense>Other Benefits	140,273.00		(140,273.00)	0.00
			RJE - 11	(140,273.00)	
68-883-00	Therapy Expense>Other Benefits	8,122.00		(8,122.00)	0.00
			RJE - 11	(8,122.00)	
69-883-00	Social Services Expense>Other Benefits	3,696.00		(3,696.00)	0.00
			RJE - 11	(3,696.00)	
70-883-00	Dietary Expense>Other Benefits	19,791.00		(19,791.00)	0.00
			RJE - 11	(19,791.00)	
71-883-00	Activity Expense>Other Benefits	3,145.00		(3,145.00)	0.00
			RJE - 11	(3,145.00)	2.00
74-883-00	Housekeeping & Laundry Expense>Other Benefits	19,083.00		(19,083.00)	0.00
		0.550.00	RJE - 11	(19,083.00) (3,558.00)	0.00
75-883-00	Maintenance Expense>Other Benefits	3,558.00	RJE - 11	(3,558.00)	0.00
	Admin Functions Other Benefite	20,904.00	RJE • 11	(20,904.00)	0.00
80-883-00	Admin Expense>Other Benefits	20,504.00	RJE - 11	(20,904.00)	0.00
85-100-00	Employee Benefits Expense>Miscellaneous	527.00		0.00	527.00
85-200-79	Employee Benefits Expense>Training Fund>Union	16,513.00		4,281.00	20,794.00
00-200-70	Employee benefits Expenses framing range enter		RJE - 11	4,281.00	
85-204-00	Employee Benefits Expense> Training & Education	3,115.00		0.00	3,115.00
85-245-00	Employee Benefits Expense>Background Checks	0.00		493.00	493.00
			RJE - 11	493.00	
Marcum 118	Employee Relations	0.00		2,597.00	2,597.00
			RJE - 11	2,597.00	
Marcum 120	Misc. Employee Benefits	0.00		110.00	110.00
			RJE - 11	110.00	
Subtotal [1A9]	Other	238,727.00		(211,091.00)	27,636.00
Subgroup : [1C]	Bad Debts				
80-251-00	Admin Expense>Bad Debt	776,100.00		0.00	776,100.00
Subtotal [1C]	Bad Debts	776,100.00		0.00	776,100.00
Subgroup : [1D]	Accounting and Auditing				
80-239-00	Admin Expense>Accounting Fees	6,950.00		(4,750.00)	2,200.00

			RJE - 12	(4,750.00)	
Marcum 104	Accounting & Auditing Fees	0.00		13,100.00	13,100.00
Subtatal (4D)	Association and Auditing	6,950.00	RJE - 1 _	<u>13,100.00</u> 8,350.00	15,300.00
Subtotal [1D]	Accounting and Auditing	0,350.00	-	0,000.00	10,000.00
Subgroup : [1E]	Legal				
50-4100	Professional Fees	0.00		17,322.00	17,322.00
			RJE - 1	16,422.00	
			RJE - 8	900.00	
80-238-00	Admin Expense>Legal Fees	6,709.00	-	0.00	6,709.00
Subtotal [1E]	Legal	6,709.00	-	17,322.00	24,031.00
0.1					
Subgroup : [1G] 80-183-00	Office Supplies Admin Expense>Supplies	90,097.00		0.00	90,097.00
80-208-00	Admin Expense>Supplies	25,148.00		(6,742.00)	18,406.00
00 200 00			RJE - 2	(6,742.00)	• • •
Subtotal [1G]	Office Supplies	115,245.00	-	(6,742.00)	108,503.00
			-		
Subgroup : [1H1]	Telephone and Telegraph				
80-231-00	Admin Expense>Telephone	25,510.00		(3,129.00)	22,381.00
			RJE - 5	(3,129.00)	
Subtotal [1H1]	Telephone and Telegraph	25,510.00	-	(3,129.00)	22,381.00
C	Colluter Disease and Response				
Subgroup : [1H2] Marcum 113	Cellular Phones and Beepers Cell Phone	0.00		3,129.00	3,129.00
Marculli 113		0.00	RJE - 5	3,129.00	-,
Subtotal [1H2]	Cellular Phones and Beepers	0.00	-	3,129.00	3,129.00
·····	• • • • • •		-		
Subgroup : [1K2]	Other Taxes				
80-147-00	Admin Expense>Sales & Use Tax	754.00	-	0.00	754.00
Subtotal [1K2]	Other Taxes	754.00_	-	0.00	754.00
Subgroup : [1K3]	Resident Day User Fee	990,407.00		0.00	990,407.00
80-101-00 Subtotai [1K3]	Admin Expense>Provider Tax Resident Day User Fee	990,407.00	-	0.00	990,407.00
Subtotal [1K3]	Resident Day User i ee		-		
			-		B 050 000 00
Total [15]	Expenditures Other than Salaries	3,633,406.00	_	18,897.00	3,652,303.00
Total [15]	Expenditures Other than Salaries	3,633,406.00	-	18,897.00	3,652,303.00
Total [15] Group : [16]	Expenditures Other than Salaries Expenditures Other than Salaries (cont'd) - Admir		•	18,897.00	3,652,303.00
Group : [16]	Expenditures Other than Salaries (cont'd) - Admir	n. and General 802.00		0.00	802.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00	Expenditures Other than Salaries (cont'd) - Admir Employee Travel Nursing Expense>Transportation Admin Expense>Travel	n. and General 802.00 7,940.00	•	0.00 0.00	802.00 7,940.00
Group : [16] Subgroup : [4] 60-213-00	- Expenditures Other than Salaries (cont'd) - Admir Employee Travel Nursing Expense>Transportation	n. and General 802.00		0.00	802.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00 Subtotal [4]	Expenditures Other than Salaries (cont'd) - Admir Employee Travel Nursing Expense>Transportation Admin Expense>Travel Employee Travel	n. and General 802.00 7,940.00		0.00 0.00	802.00 7,940.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00 Subtotal [4] Subgroup : [5]	Expenditures Other than Salaries (cont'd) - Admin Employee Travel Nursing Expense>Transportation Admin Expense>Travel Employee Travel Education Expense	n. and General 802.00 7,940.00 8,742.00		0.00 0.00 0.00	802.00 7,940.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00 Subtotal [4] Subgroup : [6] 80-233-00	Expenditures Other than Salaries (cont'd) - Admin Employee Travel Nursing Expense>Transportation Admin Expense>Travel Employee Travel Education Expense Admin Expense>Seminars	n. and General 802.00 7,940.00		0.00 0.00	802.00 7,940.00 8,742.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00 Subtotal [4] Subgroup : [5]	Expenditures Other than Salaries (cont'd) - Admin Employee Travel Nursing Expense>Transportation Admin Expense>Travel Employee Travel Education Expense	n. and General 802.00 7,940.00 8,742.00 100.00		0.00 0.00 0.00 0.00	802.00 7,940.00 8,742.00 100.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00 Subtotal [4] Subgroup : [6] 80-233-00	Expenditures Other than Salaries (cont'd) - Admin Employee Travel Nursing Expense>Transportation Admin Expense>Travel Employee Travel Education Expense Admin Expense>Seminars	n. and General 802.00 7,940.00 8,742.00 100.00		0.00 0.00 0.00 0.00	802.00 7.940.00 8,742.00 100.00 100.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00 Subtotal [4] Subgroup : [5] 80-233-00 Subtotal [5]	Expenditures Other than Salaries (cont'd) - Admin Employee Travel Nursing Expense>Transportation Admin Expense>Travel Employee Travel Education Expense Admin Expense>Seminars Education Expense	n. and General 802.00 7,940.00 8,742.00 100.00 100.00 623.00		0.00 0.00 0.00 0.00 0.00	802.00 7,940.00 8,742.00 100.00 100.00 523.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00 Subtotal [4] Subgroup : [6] 80-233-00 Subtotal [5] Subgroup : [M1]	Expenditures Other than Salaries (cont'd) - Admin Employee Travel Nursing Expense>Transportation Admin Expense>Travel Employee Travel Education Expense Admin Expense>Seminars Education Expense Advertising Help Wanted	n. and General 802.00 7,940.00 8,742.00 100.00 100.00	-	0.00 0.00 0.00 0.00	802.00 7.940.00 8,742.00 100.00 100.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00 Subtotal [4] Subgroup : [6] 80-233-00 Subtotal [5] Subgroup : [M1] 80-249-00 Subtotal [M1]	Expenditures Other than Salaries (cont'd) - Admin Employee Travel Nursing Expense>Transportation Admin Expense>Travel Employee Travel Education Expense Admin Expense>Seminars Education Expense Advertising Help Wanted Admin Expense>Recruiting Advertising Help Wanted	n. and General 802.00 7,940.00 8,742.00 100.00 100.00 623.00		0.00 0.00 0.00 0.00 0.00	802.00 7,940.00 8,742.00 100.00 100.00 523.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00 Subtotal [4] Subgroup : [6] 80-233-00 Subtotal [5] Subgroup : [M1] 80-249-00 Subtotal [M1] Subgroup : [M3]	Expenditures Other than Salaries (cont'd) - Admin Employee Travel Nursing Expense>Transportation Admin Expense>Travel Employee Travel Education Expense Admin Expense>Seminars Education Expense Advertising Help Wanted Admin Expense>Recruiting Advertising Help Wanted Advertising Help Wanted	n. and General 802.00 7,940.00 8,742.00 100.00 100.00 523.00 523.00		0.00 0.00 0.00 0.00 0.00 0.00 0.00	802.00 7,940.00 8,742.00 100.00 100.00 523.00 523.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00 Subtotal [4] Subgroup : [6] 80-233-00 Subtotal [5] Subgroup : [M1] 80-249-00 Subtotal [M1] Subgroup : [M3] 80-250-00	Expenditures Other than Salaries (cont'd) - Admin Employee Travel Nursing Expense>Transportation Admin Expense>Travel Employee Travel Education Expense Admin Expense>Seminars Education Expense Advertising Help Wanted Admin Expense>Recruiting Advertising Help Wanted Advertising Other Admin Expense>Marketing & Advertising	n. and General 802.00 7,940.00 8,742.00 100.00 100.00 523.00 523.00 32,407.00	- - - - -	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	802.00 7,940.00 8,742.00 100.00 100.00 523.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00 Subtotal [4] Subgroup : [6] 80-233-00 Subtotal [5] Subgroup : [M1] 80-249-00 Subtotal [M1] Subgroup : [M3]	Expenditures Other than Salaries (cont'd) - Admin Employee Travel Nursing Expense>Transportation Admin Expense>Travel Employee Travel Education Expense Admin Expense>Seminars Education Expense Advertising Help Wanted Admin Expense>Recruiting Advertising Help Wanted Advertising Help Wanted	n. and General 802.00 7,940.00 8,742.00 100.00 100.00 523.00 523.00	-	0.00 0.00 0.00 0.00 0.00 0.00 0.00	802.00 7,940.00 8,742.00 100.00 100.00 523.00 523.00 32,407.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00 Subtotal [4] Subgroup : [6] 80-233-00 Subtotal [5] Subgroup : [M1] 80-249-00 Subtotal [M1] Subgroup : [M3] 80-250-00	Expenditures Other than Salaries (cont'd) - Admin Employee Travel Nursing Expense>Transportation Admin Expense>Travel Employee Travel Education Expense Admin Expense>Seminars Education Expense Advertising Help Wanted Admin Expense>Recruiting Advertising Help Wanted Advertising Other Admin Expense>Marketing & Advertising	n. and General 802.00 7,940.00 8,742.00 100.00 100.00 523.00 523.00 32,407.00		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	802.00 7,940.00 8,742.00 100.00 100.00 523.00 523.00 32,407.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00 Subtotal [4] Subgroup : [5] 80-233-00 Subtotal [5] Subgroup : [M1] 80-249-00 Subtotal [M1] Subgroup : [M3] 80-250-00 Subtotal [M3]	Expenditures Other than Salaries (cont'd) - Admin Employee Travel Nursing Expense>Transportation Admin Expense>Travel Employee Travel Education Expense Admin Expense>Seminars Education Expense Advertising Help Wanted Advertising Help Wanted Advertising Other Advertising Other	n. and General 802.00 7,940.00 8,742.00 100.00 100.00 523.00 523.00 32,407.00		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	802.00 7,940.00 8,742.00 100.00 523.00 523.00 32,407.00 32,407.00 520.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00 Subtotal [4] Subgroup : [6] 80-233-00 Subtotal [5] Subgroup : [M1] 80-249-00 Subtotal [M1] Subgroup : [M3] 80-250-00 Subtotal [M3] Subgroup : [M5]	Expenditures Other than Salaries (cont'd) - Admin Employee Travel Nursing Expense>Transportation Admin Expense>Travel Employee Travel Education Expense Admin Expense>Seminars Education Expense Advertising Help Wanted Advertising Help Wanted Advertising Other Advertising Other Advertising Other Medical Records	n. and General 802.00 7,940.00 8,742.00 100.00 100.00 523.00 523.00 32,407.00 32,407.00		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	802.00 7,940.00 8,742.00 100.00 100.00 523.00 523.00 32,407.00 32,407.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00 Subtotal [4] Subgroup : [6] 80-233-00 Subtotal [5] Subgroup : [M1] 80-249-00 Subtotal [M1] Subgroup : [M3] 80-250-00 Subtotal [M3] Subgroup : [M5] 51-818-00	Expenditures Other than Salaries (cont'd) - Admin Employee Travel Nursing Expense>Transportation Admin Expense>Travel Employee Travel Education Expense Admin Expense>Seminars Education Expense Advertising Help Wanted Admin Expense>Recruiting Advertising Help Wanted Advertising Other Admin Expense>Marketing & Advertising Advertising Other Medical Records Other Rev>Medical Records Medical Records	n. and General 802.00 7,940.00 8,742.00 100.00 100.00 523.00 523.00 32,407.00 32,407.00 520.00		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	802.00 7,940.00 8,742.00 100.00 523.00 523.00 32,407.00 32,407.00 520.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00 Subtotal [4] Subgroup : [6] 80-233-00 Subtotal [5] Subgroup : [M1] 80-249-00 Subtotal [M1] Subgroup : [M3] 80-250-00 Subtotal [M3] Subgroup : [M5] 51-818-00 Subtotal [M5] Subgroup : [M7]	Expenditures Other than Salaries (cont'd) - Admin Employee Travel Nursing Expense>Transportation Admin Expense>Travel Employee Travel Education Expense Admin Expense>Seminars Education Expense Advertising Help Wanted Advertising Help Wanted Advertising Other Advertising Other Advertising Other Medical Records Other Rev>Medical Records Medical Records	802.00 7,940.00 8,742.00 100.00 100.00 100.00 32,407.00 32,407.00 520.00		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	802.00 7,940.00 8,742.00 100.00 523.00 523.00 523.00 32,407.00 32,407.00 520.00 520.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00 Subtotal [4] Subgroup : [5] 80-233-00 Subtotal [5] Subgroup : [M1] 80-249-00 Subtotal [M1] Subgroup : [M3] 80-250-00 Subtotal [M3] Subgroup : [M5] 51-818-00 Subtotal [M5] Subgroup : [M7] 80-209-00	Expenditures Other than Salaries (cont'd) - Admin Employee Travel Nursing Expense>Transportation Admin Expense>Travel Employee Travel Education Expense Admin Expense>Seminars Education Expense Advertising Help Wanted Advertising Help Wanted Advertising Other Advertising Other Advertising Other Advertising Other Medical Records Other Rev>Medical Records Medical Records Postage Admin Expense>Postage	n. and General 802.00 7,940.00 8,742.00 100.00 100.00 100.00 523.00 523.00 32,407.00 32,407.00 520.00 520.00 520.00		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	802.00 7,940.00 8,742.00 100.00 523.00 523.00 523.00 32,407.00 32,407.00 520.00 520.00 520.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00 Subtotal [4] Subgroup : [6] 80-233-00 Subtotal [5] Subgroup : [M1] 80-249-00 Subtotal [M1] Subgroup : [M3] 80-250-00 Subtotal [M3] Subgroup : [M5] 51-818-00 Subtotal [M5] Subgroup : [M7]	Expenditures Other than Salaries (cont'd) - Admin Employee Travel Nursing Expense>Transportation Admin Expense>Travel Employee Travel Education Expense Admin Expense>Seminars Education Expense Advertising Help Wanted Advertising Help Wanted Advertising Other Advertising Other Advertising Other Medical Records Other Rev>Medical Records Medical Records	802.00 7,940.00 8,742.00 100.00 100.00 100.00 32,407.00 32,407.00 520.00		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	802.00 7,940.00 8,742.00 100.00 523.00 523.00 523.00 32,407.00 32,407.00 520.00 520.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00 Subtotal [4] Subgroup : [6] 80-233-00 Subtotal [5] Subgroup : [M1] 80-249-00 Subtotal [M1] Subgroup : [M3] 80-250-00 Subtotal [M3] Subgroup : [M5] 51-818-00 Subtotal [M5] Subgroup : [M7] 80-209-00 Subtotal [M7]	Expenditures Other than Salaries (cont'd) - Admin Employee Travel Nursing Expense>Transportation Admin Expense>Travel Employee Travel Education Expense Admin Expense>Seminars Education Expense Admin Expense>Seminars Education Expense Advertising Help Wanted Advertising Help Wanted Advertising Other Advertising Other Advertising Other Medical Records Other Rev>Medical Records Medical Records Postage Admin Expense>Postage Postage	n. and General 802.00 7,940.00 8,742.00 100.00 100.00 100.00 523.00 523.00 32,407.00 32,407.00 520.00 520.00 520.00	-	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	802.00 7,940.00 8,742.00 100.00 523.00 523.00 523.00 32,407.00 32,407.00 520.00 520.00 520.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00 Subtotal [4] Subgroup : [5] 80-233-00 Subtotal [5] Subgroup : [M1] 80-249-00 Subtotal [M1] Subgroup : [M3] 80-250-00 Subtotal [M3] Subgroup : [M5] 51-818-00 Subtotal [M5] Subgroup : [M7] 80-209-00	Expenditures Other than Salaries (cont'd) - Admin Employee Travel Nursing Expense>Transportation Admin Expense>Travel Employee Travel Education Expense Admin Expense>Seminars Education Expense Advertising Help Wanted Advertising Help Wanted Advertising Other Advertising Other Advertising Other Advertising Other Medical Records Other Rev>Medical Records Medical Records Postage Admin Expense>Postage	n. and General 802.00 7,940.00 8,742.00 100.00 100.00 100.00 523.00 523.00 32,407.00 32,407.00 520.00 520.00 520.00		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	802.00 7,940.00 8,742.00 100.00 523.00 523.00 523.00 32,407.00 32,407.00 520.00 520.00 520.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00 Subtotal [4] Subgroup : [6] 80-233-00 Subtotal [5] Subgroup : [M1] 80-249-00 Subtotal [M1] Subgroup : [M3] 80-250-00 Subtotal [M3] Subgroup : [M5] 51-818-00 Subtotal [M5] Subgroup : [M7] 80-209-00 Subtotal [M7] Subgroup : [M9]	Expenditures Other than Salaries (cont'd) - Admin Employee Travel Nursing Expense>Transportation Admin Expense>Travel Employee Travel Education Expense Admin Expense>Seminars Education Expense Advertising Help Wanted Admin Expense>Recruiting Advertising Other Admin Expense>Marketing & Advertising Advertising Other Medical Records Other Rev>Medical Records Medical Records Postage Admin Expense>Postage Postage Subscriptions	n. and General 802.00 7,940.00 8,742.00 100.00 100.00 100.00 523.00 523.00 32,407.00 32,407.00 520.00 520.00 520.00 5,873.00 5,873.00		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	802.00 7,940.00 8,742.00 100.00 523.00 523.00 32,407.00 32,407.00 520.00 520.00 520.00 5,873.00 5,873.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00 Subtotal [4] Subgroup : [6] 80-233-00 Subtotal [5] Subgroup : [M1] 80-249-00 Subtotal [M1] Subgroup : [M3] 80-250-00 Subtotal [M3] Subgroup : [M5] 51-818-00 Subtotal [M5] Subgroup : [M7] 80-209-00 Subtotal [M7] Subgroup : [M9] 80-235-00	Expenditures Other than Salaries (cont'd) - Admin Employee Travel Nursing Expense>Transportation Admin Expense>Travel Employee Travel Education Expense Admin Expense>Seminars Education Expense Advertising Help Wanted Admin Expense>Recruiting Advertising Other Admin Expense>Marketing & Advertising Advertising Other Medical Records Other Rev>Medical Records Medical Records Postage Admin Expense>Postage Postage Subscriptions Admin Expense>Dues & Subscriptions	n. and General 802.00 7,940.00 8,742.00 100.00 100.00 100.00 523.00 523.00 32,407.00 32,407.00 32,407.00 520.00 520.00 520.00 5,873.00 1,528.00		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	802.00 7,940.00 8,742.00 100.00 523.00 523.00 32,407.00 32,407.00 520.00 520.00 520.00 520.00 520.00 5,873.00 5,873.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00 Subtotal [4] Subgroup : [6] 80-233-00 Subtotal [5] Subgroup : [M1] 80-249-00 Subtotal [M1] Subgroup : [M3] 80-250-00 Subtotal [M3] Subgroup : [M5] 51-818-00 Subtotal [M5] Subgroup : [M7] 80-209-00 Subtotal [M7] Subgroup : [M9] 80-235-00 Subtotal [M9] Subgroup : [M11]	Expenditures Other than Salaries (cont'd) - Admin Employee Travel Nursing Expense>Transportation Admin Expense>Travel Employee Travel Education Expense Admin Expense>Seminars Education Expense Advertising Help Wanted Advertising Other Advertising Other Advertising Other Medical Records Other Rev>Medical Records Medical Records Other Rev>Medical Records Medical Records Postage Admin Expense>Postage Postage Subscriptions Admin Expense>Dues & Subscriptions Subscriptions	B02.00 7,940.00 8,742.00 8,742.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 523.00 523.00 523.00 520.00 520.00 520.00 5,873.00 1,528.00 1,528.00		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	802.00 7,940.00 8,742.00 100.00 100.00 523.00 523.00 32,407.00 32,407.00 520.00 520.00 520.00 528.00 1,528.00 1,528.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00 Subtotal [4] Subgroup : [6] 80-233-00 Subtotal [5] Subgroup : [M1] 80-249-00 Subtotal [M1] Subgroup : [M3] 80-250-00 Subtotal [M3] Subgroup : [M5] 51-818-00 Subtotal [M5] Subgroup : [M7] 80-209-00 Subtotal [M7] Subgroup : [M9] 80-235-00 Subtotal [M9] Subgroup : [M11] 80-210-00	Expenditures Other than Salaries (cont'd) - Admin Employee Travel Nursing Expense>Transportation Admin Expense>Travel Employee Travel Education Expense Admin Expense>Seminars Education Expense Admin Expense>Seminars Education Expense Advertising Help Wanted Advertising Help Wanted Advertising Help Wanted Advertising Help Wanted Advertising Other Advertising Other Advertising Other Advertising Other Advertising Other Medical Records Other Rev>Medical Records Medical Records Postage Admin Expense>Postage Postage Subscriptions Admin Expense>Dues & Subscriptions Subscriptions Services Provided by Contract Admin Expense>Internet	n. and General 802.00 7,940.00 8,742.00 100.00 100.00 100.00 523.00 523.00 523.00 523.00 523.00 520.00 520.00 520.00 5,873.00 1,528.00 1,528.00 1,528.00		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	802.00 7,940.00 8,742.00 100.00 100.00 523.00 523.00 32,407.00 32,407.00 32,407.00 520.00 520.00 520.00 528.00 1,528.00 1,528.00 1,528.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00 Subtotal [4] Subgroup : [6] 80-233-00 Subtotal [5] Subgroup : [M1] 80-249-00 Subtotal [M1] Subgroup : [M3] 80-250-00 Subtotal [M3] Subgroup : [M5] 51-818-00 Subtotal [M5] Subgroup : [M7] 80-209-00 Subtotal [M7] Subgroup : [M9] 80-235-00 Subtotal [M9] Subgroup : [M11]	Expenditures Other than Salaries (cont'd) - Admin Employee Travel Nursing Expense>Transportation Admin Expense>Travel Employee Travel Education Expense Admin Expense>Seminars Education Expense Advertising Help Wanted Advertising Other Advertising Other Advertising Other Medical Records Other Rev>Medical Records Medical Records Other Rev>Medical Records Medical Records Postage Admin Expense>Postage Postage Subscriptions Admin Expense>Dues & Subscriptions Subscriptions	B02.00 7,940.00 8,742.00 8,742.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 100.00 523.00 523.00 523.00 520.00 520.00 520.00 5,873.00 1,528.00 1,528.00	- - - - - - - - - - - - - - - - - - -	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	802.00 7,940.00 8,742.00 100.00 100.00 523.00 523.00 32,407.00 32,407.00 520.00 520.00 520.00 528.00 1,528.00 1,528.00
Group : [16] Subgroup : [4] 60-213-00 80-236-00 Subtotal [4] Subgroup : [6] 80-233-00 Subtotal [5] Subgroup : [M1] 80-249-00 Subtotal [M1] Subgroup : [M3] 80-250-00 Subtotal [M3] Subgroup : [M5] 51-818-00 Subtotal [M5] Subgroup : [M7] 80-209-00 Subtotal [M7] Subgroup : [M9] 80-235-00 Subtotal [M9] Subgroup : [M11] 80-210-00	Expenditures Other than Salaries (cont'd) - Admin Employee Travel Nursing Expense>Transportation Admin Expense>Travel Employee Travel Education Expense Admin Expense>Seminars Education Expense Admin Expense>Seminars Education Expense Advertising Help Wanted Advertising Help Wanted Advertising Help Wanted Advertising Help Wanted Advertising Other Advertising Other Advertising Other Advertising Other Advertising Other Medical Records Other Rev>Medical Records Medical Records Postage Admin Expense>Postage Postage Subscriptions Admin Expense>Dues & Subscriptions Subscriptions Services Provided by Contract Admin Expense>Internet	n. and General 802.00 7,940.00 8,742.00 100.00 100.00 100.00 523.00 523.00 523.00 523.00 523.00 520.00 520.00 520.00 5,873.00 1,528.00 1,528.00 1,528.00	- - - - - - - - - - - - - - - - - - -	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	802.00 7,940.00 8,742.00 100.00 523.00 523.00 32,407.00 32,407.00 520.00 520.00 520.00 5,873.00 1,528.00 1,528.00 1,528.00

			RJE - 1	(30,122.00)	
			RJE - 8	69,500.00	
			RJE - 12	(100,978.00)	
80-700-00	Admin Expense>Contracted Service	22,551.00		0.00	22,551.00
Subtotal [M11]	Services Provided by Contract	174,628.00		(56,541.00)	118,087.00
-					
Subgroup : [M12]	Administrative Management Services				
80-279-00	Admin Expense>Management Fee	284,478.00		133,028.00	417,506.00
Subtatal [M42]	Administrativa Managament Canvisan	284,478.00	RJE - 12	<u>133,028.00</u> 133,028.00	417,506.00
Subtotal [M12]	Administrative Management Services	204,470.00		133,020.00	417,500.00
Subgroup : [M13]	Other				
80-234-00	Admin Expense>Licenses	1,873.00		0.00	1,873.00
80-242-00	Admin Expense>Fines and Penalties	2,427.00		0.00	2,427.00
80-243-00	Admin Expense>Late Fees	4,094.00		0.00	4,094.00
80-244-00	Admin Expense>Bank Fees	11,246.00		(5,059.00)	6,187.00
	•		RJE - 4	(5,059.00)	
Marcum 114	ACH Fees	0.00		95,282.00	95,282.00
			RJE - 3	95,282.00	
Marcum 119	Employee Food	0.00		33.00	33.00
			RJE - 11	33.00	
Subtotal [M13]	Other	19,640.00		90,256.00	109,896.00
Total [16]	Expenditures Other than Salaries (cont'd) - Admin. an	528,439.00		166,743.00	695,182.00
C	Distant Basis for All-setting of Costs				
Group : [18] Subgroup : [241]	Dietary Basis for Allocation of Costs Raw Food				
Subgroup : [2A1]		7,971.00		0.00	7,971.00
70-177-00 70-178-00	Dietary Expense>Supplements			0.00	84,310.00
	Dietary Expense>Food	84,310.00		0.00	92,281.00
Subtotal [2A1]	Raw Food	92,281.00		0.00	82,201.00
Subgroup : [2A2]	Non-Food Supplies				
70-183-00	Dietary Expense>Supplies	18,916.00		0.00	18,916.00
Subtotal [2A2]	Non-Food Supplies	18,916.00		0.00	18,916.00
•••••		· · · · · · · · · · · · · · · · · · ·			
Subgroup : [2B]	Purchased Services				
70-700-00	Dietary Expense>Contracted Service	129,293.00		0.00	129,293.00
Subtotal [2B]	Purchased Services	129,293.00		0.00	129,293.00
Total [18]	Dietary Basis for Allocation of Costs	240,490.00		0.00	240,490.00
Crown + [20]	Housekeeping and Resident Care Basis for Allocation of	of Costs			
Group : [20] Subgroup : [4A1]	In-House Care Supplies				
72-183-00	Housekeeping Expense>Supplies	45,003.00		0.00	45,003.00
Subtotal [4A1]	In-House Care Supplies	45,003.00		0.00	45,003.00
Suprotal [4A1]		40,000.00			
Subgroup : [5B]	Medicine Cabinet Drugs				
62-222-00	Pharmacy Expense>OTC	943.00		0.00	943.00
Subtotal [5B]	– Medicine Cabinet Drugs	943.00		0.00	943.00
Subgroup : [5C]	Medical and Therapeutic Supplies				
60-183-00	Nursing Expense>Supplies	161,931.00		0.00	161,931.00
60-184-00	Nursing Expense>Minor Equip & Supplies	19,740.00		0.00	19,740.00
60-208-00	Nursing Expense>Equip-Rental	22,373.00		0.00	22,373.00
Subtotal [5C]	Medical and Therapeutic Supplies	204,044.00		0.00	204,044.00
Subaraun (IEE2)	Ovursen Other				
Subgroup : [5E2] 64-223-00	Oxygen - Other Other Ancillary Expense>Oxygen	3,748.00		0.00	3,748.00
Subtotal [5E2]	Oxygen - Other	3,748.00		0.00	3,748.00
Subtotal [SE2]		3,140.00			
Subgroup : [5F]	X-Rays and related radiological				
64-225-00	Other Ancillary Expense>Radiology	(9,682.00)		0.00	(9,682.00)
Subtotal [5F]	X-Rays and related radiological	(9,682.00)		0.00	(9,682.00)
Subgroup : [5H]	Laboratory				0 000 00
64-224-00	Other Ancillary Expense>Lab	6,900.00		0.00	6,900.00
Subtotal [5H]	Laboratory	6,900.00		0.00	6,900.00
Subgroup - FER	Recreation				
Subgroup : [5l] 71-178-00	Recreation Activity Expense>Food	8.00		0.00	8.00
71-183-00	Activity Expense>Supplies	12,309.00		0.00	12,309.00
71-700-00	Activity Expense-Supplies Activity Expense-Contracted Service	957.00		0.00	957.00
80-232-00	Admin Expense>Cable TV	2,071.00		0.00	2,071.00
	Admin Expenses Gable 14	2,071,00		0.00	2,00.00

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Subtotal [51]	Recreation	15,345.00		0.00	15,345.00
Subgroup : [5J]	Other	600.00		0.00	600.00
60-185-00 Subtotal [5J]	Nursing Expense>Incontinence Supplies Other	600.00		0.00	600.00
Suprorai [55]	Oular	000.00			
Subgroup : [5A2]	Purchased From				05.00
62-000-00	Pharmacy Expense	25.00 150,115.00		0.00 0.00	25.00 150,115.00
62-145-00 Subtotal [5A2]	Pharmacy Expense>RX Purchased From	150,140.00		0.00	150,140.00
Oubiolai [on1]					
Total [20]	Housekeeping and Resident Care Basis for Allocation	n 417,041.00		0.00	417,041.00
Group : [22]	Maintenance and Property				
Subgroup : [6A]	Repairs and Maintenance				
75-207-00	Maintenance Expense>Repairs & Maint	55,478.00		0.00	55,478.00
Subtotal [6A]	Repairs and Maintenance	55,478.00		0.00	55,478.00
Subgroup : [6B]	Heat				
76-227-00	Utility Expense>Gas	31,635.00		0.00	31,635.00
Subtotal [6B]	Heat	31,635.00		0.00	31,635.00
Subgroup : [6C]	Light & Power	427 050 00		0.00	137,059.00
76-228-00	Utility Expense>Electric Light & Power	<u>137,059.00</u> 137,059.00		0.00	137,059.00
Subtotal [6C]					
Subgroup : [6D]	Water				
76-229-00	Utility Expense>Water/Sewer	19,252.00		0.00	<u>19,252.00</u> 19,252.00
Subtotal [6D]	Water	19,252.00		0.00	19,202.00
Subgroup : [6E]	Equipment Lease				
Marcum 115	Leased Equipment	0.00		6,742.00	6,742.00
	Equipment Loope	0.00	RJE - 2	<u>6,742.00</u> 6,742.00	6,742.00
Subtotal [6E]	Equipment Lease	0.00		0,142.00	
Subgroup : [6F]	Other				
75-183-00	Maintenance Expense>Supplies	3,631.00		0.00	3,631.00
75-205-00	Maintenance Expense>Sanitation & Incineration	7,112.00 319.00		0.00 0.00	7,112.00 319.00
75-217-00 75-219-00	Maintenance Expense>Extermination Maintenance Expense>Landscaping	3,412.00		0.00	3,412.00
75-220-00	Maintenance Expense>Fire Drill	1,068.00		0.00	1,068.00
75-700-00	Maintenance Expense>Contracted Service	52,632.00		(27,300.00)	25,332.00
			RJE - 12	(27,300.00)	
Subtotal [6F]	Other	68,174.00		(27,300.00)	40,874.00
Subgroup : [7D]	Movable Equipment				
92-000-00	Depreciation Expense	429,687.00		0.00	429,687.00
Subtotal [7D]	Movable Equipment	429,687.00		0.00	429,687.00
O h	Rental Payments				
Subgroup : [9] 91-121-00	Property Expense>Rent	487,203.00		0.00	487,203.00
Subtotal [9]	Rental Payments	487,203.00		0.00	487,203.00
Subgroup : [10B]	Real estate taxes paid by lessor	71,443.00		0.00	71,443.00
91-161-00 Subtotal [10B]	Property Expense>RE Taxes Real estate taxes paid by lessor	71,443.00		0.00	71,443.00
Subtotal [100]					
Subgroup : [10C]	Personal property taxes	6 500 00		0.00	6,522.00
91-261-00	Property Expense>Personal Prop Taxes Personal property taxes	<u>6,522.00</u> 6,522.00		0.00	6,522.00
Subtotal [10C]	reisonal property taxes				
Total [22]	Maintenance and Property	1,306,453.00		(20,558.00)	1,285,895.00
Group : [27]	Interest and Insurance				
Subgroup : [12D]	Other Interest Expense				
94-000-00	Interest Expense	136,275.00		0.00	136,275.00
Subtotal [12D]	Other Interest Expense	136,275.00		0.00	136,275.00
Subgroup : [14A]	Insurance on Property				
80-162-00	Admin Expense>Insurance - General Liability & Other	204,387.00		(95,282.00)	109,105.00
			RJE - 3	(95,282.00)	109,105.00
Subtotal [14A]	Insurance on Property	204,387.00		(95,282.00)	

7-4-1 (07)		240 602 00	(05 292 00)	246 280 00
Total [27]	Interest and Insurance	340,662.00	(95,282.00)	245,380.00
Group : [30]	Statement of Revenue			
Subgroup : [1A]	Medicaid Residents (CT only)			
40-111-00	Room & Board Revenue>Medicaid	(7,201,950.00)	0.00	(7,201,950.00)
Subtotal [1A]	Medicald Residents (CT only)	(7,201,950.00)	0.00	(7,201,950.00)
Subgroup : [3A]	Medicare Residents (All inclusive)			
40-102-00	Room & Board Revenue>Medicare A	(2,179,880.00)	0.00	(2,179,880.00)
40-102-14	Room & Board Revenue>Medicare A>Sequester Medicare Residents (All inclusive)	25,058.00	0.00	<u>25,058.00</u> (2,154,822.00)
Subtotal [3A]	Medicare Residents (All Inclusive)	(2,154,822.00)	0.00	(2,104,022.00)
Subgroup : [4A]	Private-pay residents and other		• •	(1 017 100 00)
40-104-00	Room & Board Revenue>Private	(1,017,120.00)	0.00	(1,017,120.00) (450,518.00)
40-105-00 40-105-14	Room & Board Revenue>HMO Room & Board Revenue>HMO>Sequester	(450,518.00) 5,483.00	0.00 0.00	(450,518.00) 5,483.00
40-109-00	Room & Board Revenue>Hospice	(242,297.00)	0.00	(242,297.00)
Subtotal [4A]	Private-pay residents and other	(1,704,452.00)	0.00	(1,704,452.00)
Subgroup : [5A] 41-102-00	Prescription Drugs - Medicare Pharmacy Rev>Medicare A	(144,603.00)	0.00	(144,603.00)
Subtotal [5A]	Prescription Drugs - Medicare	(144,603.00)	0.00	(144,603.00)
onprover [07]		(14)00000/		
Subgroup : [5B]	Prescription Drugs - Medicare Contractual Allowance		0.00	31 391 00
41-102-01	Pharmacy Rev>Medicare A>C/A Propagation Datase, Medicare Contractual Allowance	31,391.00	0.00	<u> </u>
Subtotal [5B]	Prescription Drugs - Medicare Contractual Allowance	31,391.00		
Subgroup : [5C]	Prescription Drugs - Non-medicare			
41-114-00	Pharmacy Revenue>Other Payor	(16,063.00)	0.00	(16,063.00)
Subtotal [5C]	Prescription Drugs - Non-medicare	(16,063.00)	0.00	(16,063.00)
Subgroup : [7A]	Physical Therapy - Medicare			
42-102-00	PT Revenue>Medicare A	(394,018.00)	0.00	(394,018.00)
42-103-00	PT Revenue>Medicare B	(108,723.00)	0.00	(108,723.00)
Subtotal [7A]	Physical Therapy - Medicare	(502,741.00)	0.00	(502,741.00)
Subgroup : [7B]	Physical Therapy - Medicare Contractual Allowance			
42-102-01	PT Revenue>Medicare A>C/A	595,824.00	0.00	595,824.00
Subtotal [7B]	Physical Therapy - Medicare Contractual Allowance	595,824.00	0.00	595,824.00
Subgroup : [7C]	Physical Therapy - Non-medicare			
42-105-00	PT Revenue>HMO	(45,152.00)	0.00	(45,152.00)
42-111-00	PT Revenue>Medicaid	(111,372.00)	0.00	(111,372.00)
Subtotal [7C]	Physical Therapy - Non-medicare	(156,524.00)	0.00	(156,524.00)
Subgroup : [7D]	Physical Therapy - Non-medicare Contractual Allowa	nce		
42-111-01	PT Revenue>Medicaid>C/A	23,904.00	0.00	23,904.00
Subtotal [7D]	Physical Therapy - Non-medicare Contractual Allowa	23,904.00	0.00	23,904.00
Subgroup : [8A]	Speech Therapy - Medicare			
44-102-00	ST Revenue>Medicare A	(183,334.00)	0.00	(183,334.00)
44-103-00	ST Revenue>Medicare B	88,378.00	0.00	88,378.00
Subtotal [8A]	Speech Therapy - Medicare	(94,956.00)	0.00	(94,956.00)
Subgroup : [8B]	Speech Therapy - Medicare Contractual Allowance			
44-102-01	ST Revenue>Medicare A>C/A		0.00	39,639.00
Subtotal [8B]	Speech Therapy - Medicare Contractual Allowance	39,639.00	0.00	39,639.00
Subgroup : [8C]	Speech Therapy - Non-medicare			
44-105-00	ST Revenue>HMO	(14,039.00)	0.00	(14,039.00)
44-111-00	ST Revenue>Medicaid	(54,532.00)	0.00	(54,532.00)
Subtotal [8C]	Speech Therapy - Non-medicare	(68,571.00)	0.00	(68,571.00)
Subgroup : [8D]	Speech Therapy - Non-medicare Contractual Allowan	ce		
44-111-01	ST Revenue>Medicaid>C/A	6,827.00	0.00	6,827.00
Subtotal [8D]	Speech Therapy - Non-medicare Contractual Allowan	6,827.00	0.00	6,827.00
Subgroup : [9A]	Occupational Therapy - Medicare			
43-102-00	Of Revenue>Medicare A	(381,368.00)	0.00	(381,368.00)
43-103-00	OT Revenue>Medicare B	(95,226.00)	0.00	(95,226.00)
Subtotal [9A]	Occupational Therapy - Medicare	(476,594.00)	0.00	(476,594.00)
-				

Subgroup : [9B] Occupational Therapy - Medicare Contractual Allowance

43-102-01	OT Revenue>Medicare A>C/A	435,850.00	0.00	435,850.00
Subtotal [9B]	Occupational Therapy - Medicare Contractual Allowa	r435,850.00	0.00	435,850.00
Subgroup : [9C]	Occupational Therapy - Non-medicare			
43-105-00	OT Revenue>HMO	(42,854.00)	0.00	(42,854.00)
43-111-00	OT Revenue>Medicaid	(86,883.00)	0.00	(86,883.00)
Subtotal [9C]	Occupational Therapy - Non-medicare	(129,737.00)	0.00	(129,737.00)
Subgroup : [9D]	Occupational Therapy - Non-medicare Contractual Al	lowance		
43-111-01	OT Revenue>Medicaid>C/A	13,778.00	0.00	13,778.00
Subtotal [9D]	Occupational Therapy - Non-medicare Contractual Al	13,778.00	0.00	13,778.00
Subgroup : [10A]	Other - Medicare			
46-102-00	Lab Revenue>Med A	(1,932.00)	0.00	(1,932.00)
Subtotal [10A]	Other - Medicare	(1,932.00)	0.00	(1,932.00)
		i		<u> </u>
Subgroup : [10B]	Other - Non-medicare			
46-114-00	Lab Revenue>Other Payor	(1,357.00)	0.00	(1,357.00)
52-109-00	Revenue Adjustments>Hospice	(751.00)	0.00	(751.00)
52-111-00	Revenue Adjustments>Medicaid	(9,975.00)	0.00	(9,975.00)
52-114-00	Revenue Adjustments>Other Payor	(2,523.00)	0.00	(2,523.00)
Subtotal [10B]	Other - Non-medicare	(14,606.00)	0.00	(14,606.00)
00010101 [100]		(14,000.00)		(14,000.00)
Subgroup : [11]	Meals sold to guests, employees, and others			
51-178-00	Other Rev>Food	(1 646 00)	0.00	(1,646.00)
		(1,646.00)		
Subtotal [11]	Meals sold to guests, employees, and others	(1,646.00)	0.00	(1,646.00)
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Subgroup : [15]	Interest Income			
51-160-00	Other Rev>Interest	(29.00)	0.00	(29.00)
Subtotal [15]	Interest Income	(29.00)	0.00	(29.00)
Subgroup : [18]	Other Revenue			
51-100-00	Other Revenue>Misc	(25,879.00)	0.00	(25,879.00)
Subtotal [18]	Other Revenue	(25,879.00)	0.00	(25,879.00)
			<u> </u>	
Total [30]	Statement of Revenue	(11,547,892.00)	0.00	(11,547,892.00)
Group : [31-32]	Assets			
Subgroup : [A1]	Cash			
10-010-85	Cash>Operating>Southport	360,185.00	0.00	360,185.00
10-012-85	Cash>Operating2>Southport	232,752.00	0.00	232,752.00
10-014-00	Cash>Petty Cash Facility	865.00	0.00	865.00
10-060-85	Cash>Resident Trust>Southport	29,686.00	0.00	29,686.00
Subtotal [A1]	Cash	623,488.00	0.00	623,488.00
			· · · · · · · · · · · · · · · · · · ·	
Subgroup : [A2]	Resident A/R			
11-001-00	Accounts Receivable>Clearing	(60.00)	0.00	(60.00)
11-100-00	Accounts Receivable>Miscellaneous	13,070.00	0.00	13,070.00
11-102-00	Accounts Receivable>Medicare A	169,143.00	0.00	169,143.00
11-102-70	Accounts Receivable>Medicare A>Old A/R	3,580.00	0.00	3,580.00
	Accounts Receivable>Private	440,404,00	0.00	118,481.00
11-104-00 11-104-50	Accounts Receivable>Private>Litigation	118,481.00 267,860.00	0.00	267,860.00
11-104-70	Accounts Receivable>Private>Old A/R	995,854.00	0.00	995,854.00
			0.00	
11-105-00	Accounts Receivable>HMO Accounts Receivable>HMO>Old A/R	124,005.00 657,116.00	0.00	124,005.00 657,116.00
11-105-70				
11-109-00	Accounts Receivable>Hospice	28,546.00	0.00	28,546.00
11-109-70	Accounts Receivable>Hospice>Old A/R	15,640.00	0.00	15,640.00
11-111-00	Accounts Receivable>Medicaid	951,158.00	0.00	951,158.00
11-111-70	Accounts Receivable>Medicaid>Old A/R	256,372.00	0.00	256,372.00
11-111-93	Accounts Receivable>Medicaid>Rate Adjustment	9,858.00	0.00	9,858.00
11-112-00	Accounts Receivable>Income	23,894.00	0.00	23,894.00
11-112-70	Accounts Receivable>Income>Old A/R	(21,536.00)	0.00	(21,536.00)
			0.00	11,140.00
11-113-70	Accounts Receivable>Out of State Medicaid>Old A/R	11,140.00		
11-120-00	Accounts Receivable>Out of State Medicaid>Old A/R Accounts Receivable>Allow for Doubtful Accts	11,140.00 (1,525,259.00)	0.00	(1,525,259.00)
11-120-00 11-123-00	Accounts Receivable>Out of State Medicaid>Old A/R Accounts Receivable>Allow for Doubtful Accts Accounts Receivable>Ancillary	(1,525,259.00) 32,845.00	0.00	32,845.00
11-120-00	Accounts Receivable>Out of State Medicaid>Old A/R Accounts Receivable>Allow for Doubtful Accts	(1,525,259.00)	0.00	
11-120-00 11-123-00	Accounts Receivable>Out of State Medicaid>Old A/R Accounts Receivable>Allow for Doubtful Accts Accounts Receivable>Ancillary	(1,525,259.00) 32,845.00	0.00	32,845.00
11-120-00 11-123-00	Accounts Receivable>Out of State Medicaid>Old A/R Accounts Receivable>Allow for Doubtful Accts Accounts Receivable>Ancillary	(1,525,259.00) 32,845.00	0.00	32,845.00
11-120-00 11-123-00 Subtotal [A2]	Accounts Receivable>Out of State Medicaid>Old A/R Accounts Receivable>Allow for Doubtful Accts Accounts Receivable>Ancillary Resident A/R	(1,525,259.00) 32,845.00	0.00	32,845.00
11-120-00 11-123-00 Subtotal [A2] Subgroup : [A5]	Accounts Receivable>Out of State Medicaid>Old A/R Accounts Receivable>Allow for Doubtful Accts Accounts Receivable>Ancillary Resident A/R Prepaid Expenses	(1,525,259.00) 32,845.00 2,131,707.00	0.00	32,845.00 2,131,707.00
11-120-00 11-123-00 Subtotal [A2] Subgroup : [A5] 12-000-00	Accounts Receivable>Out of State Medicaid>Old A/R Accounts Receivable>Allow for Doubtful Accts Accounts Receivable>Ancillary Resident A/R Prepaid Expenses Prepaid Expenses	(1,525,259.00) 32,845.00 2,131,707.00 47,388.00	0.00 0.00 0.00	32,845.00 2,131,707.00 47,388.00

Subgroup : [B4] Leasehold Improvements

14:13-00 Field Assess-Lassing disponentinin 34 705.00 0.00 54 705.00 Sabdau [RP] Lessing disponentini improvementini 33 557.00 0.00 12 54 705.00 Sabdau [RP] Lessing disponenti improvementini 14 1050.00 0.00 12 552.00 14:13-00 Field Assest-Medical Equipmenti 14 1050.00 0.00 15 000.00 14:13-00 Field Assest-Medical Equipmenti 14 1050.00 0.00 15 000.00 14:13-00 Field Assest-Medical Equipmenti 12 10 500.00 0.00 10 000.00 15:13-00 Accura Describational Equipmenti 12 10 500.00 0.00 12 10 500.00 15:13-00 Accura Describational Equipmenti 12 12 555.00 0.00 12 70 00.00 Subtrall [RP] Other Field Assests 5.500.00 5.200.00 5.200.00 Subtrall [RP] Other Field Assests 5.500.00 0.00 1.720.00 Subtrall [RP] Defrond Depositis 5.778.00 0.00 1.728.00 Subtrall [RP] Defrond Depositis 5.778.00 0.00 1.728.00	14 121 00				
Subticit [P] Lessbold improvements 33.552.00 0.00 33.552.00 Subgroup (FB) Morable Suppress 141.000 0.00 141.000.00 141.320.0 Find Assets*Methal Expirate 111.000.00 0.00 141.000.00 141.320.0 Find Assets*Methal Expirate 111.000.00 0.00 100.00 141.320.0 Acoun Deprof.Methal Expirate 0.00 100.00 (02.400.00) 151.320.0 Acoun Deprof.Methal Expirate 0.200.00 (02.000) 0.00 (02.400.00) 151.320.0 Acoun Deprof.Methal Expirate 0.200.00 0.00 122.446.00 151.320.0 Date Find Assets 0.00 0.200.00 0.200.00 Subclus [P] Date Find Assets 0.00 0.272.00 0.00 1.728.00 Subclus [P] Date Find Assets 0.272.00 0.00 1.728.00 0.00 1.728.00 Subclus [P] Date Find Assets 0.00 1.728.00 0.00 1.728.00 Subclus [P] Date Find Assets 0.272.00 0.00 1.728.00 <td>14-131-00</td> <td>Fixed Assets>Leasehold Improvements</td> <td>34,706.00</td> <td>0.00</td> <td>34,706.00</td>	14-131-00	Fixed Assets>Leasehold Improvements	34,706.00	0.00	34,706.00
Staturger: Description: Description: 11 1413:00 Fired Assets-Fundion: Fired Assets-Fundion: <td< td=""><td>15-131-00</td><td>Accum Depn>Leasehold Improvements</td><td>(754.00)</td><td>0.00</td><td>(754.00)</td></td<>	15-131-00	Accum Depn>Leasehold Improvements	(754.00)	0.00	(754.00)
Subgroup: 19 Movable Equipment 141360 Color 141360 1413200 Filed Asself-Familius, Filtures and Equipment 14108100 Color	Subtotal [B4]	Leasehold Improvements	33,952.00	0.00	33,952.00
1+12:00 Face Assets-Function: Finders and Caupment 1416860 0.00 1410860 1+13:00 Face Assets-Function: Finders and Caupment 150550 0.00 100550 1+13:00 Face Assets-Compare Hindows 516.00 0.00 100550 1+13:00 Face Assets-Compare Hindows 0.100 0.00 100550 1+13:00 Accom DeproCompare Hindows 0.120,4450 0.00 100500 1+13:00 Face Assets Construction Progress 0.200,00 0.00 0.000 0.000 1+13:00 Deferred Deposits 0.720,00 0.00 0.000 0.720,00 Subprova: IDI Deferred Deposits 0.720,00 0.00 0.720,00 0.00 0.720,00 Subprova: IDI Deferred Deposits 0.720,00 0.00 1.728,00 0.00 1.728,00 Subprova: IDI Deferred Deposits 0.720,00 0.00 1.414,316,00 1.414,316,00 1.414,316,00 Subprova: IDI Deferred Deposits 1.728,00 0.00 1.414,316,00 1.414,316,00 1.414,316,00		F			· · · · · ·
1+12:00 Face Assets-Function: Finders and Caupment 1416860 0.00 1410860 1+13:00 Face Assets-Function: Finders and Caupment 150550 0.00 100550 1+13:00 Face Assets-Compare Hindows 516.00 0.00 100550 1+13:00 Face Assets-Compare Hindows 0.100 0.00 100550 1+13:00 Accom DeproCompare Hindows 0.120,4450 0.00 100500 1+13:00 Face Assets Construction Progress 0.200,00 0.00 0.000 0.000 1+13:00 Deferred Deposits 0.720,00 0.00 0.000 0.720,00 Subprova: IDI Deferred Deposits 0.720,00 0.00 0.720,00 0.00 0.720,00 Subprova: IDI Deferred Deposits 0.720,00 0.00 1.728,00 0.00 1.728,00 Subprova: IDI Deferred Deposits 0.720,00 0.00 1.414,316,00 1.414,316,00 1.414,316,00 Subprova: IDI Deferred Deposits 1.728,00 0.00 1.414,316,00 1.414,316,00 1.414,316,00	Subgroup : [B6]	Novable Equipment			
1:13:00 Fues Asset: Overlaw Hardware 19:05:00 0.00 19:05:00 1:13:20 Accum Diger-Markue Fluiterer and Equipment 05:00 0.00 00:00 (8:440:00) 1:51:20 Accum Diger-Markue Fluiterer and Equipment 07:27:00 0.00 (8:440:00) 0.00 (8:440:00) 1:51:20 Accum Diger-Markue Equipment 07:27:00 0.00 (17:00) 0.00			1.44.059.00	0.00	141.069.00
1:13:200 First Asses-Computer Teachers 9500 0.00 9500 1:3:200 Accom Deprivations, Finaus end Capternin, (22100) 0.00 (22100) 1:3:3:00 Accom Deprivations, Finaus end Capternin, (22100) 0.00 (2120) 3:3:00 Accom Deprivations, Finaus end Capternin, (22100) 0.00 (2120) 3:0:00 Other Finad Asset 0.00 0.00 (2200) 3:0:00 Other Finad Asset 0.00 0.00 0.000 0.000 Subgroup; [D1] Defored Deposit 0.722.00 0.00 0.722.00 0.00 0.722.00 Subgroup; [D1] Defored Deposit 0.722.00 0.00 0.722.00 0.00 1.728.00 Subgroup; [D1] Defored Deposit 0.722.00 0.00 1.728.00 0.00 1.728.00 Subtro [D1] Defored Deposit 1.728.00 0.00 1.728.00 0.00 1.728.00 Subtro [D1] Defored Deposit 1.728.00 0.00 1.728.00 0.00 1.728.00 Subtro [D1] Deactor Order of Related P			,		
1:1:1:2:00 Accom Deproferious, Faure and Equipment (12:00) 0.00 (12:2:00) 1:1:1:1:1:1:1:1:1:1:1:1:1:1:1:1:1:1:1:					
1:5:300 Acom Deproveding Expression (227.00) 0.00 (227.00) Stabiol Morable Equipment (22.00) 0.00 (70.00) Subbral (B) Morable Equipment (22.850.00) 0.00 (70.00) Subprave : [B4] Other Fixed Assets 0.200.00 0.200.00 0.200.00 Subprave : [B4] Other Fixed Assets 0.200.00 0.200.00 0.200.00 Subprave : [B4] Other Fixed Assets 0.200.00 0.200.00 0.200.00 Subprave : [B4] Deferred Appoints 0.2702.00 0.00 0.2782.00 Subprave : [D4] Deferred Appoints 0.7282.00 0.00 0.7282.00 Subprave : [D4] Godwill 1.414.318.00 0.00 1.748.00 Subprave : [D4] Godwill 1.414.318.00 0.00 1.444.318.00 Subprave : [D4] Godwill 1.414.318.00 0.00 1.444.318.00 Subprave : [D4] Godwill 1.414.318.00 0.00 1.444.318.00 Subprave : [D4] Godwill 1.444.318.00 0.00 </td <td>14-134-00</td> <td>Fixed Assets>Computer Hardware</td> <td></td> <td></td> <td></td>	14-134-00	Fixed Assets>Computer Hardware			
Stabio Accur DeproComputer Horizane (17.00) 0.00 (17.00) Subproto : [97] Other Fised Assets 5.0000 0.00 6.20000 Subproto : [97] Other Fised Assets 6.20000 0.00 6.20000 Subproto : [97] Deterrind Assets 6.20000 0.00 6.20000 Subproto : [97] Deterrind Assets 6.20000 0.00 6.720.00 Subproto : [97] Deterred Oeposits 0.792.00 0.00 6.729.00 Subproto : [97] Deterred Oeposits 1.799.00 0.00 1.799.00 Subproto : [97] Cencer Objectis 1.799.00 0.00 1.799.00 Subproto : [97] General Tecrew Disposits 1.799.00 0.00 1.799.00 Subproto : [97] General Tecrew Disposits 1.799.00 0.00 1.799.00 Subproto : [97] General Tecrew Disposits 1.799.00 0.00 1.744.319.01 Subproto : [97] General Tecrew Disposits 1.799.00 0.00 794.00 Subproto : [97] General Tecrew Disposits	15-132-00	Accum Depn>Furniture, Fixtures and Equipment	(36,440.00)	0.00	(36,440.00)
Subtotal [56] Morabit Equipment 122,855.00 0.60 122,855.00 Subgroup : [67] Other Tixed Assets 6,200.00 0.00 6,200.00 Subgroup : [07] Defrand Deposits 6,782.00 0.00 6,782.00 Subproup : [07] Defrand Deposits 6,782.00 0.00 6,782.00 Subproup : [07] Defrand Deposits 6,782.00 0.00 1,799.00 Subproup : [07] Defrand Deposits 1,799.00 0.00 1,799.00 Subproup : [07] Gendwill 1,443.50.0 0.00 1,749.00 Subproup : [07] Gendwill 1,443.50.0 0.00 1,749.00 Subproup : [07] Const to Owner or Related Parties 740.00 0.00 1,744.316.00 Subproup : [07] Const to Owner or Related Parties 746.00 0.00 1,744.316.00 Subproup : [07] Const to Owner or Related Parties 746.00 0.00 1,745.00 Subproup : [07] Const to Owner or Related Parties 746.00 0.00 1,745.00 Subproup : [07] Const to	15-133-00	Accum Depn>Medical Equipment	(227.00)	0.00	(227.00)
Subbial [8] Words Equipment 123,855.00 0.60 123,855.00 Subgrous : [81] Other Fixed Assets 6,200.00 0.00 6,200.00 Subgrous : [01] Deternd Deposits 6,200.00 0.00 6,792.00 Subgrous : [01] Deternd Opposits 6,792.00 0.00 6,792.00 Subgrous : [01] Deternd Opposits 6,792.00 0.00 1,798.00 Subgrous : [01] Deternd Opposits 1,798.00 0.00 1,798.00 Subgrous : [04] Goodwill 1,748.00 0.00 1,749.00 Subgrous : [04] Goodwill 1,443.318.00 0.00 1,443.318.00 Subgroup : [07] Coars to Ommer or Ratizet Parties 754.00 0.00 1,443.318.00 Subgroup : [07] Coars to Ommer or Ratizet Parties 754.00 0.00 1,443.318.00 Subgroup : [07] Other Assets 754.00 0.00 1,443.318.00 Subgroup : [07] Other Assets 754.00 0.00 1,443.318.00 Subgroup : [07] Other Assets 754.00	15-134-00	Accum Depn>Computer Hardware	(17.00)	0.00	(17.00)
Cathory (C) Other Fixed Assets Construction in Progress E. 20000 0.00 6.20000 Subprove (D1) Deferred Deposits 0.722.00 0.00 6.2020.00 Subprove (D1) Deferred Deposits 0.722.00 0.00 6.722.00 Subprove (D2) Exerve Deposits 0.722.00 0.00 5.722.00 Subprove (D2) Exerve Deposits 1.7799.00 0.00 1.7799.00 Subprove (D2) Exerve Deposits 1.7799.00 0.00 1.7799.00 Subprove (D2) Convert Deposits 1.7799.00 0.00 1.7799.00 Subprove (D2) Gondvill 1.444.318.00 0.00 1.744.018.00 Subprove (D4) Gondvill 1.444.318.00 0.00 7.44.00 Subprove (D2) Date To((From) Farwer Management 7.44.00 0.00 7.44.00 Subprove (D7) Date To((From) Farwer Management 7.46.00 0.00 1.46.85.00 Z'172.00 Due To((From) Farwer Management 7.46.00 0.00 3.53.007.00 Z'1712.01 Due To((From) F				0.00	123.956.00
1:4:5:00 bibliotat [09] Field Assets Construction In Progress 6.200.00 bibliotat [09] 0.00 bibliotat [09] 0.00 bibliotat [01] 0.00 bibliotat [02] 0.00 bibliotat [02] 0.00 bibliotat [02] 0.00 bibliotat [02] 0.00 bibliotat [02] 0.00 bibliotat [02] 1798.00 bibliotat [02] 0.00 bibliotat [03] 1798.00 bibliotat [04] 0.00 bibliotat [04] 1744.316.00 bibliotat [04] 0.00 bibliotat [04] 0.00 bibliotat [04] 1.414.316.00 bibliotat [05] 0.00 bibliotat [05] 1.414.316.00 bibliotat [05] 0.00 bibliotat [07] 0.00 bibliot	Captoral [Dol	morable Eduption			
1:4:5:00 bibliotat [09] Field Assets Construction In Progress 6.200.00 bibliotat [09] 0.00 bibliotat [09] 0.00 bibliotat [01] 0.00 bibliotat [02] 0.00 bibliotat [02] 0.00 bibliotat [02] 0.00 bibliotat [02] 0.00 bibliotat [02] 0.00 bibliotat [02] 1798.00 bibliotat [02] 0.00 bibliotat [03] 1798.00 bibliotat [04] 0.00 bibliotat [04] 1744.316.00 bibliotat [04] 0.00 bibliotat [04] 0.00 bibliotat [04] 1.414.316.00 bibliotat [05] 0.00 bibliotat [05] 1.414.316.00 bibliotat [05] 0.00 bibliotat [07] 0.00 bibliot	Subaraus (IB0)	Other Fixed Assets			
Subcrail (199) Other Fixed Assets 6.200.00 0.00 9.200.00 Subgroup: (201) De From-Vendo Security Dupotits 6.792.00 0.00 6.792.00 Subproup: (102) Excrow Opposits 6.792.00 0.00 7.792.00 Subproup: (102) Excrow Opposits 1.798.00 0.00 1.7789.00 Subproup: (102) Excrow Opposits 1.798.00 0.00 1.7789.00 Subproup: (104) Goodwill Acquation Costs 1.141.318.00 0.00 1.7789.00 Subproup: (104) Goodwill 1.414.318.00 0.00 1.7789.00 0.00 1.7789.00 Subproup: (107) Don Ford From/Failwine Management 7.46.00 0.00 7.44.00 0.00 1.414.318.00 Subproup: (107) Done Faeliste 1.414.318.00 0.00 11.685.00 0.00 1.414.338.00 0.00 1.414.338.00 0.00 1.414.338.00 0.00 1.685.00 0.00 1.685.00 0.00 1.685.00 0.00 1.685.00 0.00 1.685.00 0.00 1.685.00 <t< td=""><td></td><td></td><td>0.000.00</td><td>0.00</td><td>6 200 00</td></t<>			0.000.00	0.00	6 200 00
Cannon (Lar) Deferred Deposits 5.722.00 0.00 6.7722.00 13.128.00 Deferred Deposits 6.7722.00 0.00 6.7722.00 Subbrail [D1] Deferred Deposits 6.7722.00 0.00 6.7722.00 Subbrail [D2] Excrew Deposits 1.798.00 0.00 1.7780.00 Subbrail [D2] Excrew Deposits 1.7780.00 0.00 1.7780.00 Subbrail [D2] Excrew Deposits 1.144.318.00 0.00 1.144.318.00 Subpros: [D4] Goodwill 1.444.318.00 0.00 1.444.318.00 Subpros: [D4] Coarts to Conners or Related Parties 754.00 0.00 754.00 Subpros: [D7] Coarts to Conners or Related Parties 764.00 0.00 754.00 Subpros: [D7] Other Assets 774.00 0.00 11.665.00 0.00 11.665.00 Subbrail [D7] Other Assets 338.362.00 0.00 383.362.00 383.362.00 383.362.00 383.362.00 383.362.00 383.362.00 383.362.00 365.665.00 365.665.00		-			
15.152.00 Subbrail [01] Due From-Vendor Security Deposits 6.722.00 6.722.00 0.00 0.00 6.722.00 6.722.00 Subbrail [01] Deformed Deposits 1.728.00 1.728.00 0.00 0.00 1.778.00 1.798.00 Subbrail [02] Excrow Deposits 1.728.00 1.798.00 0.00 0.00 1.778.00 1.414.318.00 Subprosp : [04] Goodwill 1.414.318.00 0.00 0.00 1.414.318.00 0.00 0.00 1.414.318.00 1.414.318.00 Subprosp : [05] Learns to Owners or Related Parties 27.317.00 Due To(From)Fellower and Related Parties 724.00 0.00 0.00 754.00 754.00 Subprosp : [05] Learns to Owners or Related Parties 72.400.80 11565.00 0.00 0.00 744.90 744.90 0.00 Subprosp : [07] Other Assets 27.317.00 Due To(From)Fellower and Related Parties 744.90 0.00 0.00 744.90 383.342.00 0.00 1.468.50 744.90 Subprosp : [07] Other Assets 27.317.00 Due To(From)Fellower and Related Parties 744.90 0.00 1.468.50 744.80 0.00 1.468.50 744.80 Subprosp : [07] Other Assets 27.317.00 Due To(From)Fellower and Related Parties 744.90 0.00 0.00 1.474.818.90 0.00 0.00 1.468.50	Subtotal [B9]	Other Fixed Assets	6,200.00	0.00	6,200.00
15.152.00 Subbrail [01] Due From-Vendor Security Deposits 6.722.00 6.722.00 0.00 0.00 6.722.00 6.722.00 Subbrail [01] Deformed Deposits 1.728.00 1.728.00 0.00 0.00 1.778.00 1.798.00 Subbrail [02] Excrow Deposits 1.728.00 1.798.00 0.00 0.00 1.778.00 1.414.318.00 Subprosp : [04] Goodwill 1.414.318.00 0.00 0.00 1.414.318.00 0.00 0.00 1.414.318.00 1.414.318.00 Subprosp : [05] Learns to Owners or Related Parties 27.317.00 Due To(From)Fellower and Related Parties 724.00 0.00 0.00 754.00 754.00 Subprosp : [05] Learns to Owners or Related Parties 72.400.80 11565.00 0.00 0.00 744.90 744.90 0.00 Subprosp : [07] Other Assets 27.317.00 Due To(From)Fellower and Related Parties 744.90 0.00 0.00 744.90 383.342.00 0.00 1.468.50 744.90 Subprosp : [07] Other Assets 27.317.00 Due To(From)Fellower and Related Parties 744.90 0.00 1.468.50 744.80 0.00 1.468.50 744.80 Subprosp : [07] Other Assets 27.317.00 Due To(From)Fellower and Related Parties 744.90 0.00 0.00 1.474.818.90 0.00 0.00 1.468.50					
Subtota [01] Deferred Deposits 6,782.00 0.00 6,772.00 Subtota [02] Excrow Deposits 1,799.00 0.00 1,799.00 Subtota [02] Excrow Deposits 1,799.00 0.00 1,799.00 Subtota [02] Excrow Deposits 1,799.00 0.00 1,799.00 Subtota [02] Excrow Deposits 1,799.00 0.00 1,414.318.00 Subtota [04] Goodwill 1,414.318.00 0.00 1,414.318.00 Subtota [04] Goodwill 1,414.318.00 0.00 1,414.318.00 Subtota [05] Leans to Owners or Related Parties 784.00 0.00 754.00 Subtota [06] Leans to Owners or Related Parties 784.00 0.00 11,665.00 27.00.03 Due To(From)Hotdorg 11,665.00 0.00 11,665.00 0.00 27.00.11 Due To(From)Hotdorg 138,342.00 0.00 4,788,686.00 0.00 4,788,686.00 Group : [33.4] Labilities 33,342.00 0.00 (3,19,1790.0) 0.00 (3,19,1790.0)	Subgroup : [D1]	Deferred Deposits			
Subbrail (D1) Deferred Deposite 6,782.00 0.00 6,772.00 Subprop: (D2) Excrow Deposite 1,798.00 0.00 1,798.00 Subprop: (D4) Goodwill 1,798.00 0.00 1,798.00 Subprop: (D4) Goodwill 1,414.318.00 0.00 1,414.318.00 Subprop: (D5) Leans to Owners or Related Parties 0.00 7,44.00 0.00 1,414.318.00 Subprop: (D5) Leans to Owners or Related Parties 0.00 744.00 0.00 744.00 Subprop: (D7) Other Assets 744.00 0.00 744.00 0.00 744.00 Subprop: (D7) Other Assets 11,665.00 0.00 33.342.00 0.00 33.342.00 Zr.172.00 Due Tol(From)-Vendor 380,842.00 0.00 383.342.00 0.00 383.342.00 Group: [33-41] Labilities 380,842.00 0.00 383.342.00 0.00 383.342.00 0.00 383.342.00 0.00 383.342.00 0.00 383.342.00 0.00 383.342.00 0.0	13-128-00	Due From>Vendor Security Deposits	6,792.00	0.00	6,792.00
Subprop: [2] Excrew Depoils 1,799.00 0.00 1,799.00 17/33.06 Other Assets-Tax Escrow Depoils 1,799.00 0.00 1,799.00 Subtrati [02] Excrew Depoils 1,799.00 0.00 1,799.00 Subtrati [02] Excrew Depoils 1,799.00 0.00 1,799.00 Subtrati [04] Goodwill 1,414.318.00 0.00 1,414.318.00 Subtrati [04] Goodwill 1,414.318.00 0.00 1,414.318.00 Subtrati [04] Coodwill 1,414.318.00 0.00 1,414.318.00 Subtrati [04] Leans to Owners or Related Parties 754.00 0.00 754.00 Subtrati [07] Other Assets 11,665.00 0.00 11,655.00 0.00 385,027.00 Subtrati [07] Other Assets 385,027.00 0.00 47,98,068.00 0.00 47,98,068.00 Group [13-34] Liabitries 385,027.00 0.00 47,98,068.00 0.00 47,98,068.00 Group [13-34] Liabitries Subitries Subitries S	Subtotal (D1)	Deferred Deposits	6,792.00	0.00	6,792.00
17.28.30 Other Assets-Tax Escore-Other 1.798.00 0.00 1.798.00 Subtrati [D2] Excrow Deposits 1.798.00 0.00 1.798.00 Subtrati [D2] Excrow Deposits 1.414.318.00 0.00 1.414.318.00 18.00.00.01 Acquisition Costs 1.414.318.00 0.00 1.414.318.00 Subtrati [D4] Goodwill 1.414.318.00 0.00 1.414.318.00 Subtrati [D4] Loans to Owners or Related Parties 0.00 754.00 0.00 754.00 Subtrati [D6] Loans to Owners or Related Parties 755.00 0.00 11.065.00 0.00 11.065.00 Subtrati [D7] Other Assets 335.42.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00					
17.28.30 Other Assets-Tax Escore-Other 1.798.00 0.00 1.798.00 Subtrati [D2] Excrow Deposits 1.798.00 0.00 1.798.00 Subtrati [D2] Excrow Deposits 1.414.318.00 0.00 1.414.318.00 18.00.00.01 Acquisition Costs 1.414.318.00 0.00 1.414.318.00 Subtrati [D4] Goodwill 1.414.318.00 0.00 1.414.318.00 Subtrati [D4] Loans to Owners or Related Parties 0.00 754.00 0.00 754.00 Subtrati [D6] Loans to Owners or Related Parties 755.00 0.00 11.065.00 0.00 11.065.00 Subtrati [D7] Other Assets 335.42.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00 33.342.00 0.00	Subaraus (D2)	Everous Deposite			
Subiotat (D2) Excrov Deposits 1,799.00 0.60 1,799.00 Subjouts (D4) Acquisition Costs 1,414.318.00 0.00 1.414.318.00 Subjouts (D4) Goodwill 1,414.318.00 0.00 1.414.318.00 Subjouts (D4) Goodwill 1,414.318.00 0.00 1.414.318.00 Subjouts (D6) Dua To((From))=Finice Management 754.00 0.00 754.00 Subjouts (D7) Dua To((From))=Finice Management 754.00 0.00 11.965.00 Subjouts (D7) Other Assets 11665.00 0.00 33.342.00 Subjorus (D7) Other Assets 33.342.00 0.00 33.342.00 Subjorus (D7) Other Assets 33.42.00 0.00 4.785.90.00 Group (13.21) Assets 4.788.605.00 0.00 4.785.90.00 Subjorus (D7) Other Assets 39.40.07.00 0.00 1.985.00 Subjorus (D7) Other Assets 39.41.97.00 0.00 4.785.90.00 Subjorus (D7) Other Current Psysisbe-Photode Tax (61.91.785.00 <td></td> <td>•</td> <td>4 700 00</td> <td>0.00</td> <td>1 799 00</td>		•	4 700 00	0.00	1 799 00
Chance (pc) Construction Construction Subgroup: (D4) Goodwill Acquisition Costs 1,414,318.00 0.00 1,414,318.00 Subgroup: (D5) Lears to Owners or Related Parties 754.00 0.00 754.00 Subgroup: (D7) Other Assets 764.00 0.00 754.00 Subgroup: (D7) Other Assets 764.00 0.00 754.00 Subgroup: (D7) Other Assets 764.00 0.00 11.685.00 Subtotal (D7) Other Assets 383.342.00 0.00 383.342.00 Subtotal (D7) Other Assets 4.788,608.00 0.00 4.788,608.00 Group: (13.34) Liabilities 385.007.00 0.00 383.342.00 Subtotal (D7) Other Current Payable (3.191.750.00) 0.00 4.788,608.00 Group: (13.34) Liabilities 385.007.00 0.00 163.176.00 21-000-00 Accounts Payable-104 163.176.00 0.00 163.176.00 21-150.00 Other Current Payable-Provider Tax (64.13.78.00) 0.00		-			
Instruction Acquisition Costs 1.414.318.00 0.00 1.414.318.00 Subtoal (DQ) Goodwill 1.414.318.00 0.00 1.414.318.00 Subgroup: (DI) Loans to Owners or Related Parties 754.00 0.00 754.00 Subgroup: (D7) Due To((From)-Fainiew Management 754.00 0.00 754.00 Subgroup: (D7) Other Assets 11.965.00 0.00 11.965.00 Subtoal (D6) Leans to Owners or Related Parties 784.00 0.00 754.00 Subtoal (D7) Other Assets 11.965.00 0.00 11.965.00 0.00 27.472.00 Due To((From)-Vindor 383.342.00 0.00 11.965.00 0.00 14.788,808.00 Corup: (33.34) Liabilities 386.007.00 0.00 (3.191.790.00) 0.00 (3.191.790.00) 0.00 (3.191.790.00) 0.00 (3.191.790.00) 0.00 (3.191.790.00) 0.00 (4.1,376.00) 0.00 (4.1,376.00) 0.00 (4.1,376.00) 0.00 (4.1,376.00) 0.00 (4.1,376.00) 0.00 <	Subtotal [D2]	Excrow Deposits	1,799.00	0.00	1,799.00
Instruction Acquisition Costs 1.414.318.00 0.00 1.414.318.00 Subtoal (DQ) Goodwill 1.414.318.00 0.00 1.414.318.00 Subgroup: (DI) Loans to Owners or Related Parties 754.00 0.00 754.00 Subgroup: (D7) Due To((From)-Fainiew Management 754.00 0.00 754.00 Subgroup: (D7) Other Assets 11.965.00 0.00 11.965.00 Subtoal (D6) Leans to Owners or Related Parties 784.00 0.00 754.00 Subtoal (D7) Other Assets 11.965.00 0.00 11.965.00 0.00 27.472.00 Due To((From)-Vindor 383.342.00 0.00 11.965.00 0.00 14.788,808.00 Corup: (33.34) Liabilities 386.007.00 0.00 (3.191.790.00) 0.00 (3.191.790.00) 0.00 (3.191.790.00) 0.00 (3.191.790.00) 0.00 (3.191.790.00) 0.00 (4.1,376.00) 0.00 (4.1,376.00) 0.00 (4.1,376.00) 0.00 (4.1,376.00) 0.00 (4.1,376.00) 0.00 <					
14:00:00 (D4) Acquisition Craits 1.414.318.00 (D4) 0.00 (D4) 1.414.318.00 (D4) Subtrait [D4] Goodwill 1.414.318.00 (D4) 0.00 (D4) 1.414.318.00 (D4) 27:317:00 (D4) Date To(From)-Fairwer Management (D4) 754.00 (D6) 0.00 (D6) 754.00 (D6) Subtrait [D6] Const to Owner or Related Parties (D4) 0.00 (D6) 754.00 (D6) 0.00 (D6) 754.00 (D6) Subtrait [D7] Other Assets (D6) 0.00 (D6) 0.00 (D6) 754.00 (D6) 0.00 (D6) 754.00 (D6) Subtrait [D7] Other Assets (D6) 0.00 (D6)	Subgroup : [D4]	Goodwill			
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Subgroup: [D6] Loans to Owners or Related Parties 754.00 0.00 754.00 Subtratil [D6] Loans to Owners or Related Parties 754.00 0.00 754.00 Subtratil [D6] Loans to Owners or Related Parties 754.00 0.00 754.00 Subtratil [D7] Other Assets 11.665.00 0.00 11.665.00 27.17.20 Due To([From)+Hotings 11.665.00 0.00 383.342.00 Subtratil [D7] Other Assets 383.047.00 0.000 385.607.00 Group : [37.37] Labilities 385.607.00 0.00 4788,608.00 Group : [37.4] Trade AP 20.000.01 Assets 4.788,608.00 0.00 436,658.00 20.000.01 Accounts Psychie-Other 366,656.00 0.00 153,178.00		•		0.00	1,414,318.00
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27200058 Due To/(Fom)+Vendor 11,665.00 0.00 11,665.00 27.172.00 Due To/(From)-Vendor 383,342.00 0.00 383,342.00 Subiotal [07] Other Assis 335,007.00 0.00 385,407.00 Total [31-32] Assets 4,788,608.00 0.00 4,788,608.00 Group : [33-34] Labilities 335,007.00 0.00 4,788,608.00 20:000-01 Accounts Payable (3,191,790.00) 0.00 (3,191,790.00) 20:000-01 Accounts Payable-Other 366,656.00 0.00 366,656.00 20:000-70 Accounts Payable>Other 153,176.00 0.00 (641,370.00) 21:150-00 Other Current Payable>Forkider Tax (641,370.00) 0.00 (43,123.00) 21:150-00 Other Current Payable>Forkider Tax (641,370.00) 0.00 (43,123.00) 21:150-00 Other Current Payable>Forkider Tax (641,370.00) 0.00 (43,123.00) 21:150-00 Other Current Payable>Forkider Tax (641,370.00) 0.00 (13,230.00) 21:150-00	Subtotal [D6]	Loans to Owners or Related Parties	754.00	0.00	/54.00
27200058 Due To/(Fom)+Vendor 11,665.00 0.00 11,665.00 27.172.00 Due To/(From)-Vendor 383,342.00 0.00 383,342.00 Subiotal [07] Other Assis 335,007.00 0.00 385,407.00 Total [31-32] Assets 4,788,608.00 0.00 4,788,608.00 Group : [33-34] Labilities 335,007.00 0.00 4,788,608.00 20:000-01 Accounts Payable (3,191,790.00) 0.00 (3,191,790.00) 20:000-01 Accounts Payable-Other 366,656.00 0.00 366,656.00 20:000-70 Accounts Payable>Other 153,176.00 0.00 (641,370.00) 21:150-00 Other Current Payable>Forkider Tax (641,370.00) 0.00 (43,123.00) 21:150-00 Other Current Payable>Forkider Tax (641,370.00) 0.00 (43,123.00) 21:150-00 Other Current Payable>Forkider Tax (641,370.00) 0.00 (43,123.00) 21:150-00 Other Current Payable>Forkider Tax (641,370.00) 0.00 (13,230.00) 21:150-00					
21-00-00 Dub 10 (From)-Vendor 383,342.00 0.00 383,342.00 Subtotal [D7] Otter Assets 336,007.00 0.00 385,007.00 Total [31-32] Assets 4,788,606.00 0.00 4,788,606.00 Group : [33-34] Liabilities 5 5 5 0.00 385,007.00 Group : [33-34] Liabilities 5 0.00 0.00 4,788,606.00 Group : [33-34] Liabilities 5 0.00 0.00 (3,191,790.00) 20:000-00 Accounts Payable>-Other 366,656.00 0.00 366,656.00 20:000-01 Accounts Payable>-Other 153,176.00 0.00 (4,1378.00) 21:150-00 Other Current Payable>-Fonder Tax (641,378.00) 0.00 1,973.00 21:150-00 Other Current Payable>-Fonder Tax (64,1378.00) 0.00 1,973.00 21:150-00 Other Current Payable>-Resident Funds (3,220.00) 0.00 (3,280.00) 21:350-00 Other Current Payable>-Resident Funds 23,280.00 0.00 (278,392.00)	Subgroup : [D7]	Other Assets			
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Subtotal [D7] Other Assets 395,007.00 0.00 395,007.00 Total [31-32] Assets 4,788,608.00 0.00 4,788,608.00 Group : [33-34] Labilities 305,007.00 0.00 4,788,608.00 20,000-00 Accounts Payable-Other 366,656.00 0.00 366,656.00 20,000-70 Accounts Payables-Other 366,656.00 0.00 153,176.00 20,000-70 Accounts Payables-Other 366,656.00 0.00 163,176.00 21-101-00 Other Current Payables-Provider Tax (614,178.00) 0.00 (64,1378.00) 21-152-05 Other Current Payables-Employee-Other 65,65.00 0.00 197.300 21-152-06 Other Current Payables-Employee-Other 197.3.00 0.000 197.300 21-152-06 Other Current Payables-Resident Rind 23,268.00 0.000 23,269.00 21-152-06 Other Current Payables-Resident Rind 23,268.00 0.000 (23,269.00 21-350-00 Other Current Payables-Resident Rind 23,269.00 0.000 (276,332.00)		. , .	383,342.00	0.00	383,342.00
Control (51) Control Access Control (31-32) Assets Control (31-32) Total (31-32) Assets 4,788,608.00 0.00 4,788,608.00 Group : (33-34) Liabilities Subgroup : (A1) Trade A/P 0.00 0.00 (3,191,790.00) 20:000-01 Accounts Payable=Other 366,656.00 0.00 366,656.00 20:000-70 Accounts Payable=Other 366,656.00 0.00 163,176.00 21:101-00 Other Current Payables-Union Dues W/H (44,92.00) 0.00 (641,378.00) 21:152-06 Other Current Payables-Employee=Other 56,165.00 0.00 1973.00 21:350-00 Other Current Payables-Resident Refunds (43,123.00) 0.00 (43,123.00) 21:350-00 Other Current Payables-Resident Refunds 23,269.00 0.00 (3,280,358.00) 21:350-00 Other Current Payables-Resident Refunds 23,269.00 0.00 (3,280,358.00) 21:350-00 Other Current Payables-Resident Refunds 23,280,358.00 0.00 (278,392.00) Subgroup : [A2] Notes Payable				0.00	395,007.00
Group: (33-34) Liabilities Subgroup: (A1) Trade AP 20-000-00 Accounts Payable>Other 366,656,00 0.00 366,656,00 20-000-01 Accounts Payable>Other 366,656,00 0.00 366,656,00 0.00 366,656,00 20-000-70 Accounts Payable>Other 366,656,00 0.00 153,176,00 0.00 1641,378,00) 21-1150-00 Other Current Payables-Union Dues WH (492,200) 0.00 (641,978,00) 21-152-60 Other Current Payables-Resident Funds (34,123,00) 0.00 1,973,00 21-152-60 Other Current Payables-Resident Funds (34,123,00) 0.00 (3,123,00) 21-350-00 Other Current Payables-Resident Refunds 23,289,00 0.00 (3,289,00) 21-353-00 Other Current Payables-Resident Refunds (34,200) 0.00 (3,280,386,00) Subtotal [A1] Trade AP (3,280,358,00) 0.00 (278,392,00) (278,392,00) Subtotal [A2] Notes Payable (278,392,00) 0.00 (187,956,00) 0.0	Subtoral [D7]	Other Assets			<u> </u>
Group: (33-34) Liabilities Subgroup: (A1) Trade AP 20-000-00 Accounts Payable>Other 366,656,00 0.00 366,656,00 20-000-01 Accounts Payable>Other 366,656,00 0.00 366,656,00 0.00 366,656,00 20-000-70 Accounts Payable>Other 366,656,00 0.00 153,176,00 0.00 1641,378,00) 21-1150-00 Other Current Payables-Union Dues WH (492,200) 0.00 (641,978,00) 21-152-60 Other Current Payables-Resident Funds (34,123,00) 0.00 1,973,00 21-152-60 Other Current Payables-Resident Funds (34,123,00) 0.00 (3,123,00) 21-350-00 Other Current Payables-Resident Refunds 23,289,00 0.00 (3,289,00) 21-353-00 Other Current Payables-Resident Refunds (34,200) 0.00 (3,280,386,00) Subtotal [A1] Trade AP (3,280,358,00) 0.00 (278,392,00) (278,392,00) Subtotal [A2] Notes Payable (278,392,00) 0.00 (187,956,00) 0.0		• •	4 799 609 00	0.00	4 788 608 00
Subgroup : [A1] Trade A/P 20:000-00 Accounts Payable-Other 366,656.00 0.00 (3,191,790.00) 20:000-01 Accounts Payable-Other 366,656.00 0.00 153,176.00 20:000-01 Accounts Payables-Other 366,656.00 0.00 (18,178.00) 21:101-00 Other Current Payables-Provider Tax (641,378.00) 0.00 (49,52.00) 21:152-06 Other Current Payables-Union Dues W/H (4,962.00) 0.00 1,973.00 21:352-06 Other Current Payables-Provider Tax (641,378.00) 0.00 1,973.00 21:352-06 Other Current Payables-Resident Funds (43,123.00) 0.00 1,973.00 21:352-00 Other Current Payables-Resident Funds (23,280.00) 0.00 (44.00) 21:353-00 Other Current Payables-Neiseident Refunds 23,289.00 0.00 (3,280,358.00) 21:884-00 Other Current Payables-Nisc (278,392.00) 0.00 (278,392.00) 22:310-00 Notes Payable (327,932.00) 0.00 (278,392.00) (276,392.00) Subgroup:	Total [31-32]	Assets	4,708,608.00		4,700,000.00
Subgroup : [A1] Trade A/P 20:000-00 Accounts Payable-Other 366,656.00 0.00 (3,191,790.00) 20:000-01 Accounts Payable-Other 366,656.00 0.00 153,176.00 20:000-01 Accounts Payables-Other 366,656.00 0.00 (18,178.00) 21:101-00 Other Current Payables-Provider Tax (641,378.00) 0.00 (49,52.00) 21:152-06 Other Current Payables-Union Dues W/H (4,962.00) 0.00 1,973.00 21:352-06 Other Current Payables-Provider Tax (641,378.00) 0.00 1,973.00 21:352-06 Other Current Payables-Resident Funds (43,123.00) 0.00 1,973.00 21:352-00 Other Current Payables-Resident Funds (23,280.00) 0.00 (44.00) 21:353-00 Other Current Payables-Neiseident Refunds 23,289.00 0.00 (3,280,358.00) 21:884-00 Other Current Payables-Nisc (278,392.00) 0.00 (278,392.00) 22:310-00 Notes Payable (327,932.00) 0.00 (278,392.00) (276,392.00) Subgroup:					
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20-00-00 Accounts Payable (3,191,790.00) 0.00 (3,191,790.00) 20-00-01 Accounts Payable>Other 366,656.00 0.00 386,656.00 20-00-70 Accounts Payable>Other 366,656.00 0.00 153,176.00 21-101-00 Other Current Payables>Union Dues W/H (4962.00) 0.00 (4,962.00) 21-150-00 Other Current Payables>Union Dues W/H (4962.00) 0.00 (4,962.00) 21-152-06 Other Current Payables>Union Dues W/H>/Other 1,973.00 0.00 (4,3123.00) 21-353-00 Other Current Payables>Resident Funds (43,123.00) 0.00 (43,123.00) 21-353-00 Other Current Payables>Resident Refunds 23,269.00 0.00 (3,246.00) 21-384-00 Other Current Payables-Nisc (278,392.00) 0.00 (3,246.00) Subtotal [A1] Trade A/P (3,280,358.00) 0.00 (278,392.00) Subgroup: [A2] Notes Payable (278,392.00) 0.00 (278,392.00) Subgroup: [A4] Accrued Payroll (278,392.00) 0.00 (187,956.00)	Subaroup : [A1]	Trade A/P			
20:000-01 Accounts Payable>Other 366,656.00 0.00 366,656.00 20:000-70 Accounts Payable>Other 153,176.00 0.00 153,176.00 20:000-70 Accounts Payable>Provider Tax (641,378.00) 0.00 (641,378.00) 21:150-00 Other Current Payables>Enpioyee>Other 56,165.00 0.00 (641,378.00) 21:152-06 Other Current Payables-Enpioyee>Other 56,165.00 0.00 (54,178.00) 21:152-06 Other Current Payables-Vinion Dues W/H (49,92.00) 0.00 (4,962.00) 21:152-06 Other Current Payables-Nesident Funds (43,123.00) 0.00 (43,123.00) 21:353-00 Other Current Payables-Disability & Other Insurance (344.00) 0.00 (3280.358.00) 21:84:00 Other Current Payable>Disability & Other Insurance (344.00) 0.00 (276,392.00) Subgroup: [A2] Notes Payable (276,392.00) 0.00 (276,392.00) Subgroup: [A4] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subgroup: [A4] Accrued Payroll Taxes Payable 837.00		Accounts Pavable	(3,191,790.00)	0.00	(3,191,790.00)
20000-01 Accounts Payable>Old 153,176.00 0.00 153,176.00 21-01-00 Other Current Payables>Provider Tax (641,378.00) 0.00 (641,378.00) 21-150-00 Other Current Payables>Employee>Other 55,165.00 0.00 (4,962.00) 21-152-06 Other Current Payables>Employee>Other 56,165.00 0.00 (4,962.00) 21-152-06 Other Current Payables>Employee>Other 19,73.00 0.00 (1,973.00) 21-152-06 Other Current Payables>Resident Funds (43,123.00) 0.00 (43,123.00) 21-350-00 Other Current Payables-Resident Refunds 23,269.00 0.00 (23,269.00) 21-353-00 Other Current Payables-Disability & Other Insurence (344.00) 0.00 (3,280,358.00) Subgroup: [A2] Notes Payable (278,392.00) 0.00 (3,280,358.00) Subtotal [A1] Trade AP (278,392.00) 0.00 (187,956.00) Subgroup: [A4] Accrued Payroll (278,392.00) 0.00 (187,956.00) Subgroup: [A4] Accrued Payroll (278,392.00) 0.00 <td></td> <td>•</td> <td>• • • •</td> <td>0.00</td> <td>366,656.00</td>		•	• • • •	0.00	366,656.00
2000000 December 1 yearbles> Provider Tax (641,378.00) 0.00 (641,378.00) 21-101-00 Other Current Payables>Provider Tax (641,378.00) 0.00 (4,952.00) 21-150-00 Other Current Payables>Employee>Other 56,165.00 0.00 (4,952.00) 21-152-06 Other Current Payables>Employee>Other 56,165.00 0.00 1,973.00 21-152-06 Other Current Payables>Resident Funds (43,123.00) 0.00 (43,123.00) 21-83-00 Other Current Payables>Resident Refunds 23,269.00 0.00 (23,269.00 21-84-00 Other Current Payables>Exesident Refunds 23,269.00 0.00 (3,280,358.00) 21-84-00 Notes Payable (278,392.00) 0.00 (3,280,358.00) Subtotal [A1] Trade A/P (3,280,358.00) 0.00 (276,392.00) Subtotal [A2] Notes Payable (278,392.00) 0.00 (278,392.00) Subtotal [A4] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subtotal [A4] Accrued Payroll Taxes Payable 837.00 0.00		•	,		
21100-00 Other Current Payables-Union Dues W/H (4,962.00) 0.00 (4,962.00) 21152-06 Other Current Payables-Employee>Other 56,165.00 0.00 1973.00 21-150-06 Other Current Payables-Employee>Other 1973.00 0.00 (4,962.00) 21-156-06 Other Current Payables-Resident Funds (43,123.00) 0.00 (43,123.00) 21-353-00 Other Current Payables-Resident Funds 23,269.00 0.00 (3,240.00) 21-353-00 Other Current Payables-Disability & Other Insurance (3,44.00) 0.00 (3,240.00) Substat [A1] Trade A/P (3,280,358.00) 0.00 (2,78.392.00) (278.392.00) Substat [A2] Notes Payable (278,392.00) 0.00 (187,956.00) (278.392.00) Substat [A2] Notes Payable (187,956.00) 0.00 (187,956.00) (187,956.00) Substat [A4] Accrued Payroll (187,956.00) 0.00 (187,956.00) (187,956.00) Substat [A4] Accrued Payroll (187,956.00) 0.00 (187,956.00) (10,312.00) Substat [A4] Accrued Payroll Taxes Payable 837.00 <td< td=""><td></td><td>•</td><td></td><td></td><td></td></td<>		•			
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21-350-00 Other Current Payables-Resident Funds (43,123.00) 0.00 (43,123.00) 21-353-00 Other Current Payables-Resident Refunds 23,269.00 0.00 23,269.00 21-884-00 Other Current Payables-Disability & Other Insurance (344.00) 0.00 (3,280,358.00) Subtotal [A1] Trade AP (3,280,358.00) 0.00 (3,280,358.00) Subgroup : [A2] Notes Payable (278,392.00) 0.00 (278,392.00) Subgroup : [A4] Accrued Payroll (278,392.00) 0.00 (187,956.00) Subgroup : [A4] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subtotal [A4] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subtotal [A4] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subtotal [A6] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subtotal [A6] Accrued Payroll Taxes Payable (10,312.00) 0.00 (10,312.00) Subtotal [A6] Accrued Expenses-Interest (10,312.00) 0.00 (10,312.00) Subtotal [A10] Interest Payable (10,312.00	21-150-00	Other Current Payables>Union Dues W/H	(4,962.00)	0.00	(641,378.00) (4,962.00) 56,165.00
21-353-00 Other Current Payables>Resident Refunds 23,269.00 0.00 23,269.00 21-353-00 Other Current Payable>Disability & Other Insurance (344.00) 0.00 (344.00) Subtotal [A1] Trade A/P (3,280,358.00) 0.00 (3,280,358.00) Subgroup : [A2] Notes Payable (278,392.00) 0.00 (278,392.00) Subtotal [A2] Notes Payable (278,392.00) 0.00 (278,392.00) Subgroup : [A4] Accrued Payroll (278,392.00) 0.00 (187,956.00) Subtotal [A4] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subgroup : [A6] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subtotal [A4] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subtotal [A6] Accrued Payroll Taxes Payable 837.00 0.00 (10,312.00) Subtotal [A6] Accrued Expenses>Interest (10,312.00) 0.00 (10,312.00) Subtotal [A10] Interest Payable (10,312.00) 0.00 (10,312.00)	21-150-00 21-152-06	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other	(4,962.00) 56,165.00	0.00	(641,378.00) (4,962.00) 56,165.00
21-884-00 Other Current Payable>Disability & Other Insurance (344.00) 0.00 (344.00) Subtotal [A1] Trade A/P (3,280,358.00) 0.00 (3,280,358.00) Subtotal [A2] Notes Payable (278,392.00) 0.00 (278,392.00) Subtotal [A2] Notes Payable (278,392.00) 0.00 (278,392.00) Subtotal [A2] Notes Payable (278,392.00) 0.00 (278,392.00) Subgroup : [A4] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subtotal [A4] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subtotal [A4] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subtotal [A4] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subtotal [A6] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subtotal [A6] Accrued Payroll Taxes Payable 837.00 0.00 (10,312.00) Subtotal [A6] Accrued Expenses>Interest (10,312.00) 0.00 (10,312.00) Subtotal [A10] Interest Payable (10,312.00) 0.00 (10,312.00	21-150-00 21-152-06 21-156-06	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payable>Union Dues W/H>Other	(4,962.00) 56,165.00 1,973.00	0.00 0.00 0.00	(641,378.00) (4,962.00) 56,165.00 1,973.00
21:00:00 Ontor Option Status, Potent Market (3,280,358.00) 0.00 (3,280,358.00) Subtotal [A1] Trade A/P (3,280,358.00) 0.00 (3,280,358.00) Subtotal [A2] Notes Payable (278,392.00) 0.00 (278,392.00) Subtotal [A4] Accrued Payroll (278,392.00) 0.00 (187,956.00) Subtotal [A4] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subtotal [A6] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subtotal [A6] Accrued Payroll Taxes Payable 837.00 0.00 (10,312.00) Subtotal [A6] Accrued Payroll Taxes Payable (10,312.00) 0.00 (10,312.00) Subtotal [A10] Interest Payable (10,312.00) 0.00 (10,312.00)	21-150-00 21-152-06 21-156-06 21-350-00	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payable>Union Dues W/H>Other Other Current Payables>Resident Funds	(4,962.00) 56,165.00 1,973.00 (43,123.00)	0.00 0.00 0.00 0.00	(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00)
Subgroup : [A2] Notes Payable (278,392.00) 0.00 (278,392.00) Subgroup : [A4] Accrued Payroll (278,392.00) 0.00 (278,392.00) Subgroup : [A4] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subgroup : [A4] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subgroup : [A6] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subgroup : [A6] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subgroup : [A6] Accrued Payroll Taxes Payable 837.00 0.00 (187,956.00) Subgroup : [A6] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subtotal [A6] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subtotal [A6] Accrued Payroll Taxes Payable (10,312.00) 0.00 (10,312.00) Subtotal [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subtotal [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subto	21-150-00 21-152-06 21-156-06 21-350-00 21-353-00	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payable>Union Dues W/H>Other Other Current Payables>Resident Funds Other Current Payables>Resident Refunds	(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00	0.00 0.00 0.00 0.00 0.00 0.00	(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00
22-310-00 Note Payable>Misc (278,392.00) 0.00 (278,392.00) Subtotal [A2] Notes Payable (278,392.00) 0.00 (278,392.00) Subtotal [A2] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subtotal [A4] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subtotal [A4] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subgroup : [A6] Accrued Payroll Taxes Payable (187,956.00) 0.00 (187,956.00) Subgroup : [A6] Accrued Payroll Taxes Payable 837.00 0.00 (187,956.00) Subgroup : [A6] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subgroup : [A10] Interest Payable 837.00 0.00 (10,312.00) Subgroup : [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subtotal [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subtotal [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subgroup : [A12] </td <td>21-150-00 21-152-06 21-156-06 21-350-00 21-353-00 21-884-00</td> <td>Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payable>Union Dues W/H>Other Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance</td> <td>(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00)</td> <td>0.00 0.00 0.00 0.00 0.00 0.00</td> <td>(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00)</td>	21-150-00 21-152-06 21-156-06 21-350-00 21-353-00 21-884-00	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payable>Union Dues W/H>Other Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance	(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00)	0.00 0.00 0.00 0.00 0.00 0.00	(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00)
22-310-00 Note Payable>Misc (278,392.00) 0.00 (278,392.00) Subtotal [A2] Notes Payable (278,392.00) 0.00 (278,392.00) Subtotal [A2] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subtotal [A4] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subtotal [A4] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subgroup : [A6] Accrued Payroll Taxes Payable (187,956.00) 0.00 (187,956.00) Subgroup : [A6] Accrued Payroll Taxes Payable 837.00 0.00 (187,956.00) Subgroup : [A6] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subgroup : [A10] Interest Payable 837.00 0.00 (10,312.00) Subgroup : [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subtotal [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subtotal [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subgroup : [A12] </td <td>21-150-00 21-152-06 21-156-06 21-350-00 21-353-00 21-884-00</td> <td>Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payable>Union Dues W/H>Other Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance</td> <td>(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00)</td> <td>0.00 0.00 0.00 0.00 0.00 0.00</td> <td>(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00)</td>	21-150-00 21-152-06 21-156-06 21-350-00 21-353-00 21-884-00	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payable>Union Dues W/H>Other Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance	(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00)	0.00 0.00 0.00 0.00 0.00 0.00	(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00)
Z2-010-00 Notes Payable (278,392.00) 0.00 (278,392.00) Subtotal [A2] Notes Payable (187,956.00) 0.00 (278,392.00) Subgroup : [A4] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subtotal [A4] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subgroup : [A6] Accrued Payroll Taxes Payable (187,956.00) 0.00 (187,956.00) Subgroup : [A6] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subtotal [A6] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subtotal [A6] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subtotal [A6] Accrued Payroll Taxes Payable (10,312.00) 0.00 (10,312.00) Subtotal [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subtotal [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subtotal [A10] Interest Payable (10,312.00) 0.00 (10,312.00) 24-000-00 <td>21-150-00 21-152-06 21-156-06 21-350-00 21-353-00 21-884-00</td> <td>Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payable>Union Dues W/H>Other Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance</td> <td>(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00)</td> <td>0.00 0.00 0.00 0.00 0.00 0.00</td> <td>(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00)</td>	21-150-00 21-152-06 21-156-06 21-350-00 21-353-00 21-884-00	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payable>Union Dues W/H>Other Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance	(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00)	0.00 0.00 0.00 0.00 0.00 0.00	(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00)
Subgroup : [A4] Accrued Payroll 23-000-00 Accrued Wages & Related (187,956.00) 0.00 (187,956.00) Subgroup : [A4] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subgroup : [A6] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subgroup : [A6] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subgroup : [A6] Accrued Wages & Related>PR Taxes 837.00 0.00 837.00 Subtotal [A6] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subgroup : [A10] Interest Payable 837.00 0.00 (10,312.00) Subtotal [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subgroup : [A12] Other Current Llabilities (106,378.00) 0.00 (186,378.00) 24-000-00 Accrued Expenses (186,378.00) 0.00 (186,378.00)	21-150-00 21-152-06 21-156-06 21-350-00 21-353-00 21-854-00 Subtotal [A1]	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payable>Inion Dues W/H>Other Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance Trade A/P	(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00)	0.00 0.00 0.00 0.00 0.00 0.00 0.00	(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00)
23-000-00 Accrued Wages & Related (187,956.00) 0.00 (187,956.00) Subtotal [A4] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subgroup : [A6] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subtotal [A6] Accrued Wages & Related>PR Taxes 837.00 0.00 837.00 Subtotal [A6] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subtotal [A6] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subgroup : [A10] Interest Payable 837.00 0.00 (10,312.00) Subtotal [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subgroup : [A12] Other Current Llabilities (166,378.00) 0.00 (186,378.00) 24-000-00 Accrued Expenses (186,378.00) 0.00 (186,378.00)	21-150-00 21-152-06 21-156-06 21-350-00 21-353-00 21-884-00 Subtotal [A1] Subgroup : [A2]	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payable>Union Dues W/H>Other Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance Trade A/P Notes Payable	(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00)	0.00 0.00 0.00 0.00 0.00 0.00 0.00	(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3280,358.00) (278,392.00)
23-000-00 Accrued Wages & Related (187,956.00) 0.00 (187,956.00) Subtotal [A4] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subgroup : [A6] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subtotal [A6] Accrued Wages & Related>PR Taxes 837.00 0.00 837.00 Subtotal [A6] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subtotal [A6] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subgroup : [A10] Interest Payable 837.00 0.00 (10,312.00) Subtotal [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subgroup : [A12] Other Current Llabilities (166,378.00) 0.00 (186,378.00) 24-000-00 Accrued Expenses (186,378.00) 0.00 (186,378.00)	21-150-00 21-152-06 21-156-06 21-350-00 21-353-00 21-884-00 Subtotal [A1] Subgroup : [A2] 22-310-00	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payable>Union Dues W/H>Other Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance Trade A/P Notes Payable Note Payable>Misc	(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00) (278,392.00)	0.00 0.00 0.00 0.00 0.00 0.00 0.00	(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3280,358.00) (278,392.00)
23-000-00 Accrued Wages & Related (187,956.00) 0.00 (187,956.00) Subtotal [A4] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subgroup : [A6] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subtotal [A6] Accrued Wages & Related>PR Taxes 837.00 0.00 837.00 Subtotal [A6] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subtotal [A6] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subgroup : [A10] Interest Payable 837.00 0.00 (10,312.00) Subtotal [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subgroup : [A12] Other Current Llabilities (166,378.00) 0.00 (186,378.00) 24-000-00 Accrued Expenses (186,378.00) 0.00 (186,378.00)	21-150-00 21-152-06 21-156-06 21-350-00 21-353-00 21-884-00 Subtotal [A1] Subgroup : [A2] 22-310-00	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payable>Union Dues W/H>Other Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance Trade A/P Notes Payable Note Payable>Misc	(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00) (278,392.00)	0.00 0.00 0.00 0.00 0.00 0.00 0.00	(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3280,358.00) (278,392.00)
Subtotal [A4] Accrued Payroll (187,956.00) 0.00 (187,956.00) Subgroup : [A6] Accrued Payroll Taxes Payable 837.00 0.00 837.00 23-156-00 Accrued Wages & Related>PR Taxes 837.00 0.00 837.00 Subtotal [A6] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subgroup : [A10] Interest Payable 837.00 0.00 837.00 Subgroup : [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subtotal [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subgroup : [A12] Other Current Llabilities (166,378.00) 0.00 (186,378.00) 24-000-00 Accrued Expenses (126,378.00) 0.00 (186,378.00)	21-150-00 21-152-06 21-156-06 21-350-00 21-353-00 21-884-00 Subtotal [A1] Subgroup : [A2] 22-310-00 Subtotal [A2]	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payable>Union Dues W/H>Other Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance Trade A/P Notes Payable Note Payable Notes Payable	(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00) (278,392.00)	0.00 0.00 0.00 0.00 0.00 0.00 0.00	(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3280,358.00) (278,392.00)
Subgroup : [A6] Accrued Payroll Taxes Payable 23-156-00 Accrued Wages & Related>PR Taxes 837.00 0.00 837.00 Subgroup : [A6] Accrued Wages & Related>PR Taxes 837.00 0.00 837.00 Subgroup : [A10] Interest Payable 837.00 0.00 (10,312.00) 0.00 (10,312.00) Subgroup : [A10] Interest Payable (10,312.00) 0.00 (10,312.00) 0.00 (10,312.00) Subgroup : [A12] Other Current Llabilities (106,378.00) 0.00 (186,378.00) 0.00 <td>21-150-00 21-152-06 21-156-06 21-350-00 21-353-00 21-884-00 Subtotal [A1] Subgroup : [A2] 22-310-00 Subtotal [A2] Subgroup : [A4]</td> <td>Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payable>Union Dues W/H>Other Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance Trade A/P Notes Payable Note Payable Note Payable Note Payable Accrued Payroll</td> <td>(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00) (278,392.00) (278,392.00)</td> <td>0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0</td> <td>(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00) (278,392.00) (278,392.00)</td>	21-150-00 21-152-06 21-156-06 21-350-00 21-353-00 21-884-00 Subtotal [A1] Subgroup : [A2] 22-310-00 Subtotal [A2] Subgroup : [A4]	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payable>Union Dues W/H>Other Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance Trade A/P Notes Payable Note Payable Note Payable Note Payable Accrued Payroll	(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00) (278,392.00) (278,392.00)	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00) (278,392.00) (278,392.00)
23-156-00 Accrued Wages & Related>PR Taxes 837.00 0.00 837.00 Subtotal [A6] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subgroup : [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subtotal [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subgroup : [A12] Other Current Llabilities (106,378.00) 0.00 (186,378.00) 24-000-00 Accrued Expenses (126,378.00) 0.00 (186,378.00)	21-150-00 21-152-06 21-156-06 21-350-00 21-353-00 21-884-00 Subtotal [A1] Subgroup : [A2] 22-310-00 Subtotal [A2] Subgroup : [A4] 23-000-00	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payable>Inion Dues W/H>Other Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance Trade A/P Notes Payable Note Payable Notes Payable Accrued Payroll Accrued Wages & Related	(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00) (278,392.00) (278,392.00) (187,956.00)	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3280,358.00) (278,392.00) (278,392.00) (187,956.00)
23-156-00 Accrued Wages & Related>PR Taxes 837.00 0.00 837.00 Subtotal [A6] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subgroup : [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subtotal [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subgroup : [A12] Other Current Llabilities (106,378.00) 0.00 (186,378.00) 24-000-00 Accrued Expenses (126,378.00) 0.00 (186,378.00)	21-150-00 21-152-06 21-156-06 21-350-00 21-353-00 21-884-00 Subtotal [A1] Subgroup : [A2] 22-310-00 Subtotal [A2] Subgroup : [A4] 23-000-00	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payable>Inion Dues W/H>Other Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance Trade A/P Notes Payable Note Payable Notes Payable Accrued Payroll Accrued Wages & Related	(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00) (278,392.00) (278,392.00) (187,956.00)	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3280,358.00) (278,392.00) (278,392.00) (187,956.00)
Subtotal [A6] Accrued Payroll Taxes Payable 837.00 0.00 837.00 Subgroup : [A10] Interest Payable (10,312.00) 0.00 (10,312.00) 24-160-00 Accrued Expenses>Interest (10,312.00) 0.00 (10,312.00) Subtotal [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subtotal [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subgroup : [A12] Other Current Llabilities (186,378.00) 0.00 (186,378.00) 24-000-00 Accrued Expenses (186,378.00) 0.00 (186,378.00)	21-150-00 21-152-06 21-156-06 21-350-00 21-353-00 Subtotal [A1] Subgroup : [A2] 22-310-00 Subtotal [A2] Subgroup : [A4] 23-000-00 Subtotal [A4]	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance Trade A/P Notes Payable Note Payable>Misc Notes Payable Accrued Payroll Accrued Payroll	(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00) (278,392.00) (278,392.00) (187,956.00)	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3280,358.00) (278,392.00) (278,392.00) (187,956.00)
Subtroal [A10] Interest Payable 24-160-00 Accrued Expenses>Interest (10,312.00) 0.00 (10,312.00) Subtroal [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subtroal [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subtroal [A10] Other Current Liabilities (186,378.00) 0.00 (186,378.00) 24-000-00 Accrued Expenses (186,378.00) 0.00 (186,378.00)	21-150-00 21-152-06 21-156-06 21-350-00 21-353-00 21-884-00 Subtotal [A1] Subgroup : [A2] 22-310-00 Subtotal [A2] Subgroup : [A4] 23-000-00 Subtotal [A4] Subgroup : [A6]	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payables>Employee>Other Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance Trade A/P Notes Payable Notes Payable Notes Payable Notes Payable Accrued Payroll Accrued Payroll Accrued Payroll Accrued Payroll	(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00) (278,392.00) (278,392.00) (187,956.00) (187,956.00)	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (344.00) (3280,358.00) (278,392.00) (278,392.00) (187,956.00) (187,956.00)
Subgroup : [A10] Interest Payable 24-160-00 Accrued Expenses>Interest (10,312.00) 0.00 (10,312.00) Subtotal [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subgroup : [A12] Other Current Liabilities (186,378.00) 0.00 (186,378.00) 24-000-00 Accrued Expenses (196,378.00) 0.00 (186,378.00)	21-150-00 21-152-06 21-156-06 21-350-00 21-353-00 21-884-00 Subtotal [A1] Subgroup : [A2] 22-310-00 Subtotal [A2] Subgroup : [A4] 23-000-00 Subtotal [A4] Subgroup : [A6]	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payables>Employee>Other Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance Trade A/P Notes Payable Notes Payable Notes Payable Notes Payable Accrued Payroll Accrued Payroll Accrued Payroll Accrued Payroll	(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00) (278,392.00) (278,392.00) (187,956.00) (187,956.00) 837.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3280,358.00) (278,392.00) (278,392.00) (187,956.00) (187,956.00) (187,956.00)
24-160-00 Accrued Expenses>Interest (10,312.00) 0.00 (10,312.00) Subtotal [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subgroup : [A12] Other Current Liabilities (186,378.00) 0.00 (186,378.00) 24-000-00 Accrued Expenses (186,378.00) 0.00 (186,378.00)	21-150-00 21-152-06 21-156-06 21-350-00 21-353-00 21-884-00 Subtotal [A1] Subgroup : [A2] 22-310-00 Subtotal [A2] Subgroup : [A4] 23-000-00 Subtotal [A4] Subgroup : [A6] 23-156-00	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payables>Employee>Other Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance Trade A/P Notes Payable Note Payable>Misc Notes Payable Accrued Payroll Accrued Wages & Related Accrued Payroll Accrued Payroll Accrued Payroll Taxes Payable Accrued Wages & Related>PR Taxes	(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00) (278,392.00) (278,392.00) (187,956.00) (187,956.00) 837.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3280,358.00) (278,392.00) (278,392.00) (187,956.00) (187,956.00) (187,956.00)
24-160-00 Accrued Expenses>Interest (10,312.00) 0.00 (10,312.00) Subtotal [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subgroup : [A12] Other Current Liabilities (186,378.00) 0.00 (186,378.00) 24-000-00 Accrued Expenses (186,378.00) 0.00 (186,378.00)	21-150-00 21-152-06 21-156-06 21-350-00 21-353-00 21-884-00 Subtotal [A1] Subgroup : [A2] 22-310-00 Subtotal [A2] Subgroup : [A4] 23-000-00 Subtotal [A4] Subgroup : [A6] 23-156-00	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payables>Employee>Other Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance Trade A/P Notes Payable Note Payable>Misc Notes Payable Accrued Payroll Accrued Wages & Related Accrued Payroll Accrued Payroll Accrued Payroll Taxes Payable Accrued Wages & Related>PR Taxes	(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00) (278,392.00) (278,392.00) (187,956.00) (187,956.00) 837.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3280,358.00) (278,392.00) (278,392.00) (187,956.00) (187,956.00) (187,956.00)
Subtotal [A10] Interest Payable (10,312.00) 0.00 (10,312.00) Subgroup : [A12] Other Current Llabilities (186,378.00) 0.00 (186,378.00) 24-000-00 Accrued Expenses (186,378.00) 0.00 (186,378.00)	21-150-00 21-152-06 21-152-06 21-350-00 21-353-00 21-884-00 Subtotal [A1] Subgroup : [A2] 22-310-00 Subtotal [A2] Subgroup : [A4] 23-000-00 Subtotal [A4] Subgroup : [A6] 23-156-00 Subtotal [A6]	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payables>Resident Funds Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance Trade A/P Notes Payable Note Payable>Misc Notes Payable Accrued Payroll Accrued Payroll Accrued Payroll Accrued Payroll Accrued Payroll Taxes Payable Accrued Wages & Related>PR Taxes Accrued Payroll Taxes Payable	(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00) (278,392.00) (278,392.00) (187,956.00) (187,956.00) 837.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3280,358.00) (278,392.00) (278,392.00) (187,956.00) (187,956.00) (187,956.00)
Subgroup : [A12] Other Current Llabilities 24-000-00 Accrued Expenses (186,378.00) 0.00 (186,378.00)	21-150-00 21-152-06 21-152-06 21-350-00 21-353-00 21-884-00 Subtotal [A1] Subgroup : [A2] 22-310-00 Subtotal [A2] Subgroup : [A4] 23-000-00 Subtotal [A4] Subgroup : [A6] 23-156-00 Subtotal [A6] Subgroup : [A10]	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payables>Resident Funds Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance Trade A/P Notes Payable Note Payable>Misc Notes Payable Accrued Payroll Accrued Payroll Accrued Payroll Accrued Payroll Taxes Payable Accrued Wages & Related>PR Taxes Accrued Payroll Taxes Payable Interest Payable	(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00) (278,392.00) (278,392.00) (187,956.00) (187,956.00) 837.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3280,358.00) (278,392.00) (278,392.00) (187,956.00) (187,956.00) (187,956.00) 837.00 837.00
24-000-00 Accrued Expenses (186,378.00) 0.00 (186,378.00)	21-150-00 21-152-06 21-152-06 21-350-00 21-353-00 Subtotal [A1] Subgroup : [A2] 22-310-00 Subtotal [A2] Subgroup : [A4] 23-000-00 Subtotal [A4] Subgroup : [A6] 23-156-00 Subtotal [A6] Subgroup : [A10] 24-160-00	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payables>Resident Funds Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance Trade A/P Notes Payable Note Payable>Misc Notes Payable Accrued Payroll Accrued Payroll Interest Payable Accrued Expenses>Interest	(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00) (278,392.00) (278,392.00) (187,956.00) (187,956.00) 837.00 837.00 (10,312.00)	0.00 0.00	(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00) (278,392.00) (278,392.00) (187,956.00) (187,956.00) (187,956.00) (187,956.00) (187,956.00) (10,312.00)
24-000-00 Accrued Expenses (186,378.00) 0.00 (186,378.00)	21-150-00 21-152-06 21-152-06 21-350-00 21-353-00 Subtotal [A1] Subgroup : [A2] 22-310-00 Subtotal [A2] Subgroup : [A4] 23-000-00 Subtotal [A4] Subgroup : [A6] 23-156-00 Subtotal [A6] Subgroup : [A10] 24-160-00	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payables>Resident Funds Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance Trade A/P Notes Payable Note Payable>Misc Notes Payable Accrued Payroll Accrued Payroll Interest Payable Accrued Expenses>Interest	(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00) (278,392.00) (278,392.00) (187,956.00) (187,956.00) 837.00 837.00 (10,312.00)	0.00 0.00	(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00) (278,392.00) (278,392.00) (187,956.00) (187,956.00) (187,956.00) (187,956.00) (187,956.00) (10,312.00)
	21-150-00 21-152-06 21-156-06 21-350-00 21-353-00 Subtotal [A1] Subgroup : [A2] 22-310-00 Subtotal [A2] Subgroup : [A4] 23-000-00 Subtotal [A4] Subgroup : [A6] 23-156-00 Subtotal [A6] Subgroup : [A10] 24-160-00 Subtotal [A10]	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance Trade A/P Notes Payable Note Payable>Misc Notes Payable Accrued Payroll Accrued Payroll Accrued Payroll Accrued Payroll Accrued Payroll Accrued Payroll Accrued Payroll Accrued Payroll Interest Payable Accrued Expenses>Interest Interest Payable	(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00) (278,392.00) (278,392.00) (187,956.00) (187,956.00) 837.00 837.00 (10,312.00)	0.00 0.00	(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00) (278,392.00) (278,392.00) (187,956.00) (187,956.00) (187,956.00) (187,956.00) (187,956.00) (10,312.00)
24-000-03 Accrued Expenses>Prior (26,331.00) 0.00 (26,331.00)	21-150-00 21-152-06 21-350-00 21-353-00 21-364-00 Subtotal [A1] Subgroup : [A2] 22-310-00 Subtotal [A2] Subgroup : [A4] 23-000-00 Subtotal [A4] Subgroup : [A10] 24-160-00 Subtotal [A10] Subgroup : [A12]	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance Trade A/P Notes Payable Notes Payable Notes Payable Notes Payable Notes Payable Accrued Payroll Accrued Payroll Noter Current Liabilities	(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00) (278,392.00) (278,392.00) (187,956.00) (187,956.00) (187,956.00) (187,956.00) (10,312.00) (10,312.00)	0.00 0.00	(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3,280,358.00) (278,392.00) (278,392.00) (187,956.00) (187,956.00) (187,956.00) (187,956.00) (10,312.00) (10,312.00) (10,312.00)
	21-150-00 21-152-06 21-350-00 21-353-00 21-364-00 Subtotal [A1] Subgroup : [A2] 22-310-00 Subtotal [A2] Subgroup : [A4] 23-000-00 Subtotal [A4] Subgroup : [A10] 24-160-00 Subtotal [A10] Subgroup : [A12]	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance Trade A/P Notes Payable Notes Payable Notes Payable Notes Payable Notes Payable Accrued Payroll Accrued Payroll Noter Current Liabilities	(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (32,280,358.00) (278,392.00) (278,392.00) (187,956.00) (187,956.00) (187,956.00) (187,956.00) (10,312.00) (10,312.00) (186,378.00)	0.00 0.00	(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3280,358.00) (278,392.00) (278,392.00) (278,392.00) (187,956.00) (187,956.00) (187,956.00) (10,312.00) (10,312.00) (10,312.00) (186,378.00)
	21-150-00 21-152-06 21-152-06 21-350-00 21-353-00 21-353-00 Subtotal [A1] Subgroup : [A2] 22-310-00 Subtotal [A2] Subgroup : [A4] 23-000-00 Subtotal [A4] Subgroup : [A6] 23-156-00 Subtotal [A6] Subgroup : [A10] 24-160-00 Subtotal [A10] Subgroup : [A12] 24-000-00	Other Current Payables>Union Dues W/H Other Current Payables>Employee>Other Other Current Payables>Resident Funds Other Current Payables>Resident Funds Other Current Payables>Resident Refunds Other Current Payable>Disability & Other Insurance Trade A/P Notes Payable Note Payable>Misc Notes Payable Accrued Payroll Accrued Payroll Accrued Payroll Accrued Payroll Accrued Payroll Taxes Payable Accrued Payroll Taxes Payable Accrued Payroll Taxes Payable Interest Payable Dither Expenses>Interest Interest Payable Other Current Llabilities Accrued Expenses	(4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (32,280,358.00) (278,392.00) (278,392.00) (187,956.00) (187,956.00) (187,956.00) (187,956.00) (10,312.00) (10,312.00) (186,378.00)	0.00 0.00	(641,378.00) (4,962.00) 56,165.00 1,973.00 (43,123.00) 23,269.00 (344.00) (3280,358.00) (278,392.00) (278,392.00) (278,392.00) (187,956.00) (187,956.00) (187,956.00) (10,312.00) (10,312.00) (10,312.00) (186,378.00)

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24-161-00	Accrued Expenses>RE Taxes	(116,442.00)	0.00	(116,442.00)
24-229-00	Accrued Expenses>Water/Sewer	(10,872.00)	0.00	(10,872.00)
24-882-00	Accrued Expenses>Health Insurance	(18,502.00)	0.00	(18,502.00)
25-154-00	Deferred Revenue>R&B Prepayment	(10,983.00)	0.00	(10,983.00)
27-199-00	Due To>Patient Spend Down	(22,791.00)	0.00	(22,791.00)
Subtotal [A12]	Other Current Liabilities	(392,299.00)	0.00	(392,299.00)
Subgroup : [83]	Loans from Owners or Related Parties			
27-152-00	Due To/(From)>Employee	(552.00)	0.00	(552.00)
27-316-00	Due To/(From)>Greenwich	(495,161.00)	0.00	(495,161.00)
Subtotal [B3]	Loans from Owners or Related Parties	(495,713.00)	0.00	(495,713.00)
Subgroup : [B4]	Other Long-Term Liabilities			
27-176-00	Due To/(From)>Facility	(569,231.00)	0.00	(569,231.00)
Subtotal [B4]	Other Long-Term Liabilities	(569,231.00)	0.00	(569,231.00)
Total [33-34]	Liabilities	(5,213,424.00)	0.00	(5,213,424.00)
Group : [35]	Equity			
Subgroup : [B1]	Owner's Capital			
31-401-00	Partners' Equity>Partner #2	(1,261,771.00)	0.00	(1,261,771.00)
Subtotal [B1]	Owner's Capital	(1,261,771.00)	0.00	(1,261,771.00)
Subgroup : [B5]	Cumulated Earnings			
30-000-00	Retained Earnings	468,296.00	0.00	468,296.00
Subtotal [B5]	Cumulated Earnings	468,296.00	0.00	468,296.00
Total [35]	Equity	(793,475.00)	0.00	(793,475.00)
	NET (INCOME) LOSS	0.00	0.00	0.00
	Sum of Account Groups	0.00	0.00	0.00

Client: Engagement Period Ending: Trial Balance:	Fairview Health Cost Reports Medicald - Fairview Health of Southport, LLC 2018 9/30/2018 A.01 - TB-CCNH			
Workpaper Account	H.01 - Reclassifying Journal Entries Report Description	W/P Ref	Debit	Credit
Account				oroun
Reclassifying Jour To reclass legal and 50-4100 55-5550 Marcum 104 80-240-00 Total	mal Entries JE # 1 Fecconting expenses Professional Fees Medical Director Accounting & Auditing Fees Admin Expense>Professional Fees	E.10	16,422.00 600.00 13,100.00 <u>30,122.00</u>	<u>30,122.00</u> 30,122.00
Reclassifying Jou		E.09		
To reclass leased e Marcum 115 80-208-00 Total	auipment Leased Equipment Admin Expense>Equip-Rental		6,742.00 6,742.00	6,742.00 6,742.00
Reclassifying Jou To reclass ACH fee	rnal Entries JE # 3 is from insurance expense	E.08		
Marcum 114 80-162-00	ACH Fees Admin Expense>Insurance - General Liability &		95,282.00	95,282.00
Total			95,282.00	95,282.00
Reclassifying Jou Tor eclass payrol p	rnal Entries JE # 4 rocessing fees from bank charges account	E.03a		
80-230-00 80-244-00	Admin Expense>Data Processing Admin Expense>Bank Fees		5,059.00	5,059.00
Total			5,059.00	5,059.00
To reclass cell phot Marcum 113	rnal Entries JE # 5 ne expense to the correct line Cell Phone	D.05	3,129.00	3,129.00
80-231-00 Total	Admin Expense>Telephone		3,129.00	3,129.00
To reclass dentist f	rnal Entries JE # 6 ees to correct line of the cost report	D.05	600.00	
55-5387 60-212-00	Other Consultant Nursing Expense>Clinical Consultants		600.00	600.00
Total Reclassifying Jou To reclass pharma	Irnal Entries JE # 7	E.02a		
55-5386	Pharmacy Consultant		5,778.00	/-
60-212-00 Total	Nursing Expense>Clinical Consultants		5,778.00	5,778.00 5,778.00
Reclassifying Jou To reclass items fr	Irnal Entries JE # 8 om PT expense	D.05		
50-4100 55-5540	Professional Fees Other Consultant		900.00 1,650.00	
67-000-00 80-240-00	ST Expense Admin Expense>Professional Fees		1,095.00 69,500.00	
60-700-06 Total	Nursing Expense>Contracted Service>Other		73,145.00	73,145.00 73,145.00

05-00	Fairview Health Cost Reports			
Client: Engagement:	Medicaid - Fairview Health of Southport, LLC 2018			
Period Ending:	9/30/2016			
Trial Balance:	A.01 - TB-CCNH			
Workpaper:	H.01 - Reclassifying Journal Entries Report			
Account	Description	W/P Ref	Debit	Credit
	rnal Entries JE # 9	D.05		
To reclass Ell's sala	ary fromt he administrator line			
32		l de la companya de la	63,024.00	
80-840-80 80-811-80	Admin Expense>Business Office>Wages Admin Expense>Director>Wages		03,024.00	63,024.00
Total			63,024.00	63,024.00
Reclassifying Jou	rnal Entries JE # 10	D.05		
To reclass dentist f	ees to the correct line of the cost report			
55-5387	Other Consultant		1,800.00	
60-206-00	Nursing Expense>Clinical Services			1,800.00
Total			1,800.00	1,800.00
		I F 44		
	rnal Entries JE # 11	E.11		
To reclass other en	ipicyee benefits			
85-200-79	Employee Benefits Expense>Training Fund>Union		4,281.00	
85-245-00	Employee Benefits Expense>Background Checks		493.00	
Marcum 116	Union Health & Welfare		158,331.00	
Marcum 117	Union Pension		52,727.00	
Marcum 118	Employee Relations		2,597.00	
Marcum 119	Employee Food		33.00	
Marcum 120	Misc. Employee Benefits		110.00	140,273,00
61-883-00	Nursing Admin Expense>Other Benefits			8,122.00
68-883-00	Therapy Expense>Other Benefits			3,696.00
69-883-00	Social Services Expense>Other Benefits Dietary Expense>Other Benefits			19,791.00
70-883-00 71-883-00	Activity Expense>Other Benefits			3,145.00
74-883-00	Housekeeping & Laundry Expense>Other Benefits			19,083.00
75-883-00	Maintenance Expense>Other Benefits			3,558.00
80-883-00	Admin Expense>Other Benefits			20,904.00
Total			218,572.00	218,572.00
		_		
	rnal Entries JE # 12	H.01a		
To reclass expense	es associated with management fee			
00.070.02	Admin Evenence Management Eco		133,028.00	
80-279-00 75-700-00	Admin Expense>Management Fee Maintenance Expense>Contracted Service		100,020.00	27,300.00
80-239-00	Admin Expense>Accounting Fees			4,750.00
80-240-00	Admin Expense>Professional Fees			100,978.00
Total			133,028.00	133,028.00

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Workpaper Index:400.2Prepared By:200.2Reviewed By:2/11/2017Workpaper Date:2/11/2017Run Date:2/11/2017

VHCL CKLST

Name of Workpaper:

Provider Name:	Fairview Health of Southport, LLC
Provider Number:	000008433
Period Ended:	9/30/16

VEHICLE COMPLIANCE CHECKLIST

PURPOSE:

To determine that vehicles comply with the published February 15, 2000 guidelines developed to assist providers in understanding what transportation costs are allowable and how the costs must be documented.

		Yes	No	Support Filed at?	Finding Issued?
1	Are all vehicles registered and insured in the facility's name? Request insurance cards and current vehicle registration.				
2	Are all purchase and lease agreements made in the facility's name?				
3	Were mileage logs obtained for facility vehicles claimed for reimbursement				
4	Were the number of vehicles allowed for reimbursement determined?				
5	Was personal use of the facility vehicles determined?				
6	Has the maximum cost allowed for depreciation purposes or the maximum allowablemonthly lease expense been determined?			-	
7	Were all newly acquired vehicle additions for the cost years specified to supporting invoices and cancelled checks verified?	-			
8	Were all motor vehicle additions physically inspected?				

Conclusion: