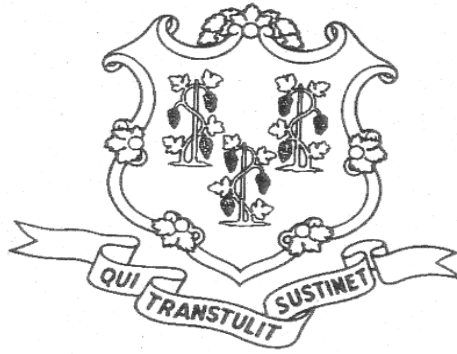


# State of Connecticut



## Annual Report of Long-Term Care Facility Cost Year 2019

Name of Facility (as licensed) 22 South Street Operations LLC, d/b/a Fox Hill center	
Address (No. & Street, City, State, Zip Code) 1253 Hartford Turnpike, Rockville, CT 06066	
Type of Facility <input checked="" type="checkbox"/> Chronic and Convalescent Nursing Home only (CCNH) <input type="checkbox"/> Rest Home with Nursing Supervision only (RHNS) <input type="checkbox"/> (Specify)	
Report for Year Beginning 10/1/2018	Report for Year Ending 9/30/2019

License Numbers:	CCNH 2370	RHNS	(Specify)	Medicare Provider 07-5183
------------------	--------------	------	-----------	------------------------------

Medicaid Provider Numbers:	CCNH 000008029	RHNS	ICF-IID
----------------------------	-------------------	------	---------

**For Department Use Only**

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

**General Information**

Name of Facility (as licensed) 22 South Street Operations LLC, d/b/a Fox Hill center	License No. 2370	Report for Year Ended 9/30/2019	Page 1	of 37
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**Administrator's/Owner's Certification**

MISREPRESENTATION OR FALSIFICATION OF ANY INFORMATION CONTAINED IN THIS COST REPORT MAY BE PUNISHABLE BY FINE AND/OR IMPRISONMENT UNDER STATE OR FEDERAL LAW.

I HEREBY CERTIFY that I have read the above statement and that I have examined the accompanying Cost Report and supporting schedules prepared for 22 South Street Operations LLC, d/b/a Fox Hill center [facility name], for the cost report period beginning October 1, 2018 and ending September 30, 2019, and that to the best of my knowledge and belief, it is a true, correct, and complete statement prepared from the books and records of the provider(s) in accordance with applicable instructions.

I hereby certify that I have directed the preparation of the attached General Information and Questionnaires, Schedule of Resident Statistics, Statements of Reported Expenditures, Statements of Revenues and the related Balance Sheet of this Facility in accordance with the Reporting Requirements of the State of Connecticut for the year ended as specified above.

I have read this Report and hereby certify that the information provided is true and correct to the best of my knowledge under the penalty of perjury. I also certify that all salary and non-salary expenses presented in this Report as a basis for securing reimbursement for Title XIX and/or other State assisted residents were incurred to provide resident care in this Facility. All supporting records for the expenses recorded have been retained as required by Connecticut law and will be made available to auditors upon request.

Signed (Administrator)		Date	Signed (Owner)		Date
Printed Name (Administrator) Vitko-Aniolek, Stephanie Margaret			Printed Name (Owner) Keith Davis, V.P. of Reimb., Genesis Healthcare		
Subscribed and Sworn to before me:	State of	Date	Signed (Notary Public)	Comm. Expires  / /	
Address of Notary Public					

(Notary Seal)

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State of Connecticut  
**Department of Social Services**  
 55 Farmington Avenue, Hartford, Connecticut 06105

<b>Data Required for Real Wage Adjustment</b>			Page 1A	of 37
Name of Facility 22 South Street Operations LLC, d/b/a Fox Hill center		Period Covered:	From 10/1/2018	To 9/30/2019
Address of Facility 1253 Hartford Turnpike, Rockville, CT 06066				
Report Prepared By Thomas Farnan		Phone Number 978-247-5029	Date 12/28/2019	
Item	Total	CCNH	RHNS	(Specify)
1. Dietary wages paid	\$			
2. Laundry wages paid	\$			
3. Housekeeping wages paid	\$			
4. Nursing wages paid	\$	3,773,375	3,773,375	
5. All other wages paid	\$	533,141	533,141	
6. <b>Total Wages Paid</b>	\$	4,306,517	4,306,517	
7. Total salaries paid	\$	285,174	285,174	
8. <b>Total Wages and Salaries Paid</b> (As per page 10 of Report)	\$	4,591,690	4,591,690	

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**  
**Type of Facility - Organization Structure**

Phone No. of Facility 860-875-0771		Report for Year Ended 9/30/2019	Page 2	of 37
Name of Facility (as shown on license) 22 South Street Operations LLC, d/b/a Fox Hill center		Address (No. & Street, City, State, Zip) 1253 Hartford Turnpike, Rockville, CT 06066		
License Numbers:	CCNH 2370	RHNS (Specify)	Medicare Provider No. 07-5183	
Type of Facility (Check appropriate box(es))				
<input checked="" type="checkbox"/> Chronic and Convalescent Nursing Home only (CCNH)		<input type="checkbox"/> Rest Home with Nursing Supervision only (RHNS)		<input type="checkbox"/> (Specify)
Type of Ownership (Check appropriate box)				
<input type="radio"/> Proprietorship <input checked="" type="radio"/> LLC <input type="radio"/> Partnership <input type="radio"/> Profit Corp. <input type="radio"/> Non-Profit Corp. <input type="radio"/> Government <input type="radio"/> Trust				
If this facility opened or closed during report year provide:		Date Opened	Date Closed	
Has there been any change in ownership or operation during this report year? <input type="radio"/> Yes <input checked="" type="radio"/> No      If "Yes," explain fully.				
<b>Administrator</b>				
Name of Administrator Vitko-Aniolek,Stephanie Margaret		Nursing Home Administrator's License No.:	CT 001864	
Other Operators/Owners who are assistant administrators (full or part time) of this facility.				
Name		License No.:		









**22 South Street Operations LLC  
OWNERSHIP DISCLOSURE**

**LICENSEE**

**22 South Street Operations LLC**

c/o Corporation Service Company, 50 Weston Street, Hartford CT 06120  
FEIN: 26-0842089  
Provider Location: Fox Hill Center, 22 South Street, Vernon Rockville, CT 06066  
Ownership: Genesis CT Holdings LLC (100%)

**MEMBER OF LICENSEE**

**Genesis CT Holdings LLC**

c/o Corporation Service Company, 50 Weston Street, Hartford CT 06120  
FEIN: 26-0787896  
Ownership: Genesis Operations LLC (100%)

**SUBSIDIARIES HAVING INDIRECT BENEFICIAL OWNERSHIP**

**Genesis Operations LLC**

c/o Corporation Service Company, 2711 Centerville Road , Suite 400, Wilmington, DE, 19808  
FEIN: 26-0787826  
Ownership: GHC Holdings LLC (100% membership interest)

**GHC Holdings LLC**

c/o Corporation Service Company, 2711 Centerville Road , Suite 400, Wilmington, DE, 19808  
FEIN: 26-0740682  
Ownership: Genesis HealthCare LLC (100% membership interest)

**Genesis HealthCare LLC (Parent Company)**

c/o CT Corporation System, 100 Pine Street, Suite 325, Harrisburg, PA, 17101  
EIN: 27-3237296  
Ownership: GEN Operations II, LLC. (100% membership interest)

**ESTMENT ENTITIES HAVING BENEFICIAL OWNERSHIP**

**GEN Operations II, LLC**

EIN: 27-3237225  
101 East State Street  
Kennett Square, PA 19348

*Ownership*

GEN Operations I, LLC (100%)

---

**GEN Operations I, LLC**

EIN: 27-3237090  
101 East State Street

Kennett Square, PA 19348

Ownership

FC-GEN Operations Investment, LLC (100%)

---

**FC-GEN Operations Investment, LLC**

EIN: 27-3237005

101 East State Street

Kennett Square, PA 19348

Ownership

Sun Healthcare Group, Inc. (approximately 59.2957%)

Sundance Rehabilitation Holdco, Inc. (5.5444%)

Other members that are disclosed herein as owners of Genesis Healthcare, Inc.

Other members that do not trigger 5% ownership test

---

**Sundance Rehabilitation Holdco, Inc.**

EIN: 38-3954180

101 East State Street

Kennett Square, PA 19348

Ownership

Sun Healthcare Group, Inc. (100%)

**Sun Healthcare Group, Inc.**

EIN: 13-4230695

101 East State Street

Kennett Square, PA 19348

Ownership

Genesis Healthcare, Inc. (100%)

---

**Genesis Healthcare, Inc.**

(publicly traded company on the New York Stock Exchange)

(f/k/a Skilled Healthcare Group, Inc.)

EIN: 20-3934755

101 East State Street

Kennett Square, PA 19348

Ownership

HCCF Management Group XI, LLC (approximately 14.0%)

Senior Care Genesis, LLC (approximately 5.3%)

ZAC Properties XI, LLC (approximately 8.1%)

Welltower, Inc. (approximately 5.9%)

Others that do not trigger 5% ownership test

---

**HCCF Management Group XI, LLC**

EIN: 20-8751674  
3820 Mansell Road  
Suite 280  
Alpharetta, GA 30022

*Ownership*

[Arnold M. Whitman\[1\]](#)

3820 Mansell Road  
Suite 280  
Alpharetta, GA 30022

---

**ZAC Properties XI, LLC**

EIN: 20-8794579  
1617 JFK Boulevard  
Suite 545  
Philadelphia, PA 19103

*Ownership*

[Steven E. Fishman\[2\]](#)

1617 JFK Boulevard  
Suite 545  
Philadelphia, PA 19103  
Other members that do not trigger 5% ownership test

---

**Welltower Inc.**

EIN: 34-1096634  
4500 Dorr Street  
Toledo, OH 43615

Ownership

(publicly traded company on the New York Stock Exchange)

**Senior Care Genesis, LLC**

EIN: 20-8282470  
234 Church Street, Suite 901  
New Haven, CT 06510

*Ownership*

[David Reis\[3\]](#)

234 Church Street, Suite 901  
New Haven, CT 06510

*ership information for the Operator as well as all officer/director/manager information for the Operator and its 5% or more direct and indirect owners.*

-

[1] HCCF is a privately-held company that is not affiliated with Genesis, however, it is our understanding that Mr. Whitman may be considered the be

[2] ZAC Properties is a privately-held company that is not affiliated with Genesis, however, it is our understanding that Mr. Fishman may be considere

3 Senior Care is a privately-held company that is not affiliated with Genesis, however, it is our understanding that Mr. Reis may be considered the beneficial owner of the shares held by Senior Care.

**General Information and Questionnaire  
Related Parties\***

Name of Facility 22 South Street Operations LLC, d/b/a Fox Hill center	License No. 2370	Report for Year Ended 9/30/2019	Page 4	of 37
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Are any individuals receiving compensation from the facility related through marriage, ability to control, ownership, family or business association?     Yes     No    If "Yes," provide the Name/Address and complete the information on Page 11 of the report.

Are any individuals or companies which provide goods or services, including the rental of property or the loaning of funds to this facility, related through family association, common ownership, control, or business association to any of the owners, operators, or officials of this facility?     Yes     No    If "Yes," provide the following information:

Name of Related Individual or Company	Business Address	Also Provides Goods/Services to Non-Related Parties			Description of Goods/Services Provided	Indicate Where Costs are Included in Annual Report Page # / Line #	Cost Reported	Actual Cost to the Related Party
		Yes	No	%**				
Genesis Healthcare	101 East State Street, Kennett Square, PA 19348	<input checked="" type="radio"/>	<input type="radio"/>		Home Office	Pg 16/m12	472,049	472,049
Genesis ElderCare Rehabilitation Services	101 East State Street, Kennett Square, PA 19348	<input checked="" type="radio"/>	<input type="radio"/>	66%	PT/OT/ST- Direct and Indirect Cost	Pg 13/B5, 9,10	669,590	669,590
Genesis ElderCare Staffing Services	101 East State Street, Kennett Square, PA 19348	<input type="radio"/>	<input checked="" type="radio"/>	50%	Staffing Pool	Pg 10/A12, p15-1		
Genesis ElderCare Physician Services	101 East State Street, Kennett Square, PA 19348	<input checked="" type="radio"/>	<input type="radio"/>	87%	Medical Director /NP	Pg 13/B8, Pg 10/A12	66,924	66,924
Career Staffing	101 East State Street, Kennett Square, PA 19348	<input checked="" type="radio"/>	<input type="radio"/>	84%	Outside Agency	Pg 13/B11 pg 10-12, 15		
Respiratory Health Services	101 East State Street, Kennett Square, PA 19348	<input checked="" type="radio"/>	<input type="radio"/>	50%	Respiratory Therapy	Pg 13/B12, Pg 20/C5E2	49,780	49,780
Liberty Health (Insurance)	101 East State Street, Kennett Square, PA 19348	<input checked="" type="radio"/>	<input type="radio"/>		Insurance	Pg 27/14	195,848	195,848
Genesis Healthcare	101 East State Street, Kennett Square, PA 19348	<input checked="" type="radio"/>	<input type="radio"/>		Capital Interest	Page 17, page 26-12A		
		<input type="radio"/>	<input checked="" type="radio"/>					

\* 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 22 South Street Operations LLC, d/b/a Fox Hill	License No. 2370	Report for Year Ended 9/30/2019	Page 5	of 37
If the facility is licensed as CDH and/or RCH or provides AIDS or TBI services with special Medicaid rates, costs must be allocated to CCNH and RHNS as follows:				
Item		Method of Allocation		
Dietary		Number of meals served to residents		
Laundry		Number of pounds processed		
Housekeeping		Number of square feet serviced		
Nursing		Number of hours of routine care provided by EACH employee classification, i.e., Director (or Charge Nurse), Registered Nurses, Licensed Practical Nurses, Aides and Attendants		
Direct Resident Care Consultants		Number of hours of resident care provided by EACH specialist ( <i>See listing page 13</i> )		
Maintenance and operation of plant		Square feet		
Property costs (depreciation)		Square feet		
Employee health and welfare		Gross salaries		
Management services		Appropriate cost center involved		
All other General Administrative expenses		Total of Direct and Allocated Costs		
The preparer of this report must answer the following questions applicable to the cost information provided.				
1. In the preparation of this Report, were all costs allocated as required? <input checked="" type="radio"/> Yes <input type="radio"/> No      If "No," explain fully why such allocation was not made.				
2. Explain the allocation of related company expenses and attach copy of appropriate supporting data.				
3. Did the Facility appropriately allocate and self-disallow direct and indirect costs to non-nursing home cost centers? (e.g., Assisted Living, Home Health, Outpatient Services, Adult Day Care Services, etc.)				
<input checked="" type="radio"/> Yes <input type="radio"/> No      If "No," explain fully why such allocation was not made.				

### 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 22 South Street Operations LLC, d/b/a Fox Hill center			License No. 2370			Report for Year Ended 9/30/2019		Page of 6   37		
Name and Address of Lessor	Related * to Owners, Operators, Officers		Description of Items Leased	Date of Lease**	Term of Lease	Annual Amount of Lease	Amount Claimed			
	Yes	No								
	<input type="radio"/>	<input checked="" type="radio"/>								
	<input type="radio"/>	<input checked="" type="radio"/>								
	<input type="radio"/>	<input checked="" type="radio"/>								
	<input type="radio"/>	<input checked="" type="radio"/>								
	<input type="radio"/>	<input checked="" type="radio"/>								
	<input type="radio"/>	<input checked="" type="radio"/>								
	<input type="radio"/>	<input checked="" type="radio"/>								
	<input type="radio"/>	<input checked="" type="radio"/>								
	<input type="radio"/>	<input checked="" type="radio"/>								
Is a Mileage Log Book Maintained for All Leased Vehicles ?								<input type="radio"/> Yes	<input checked="" type="radio"/> No	<b>Total ***</b>

\* 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 22 South Street Operations LLC, d/	License No. 2370	Report for Year Ended 9/30/2019	Page 7	of 37
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The records of this facility for the period covered by this report were maintained on the following basis:

Accrual     Cash     Modified Cash

Is the accounting basis for this period the same as for the previous period?     Yes     No    If "No," explain.

**Independent Accounting Firm**

Name of Accounting Firm 1 KPMG Peat Marwick 2 3 4	Address (No. & Street, City, State, Zip Code) 1600 Market Street, Philadelphia, PA 19103
---	---

Services Provided by This Firm (*describe fully*)

1 Year end financial audit	\$	
2	\$	
3	\$	
4	\$	
		Charge for Services Provided
		\$

Are These Charges Reflected in the Expenditure Portion of This Report? If Yes, Specify Expense Classification and Line No.  
 Yes     No

**Legal Services Information**

Name of Legal Firm or Independent Attorney 1 Bloom & Witkin 2 Goldman Gruder & Woods LLC 3 Wiggim And Dana LLP 4 5	Telephone Number 617-456-0500 860-872-0519
---	--

Address ( <i>No. &amp; Street, City, State, Zip Code</i> )	
1	175 Federal Street Boston, MA 02110
2	14 Park Place, Vernon CT 06066-0268
3	130 Union St P.O. Box 388 Rockville, CT 06066
4	
5	

Services Provided by This Firm (*describe fully*)

1 Real Estate Tax Abatement-reduced the assessment values of Real Estate Tax	\$	1,584
2 Probate Court Fee	\$	
3 Probate Court Regarding Uncollectable Accounts	\$	
4	\$	
5	\$	
		Charge for Services Provided
		\$ 1,584

Are These Charges Reflected in the Expenditure Portion of This Report? If Yes, Specify Expense Classification and Line No.  
 Yes     No



**Schedule of Resident Statistics**

Name of Facility 22 South Street Operations LLC, d/b/a Fox Hill center		License No. 2370			Report for Year Ended 9/30/2019				Page 8	of 37			
	Total All Levels	Total CCNH Level	Total RHNS Level	Total (Specify)	Period 10/1 Thru 6/30				Period 7/1 Thru 9/30				
					Total	CCNH	RHNS	(Specify)	Total	CCNH	RHNS	(Specify)	
1. Certified Bed Capacity													
A. On last day of PREVIOUS report period	150	150			150	150			150	150			
B. On last day of THIS report period	150	150			150	150			150	150			
2. Number of Residents													
A. As of midnight of PREVIOUS report period	109	109			109	109			110	110			
B. As of midnight of THIS report period	110	110			110	110			110	110			
3. Total Number of Days Care Provided During Period													
A. Medicare	2,818	2,818			2,281	2,281			537	537			
B. Medicaid (Conn.)	29,961	29,961			22,395	22,395			7,566	7,566			
C. Medicaid (other states)													
D. Private Pay	2,885	2,885			2,183	2,183			702	702			
E. State SSI for RCH													
F. Other (Specify)	2,920	2,920			2,263	2,263			657	657			
G. Total Care Days During Period (3A thru F)	38,584	38,584			29,122	29,122			9,462	9,462			
4. Total Number of Days Not Included in Figures in 3G for Which Revenue Was Received for Reserved Beds													
A. Medicaid Bed Reserve Days													
B. Other Bed Reserve Days													
5. <b>Total Resident Days (3G + 4A + 4B)</b>	38,584	38,584			29,122	29,122			9,462	9,462			

### Schedule of Resident Statistics (Cont'd)

Name of Facility 22 South Street Operations LLC, d/b/a Fox H			License No. 2370			Report for Year Ended 9/30/2019			Page 9		of 37		
4. Were there any changes in the certified bed capacity during the report year? <span style="float: right;"><input type="radio"/> Yes <input checked="" type="radio"/> No</span>													
If "YES", provide the following information:													
Date of Change	Place of Change			Change in Beds						Capacity After Change			Reason for Change
	CCNH	RHNS	(Specify)	Lost			Gained			CCNH	RHNS	(Specify)	
	(1)	(2)	(3)	(1)	(2)	(3)	(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.													
Change in Resident Days									CCNH	RHNS	(Specify)		
1st change													
2nd change													
3rd change													
4th change													
6. Number of Residents and Rates on September 30 of Cost Year													
Item	Medicare		Medicaid		Self-Pay			Other State Assisted					
	CCNH	RHNS	CCNH	RHNS	CCNH	RHNS	(Specify)	R.C.H.	ICF-MR				
No. of Residents	10		81		19								
Per Diem Rate													
a. One bed rm.													
b. Two bed rms.	555.13		199.58		444.06								
c. Three or more bed rms.													
7. Total Number of Physical Therapy Treatments									TOTAL	CCNH	RHNS	(Specify)	
A. Medicare - Part B									2,768	2,768			
B. Medicaid (Exclusive of Part B)													
1. Maintenance Treatments													
2. Restorative Treatments									637	637			
C. Other									13,597	13,597			
D. <b>Total Physical Therapy Treatments</b>									17,002	17,002			
8. Total Number of Speech Therapy Treatments													
A. Medicare - Part B									255	255			
B. Medicaid (Exclusive of Part B)													
1. Maintenance Treatments													
2. Restorative Treatments									24	24			
C. Other									1,227	1,227			
D. <b>Total Speech Therapy Treatments</b>									1,506	1,506			
9. Total Number of Occupational Therapy Treatments													
A. Medicare - Part B									2,975	2,975			
B. Medicaid (Exclusive of Part B)													
1. Maintenance Treatments													
2. Restorative Treatments									323	323			
C. Other									13,806	13,806			
D. <b>Total Occupational Therapy Treatments</b>									17,104	17,104			

### Report of Expenditures - Salaries & Wages

Name of Facility 22 South Street Operations LLC, d/b/a Fox Hill center	License No. 2370	Report for Year Ended 9/30/2019	Page 10	of 37		
Are time records maintained by all individuals receiving compensation? <input checked="" type="radio"/> Yes <input type="radio"/> No						
	Total Cost and Hours					
Item	CCNH	Hours	RHNS	Hours	(Specify)	Hours
<b>A. Salaries and Wages*</b>						
1. Operators/Owners (Complete also Sec. I of Schedule A1)						
2. Administrator(s) (Complete also Sec. III of Schedule A1)	112,783	2,056				
3. Assistant Administrator (Complete also Sec. IV of Schedule A1)						
4. Other Administrative Salaries (telephone operator, clerks, receptionists, etc.)	231,592	10,190				
5. Dietary Service						
a. Head Dietitian						
b. Food Service Supervisor						
c. Dietary Workers						
6. Housekeeping Service						
a. Head Housekeeper						
b. Other Housekeeping Workers						
7. Repairs & Maintenance Services						
a. Engineer or Chief of Maintenance	36,849	1,434				
b. Other Maintenance Workers	10,908	706				
8. Laundry Service						
a. Supervisor						
b. Other Laundry Workers						
9. Barber and Beautician Services						
10. Protective Services						
11. Accounting Services						
a. Head Accountant						
b. Other Accountants						
12. Professional Care of Residents						
a. Directors and Assistant Director of Nurses	172,391	3,283				
b. RN						
1. Direct Care	886,651	23,177				
2. Administrative**	171,886	4,376				
c. LPN						
1. Direct Care	1,175,601	38,903				
2. Administrative**						
d. Aides and Attendants	1,476,620	84,657				
e. Physical Therapists						
f. Speech Therapists						
g. Occupational Therapists						
h. Recreation Workers	98,757	5,142				
i. Physicians						
1. Medical Director						
2. Utilization Review						
3. Resident Care***						
4. Other (Specify)						
j. Dentists						
k. Pharmacists						
l. Podiatrists						
m. Social Workers/Case Management	155,035	5,431				
n. Marketing						
o. Other (Specify)						
See Attached Schedule	62,618	3,271				
<i>A-13. Total Salary Expenditures</i>	4,591,690	182,626				

\* 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.



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

Name of Facility				License No.	Report for Year Ended			Page	of	
22 South Street Operations LLC, d/b/a Fox Hill center				2370	9/30/2019			11	37	
Name	Salary Paid			Fringe Benefits and/or Other Payments (describe fully)	Full Description of Services Rendered	Total Hours Worked	Line Where Claimed on Page 10	Name and Address of All Other Employment**	Total Hours Worked	Compensation Received
	CCNH	RHNS	(Specify)							
<b>Section I - Operators/Owners</b>										
<b>Section II - Other related parties of Operators/Owners employed in and paid by facility (EXCEPT those who may be the Administrator or Assistant Administrators who are identified on Page 12).</b>										

\* 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.

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

Name of Facility (as licensed)				License No.	Report for Year Ended			Page	of	
22 South Street Operations LLC, d/b/a Fox Hill center				2370	9/30/2019			12	37	
Name	Salary Paid			Fringe Benefits and/or Other Payments (describe fully)	Full Description of Services Rendered	Total Hours Worked	Line Where Claimed on Page 10	Name and Address of All Other Employment**	Total Hours Worked	Compensation Received
	CCNH	RHNS	(Specify)							
<b>Section III - Administrators***</b>										
Vitko-Aniolek,Stephanie Margaret	111,876				Management of Center	2,040	2			
Thompson,James 10/1/2018- 10/6/2018	907				Management of Center	16	2			
<b>Section IV - Assistant Administrators</b>										

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

\*\* Include **all** other employment worked during the cost year.

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

**B. Report of Expenditures - Professional Fees**

Name of Facility	License No.	Report for Year Ended	Page	of		
22 South Street Operations LLC, d/b/a Fox Hill cent	2370	9/30/2019	13	37		
	Total Cost and Hours					
Item	CCNH	Hours	RHNS	Hours	(Specify)	Hours
<b>*B. Direct care consultants paid on a fee for service basis in lieu of salary</b> (For all such services complete Schedule B1)						
1. Dietitian						
2. Dentist	16,322	112				
3. Pharmacist	14,492	296				
4. Podiatrist						
5. Physical Therapy						
a. Resident Care	362,390	4,964				
b. Other						
6. Social Worker						
7. Recreation Worker						
8. Physicians						
a. Medical Director (entire facility)	81,924	433				
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 (Quarterly meetings)						
3. Staff Development Committee (Once annually)						
e. Other (Specify)						
9. Speech Therapist						
a. Resident Care	45,533	584				
b. Other						
10. Occupational Therapist						
a. Resident Care	263,006	3,603				
b. Other						
11. Nurses and aides and attendants						
a. RN						
1. Direct Care						
2. Administrative***						
b. LPN						
1. Direct Care	14,342	339				
2. Administrative***						
c. Aides						
d. Other						
12. Other (Specify) See Attached Schedule	47,743					
<b>B-13 Total Fees Paid in Lieu of Salaries</b>	<b>845,751</b>	<b>10,330</b>				

\* 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.





**C. Expenditures Other Than Salaries - Administrative and General**

Name of Facility	License No.	Report for Year Ended	Page	of
22 South Street Operations LLC, d/b/a Fox Hill c	2370	9/30/2019	15	37
Item	Total	CCNH	RHNS	(Specify)
1. Administrative and General				
a. Employee Health & Welfare Benefits				
1. Workmen's Compensation	\$ 218,658	218,658		
2. Disability Insurance	\$			
3. Unemployment Insurance	\$ 58,179	58,179		
4. Social Security (F.I.C.A.)	\$ 336,222	336,222		
5. Health Insurance	\$ 426,163	426,163		
6. Life Insurance (employees only) (not-owners and not-operators)	\$			
7. Pensions (Non-Discriminatory) (not-owners and not-operators)	\$			
8. Uniform Allowance	\$			
9. Other ( <i>Specify</i> ) See Attached Schedule	\$			
b. Personal Retirement Plans, Pensions, and Profit Sharing Plans for Owners and Operators (Discriminatory)*	\$			
c. Bad Debts*	\$ 73,608	73,608		
d. Accounting and Auditing	\$			
e. Legal ( <i>Services should be fully described on Page 7</i> )	\$ 1,584	1,584		
f. Insurance on Lives of Owners and Operators ( <i>Specify</i> )*	\$			
g. Office Supplies	\$ 7,919	7,919		
h. Telephone and Cellular Phones				
1. Telephone & Pagers	\$ 20,671	20,671		
2. Cellular Phones	\$ 1,062	1,062		
i. Appraisal ( <i>Specify purpose and         attach copy</i> )*	\$			
j. Corporation Business Taxes ( <i>franchise tax</i> )	\$			
k. Other Taxes ( <i>Not related to property - See Page 22</i> )				
1. Income*	\$			
2. Other ( <i>Specify</i> ) See Attached Schedule	\$ 253	253		
3. Resident Day User Fee	\$ 692,798	692,798		
<b>Subtotal</b>	\$ 1,837,117	1,837,117		

\* 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**

**Schedule of Other Employee Benefits**

Description		CCNH	RHNS	(Specify)
	0	\$ -	\$ -	\$ -
	0	\$ -	\$ -	\$ -
	0	\$ -	\$ -	\$ -
	0	\$ -	\$ -	\$ -
	0	\$ -	\$ -	\$ -
	0	\$ -	\$ -	\$ -
	0	\$ -	\$ -	\$ -
<b>Total</b>		\$ -	\$ -	\$ -

**Schedule of Other Taxes**

Description		CCNH	RHNS	(Specify)
Sales Tax		\$ 253	\$ -	\$ -
Sales Tax		\$ -	\$ -	\$ -
	0	\$ -	\$ -	\$ -
	0	\$ -	\$ -	\$ -
<b>Total</b>		\$ 253	\$ -	\$ -

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

Name of Facility	License No.	Report for Year Ended	Page	of
22 South Street Operations LLC, d/b/a Fox Hill center	2370	9/30/2019	16	37
Item	Total	CCNH	RHNS	(Specify)
<b>Subtotals Brought Forward:</b>	1,837,117	1,837,117		
l. Travel and Entertainment				
1. Resident Travel and Entertainment	\$			
2. Holiday Parties for Staff	\$	245	245	
3. Gifts to Staff and Residents	\$			
4. Employee Travel	\$	938	938	
5. Education Expenses Related to Seminars and Conventions	\$	600	600	
6. Automobile Expense ( <i>not purchase or depreciation</i> )	\$			
7. Other ( <i>Specify</i> ) See Attached Schedule	\$			
m. Other Administrative and General Expenses				
1. Advertising Help Wanted ( <i>all such expenses</i> )	\$			
2. Advertising Telephone Directory ( <i>all such expenses</i> )***	\$			
3. Advertising Other ( <i>Specify</i> )*** See Attached Schedule	\$	7,444	7,444	
4. Fund-Raising***	\$			
5. Medical Records	\$			
6. Barber and Beauty Supplies (if this service is supplied directly and not by contract or fee for service)***	\$			
7. Postage	\$	2,365	2,365	
* 8. Dues and Membership Fees to Professional Associations ( <i>Specify</i> ) See Attached Schedule	\$	12,052	12,052	
8a. Dues to Chamber of Commerce & Other Non-Allowable Org.***	\$	450	450	
9. Subscriptions	\$	753	753	
10. Contributions*** See Attached Schedule	\$	2,064	2,064	
11. Services Provided by Contract ( <i>Specify and Complete Schedule C-2, Page 21 for each firm or individual</i> )	\$	8,555	8,555	
12. Administrative Management Services**	\$	450,979	450,979	
13. Other ( <i>Specify</i> ) See Attached Schedule	\$	31,955	31,955	
<b>C-14 Total Administrative &amp; General Expenditures</b>	<b>\$</b>	<b>2,355,516</b>	<b>2,355,516</b>	

\* 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.

## Schedule of Other Travel and Entertainment

Description	CCNH	RHNS	(Specify)
	0 \$ -	\$ -	\$ -
	0 \$ -	\$ -	\$ -
	0 \$ -	\$ -	\$ -
	0 \$ -	\$ -	\$ -
	0 \$ -	\$ -	\$ -
	0 \$ -	\$ -	\$ -
<b>Total Other Travel and Entertainment</b>	\$ -	\$ -	\$ -

## Schedule of Other Advertising

Description	CCNH	RHNS	(Specify)
Advertising	\$ 1,923	\$ -	\$ -
Marketing Expense	\$ 3,220	\$ -	\$ -
Marketing Exp- Corporate Spend	\$ 2,301	\$ -	\$ -
<b>Total Other Advertising</b>	\$ 7,444	\$ -	\$ -

## Schedule of Dues

Description	CCNH	RHNS	(Specify)
Licenses & Certifications	\$ 12,502	\$ -	\$ -
Dues to Chamber of Commerce	\$ (450)	\$ -	\$ -
	0 \$ -	\$ -	\$ -
	0 \$ -	\$ -	\$ -
	0 \$ -	\$ -	\$ -
<b>Total Dues</b>	\$ 12,052	\$ -	\$ -

## Schedule of Contributions

Description	CCNH	RHNS	(Specify)
Contributions	\$ 75	\$ -	\$ -
Political Contributions	\$ 1,989	\$ -	\$ -
	0 \$ -	\$ -	\$ -
<b>Total Contributions</b>	\$ 2,064	\$ -	\$ -

## Schedule of Other Administrative and General

Description	CCNH	RHNS	(Specify)
Bank Service Charges	\$ 4,430	\$ -	\$ -
Collection Fees	\$ 23,098	self-disallowed	\$ -
Education Expense	\$ 5	\$ -	\$ -
Employee Physicals	\$ 5,317	\$ -	\$ -
Employee Relations	\$ 1,923	\$ -	\$ -
Printing	\$ 104	\$ -	\$ -
Training Expense	\$ 473	\$ -	\$ -
Fines & Penalties	\$ -	self-disallowed	\$ -
Miscellaneous	\$ 111	\$ -	\$ -
Rental Expense	\$ 2,212	\$ -	\$ -
Accrued Expense Estimation	\$ (452)	self-disallowed	\$ -
Landlord Operating Taxes	\$ -	\$ -	\$ -
State Tax Annual Report Filing	\$ 20	\$ -	\$ -
Recruiting Fees	\$ -	\$ -	\$ -
Non-recurring Charges	\$ (5,285)	\$ -	\$ -
<b>Total Other Administrative and General</b>	\$ 31,955	\$ -	\$ -

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

Name of Facility 22 South Street Operations LLC, d/b/a Fo	License No. 2370	Report for Year Ended 9/30/2019	Page of 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 #
Genesis Health Ventures, 101 East St., Kennett Square, PA 19348	472,049	Mgmt Services, Property Mgmt Assisting, MIS, Personnel, Compliance	pg 16 m-12
Genesis Health Ventures, 101 East St., Kennett Square, PA 19348			

**\* 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)**

Name of Facility		License No.	Report for Year Ended	Page	of
22 South Street Operations LLC, d/b/a Fox Hill center		2370	9/30/2019	18	37
Item		Total	CCNH	RHNS	(Specify)
2. Dietary					
a. In-House Preparation & Service					
1.	Raw Food	\$ 183,404	183,404		
2.	Non-Food Supplies	\$ 28,899	28,899		
3.	Other (Specify) _____	\$ (3,461)	(3,461)		
b. Purchased Services (by contract other than through Management Services) (Complete Schedule C-2 att. Page 21)					
c. Other (Specify) _____		\$			
<b>2D. Total Dietary Expenditures (2a + b + c + d)</b>		\$ 807,478	807,478		
2E. Dietary Questionnaire		Total	CCNH	RHNS	(Specify)
F.	Resident Meals: Total no. of meals served per day:*				
G.	Is cost of employee meals included in 2D?	<input type="radio"/> Yes	<input checked="" type="radio"/> No		
H.	Did you receive revenue from employees?	<input type="radio"/> Yes	<input checked="" type="radio"/> No		If yes, specify amt.
I.	Where is the revenue received reported in the Cost Report? (Page/Line Item)				
J.	Is cost of meals provided to persons other than employees or residents (i.e., Board Members, Guests) included in 2D?	<input type="radio"/> Yes	<input checked="" type="radio"/> No		If yes, specify cost.
K.	Is any revenue collected from these people?	<input type="radio"/> Yes	<input checked="" type="radio"/> No		If yes, specify amt.
L.	Where is the revenue received reported in the Cost Report? (Page/Line Item)				
M.	Is cost of food (other than meals, e.g., snacks at monthly staff meetings, board meetings) provided to employees included in 2D?	<input type="radio"/> Yes	<input checked="" type="radio"/> No		If yes, specify cost.
N.	Is any revenue collected from employees?	<input type="radio"/> Yes	<input checked="" type="radio"/> No		If yes, specify amt.
O.	Where is the revenue received reported in the Cost Report? (Page/Line Item)				

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

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

Name of Facility 22 South Street Operations LLC, d/b/a Fox Hill center		License No. 2370	Report for Year Ended 9/30/2019	Page 19	of 37
Item		Total	CCNH	RHNS	(Specify)
3. Laundry					
a. In-House Processing*		Lbs.			
1. Bed linens, cubicle curtains, draperies, gowns and other resident care items washed, ironed, and/or processed.***		Amt. \$	4,875	4,875	
2. Employee items including uniforms, gowns, etc. washed, ironed and/or processed.***		Lbs.			
		Amt. \$			
3. Personal clothing of residents washed, ironed, and/or processed.***		Lbs.			
		Amt. \$			
4. Repair and/or purchase of linens.***		Lbs.			
		Amt. \$	4,295	4,295	
b. Purchased Services (by contract other than through Management Services) (Complete Schedule C-2 att. Page 21)		\$	146,960	146,960	
c. Other (Specify)		\$			
<b>3D. Total Laundry Expenditures (3a + b + c)</b>		\$	156,130	156,130	
3E. Laundry Questionnaire					
F.	Is cost of employee laundry included in 3D?	<input type="radio"/> Yes	<input checked="" type="radio"/> No	If yes, specify cost.	
G.	Did you receive revenue from employees?	<input type="radio"/> Yes	<input checked="" type="radio"/> No	If yes, specify amt.	
H.	Where is the revenue received reported in the Cost Report?	(Page/Line Item)			
I.	Is Cost of laundry provided to persons other than employees or residents included in 3D?	<input type="radio"/> Yes	<input checked="" type="radio"/> No	If yes, specify cost.	
J.	Did you receive revenue from these people?	<input type="radio"/> Yes	<input checked="" type="radio"/> No	If yes, specify amt.	
K.	Where is the revenue received reported in the Cost Report?	(Page/Line 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 3D.  
 \*\*\* 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)**

Name of Facility		License No.	Report for Year Ended		Page	of
22 South Street Operations LLC, d/b/a Fox Hill		2370	9/30/2019		20	37
Item			Total	CCNH	RHNS	(Specify)
4.	Housekeeping	Sq. Ft. Serviced by Personnel				
a.	In-House Care					
	1. Supplies - Cleaning ( <i>Mops, pails, brooms, etc.</i> )	Amt. \$	14,663	14,663		
b.	Purchased Services ( <i>by contract other than through Management Services</i> ) ( <i>Complete Schedule C-2 att. Page 21</i> )	Sq. Ft. Serviced by Personnel				
		Amt. \$	221,386	221,386		
C. Other ( <i>Specify</i> )			\$			
<b>4D. Total Housekeeping Expenditures (4a + b + c)</b>			\$ 236,049	236,049		
5.	Resident Care (Supplies)**					
a.	Prescription Drugs***					
	1. Own Pharmacy	\$				
	2. Purchased from	\$	240,644	240,644		
	b. Medicine Cabinet Drugs	\$	13,169	13,169		
	c. Medical and Therapeutic Supplies	\$	109,627	109,627		
	d. Ambulance/Limousine***	\$	4,058	4,058		
	e. Oxygen					
	1. For Emergency Use	\$				
	2. Other***	\$	11,924	11,924		
	f. X-rays and Related Radiological Procedures***	\$	9,408	9,408		
	g. Dental ( <i>Not dentists who should be included under salaries or fees</i> )	\$				
	h. Laboratory***	\$	46,317	46,317		
	i. Recreation	\$	52,527	52,527		
	j. Direct Management Services*	\$				
	k. Indirect Management Services*	\$				
	l. Other (Specify)**** See Attached Schedule	\$	74,335	74,335		
<b>5M. Total Resident Care Expenditures (5a - 5j)</b>			\$ 562,009	562,009		

\* 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.



## Schedule of Other Resident Care

Description	CCNH	RHNS	(Specify)
Incontinency	\$ 43,434	\$ -	\$ -
Advertising-Help Wanted	\$ (6,420)	\$ -	\$ -
Advertising-Help Wanted	\$ 954	\$ -	\$ -
Books, Dues & Subscriptions	\$ 85	\$ -	\$ -
Education Expense	\$ 804	\$ -	\$ -
Supplies	\$ 1,182	\$ -	\$ -
Supplies	\$ 28,479	\$ -	\$ -
Supplies	\$ -	\$ -	\$ -
Office Supplies	\$ 50	\$ -	\$ -
Office Supplies	\$ -	\$ -	\$ -
Office Supplies	\$ -	\$ -	\$ -
Training Expense	\$ -	\$ -	\$ -
Rental Expense	\$ 443	\$ -	\$ -
Rental Expense	\$ 5,264	\$ -	\$ -
Consolidated Billing	\$ 39	\$ -	\$ -
Tuition Reimbursement	\$ -	\$ -	\$ -
Tuition Reimbursement	\$ -	\$ -	\$ -
Tuition Reimbursement	\$ -	\$ -	\$ -
Miscellaneous	\$ (3)	\$ -	\$ -
Licenses & Certifications	\$ -	\$ -	\$ -
Supplies	\$ 22	\$ -	\$ -
	0	\$ -	\$ -
	0	\$ -	\$ -
<b>Total Other Resident Care</b>	<b>\$ 74,335</b>	<b>\$ -</b>	<b>\$ -</b>

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

Name of Facility 22 South Street Operations LLC, d/b/a Fox Hill center			License No. 2370		Report for Year Ended 9/30/2019			Page of 21   37		
Name of Individual or Company	Address	Related ** to Owners, Operators, Officers		Explanation of Relationship	Full Explanation of Service Provided*	Total Cost/Page Ref.***				
		Yes	No			CCNH	RHNS	(Specify)	Pg	Line
Healthcare Services Group	Drive, Bensalem, PA 19020	<input type="radio"/>	<input checked="" type="radio"/>	Vendor Contracted	Laundry Purchased Services	146,960			19	3b
Healthcare Services Group	Drive, Bensalem, PA 19020	<input type="radio"/>	<input checked="" type="radio"/>	Vendor Contracted	Housekeeping Purchased Services	221,386			20	4b
Healthcare Services Group	Drive, Bensalem, PA 19020	<input type="radio"/>	<input checked="" type="radio"/>	Vendor Contracted	Dietary Purchased Services	596,405			18	2b
		<input type="radio"/>	<input checked="" type="radio"/>							
		<input type="radio"/>	<input checked="" type="radio"/>							
		<input type="radio"/>	<input checked="" type="radio"/>							
		<input type="radio"/>	<input checked="" type="radio"/>							
		<input type="radio"/>	<input checked="" type="radio"/>							
		<input type="radio"/>	<input checked="" type="radio"/>							
		<input type="radio"/>	<input checked="" type="radio"/>							
		<input type="radio"/>	<input checked="" type="radio"/>							
		<input type="radio"/>	<input checked="" type="radio"/>							
		<input type="radio"/>	<input checked="" type="radio"/>							
		<input type="radio"/>	<input checked="" type="radio"/>							
		<input type="radio"/>	<input checked="" type="radio"/>							
		<input type="radio"/>	<input checked="" type="radio"/>							
		<input type="radio"/>	<input checked="" type="radio"/>							

\* 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 Year Ended			Page	of
22 South Street Operations LLC, d/b/a Fox Hi	2370	9/30/2019			22	37
Item		Total	CCNH	RHNS	(Specify)	
6. Maintenance & Operation of Plant						
a. Repairs & Maintenance	\$	161,042	161,042			
b. Heat	\$	136,980	136,980			
c. Light & Power	\$	132,373	132,373			
d. Water	\$	47,921	47,921			
e. Equipment Lease ( <i>Provide detail on page 6</i> )	\$					
f. Other ( <i>itemize</i> )	\$					
See Attached Schedule						
<b>6g. Total Maint. &amp; Operating Expense (6a - 6f)</b>	<b>\$</b>	<b>478,317</b>	<b>478,317</b>			
7. Depreciation ( <i>complete schedule page 23*</i> )						
a. Land Improvements	\$					
b. Building & Building Improvements	\$	60	60			
c. Non-Movable Equipment	\$					
d. Movable Equipment	\$	556	556			
<b>*7e. Total Depreciation Costs (7a + b + c + d)</b>	<b>\$</b>	<b>616</b>	<b>616</b>			
8. Amortization ( <i>Complete att. Schedule Page 24*</i> )						
a. Organization Expense	\$					
b. Mortgage Expense	\$					
c. Leasehold Improvements	\$					
d. Other ( <i>Specify</i> )	\$					
<b>*8e. Total Amortization Costs (8a + b + c + d)</b>	<b>\$</b>					
9. Rental payments on leased real property less real estate taxes included in item 10b	\$	246,337	246,337			
10. Property Taxes						
a. Real estate taxes paid by owner	\$					
b. Real estate taxes paid by lessor	\$	93,648	93,648			
c. Personal property taxes	\$					
<b>11. Total Property Expenses (7e + 8e + 9 + 10)</b>	<b>\$</b>	<b>340,601</b>	<b>340,601</b>			

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



### Depreciation Schedule

Name of Facility 22 South Street Operations LLC, d/b/a Fox Hill center			License No. 2370		Report for Year Ended 9/30/2019			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			
<b>A. Land Improvements</b>											
1. Acquired prior to this report period	5,977		5,977	2,542	S/L	Various					
2. Disposals (attach schedule)	(5,977)		(5,977)	(2,542)							
3. Acquired during this report period (attach schedule)											
A-4. Subtotal											
<b>B. Building and Building Improvements</b>											
1. Acquired prior to this report period	6,558,782		6,558,782	2,235,231	S/L	Various	(0)				
2. Disposals (attach schedule)	(6,558,782)		(6,558,782)	(2,235,231)							
3. Acquired during this report period (attach schedule)	5,381		5,381				60				
B-4. Subtotal								60			
<b>C. Non-Movable Equipment</b>											
1. Acquired prior to this report period	167,122		167,122	136,389	S/L	Various					
2. Disposals (attach schedule)	(167,122)		(167,122)	(136,389)							
3. Acquired during this report period (attach schedule)											
C-4. Subtotal											
	Is a mileage logbook maintained?	Date of Acquisition		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
	Yes	No	Month	Year							
<b>D. Movable Equipment</b>											
1. Motor Vehicles (Specify name, model and year of each vehicle)											
a.											
b.											
c.											
d.											
2. Movable Equipment											
a. Acquired prior to this report period											
b. Disposals (attach schedule)											
c. Acquired during this report period (attach schedule)											
D-3. Subtotal											
<b>E. Total Depreciation</b>											



Fox Hill Center  
 Asset Deletions on 10/1/2018

Locati	Account No.	Sys	Ex	Description	In Svc Date	(7,190,898.26)		DeprMeth	EstLife	(1,715,941.34)				
						Acquired	Value			Current	Center	Narr	State	
											Accum			
56001	150050	Bldg Imp	009335	000	2 Taco hea	8/31/2012	(5,300.00)	R	SLMM	20	00	(1,612.08)	Fox Hill	CT
56001	150050	Bldg Imp	009336	000	Webter oil	8/31/2012	(1,230.00)	R	SLMM	20	00	(374.13)	Fox Hill	CT
56001	150050	Bldg Imp	009341	000	Amtrol SX	12/31/2012	(1,329.38)	R	SLMM	20	00	(382.20)	Fox Hill	CT
56001	150050	Bldg Imp	009346	000	2 Taco Pur	1/31/2013	(5,973.10)	R	SLMM	20	00	(1,692.41)	Fox Hill	CT
56001	150050	Bldg Imp	009367	000	Burner boc	9/30/2013	(8,820.00)	R	SLMM	20	00	(2,205.00)	Fox Hill	CT
56001	150050	Bldg Imp	014044	000	Burner boc	11/30/2013	(9,380.00)	R	SLMM	20	00	(2,266.83)	Fox Hill	CT
56001	150050	Bldg Imp	014138	000	Circulator	12/31/2013	(1,169.79)	R	SLMM	20	00	(490.39)	Fox Hill	CT
56001	150050	Bldg Imp	014402	000	Easy Heat	2/28/2014	(1,807.15)	R	SLMM	20	00	(414.15)	Fox Hill	CT
56001	150050	Bldg Imp	014483	000	Undergrou	3/31/2014	(11,693.53)	R	SLMM	20	00	(2,631.06)	Fox Hill	CT
56001	150050	Bldg Imp	014484	000	Undergrou	3/31/2014	(92,014.02)	R	SLMM	20	00	(20,703.16)	Fox Hill	CT
56001	150050	Bldg Imp	014723	000	Undergrou	5/31/2014	(1,169.85)	R	SLMM	20	00	(253.46)	Fox Hill	CT
56001	150050	Bldg Imp	014724	000	Fire hydran	5/31/2014	(7,763.55)	R	SLMM	20	00	(1,682.12)	Fox Hill	CT
56001	150050	Bldg Imp	015626	000	Grease traf	2/28/2015	(7,200.00)	R	SLMM	20	00	(1,290.00)	Fox Hill	CT
56001	150050	Bldg Imp	015759	000	(2) 30 amp	3/31/2015	(1,200.00)	R	SLMM	20	00	(210.00)	Fox Hill	CT
56001	150050	Bldg Imp	016744	000	Wiring anc	9/30/2015	(1,935.00)	R	SLMM	20	00	(290.25)	Fox Hill	CT
56001	150050	Bldg Imp	017036	000	E stop on g	10/31/2015	(1,059.75)	R	SLMM	20	00	(154.55)	Fox Hill	CT
56001	150050	Bldg Imp	017319	000	install for l	12/31/2015	(3,100.00)	R	SLMM	20	00	(426.25)	Fox Hill	CT
56001	150050	Bldg Imp	017320	000	2nd and fir	12/31/2015	(3,785.00)	R	SLMM	20	00	(520.44)	Fox Hill	CT
56001	150050	Bldg Imp	017362	000	Piping and	12/31/2015	(1,776.20)	R	SLMM	20	00	(244.23)	Fox Hill	CT
56001	150050	Bldg Imp	019486	000	Updated M	7/31/2017	(2,193.65)	R	SLMM	20	00	(127.96)	Fox Hill	CT
56001	150050	Bldg Imp	019557	000	Touchscree	8/31/2017	(3,391.50)	R	SLMM	20	00	(183.72)	Fox Hill	CT
56001	150050	Bldg Imp	019880	000	Square D I	11/30/2017	(5,530.20)	R	SLMM	20	00	(230.42)	Fox Hill	CT
56001	150050	Bldg Imp	020542	000	North Day	6/30/2018	(1,992.00)	R	SLMM	20	00	(24.90)	Fox Hill	CT
56001	150055	Bldg Imp	009355	000	Vinyl cove	6/30/2013	(55,833.64)	R	SLMM	15	00	(19,541.76)	Fox Hill	CT
56001	150055	Bldg Imp	009356	000	5 exterior s	6/30/2013	(20,266.58)	R	SLMM	15	00	(7,093.32)	Fox Hill	CT
56001	150055	Bldg Imp	009369	000	Vinyl cove	10/31/2013	(52,499.90)	R	SLMM	15	00	(17,208.28)	Fox Hill	CT
56001	150055	Bldg Imp	015354	000	7 exterior s	11/30/2014	(27,579.18)	R	SLMM	15	00	(7,048.01)	Fox Hill	CT
56001	150055	Bldg Imp	015625	000	Exterior dc	2/28/2015	(2,190.81)	R	SLMM	15	00	(523.35)	Fox Hill	CT
56001	150057	Bldg Imp	009325	000	Remove ex	3/31/2012	(6,684.31)	R	SLMM	10	00	(4,344.79)	Fox Hill	CT
56001	150057	Bldg Imp	009361	000	Video surv	8/31/2013	(21,240.22)	R	SLMM	10	00	(10,797.11)	Fox Hill	CT
56001	150057	Bldg Imp	018343	000	Access cor	8/31/2016	(5,640.80)	R	SLMM	10	00	(1,175.17)	Fox Hill	CT
56001	150057	Bldg Imp	018457	000	50% depos	9/30/2016	(43,750.00)	R	SLMM	10	00	(8,750.00)	Fox Hill	CT
56001	150057	Bldg Imp	018732	000	Supply & i	12/31/2016	(43,750.00)	R	SLMM	10	00	(7,656.25)	Fox Hill	CT
56001	150057	Bldg Imp	019485	000	Upgrade G	7/31/2017	(3,498.92)	R	SLMM	10	00	(408.21)	Fox Hill	CT
56001	150057	Bldg Imp	020714	000	Birch Woc	8/31/2018	(4,215.00)	R	SLMM	10	00	(35.13)	Fox Hill	CT
56001	150057	Bldg Imp	020715	000	Dish Room	8/31/2018	(1,595.99)	R	SLMM	10	00	(13.30)	Fox Hill	CT
56001	150070	Non Mova	009141	000	INSTALL.	12/31/2011	(50.99)	P	NoDep	00	00	-	Fox Hill	CT
56001	150070	Non Mova	009145	000	(1) WALL	12/31/2011	(19.47)	P	NoDep	00	00	-	Fox Hill	CT
56001	150070	Non Mova	009146	000	(7) NC205	12/31/2011	(31.18)	P	NoDep	00	00	-	Fox Hill	CT
56001	150070	Non Mova	009148	000	INSTALL.	12/31/2011	(59.54)	P	SLMM	00	02	59.54	Fox Hill	CT
56001	150070	Non Mova	009163	000	Installatio	12/31/2011	(161.01)	P	SLMM	00	10	161.01	Fox Hill	CT
56001	150070	Non Mova	009165	000	Unimac W	12/31/2011	(1,664.32)	P	SLMM	00	11	1,664.32	Fox Hill	CT
56001	150075	Non Mova	009160	000	PAINT AN	12/31/2011	(26,519.38)	P	SLMM	03	09	26,519.38	Fox Hill	CT
56001	150075	Non Mova	009164	000	Labor & M	12/31/2011	(2,878.72)	P	SLMM	03	10	2,878.72	Fox Hill	CT
56001	150075	Non Mova	009166	000	Labor & M	12/31/2011	(3,850.51)	P	SLMM	03	11	3,850.51	Fox Hill	CT
56001	150075	Non Mova	009169	000	MILEAGE	12/31/2011	(4,931.54)	P	SLMM	04	00	4,931.54	Fox Hill	CT
56001	150075	Non Mova	009170	000	Project Ma	12/31/2011	(416.00)	P	SLMM	03	10	416.00	Fox Hill	CT
56001	150075	Non Mova	009171	000	Project Ma	12/31/2011	(484.48)	P	SLMM	03	11	484.48	Fox Hill	CT
56001	150075	Non Mova	009172	000	Project Ma	12/31/2011	(580.77)	P	SLMM	04	00	580.77	Fox Hill	CT
56001	150075	Non Mova	009173	000	Constructi	12/31/2011	(5,389.80)	P	SLMM	04	01	5,389.80	Fox Hill	CT
56001	150075	Non Mova	009179	000	Project Ma	12/31/2011	(539.63)	P	SLMM	04	01	539.63	Fox Hill	CT
56001	150075	Non Mova	009180	000	Project Ma	12/31/2011	(200.05)	P	SLMM	01	02	200.05	Fox Hill	CT
56001	150075	Non Mova	009181	000	Constructi	12/31/2011	(2,158.80)	P	SLMM	01	02	2,158.80	Fox Hill	CT
56001	150075	Non Mova	009183	000	Labor & M	12/31/2011	(6,330.68)	P	SLMM	04	03	6,330.68	Fox Hill	CT
56001	150075	Non Mova	009184	000	Project Ma	12/31/2011	(494.06)	P	SLMM	04	03	494.06	Fox Hill	CT
56001	150075	Non Mova	009185	000	GMA Labo	12/31/2011	(5,374.55)	P	SLMM	04	04	5,374.55	Fox Hill	CT
56001	150075	Non Mova	009186	000	Project Ma	12/31/2011	(494.55)	P	SLMM	04	04	494.55	Fox Hill	CT
56001	150075	Non Mova	009187	000	Project Ma	12/31/2011	(136.39)	P	SLMM	04	05	136.39	Fox Hill	CT
56001	150075	Non Mova	009188	000	GMA Labo	12/31/2011	(6,049.98)	P	SLMM	04	05	6,049.98	Fox Hill	CT
56001	150075	Non Mova	009191	000	GMA Labo	12/31/2011	(5,114.06)	P	SLMM	04	06	5,114.06	Fox Hill	CT
56001	150075	Non Mova	009192	000	Project Ma	12/31/2011	(221.87)	P	SLMM	04	06	221.87	Fox Hill	CT
56001	150075	Non Mova	009194	000	Wallcoveri	12/31/2011	(34.00)	P	SLMM	04	07	34.00	Fox Hill	CT
56001	150075	Non Mova	009198	000	Kwalu Pan	12/31/2011	(25.60)	P	SLMM	04	08	25.60	Fox Hill	CT
56001	150075	Non Mova	009199	000	Flooring	12/31/2011	(29,361.34)	P	SLMM	04	09	29,361.34	Fox Hill	CT
56001	150075	Non Mova	009200	000	Handrail b	12/31/2011	(289.03)	P	SLMM	04	09	289.03	Fox Hill	CT
56001	150075	Non Mova	009301	000	2 Trane 8 l	12/31/2011	(13,749.69)	P	SLMM	09	07	9,684.56	Fox Hill	CT
56001	150075	Non Mova	009303	000	Trane 1 tor	12/31/2011	(3,354.17)	P	SLMM	09	07	2,362.50	Fox Hill	CT

56001	150075	Non Mova 009304	000	Compressc	12/31/2011	(1,471.04) P	SLMM	09 07	1,036.13	Fox Hill	CT
56001	150075	Non Mova 009310	000	Control bo	12/31/2011	(628.33) P	SLMM	09 08	438.75	Fox Hill	CT
56001	150075	Non Mova 009312	000	Variable sp	12/31/2011	(1,343.67) P	SLMM	09 08	938.25	Fox Hill	CT
56001	150075	Non Mova 009317	000	Final payr	12/31/2011	(13,988.81) P	SLMM	09 09	9,684.56	Fox Hill	CT
56001	150075	Non Mova 009362	000	Amtrol ex	8/31/2013	(1,342.50) P	SLMM	10 00	682.44	Fox Hill	CT
56001	150075	Non Mova 009363	000	Amtrol ex	8/31/2013	(1,342.50) P	SLMM	10 00	682.44	Fox Hill	CT
56001	150075	Non Mova 015028	000	1st install c	7/31/2014	(2,067.50) P	SLMM	10 00	861.46	Fox Hill	CT
56001	150075	Non Mova 015029	000	1st install c	7/31/2014	(2,400.00) P	SLMM	10 00	1,000.00	Fox Hill	CT
56001	150075	Non Mova 015030	000	Final instal	7/31/2014	(2,067.50) P	SLMM	10 00	861.46	Fox Hill	CT
56001	150075	Non Mova 015031	000	Final instal	7/31/2014	(2,400.00) P	SLMM	10 00	1,000.00	Fox Hill	CT
56001	150075	Non Mova 016373	000	1st install c	6/30/2015	(1,950.00) P	SLMM	10 00	633.75	Fox Hill	CT
56001	150075	Non Mova 016495	000	Compressc	7/31/2015	(1,950.00) P	SLMM	10 00	617.50	Fox Hill	CT
56001	150075	Non Mova 016496	000	Parts and l	7/31/2015	(903.98) P	SLMM	10 00	286.27	Fox Hill	CT
56001	150075	Non Mova 018242	000	1st install i	7/31/2016	(2,280.00) P	SLMM	10 00	494.00	Fox Hill	CT
56001	150075	Non Mova 018342	000	Kitchen A/	8/31/2016	(2,785.00) P	SLMM	10 00	580.21	Fox Hill	CT
56001	150075	Non Mova 019558	000	Compressc	8/31/2017	(3,617.50) P	SLMM	10 00	391.89	Fox Hill	CT
56001	150075	Non Mova 019559	000	Compressc	8/31/2017	(3,617.50) P	SLMM	10 00	391.89	Fox Hill	CT
56001	150080	Movable E 009140	000	REPAIR T	12/31/2011	(35.41) P	NoDep	00 00	-	Fox Hill	CT
56001	150080	Movable E 009142	000	Special bec	12/31/2011	(4.91) P	NoDep	00 00	-	Fox Hill	CT
56001	150080	Movable E 009149	000	(4) VACU	12/31/2011	(79.10) P	SLMM	00 04	79.10	Fox Hill	CT
56001	150080	Movable E 009150	000	USER TA.	12/31/2011	(6.46) P	SLMM	00 04	6.46	Fox Hill	CT
56001	150080	Movable E 009151	000	NEW SNC	12/31/2011	(164.00) P	SLMM	00 05	164.00	Fox Hill	CT
56001	150080	Movable E 009152	000	IMPLEME	12/31/2011	(1,232.46) P	SLMM	00 06	1,232.46	Fox Hill	CT
56001	150080	Movable E 009154	000	Interior Im	12/31/2011	(58.96) P	SLMM	00 08	58.96	Fox Hill	CT
56001	150080	Movable E 009155	000	Interior Im	12/31/2011	(0.75) P	SLMM	00 08	0.75	Fox Hill	CT
56001	150080	Movable E 009158	000	Furniture	12/31/2011	(4,833.22) P	SLMM	00 09	4,833.22	Fox Hill	CT
56001	150080	Movable E 009159	000	34, 15" LC	12/31/2011	(3,557.07) P	SLMM	00 09	3,557.07	Fox Hill	CT
56001	150080	Movable E 009162	000	Storage Cc	12/31/2011	(53.88) P	SLMM	00 10	53.88	Fox Hill	CT
56001	150080	Movable E 009168	000	Rolling Ca	12/31/2011	(1,528.51) P	SLMM	01 00	1,528.51	Fox Hill	CT
56001	150080	Movable E 009176	000	Vacuum	12/31/2011	(184.11) P	SLMM	01 01	184.11	Fox Hill	CT
56001	150080	Movable E 009177	000	Vacuum	12/31/2011	(1,369.52) P	SLMM	01 01	1,369.52	Fox Hill	CT
56001	150080	Movable E 009178	000	Kwalu Inc	12/31/2011	(4,463.13) P	SLMM	01 01	4,463.13	Fox Hill	CT
56001	150080	Movable E 009182	000	Vacuum, F	12/31/2011	(32.52) P	SLMM	01 03	32.52	Fox Hill	CT
56001	150080	Movable E 009195	000	HCST/CH	12/31/2011	(845.89) P	SLMM	01 08	845.89	Fox Hill	CT
56001	150080	Movable E 009196	000	Chairs and	12/31/2011	(4,031.58) P	SLMM	01 08	4,031.58	Fox Hill	CT
56001	150080	Movable E 009197	000	Midland D	12/31/2011	(788.66) P	SLMM	01 08	788.66	Fox Hill	CT
56001	150080	Movable E 009202	000	Dining roo	12/31/2011	(8,945.41) P	SLMM	01 11	8,945.41	Fox Hill	CT
56001	150080	Movable E 009207	000	Spot Vital	12/31/2011	(2,931.60) P	SLMM	02 01	2,931.60	Fox Hill	CT
56001	150080	Movable E 009208	000	Linen Cart	12/31/2011	(806.63) P	SLMM	02 01	806.63	Fox Hill	CT
56001	150080	Movable E 009210	000	AED Semi	12/31/2011	(1,415.08) P	SLMM	02 02	1,415.08	Fox Hill	CT
56001	150080	Movable E 009219	000	Four Funct	12/31/2011	(985.88) P	SLMM	02 05	985.88	Fox Hill	CT
56001	150080	Movable E 009237	000	Replace P1	12/31/2011	(12,233.33) P	SLMM	03 04	12,233.33	Fox Hill	CT
56001	150080	Movable E 009241	000	(12) STAC	12/31/2011	(2,141.38) P	SLMM	03 06	2,141.38	Fox Hill	CT
56001	150080	Movable E 009268	000	(2)Reliant	12/31/2011	(2,957.72) P	SLMM	04 07	2,957.72	Fox Hill	CT
56001	150080	Movable E 009281	000	42" Comm	12/31/2011	(1,366.46) P	SLMM	05 04	1,366.46	Fox Hill	CT
56001	150080	Movable E 009283	000	Reliant 45	12/31/2011	(1,010.54) P	SLMM	05 05	1,010.54	Fox Hill	CT
56001	150080	Movable E 009284	000	oxygen cor	12/31/2011	(4,930.71) P	SLMM	04 11	4,930.71	Fox Hill	CT
56001	150080	Movable E 009285	000	2 Digital L	12/31/2011	(1,222.71) P	SLMM	06 01	1,222.71	Fox Hill	CT
56001	150080	Movable E 009296	000	Digital Lif	12/31/2011	(662.58) P	SLMM	06 06	662.58	Fox Hill	CT
56001	150080	Movable E 009297	000	Reliant 60	12/31/2011	(2,233.06) P	SLMM	06 06	2,233.06	Fox Hill	CT
56001	150080	Movable E 009298	000	Cool Only	12/31/2011	(1,934.95) P	SLMM	06 06	1,934.95	Fox Hill	CT
56001	150080	Movable E 009308	000	Huntleigh	12/31/2011	(670.92) P	SLMM	06 08	670.92	Fox Hill	CT
56001	150080	Movable E 009313	000	OLS laund	12/31/2011	(13,191.43) P	SLMM	06 09	13,191.43	Fox Hill	CT
56001	150080	Movable E 009343	000	Attendant l	2/28/2013	(608.30) P	SLMM	07 00	485.19	Fox Hill	CT
56001	150080	Movable E 009344	000	Reliant 60	2/28/2013	(3,397.73) P	SLMM	07 00	2,710.09	Fox Hill	CT
56001	150080	Movable E 009345	000	2 Attendan	2/28/2013	(4,004.94) P	SLMM	07 00	3,194.45	Fox Hill	CT
56001	150080	Movable E 009352	000	Fold Up Pc	4/30/2013	(1,358.07) P	SLMM	07 00	1,050.89	Fox Hill	CT
56001	150080	Movable E 009359	000	GE 11,600	7/31/2013	(773.52) P	SLMM	07 00	570.92	Fox Hill	CT
56001	150080	Movable E 015758	000	Sales and U	3/31/2015	(457.00) P	SLMM	07 00	228.52	Fox Hill	CT
56001	150080	Movable E 016371	000	2 Attendan	6/30/2015	(4,302.39) P	SLMM	07 00	1,997.54	Fox Hill	CT
56001	150080	Movable E 016497	000	Wired up 2	7/31/2015	(553.02) P	SLMM	07 00	250.17	Fox Hill	CT
56001	150080	Movable E 016498	000	2 bases for	7/31/2015	(638.10) P	SLMM	07 00	288.67	Fox Hill	CT
56001	150080	Movable E 016742	000	GE Zoneli	9/30/2015	(1,280.08) P	SLMM	07 00	548.61	Fox Hill	CT
56001	150080	Movable E 016743	000	2 UniMac	9/30/2015	(27,733.95) P	SLMM	07 00	11,885.97	Fox Hill	CT
56001	150080	Movable E 017225	000	Digital Lif	11/30/2015	(751.87) P	SLMM	07 00	304.32	Fox Hill	CT
56001	150080	Movable E 017543	000	24 in and (	2/29/2016	(345.63) P	SLMM	07 00	127.57	Fox Hill	CT
56001	150080	Movable E 018243	000	Rice Lake	7/31/2016	(1,919.15) P	SLMM	07 00	594.04	Fox Hill	CT
56001	150080	Movable E 019084	000	Invacare P	3/31/2017	(1,024.11) P	SLMM	07 00	219.46	Fox Hill	CT
56001	150080	Movable E 019085	000	Welch All	3/31/2017	(466.86) P	SLMM	07 00	100.05	Fox Hill	CT
56001	150080	Movable E 019086	000	Attendant t	3/31/2017	(2,134.74) P	SLMM	07 00	457.44	Fox Hill	CT
56001	150080	Movable E 019879	000	Digital Lif	11/30/2017	(756.13) P	SLMM	07 00	90.02	Fox Hill	CT
56001	150080	Movable E 020540	000	Flat Screer	6/30/2018	(170.14) P	SLMM	07 00	6.08	Fox Hill	CT
56001	150080	Movable E 020713	000	Built In Cc	8/31/2018	(2,263.79) P	SLMM	07 00	26.95	Fox Hill	CT
56001	150080	Movable E 020764	000	Vital Signs	9/30/2018	(4,039.40) P	SLMM	07 00	-	Fox Hill	CT



56001	150085	Movable E 009156	000	Duracase I	12/31/2011	(2,133.95) P	SLMM	03 09	2,133.95	Fox Hill	CT
56001	150085	Movable E 009157	000	23, V-Rise	12/31/2011	(9,800.06) P	SLMM	03 09	9,800.06	Fox Hill	CT
56001	150085	Movable E 009167	000	V-Riser Fu	12/31/2011	(5,124.82) P	SLMM	04 00	5,124.82	Fox Hill	CT
56001	150085	Movable E 009174	000	Window T	12/31/2011	(18,150.70) P	SLMM	04 01	18,150.70	Fox Hill	CT
56001	150085	Movable E 009175	000	Window T	12/31/2011	(22,597.60) P	SLMM	04 01	22,597.60	Fox Hill	CT
56001	150085	Movable E 009193	000	(12) Full E	12/31/2011	(6,385.44) P	SLMM	04 07	6,385.44	Fox Hill	CT
56001	150085	Movable E 009201	000	Gas stove,	12/31/2011	(2,944.96) P	SLMM	04 10	2,944.96	Fox Hill	CT
56001	150085	Movable E 009203	000	Wheelchai	12/31/2011	(454.84) P	SLMM	05 00	454.84	Fox Hill	CT
56001	150085	Movable E 009204	000	Install feed	12/31/2011	(360.92) P	SLMM	05 00	360.92	Fox Hill	CT
56001	150085	Movable E 009205	000	Repipe gas	12/31/2011	(295.74) P	SLMM	05 00	295.74	Fox Hill	CT
56001	150085	Movable E 009206	000	Square Mo	12/31/2011	(2,319.32) P	SLMM	05 00	2,319.32	Fox Hill	CT
56001	150085	Movable E 009209	000	Food proce	12/31/2011	(1,659.21) P	SLMM	05 02	1,659.21	Fox Hill	CT
56001	150085	Movable E 009213	000	Elec Hi-Lc	12/31/2011	(1,204.16) P	SLMM	05 04	1,204.16	Fox Hill	CT
56001	150085	Movable E 009214	000	Special Lif	12/31/2011	(56.68) P	SLMM	05 04	56.68	Fox Hill	CT
56001	150085	Movable E 009215	000	Electric M	12/31/2011	(1,234.71) P	SLMM	05 04	1,234.71	Fox Hill	CT
56001	150085	Movable E 009216	000	(2) Sofas, t	12/31/2011	(3,720.34) P	SLMM	05 05	3,720.34	Fox Hill	CT
56001	150085	Movable E 009220	000	27" Solid B	12/31/2011	(320.68) P	SLMM	05 05	320.68	Fox Hill	CT
56001	150085	Movable E 009222	000	freight and	12/31/2011	(259.82) P	SLMM	05 06	259.82	Fox Hill	CT
56001	150085	Movable E 009223	000	Bed Headt	12/31/2011	(5,277.44) P	SLMM	05 07	5,277.44	Fox Hill	CT
56001	150085	Movable E 009224	000	inratio pt/i	12/31/2011	(659.30) P	SLMM	05 08	659.30	Fox Hill	CT
56001	150085	Movable E 009225	000	Artwork	12/31/2011	(1,968.68) P	SLMM	05 09	1,968.68	Fox Hill	CT
56001	150085	Movable E 009226	000	Artwork	12/31/2011	(1,763.33) P	SLMM	05 09	1,763.33	Fox Hill	CT
56001	150085	Movable E 009227	000	Insinkeratc	12/31/2011	(1,008.13) P	SLMM	05 09	1,008.13	Fox Hill	CT
56001	150085	Movable E 009228	000	Install Stai	12/31/2011	(1,493.27) P	SLMM	05 09	1,493.27	Fox Hill	CT
56001	150085	Movable E 009230	000	Window T	12/31/2011	(1,740.79) P	SLMM	05 10	1,740.79	Fox Hill	CT
56001	150085	Movable E 009231	000	Electric be	12/31/2011	(53,551.20) P	SLMM	05 10	53,551.20	Fox Hill	CT
56001	150085	Movable E 009232	000	Window T	12/31/2011	(3,991.14) P	SLMM	05 10	3,991.14	Fox Hill	CT
56001	150085	Movable E 009235	000	Refrigeratc	12/31/2011	(2,112.45) P	SLMM	05 11	2,112.45	Fox Hill	CT
56001	150085	Movable E 009243	000	(3) OVERI	12/31/2011	(202.76) P	SLMM	06 07	202.76	Fox Hill	CT
56001	150085	Movable E 009244	000	(1) REACI	12/31/2011	(3,338.45) P	SLMM	06 07	3,338.45	Fox Hill	CT
56001	150085	Movable E 009247	000	Direct Sup	12/31/2011	(684.41) P	SLMM	06 08	684.41	Fox Hill	CT
56001	150085	Movable E 009248	000	Direct Sup	12/31/2011	(433.77) P	SLMM	06 08	433.77	Fox Hill	CT
56001	150085	Movable E 009249	000	Garbage D	12/31/2011	(890.93) P	SLMM	06 10	880.07	Fox Hill	CT
56001	150085	Movable E 009252	000	(1)Wheelcl	12/31/2011	(191.70) P	SLMM	07 01	182.66	Fox Hill	CT
56001	150085	Movable E 009253	000	(1)Counter	12/31/2011	(2,225.12) P	SLMM	07 01	2,120.45	Fox Hill	CT
56001	150085	Movable E 009254	000	(1)Maxi-R	12/31/2011	(2,138.79) P	SLMM	07 02	2,014.47	Fox Hill	CT
56001	150085	Movable E 009255	000	(3)Large C	12/31/2011	(433.68) P	SLMM	07 02	408.44	Fox Hill	CT
56001	150085	Movable E 009262	000	(2)End Par	12/31/2011	(118.95) P	SLMM	07 05	108.27	Fox Hill	CT
56001	150085	Movable E 009263	000	(4)Overber	12/31/2011	(333.52) P	SLMM	07 05	303.55	Fox Hill	CT
56001	150085	Movable E 009266	000	(1)Dormor	12/31/2011	(193.40) P	SLMM	07 07	172.13	Fox Hill	CT
56001	150085	Movable E 009267	000	(1)Counter	12/31/2011	(2,188.66) P	SLMM	07 07	1,948.18	Fox Hill	CT
56001	150085	Movable E 009269	000	9000 XT V	12/31/2011	(258.35) P	SLMM	07 08	227.48	Fox Hill	CT
56001	150085	Movable E 009270	000	Fingertip p	12/31/2011	(258.73) P	SLMM	07 09	225.38	Fox Hill	CT
56001	150085	Movable E 009271	000	ACCECAI	12/31/2011	(5,093.87) P	SLMM	08 01	4,253.65	Fox Hill	CT
56001	150085	Movable E 009278	000	oval pastry	12/31/2011	(879.40) P	SLMM	08 03	719.48	Fox Hill	CT
56001	150085	Movable E 009280	000	Queene Ar	12/31/2011	(267.18) P	SLMM	08 04	216.41	Fox Hill	CT
56001	150085	Movable E 009282	000	1 Maxwell	12/31/2011	(1,858.69) P	SLMM	08 04	1,505.52	Fox Hill	CT
56001	150085	Movable E 009287	000	Reach-In F	12/31/2011	(2,915.02) P	SLMM	09 03	2,127.20	Fox Hill	CT
56001	150085	Movable E 009288	000	29x36 pedi	12/31/2011	(974.23) P	SLMM	09 03	710.91	Fox Hill	CT
56001	150085	Movable E 009295	000	Conveyor	12/31/2011	(1,005.02) P	SLMM	09 06	714.08	Fox Hill	CT
56001	150085	Movable E 009307	000	Parallel ba	12/31/2011	(4,922.90) P	SLMM	09 08	3,437.57	Fox Hill	CT
56001	150085	Movable E 009320	000	Reach in fi	12/31/2011	(4,068.78) P	SLMM	09 11	2,769.53	Fox Hill	CT
56001	150085	Movable E 009322	000	4 Deluxe a	1/31/2012	(540.17) P	SLMM	10 00	360.14	Fox Hill	CT
56001	150085	Movable E 009324	000	4 Deluxe A	3/31/2012	(574.20) P	SLMM	10 00	373.24	Fox Hill	CT
56001	150085	Movable E 009328	000	(2) EX2 2C	5/31/2012	(347.90) P	SLMM	10 00	220.34	Fox Hill	CT
56001	150085	Movable E 009332	000	Hot food tr	6/30/2012	(2,208.42) P	SLMM	10 00	1,380.25	Fox Hill	CT
56001	150085	Movable E 009334	000	3 shelf util	8/31/2012	(1,920.68) P	SLMM	10 00	1,168.42	Fox Hill	CT
56001	150085	Movable E 009351	000	STEAMEF	4/30/2013	(5,201.56) P	SLMM	10 00	2,817.53	Fox Hill	CT
56001	150085	Movable E 009354	000	3 Deluxe A	6/30/2013	(437.65) P	SLMM	10 00	229.79	Fox Hill	CT
56001	150085	Movable E 009357	000	7 Qt. Repl	7/31/2013	(869.92) P	SLMM	10 00	449.45	Fox Hill	CT
56001	150085	Movable E 009358	000	2 Deluxe A	7/31/2013	(284.26) P	SLMM	10 00	146.89	Fox Hill	CT
56001	150085	Movable E 009364	000	OmniCycl	9/30/2013	(15,633.45) P	SLMM	10 00	7,816.75	Fox Hill	CT
56001	150085	Movable E 009365	000	4 Deluxe A	9/30/2013	(577.82) P	SLMM	10 00	288.91	Fox Hill	CT
56001	150085	Movable E 009366	000	4 Deluxe A	9/30/2013	(577.82) P	SLMM	10 00	288.91	Fox Hill	CT
56001	150085	Movable E 014166	000	Liquid blei	12/31/2013	(721.45) P	SLMM	10 00	342.71	Fox Hill	CT
56001	150085	Movable E 014332	000	4 Deluxe A	1/31/2014	(583.27) P	SLMM	10 00	272.21	Fox Hill	CT
56001	150085	Movable E 015027	000	Deluxe Au	7/31/2014	(449.30) P	SLMM	10 00	187.21	Fox Hill	CT
56001	150085	Movable E 015119	000	3 Deluxe A	8/31/2014	(449.01) P	SLMM	10 00	183.35	Fox Hill	CT
56001	150085	Movable E 015437	000	1.6 cu ft m	12/31/2014	(527.54) P	SLMM	10 00	197.81	Fox Hill	CT
56001	150085	Movable E 015757	000	Maxwell T	3/31/2015	(457.45) P	SLMM	10 00	160.12	Fox Hill	CT
56001	150085	Movable E 016372	000	Countertop	6/30/2015	(3,188.35) P	SLMM	10 00	1,036.23	Fox Hill	CT
56001	150085	Movable E 017035	000	VACCINE	10/31/2015	(1,081.29) P	SLMM	10 00	315.38	Fox Hill	CT
56001	150085	Movable E 017603	000	4 Economy	2/29/2016	(297.90) P	SLMM	10 00	76.96	Fox Hill	CT
56001	150085	Movable E 017891	000	Mirage Ca	4/30/2016	(314.37) P	SLMM	10 00	75.98	Fox Hill	CT

56001	150085	Movable E019816	000	Whirlpool	10/31/2017	(587.04) P	SLMM	10 00	53.80	Fox Hill	CT
56001	150085	Movable E019878	000	(2) 18 in (2	11/30/2017	(1,286.21) P	SLMM	10 00	107.19	Fox Hill	CT
56001	150085	Movable E019963	000	Filter for I	12/31/2017	(163.69) P	SLMM	10 00	12.28	Fox Hill	CT
56001	150085	Movable E019964	000	Counter Ct	12/31/2017	(5,743.22) P	SLMM	10 00	430.74	Fox Hill	CT
56001	150085	Movable E020763	000	2 - Wheelc	9/30/2018	(486.18) P	SLMM	10 00	-	Fox Hill	CT
56001	150087	Movable E009250	000	(10) Alarm	12/31/2011	(316.94) P	SLMM	01 11	316.94	Fox Hill	CT
56001	150087	Movable E009251	000	Cont passi	12/31/2011	(108.00) P	SLMM	02 00	108.00	Fox Hill	CT
56001	150087	Movable E009256	000	(1)52in Co	12/31/2011	(1,181.05) P	SLMM	02 03	1,181.05	Fox Hill	CT
56001	150087	Movable E009261	000	(20)Alarm	12/31/2011	(823.22) P	SLMM	02 05	823.22	Fox Hill	CT
56001	150087	Movable E009274	000	15" & 18"	12/31/2011	(1,306.49) P	SLMM	03 02	1,306.49	Fox Hill	CT
56001	150087	Movable E009276	000	Genesis on	12/31/2011	(662.33) P	SLMM	03 03	662.33	Fox Hill	CT
56001	150087	Movable E009289	000	15" Smart	12/31/2011	(2,632.01) P	SLMM	04 04	2,632.01	Fox Hill	CT
56001	150087	Movable E009323	000	28" floor s	2/29/2012	(3,447.74) P	SLMM	05 00	3,447.74	Fox Hill	CT
56001	150087	Movable E009338	000	Readyspac	9/30/2012	(8,936.46) P	SLMM	05 00	8,936.46	Fox Hill	CT
56001	150087	Movable E009339	000	Air mover	9/30/2012	(2,502.09) P	SLMM	05 00	2,502.09	Fox Hill	CT
56001	150087	Movable E018344	000	Air Circul	8/31/2016	(380.71) P	SLMM	05 00	158.63	Fox Hill	CT
56001	150088	Movable E009221	000	Compact c	12/31/2011	(1.00) P	NoDep	00 00	-	Fox Hill	CT
56001	150088	Movable E009264	000	(5)C2500&	12/31/2011	(1,764.70) P	SLMM	00 06	1,764.70	Fox Hill	CT
56001	150088	Movable E009265	000	(1)Hush C	12/31/2011	(35.57) P	SLMM	00 06	35.57	Fox Hill	CT
56001	150088	Movable E009277	000	TRUE LO	12/31/2011	(1,240.63) P	SLMM	01 03	1,240.63	Fox Hill	CT
56001	150088	Movable E009279	000	10 Genesis	12/31/2011	(1,339.14) P	SLMM	01 04	1,339.14	Fox Hill	CT
56001	150088	Movable E009286	000	19 MATTI	12/31/2011	(4,078.35) P	SLMM	02 03	4,078.35	Fox Hill	CT
56001	150088	Movable E009326	000	Misc asset:	4/30/2012	(537.00) P	SLMM	00 08	537.00	Fox Hill	CT
56001	150088	Movable E009327	000	4 Genesis	4/30/2012	(1,254.93) P	SLMM	03 00	1,254.93	Fox Hill	CT
56001	150088	Movable E009342	000	9 MATTR	2/28/2013	(2,918.54) P	SLMM	03 00	2,918.54	Fox Hill	CT
56001	150088	Movable E009368	000	10 MATTI	10/31/2013	(3,256.01) P	SLMM	03 00	3,256.01	Fox Hill	CT
56001	150088	Movable E014404	000	12 MATTI	2/28/2014	(3,907.22) P	SLMM	03 00	3,907.22	Fox Hill	CT
56001	150088	Movable E015436	000	20 MATTI	12/31/2014	(6,512.03) P	SLMM	03 00	6,512.03	Fox Hill	CT
56001	150088	Movable E017318	000	First instal	12/31/2015	(3,208.54) P	SLMM	03 00	2,941.15	Fox Hill	CT
56001	150088	Movable E018084	000	14 MATTI	6/30/2016	(4,487.21) P	SLMM	03 00	3,365.42	Fox Hill	CT
56001	150088	Movable E019083	000	10 MATTI	3/31/2017	(3,137.33) P	SLMM	03 00	1,568.67	Fox Hill	CT
56001	150088	Movable E019586	000	7 MATTR	9/30/2017	(2,196.13) P	SLMM	03 00	732.04	Fox Hill	CT
56001	150088	Movable E019877	000	7 MATTR	11/30/2017	(2,196.13) P	SLMM	03 00	610.03	Fox Hill	CT
56001	150088	Movable E020451	000	(10) Visco	5/31/2018	(2,469.07) P	SLMM	03 00	274.34	Fox Hill	CT
56001	150088	Movable E020541	000	(10) Visco	6/30/2018	(2,469.07) P	SLMM	03 00	205.76	Fox Hill	CT
56001	150100	Movable E009153	000	UNDER-S	12/31/2011	(135.13) P	SLMM	03 06	135.13	Fox Hill	CT
56001	150100	Movable E009211	000	Executive	12/31/2011	(367.67) P	SLMM	05 03	367.67	Fox Hill	CT
56001	150100	Movable E009212	000	Ergonomic	12/31/2011	(242.48) P	SLMM	05 04	242.48	Fox Hill	CT
56001	150100	Movable E009217	000	Connector	12/31/2011	(277.08) P	SLMM	05 05	277.08	Fox Hill	CT
56001	150100	Movable E009218	000	Fax Machi	12/31/2011	(272.71) P	SLMM	05 05	272.71	Fox Hill	CT
56001	150100	Movable E009233	000	(12) chairs	12/31/2011	(974.63) P	SLMM	05 11	974.63	Fox Hill	CT
56001	150100	Movable E009234	000	Desk	12/31/2011	(992.18) P	SLMM	05 11	992.18	Fox Hill	CT
56001	150100	Movable E009245	000	(2) Task C	12/31/2011	(641.04) P	SLMM	06 07	641.04	Fox Hill	CT
56001	150100	Movable E009246	000	(2)Chairs,	12/31/2011	(594.56) P	SLMM	06 07	594.56	Fox Hill	CT
56001	150100	Movable E009331	000	Credit Car	6/30/2012	(499.00) P	SLMM	02 06	499.00	Fox Hill	CT
56001	150100	Movable E009360	000	5 drawer fi	8/31/2013	(1,275.46) P	SLMM	10 00	648.38	Fox Hill	CT
56001	150100	Movable E014881	000	Credit Car	6/30/2014	(77.46) P	SLMM	10 00	32.93	Fox Hill	CT
56001	150100	Movable E020762	000	Office Cha	9/30/2018	(187.07) P	SLMM	10 00	-	Fox Hill	CT
56001	150110	Movable E009143	000	HP LASEF	12/31/2011	(1.02) P	NoDep	00 00	-	Fox Hill	CT
56001	150110	Movable E009144	000	HP LASEF	12/31/2011	(10.92) P	NoDep	00 00	-	Fox Hill	CT
56001	150110	Movable E009147	000	CABLING	12/31/2011	(40.80) P	NoDep	00 00	-	Fox Hill	CT
56001	150110	Movable E009161	000	Analog ph	12/31/2011	(1.24) P	NoDep	00 00	-	Fox Hill	CT
56001	150110	Movable E009257	000	(1)HP 17"	12/31/2011	(15.19) P	SLMM	00 04	15.19	Fox Hill	CT
56001	150110	Movable E009258	000	(1)APC Sn	12/31/2011	(69.90) P	SLMM	00 04	69.90	Fox Hill	CT
56001	150110	Movable E009259	000	(1)HP 17"	12/31/2011	(15.00) P	SLMM	00 04	15.00	Fox Hill	CT
56001	150110	Movable E009260	000	Cortelco 2-	12/31/2011	(23.02) P	SLMM	00 04	23.02	Fox Hill	CT
56001	150110	Movable E009273	000	HP 17" fla	12/31/2011	(52.84) P	SLMM	01 02	52.84	Fox Hill	CT
56001	150110	Movable E009275	000	HP 19" mc	12/31/2011	(64.87) P	SLMM	01 03	64.87	Fox Hill	CT
56001	150110	Movable E009290	000	PGP licens	12/31/2011	(28.88) P	SLMM	02 05	28.88	Fox Hill	CT
56001	150110	Movable E009291	000	CoreCal &	12/31/2011	(321.66) P	SLMM	02 05	321.66	Fox Hill	CT
56001	150110	Movable E009293	000	1 1 Yr Ons	12/31/2011	(38.87) P	SLMM	02 06	38.87	Fox Hill	CT
56001	150110	Movable E009294	000	1 Lenovo	12/31/2011	(540.35) P	SLMM	02 06	540.35	Fox Hill	CT
56001	150110	Movable E009306	000	HP SB LE	12/31/2011	(133.52) P	SLMM	02 08	133.52	Fox Hill	CT
56001	150110	Movable E009333	000	1 Asus 19	7/31/2012	(120.28) P	SLMM	03 00	120.28	Fox Hill	CT
56001	150110	Movable E009340	000	1 Asus 19	10/31/2012	(120.81) P	SLMM	03 00	120.81	Fox Hill	CT
56001	150110	Movable E009349	000	1 APC Sm	3/31/2013	(741.73) P	SLMM	03 00	741.73	Fox Hill	CT
56001	150110	Movable E009350	000	1 APC UP	3/31/2013	(249.19) P	SLMM	03 00	249.19	Fox Hill	CT
56001	150110	Movable E014043	000	1 HP Laser	11/30/2013	(323.51) P	SLMM	03 00	323.51	Fox Hill	CT
56001	150110	Movable E014722	000	Asus 19 in	5/31/2014	(118.03) P	SLMM	03 00	118.03	Fox Hill	CT
56001	150110	Movable E014883	000	HP LJ M4	6/30/2014	(533.35) P	SLMM	03 00	533.35	Fox Hill	CT
56001	150110	Movable E014884	000	HP LJ M4	6/30/2014	(533.35) P	SLMM	03 00	533.35	Fox Hill	CT
56001	150110	Movable E015624	000	Two Way	2/28/2015	(366.83) P	SLMM	03 00	366.83	Fox Hill	CT
56001	150110	Movable E016124	000	Infocus prc	4/30/2015	(509.86) P	SLMM	03 00	509.86	Fox Hill	CT
56001	150115	Movable E009272	000	HP Laserje	12/31/2011	(157.46) P	SLMM	03 02	157.46	Fox Hill	CT

56001	150117	Movable E	009229	000	installation	12/31/2011	(176.96)	P	SLMM	02 10	176.96	Fox Hill	CT
56001	150117	Movable E	009242	000	(1) 5402 D	12/31/2011	(218.40)	P	SLMM	03 07	218.40	Fox Hill	CT
56001	150117	Movable E	009337	000	Cabling	9/30/2012	(532.00)	P	SLMM	07 00	456.00	Fox Hill	CT
56001	150117	Movable E	009353	000	Cabling	5/31/2013	(532.00)	P	SLMM	07 00	405.33	Fox Hill	CT
56001	150117	Movable E	014882	000	Data line d	6/30/2014	(718.22)	P	SLMM	07 00	436.05	Fox Hill	CT
56001	150025	Land Imp	014331	000	CONCRETE	1/31/2014	(1,940.88)	R	SLMM	10 00	905.75	Fox Hill	CT
56001	150025	Land Imp	014403	000	CONCRETE	2/28/2014	(2,812.95)	R	SLMM	10 00	1,289.29	Fox Hill	CT
56001	150025	Land Imp	017224	000	flagpole	11/30/2015	(1,223.03)	R	SLMM	10 00	346.52	Fox Hill	CT
56001	150046	Bldg	009330	000	Est Buildir	12/31/2017	(6,088,327.66)	R	RemVI		(2,112,227.00)	Fox Hill	CT

22 South Street Operations LLC, d/b/a Fox Hill center  
 Depreciation Expense Report  
 As of September 30, 2019

Sch 23 Total Depm 615.81  
 Sch 29 total Depm Adj 66,285.70  
 Total Depm Expense 66,901.51

1,171,262.54

642,294.44 66,901.51 709,195.95

Locati	G/L Asset	Acct Desc Sys	Description	In Svc Date	AcquiredValue PT	DeptrMeth	EstLife	Depreciable Basis	Prior Accum	Current YTD	Current Accum
									Depreciation	Depreciation	Depreciation
									9/30/2018	2,019.00	9/30/2019
56001	150016	Financing 009329	Establish land valu	12/31/2011	1,080,000.00 R	NoDep	00 00	1,080,000.00	-	-	-
56001	150070	Non Mova 009141	INSTALLATION	12/31/2011	50.99 P	NoDep	00 00	50.99	-	-	-
56001	150070	Non Mova 009145	(1) WALL MOUN	12/31/2011	19.47 P	NoDep	00 00	19.47	-	-	-
56001	150070	Non Mova 009146	(7) NC205 MULT	12/31/2011	31.18 P	NoDep	00 00	31.18	-	-	-
56001	150070	Non Mova 009148	INSTALLATION	12/31/2011	59.54 P	SLMM	00 02	59.54	59.54	-	59.54
56001	150070	Non Mova 009163	Installation of Sigr	12/31/2011	161.01 P	SLMM	00 10	161.01	161.01	-	161.01
56001	150070	Non Mova 009165	Unimac Washer	12/31/2011	1,664.32 P	SLMM	00 11	1,664.32	1,664.32	-	1,664.32
56001	150075	Non Mova 009160	PAINT AND WAI	12/31/2011	26,519.38 P	SLMM	03 09	26,519.38	26,519.38	-	26,519.38
56001	150075	Non Mova 009164	Labor & Mileage	12/31/2011	2,878.72 P	SLMM	03 10	2,878.72	2,878.72	-	2,878.72
56001	150075	Non Mova 009166	Labor & Mileage	12/31/2011	3,850.51 P	SLMM	03 11	3,850.51	3,850.51	-	3,850.51
56001	150075	Non Mova 009169	MILEAGE AND I	12/31/2011	4,931.54 P	SLMM	04 00	4,931.54	4,931.54	-	4,931.54
56001	150075	Non Mova 009170	Project Manager T	12/31/2011	416.00 P	SLMM	03 10	416.00	416.00	-	416.00
56001	150075	Non Mova 009171	Project Manager T	12/31/2011	484.48 P	SLMM	03 11	484.48	484.48	-	484.48
56001	150075	Non Mova 009172	Project Manager T	12/31/2011	580.77 P	SLMM	04 00	580.77	580.77	-	580.77
56001	150075	Non Mova 009173	Construction Crew	12/31/2011	5,389.80 P	SLMM	04 01	5,389.80	5,389.80	-	5,389.80
56001	150075	Non Mova 009179	Project Manager T	12/31/2011	539.63 P	SLMM	04 01	539.63	539.63	-	539.63
56001	150075	Non Mova 009180	Project Manager T	12/31/2011	200.05 P	SLMM	01 02	200.05	200.05	-	200.05
56001	150075	Non Mova 009181	Construction Crew	12/31/2011	2,158.80 P	SLMM	01 02	2,158.80	2,158.80	-	2,158.80
56001	150075	Non Mova 009183	Labor & Mileage	12/31/2011	6,330.68 P	SLMM	04 03	6,330.68	6,330.68	-	6,330.68
56001	150075	Non Mova 009184	Project Manager T	12/31/2011	494.06 P	SLMM	04 03	494.06	494.06	-	494.06
56001	150075	Non Mova 009185	GMA Labor & Mi	12/31/2011	5,374.55 P	SLMM	04 04	5,374.55	5,374.55	-	5,374.55
56001	150075	Non Mova 009186	Project Manager T	12/31/2011	494.55 P	SLMM	04 04	494.55	494.55	-	494.55
56001	150075	Non Mova 009187	Project Manager T	12/31/2011	136.39 P	SLMM	04 05	136.39	136.39	-	136.39
56001	150075	Non Mova 009188	GMA Labor & Mi	12/31/2011	6,049.98 P	SLMM	04 05	6,049.98	6,049.98	-	6,049.98
56001	150075	Non Mova 009191	GMA Labor & Mi	12/31/2011	5,114.06 P	SLMM	04 06	5,114.06	5,114.06	-	5,114.06
56001	150075	Non Mova 009192	Project Manager T	12/31/2011	221.87 P	SLMM	04 06	221.87	221.87	-	221.87
56001	150075	Non Mova 009194	Wallcovering	12/31/2011	34.00 P	SLMM	04 07	34.00	34.00	-	34.00
56001	150075	Non Mova 009198	Kwalu Paneling Sy	12/31/2011	25.60 P	SLMM	04 08	25.60	25.60	-	25.60
56001	150075	Non Mova 009199	Flooring	12/31/2011	29,361.34 P	SLMM	04 09	29,361.34	29,361.34	-	29,361.34
56001	150075	Non Mova 009200	Handrail brackets,	12/31/2011	289.03 P	SLMM	04 09	289.03	289.03	-	289.03
56001	150075	Non Mova 009301	2 Trane 8 1/2 ton d	12/31/2011	13,749.69 P	SLMM	09 07	13,749.69	9,684.56	1,434.75	11,119.31
56001	150075	Non Mova 009303	Trane 1 ton A/C ur	12/31/2011	3,354.17 P	SLMM	09 07	3,354.17	2,362.50	350.00	2,712.50
56001	150075	Non Mova 009304	Compressor crank	12/31/2011	1,471.04 P	SLMM	09 07	1,471.04	1,036.13	153.50	1,189.63
56001	150075	Non Mova 009310	Control board for /	12/31/2011	628.33 P	SLMM	09 08	628.33	438.75	65.00	503.75
56001	150075	Non Mova 009312	Variable speed mo	12/31/2011	1,343.67 P	SLMM	09 08	1,343.67	938.25	139.00	1,077.25
56001	150075	Non Mova 009317	Final payment on 2	12/31/2011	13,988.81 P	SLMM	09 09	13,988.81	9,684.56	1,434.75	11,119.31
56001	150080	Movable E009140	REPAIR TO PATI	12/31/2011	35.41 P	NoDep	00 00	35.41	-	-	-
56001	150080	Movable E009142	Special bed and m	12/31/2011	4.91 P	NoDep	00 00	4.91	-	-	-
56001	150080	Movable E009149	(4) VACUUM 156	12/31/2011	79.10 P	SLMM	00 04	79.10	79.10	-	79.10
56001	150080	Movable E009150	USER TAX UNK	12/31/2011	6.46 P	SLMM	00 04	6.46	6.46	-	6.46
56001	150080	Movable E009151	NEW SNOW BLC	12/31/2011	164.00 P	SLMM	00 05	164.00	164.00	-	164.00
56001	150080	Movable E009152	IMPLEMENTATI	12/31/2011	1,232.46 P	SLMM	00 06	1,232.46	1,232.46	-	1,232.46
56001	150080	Movable E009154	Interior Improvem	12/31/2011	58.96 P	SLMM	00 08	58.96	58.96	-	58.96
56001	150080	Movable E009155	Interior Improvem	12/31/2011	0.75 P	SLMM	00 08	0.75	0.75	-	0.75
56001	150080	Movable E009158	Furniture	12/31/2011	4,833.22 P	SLMM	00 09	4,833.22	4,833.22	-	4,833.22
56001	150080	Movable E009159	34, 15" LCD and n	12/31/2011	3,557.07 P	SLMM	00 09	3,557.07	3,557.07	-	3,557.07
56001	150080	Movable E009162	Storage Container	12/31/2011	53.88 P	SLMM	00 10	53.88	53.88	-	53.88
56001	150080	Movable E009168	Rolling Cart/BVI 3	12/31/2011	1,528.51 P	SLMM	01 00	1,528.51	1,528.51	-	1,528.51
56001	150080	Movable E009176	Vacuum	12/31/2011	184.11 P	SLMM	01 01	184.11	184.11	-	184.11
56001	150080	Movable E009177	Vacuum	12/31/2011	1,369.52 P	SLMM	01 01	1,369.52	1,369.52	-	1,369.52
56001	150080	Movable E009178	Kwalu Inc	12/31/2011	4,463.13 P	SLMM	01 01	4,463.13	4,463.13	-	4,463.13
56001	150080	Movable E009182	Vacuum, Filter Cai	12/31/2011	32.52 P	SLMM	01 03	32.52	32.52	-	32.52
56001	150080	Movable E009195	HCST/CHP/T-AR	12/31/2011	845.89 P	SLMM	01 08	845.89	845.89	-	845.89
56001	150080	Movable E009196	Chairs and Tables	12/31/2011	4,031.58 P	SLMM	01 08	4,031.58	4,031.58	-	4,031.58
56001	150080	Movable E009197	Midland Deluxe H	12/31/2011	788.66 P	SLMM	01 08	788.66	788.66	-	788.66
56001	150080	Movable E009202	Dining room table	12/31/2011	8,945.41 P	SLMM	01 11	8,945.41	8,945.41	-	8,945.41
56001	150080	Movable E009207	Spot Vital Signs	12/31/2011	2,931.60 P	SLMM	02 01	2,931.60	2,931.60	-	2,931.60
56001	150080	Movable E009208	Linen Cart	12/31/2011	806.63 P	SLMM	02 01	806.63	806.63	-	806.63
56001	150080	Movable E009210	AED Semi Autom:	12/31/2011	1,415.08 P	SLMM	02 02	1,415.08	1,415.08	-	1,415.08
56001	150080	Movable E009219	Four Function Con	12/31/2011	985.88 P	SLMM	02 05	985.88	985.88	-	985.88
56001	150080	Movable E009237	Replace PTAC'S	12/31/2011	12,233.33 P	SLMM	03 04	12,233.33	12,233.33	-	12,233.33
56001	150080	Movable E009241	(12) STACK CHA	12/31/2011	2,141.38 P	SLMM	03 06	2,141.38	2,141.38	-	2,141.38
56001	150080	Movable E009268	(2)Reliant 350 Seri	12/31/2011	2,957.72 P	SLMM	04 07	2,957.72	2,957.72	-	2,957.72
56001	150080	Movable E009281	42" Commercial gr	12/31/2011	1,366.46 P	SLMM	05 04	1,366.46	1,366.46	-	1,366.46
56001	150080	Movable E009283	Reliant 450 Series	12/31/2011	1,010.54 P	SLMM	05 05	1,010.54	1,010.54	-	1,010.54
56001	150080	Movable E009284	oxygen concentrat	12/31/2011	4,930.71 P	SLMM	04 11	4,930.71	4,930.71	-	4,930.71
56001	150080	Movable E009285	2 Digital Lift Scale	12/31/2011	1,222.71 P	SLMM	06 01	1,222.71	1,222.71	-	1,222.71
56001	150080	Movable E009296	Digital Lift Scale,	12/31/2011	662.58 P	SLMM	06 06	662.58	662.58	-	662.58
56001	150080	Movable E009297	Reliant 600 Series	12/31/2011	2,233.06 P	SLMM	06 06	2,233.06	2,233.06	-	2,233.06
56001	150080	Movable E009298	Cool Only Thru-th	12/31/2011	1,934.95 P	SLMM	06 06	1,934.95	1,934.95	-	1,934.95
56001	150080	Movable E009308	Huntleigh pocket s	12/31/2011	670.92 P	SLMM	06 08	670.92	670.92	-	670.92
56001	150080	Movable E009313	OLS laundry syste	12/31/2011	13,191.43 P	SLMM	06 09	13,191.43	13,191.43	-	13,191.43

22 South Street Operations LLC, d/b/a Fox Hill center  
 Depreciation Expense Report  
 As of September 30, 2019

Sch 23 Total Depm 615.81  
 Sch 29 total Depm Adj 66,285.70  
 Total Depm Expense 66,901.51

1,171,262.54

642,294.44 66,901.51 709,195.95

Locati	G/L Asset	Acct Desc Sys	Description	In Svc Date	AcquiredValue PT	DeprMeth	EstLife	Depreciable Basis	Prior Accum	Current YTD	Current Accum
									Depreciation 9/30/2018	Depreciation 9/30/2019	Depreciation 9/30/2019
56001	150085	Movable E009156	Duracase LLC	12/31/2011	2,133.95 P	SLMM	03 09	2,133.95	2,133.95	-	2,133.95
56001	150085	Movable E009157	23, V-Riser full elc	12/31/2011	9,800.06 P	SLMM	03 09	9,800.06	9,800.06	-	9,800.06
56001	150085	Movable E009167	V-Riser Full Elect	12/31/2011	5,124.82 P	SLMM	04 00	5,124.82	5,124.82	-	5,124.82
56001	150085	Movable E009174	Window Treatmen	12/31/2011	18,150.70 P	SLMM	04 01	18,150.70	18,150.70	-	18,150.70
56001	150085	Movable E009175	Window Treatmen	12/31/2011	22,597.60 P	SLMM	04 01	22,597.60	22,597.60	-	22,597.60
56001	150085	Movable E009193	(12) Full Electric V	12/31/2011	6,385.44 P	SLMM	04 07	6,385.44	6,385.44	-	6,385.44
56001	150085	Movable E009201	Gas stove, Double	12/31/2011	2,944.96 P	SLMM	04 10	2,944.96	2,944.96	-	2,944.96
56001	150085	Movable E009203	Wheelchair	12/31/2011	454.84 P	SLMM	05 00	454.84	454.84	-	454.84
56001	150085	Movable E009204	Install feed for nev	12/31/2011	360.92 P	SLMM	05 00	360.92	360.92	-	360.92
56001	150085	Movable E009205	Repipe gas line for	12/31/2011	295.74 P	SLMM	05 00	295.74	295.74	-	295.74
56001	150085	Movable E009206	Square Mobile Flo	12/31/2011	2,319.32 P	SLMM	05 00	2,319.32	2,319.32	-	2,319.32
56001	150085	Movable E009209	Food processor	12/31/2011	1,659.21 P	SLMM	05 02	1,659.21	1,659.21	-	1,659.21
56001	150085	Movable E009213	Elec Hi-Lo Stand-l	12/31/2011	1,204.16 P	SLMM	05 04	1,204.16	1,204.16	-	1,204.16
56001	150085	Movable E009214	Special Lift Gate C	12/31/2011	56.68 P	SLMM	05 04	56.68	56.68	-	56.68
56001	150085	Movable E009215	Electric Mat Platfo	12/31/2011	1,234.71 P	SLMM	05 04	1,234.71	1,234.71	-	1,234.71
56001	150085	Movable E009216	(2) Sofas, Chairs, I	12/31/2011	3,720.34 P	SLMM	05 05	3,720.34	3,720.34	-	3,720.34
56001	150085	Movable E009220	27' Solid Brass Tal	12/31/2011	320.68 P	SLMM	05 05	320.68	320.68	-	320.68
56001	150085	Movable E009222	freight and lift gatc	12/31/2011	259.82 P	SLMM	05 06	259.82	259.82	-	259.82
56001	150085	Movable E009223	Bed Headboard/Fo	12/31/2011	5,277.44 P	SLMM	05 07	5,277.44	5,277.44	-	5,277.44
56001	150085	Movable E009224	inratio pt/inr meter	12/31/2011	659.30 P	SLMM	05 08	659.30	659.30	-	659.30
56001	150085	Movable E009225	Artwork	12/31/2011	1,968.68 P	SLMM	05 09	1,968.68	1,968.68	-	1,968.68
56001	150085	Movable E009226	Artwork	12/31/2011	1,763.33 P	SLMM	05 09	1,763.33	1,763.33	-	1,763.33
56001	150085	Movable E009227	Insinkerator Garba	12/31/2011	1,008.13 P	SLMM	05 09	1,008.13	1,008.13	-	1,008.13
56001	150085	Movable E009228	Install Stainless ste	12/31/2011	1,493.27 P	SLMM	05 09	1,493.27	1,493.27	-	1,493.27
56001	150085	Movable E009230	Window Treatmen	12/31/2011	1,740.79 P	SLMM	05 10	1,740.79	1,740.79	-	1,740.79
56001	150085	Movable E009231	Electric beds and a	12/31/2011	53,551.20 P	SLMM	05 10	53,551.20	53,551.20	-	53,551.20
56001	150085	Movable E009232	Window Treatmen	12/31/2011	3,991.14 P	SLMM	05 10	3,991.14	3,991.14	-	3,991.14
56001	150085	Movable E009235	Refrigerator	12/31/2011	2,112.45 P	SLMM	05 11	2,112.45	2,112.45	-	2,112.45
56001	150085	Movable E009243	(3) OVERBED TA	12/31/2011	202.76 P	SLMM	06 07	202.76	202.76	-	202.76
56001	150085	Movable E009244	(1) REACH IN FR	12/31/2011	3,338.45 P	SLMM	06 07	3,338.45	3,338.45	-	3,338.45
56001	150085	Movable E009247	Direct Supply Equ	12/31/2011	684.41 P	SLMM	06 08	684.41	684.41	-	684.41
56001	150085	Movable E009248	Direct Supply Equ	12/31/2011	433.77 P	SLMM	06 08	433.77	433.77	-	433.77
56001	150085	Movable E009249	Garbage Disposal	12/31/2011	890.93 P	SLMM	06 10	890.93	880.07	10.86	890.93
56001	150085	Movable E009252	(1)Wheelchair INV	12/31/2011	191.70 P	SLMM	07 01	191.70	182.66	9.04	191.70
56001	150085	Movable E009253	(1)Countertop Ice l	12/31/2011	2,225.12 P	SLMM	07 01	2,225.12	2,120.45	104.67	2,225.12
56001	150085	Movable E009254	(1)Maxi-Rest Bari	12/31/2011	2,138.79 P	SLMM	07 02	2,138.79	2,014.47	124.32	2,138.79
56001	150085	Movable E009255	(3)Large Overbed	12/31/2011	433.68 P	SLMM	07 02	433.68	408.44	25.24	433.68
56001	150085	Movable E009262	(2)End Panels for	12/31/2011	118.95 P	SLMM	07 05	118.95	108.27	10.68	118.95
56001	150085	Movable E009263	(4)Overbed Table	12/31/2011	333.52 P	SLMM	07 05	333.52	303.55	-	303.55
56001	150085	Movable E009266	(1)Dormont Swirl	12/31/2011	193.40 P	SLMM	07 07	193.40	172.13	21.27	193.40
56001	150085	Movable E009267	(1)Countertop Icen	12/31/2011	2,188.66 P	SLMM	07 07	2,188.66	1,948.18	240.48	2,188.66
56001	150085	Movable E009269	9000 XT Wheelch	12/31/2011	258.35 P	SLMM	07 08	258.35	227.48	30.87	258.35
56001	150085	Movable E009270	Fingertip pulse oxi	12/31/2011	258.73 P	SLMM	07 09	258.73	225.38	33.35	258.73
56001	150085	Movable E009271	ACCCECARE-002	12/31/2011	5,093.87 P	SLMM	08 01	5,093.87	4,253.65	630.17	4,883.82
56001	150085	Movable E009278	oval pastry dessert	12/31/2011	879.40 P	SLMM	08 03	879.40	719.48	106.59	826.07
56001	150085	Movable E009280	Queene Anne oval	12/31/2011	267.18 P	SLMM	08 04	267.18	216.41	32.06	248.47
56001	150085	Movable E009282	1 Maxwell Thoma	12/31/2011	1,858.69 P	SLMM	08 04	1,858.69	1,505.52	223.04	1,728.56
56001	150085	Movable E009287	Reach-In Refriger	12/31/2011	2,915.02 P	SLMM	09 03	2,915.02	2,127.20	315.14	2,442.34
56001	150085	Movable E009288	29x36 pedestal tab	12/31/2011	974.23 P	SLMM	09 03	974.23	710.91	105.32	816.23
56001	150085	Movable E009295	Conveyor Toaster	12/31/2011	1,005.02 P	SLMM	09 06	1,005.02	714.08	105.79	819.87
56001	150085	Movable E009307	Parallel bars tropic	12/31/2011	4,922.90 P	SLMM	09 08	4,922.90	3,437.57	509.27	3,946.84
56001	150085	Movable E009320	Reach in freezer	12/31/2011	4,068.78 P	SLMM	09 11	4,068.78	2,769.53	410.30	3,179.83
56001	150087	Movable E009250	(10) Alarm System	12/31/2011	316.94 P	SLMM	01 11	316.94	316.94	-	316.94
56001	150087	Movable E009251	Cont passive motic	12/31/2011	108.00 P	SLMM	02 00	108.00	108.00	-	108.00
56001	150087	Movable E009256	(1)52in Commerci	12/31/2011	1,181.05 P	SLMM	02 03	1,181.05	1,181.05	-	1,181.05
56001	150087	Movable E009261	(20)Alarm System	12/31/2011	823.22 P	SLMM	02 05	823.22	823.22	-	823.22
56001	150087	Movable E009274	15" & 18" dual mo	12/31/2011	1,306.49 P	SLMM	03 02	1,306.49	1,306.49	-	1,306.49
56001	150087	Movable E009276	Genesis only defib	12/31/2011	662.33 P	SLMM	03 03	662.33	662.33	-	662.33
56001	150087	Movable E009289	15" Smart Care car	12/31/2011	2,632.01 P	SLMM	04 04	2,632.01	2,632.01	-	2,632.01
56001	150088	Movable E009221	Compact carpet &	12/31/2011	1.00 P	NoDep	00 00	1.00	-	-	-
56001	150088	Movable E009264	(5)C2500&X3580	12/31/2011	1,764.70 P	SLMM	00 06	1,764.70	1,764.70	-	1,764.70
56001	150088	Movable E009265	(1)Hush Commerc	12/31/2011	35.57 P	SLMM	00 06	35.57	35.57	-	35.57
56001	150088	Movable E009277	TRUE LOW AIR	12/31/2011	1,240.63 P	SLMM	01 03	1,240.63	1,240.63	-	1,240.63
56001	150088	Movable E009279	10 Genesis Visco s	12/31/2011	1,339.14 P	SLMM	01 04	1,339.14	1,339.14	-	1,339.14
56001	150088	Movable E009286	19 MATTRESS,G	12/31/2011	4,078.35 P	SLMM	02 03	4,078.35	4,078.35	-	4,078.35
56001	150100	Movable E009153	UNDER-SEAT FA	12/31/2011	135.13 P	SLMM	03 06	135.13	135.13	-	135.13
56001	150100	Movable E009211	Executive high bac	12/31/2011	367.67 P	SLMM	05 03	367.67	367.67	-	367.67
56001	150100	Movable E009212	Ergonomic Low-b	12/31/2011	242.48 P	SLMM	05 04	242.48	242.48	-	242.48
56001	150100	Movable E009217	Connector Panels f	12/31/2011	277.08 P	SLMM	05 05	277.08	277.08	-	277.08
56001	150100	Movable E009218	Fax Machine	12/31/2011	272.71 P	SLMM	05 05	272.71	272.71	-	272.71
56001	150100	Movable E009233	(12) chairs	12/31/2011	974.63 P	SLMM	05 11	974.63	974.63	-	974.63
56001	150100	Movable E009234	Desk	12/31/2011	992.18 P	SLMM	05 11	992.18	992.18	-	992.18

22 South Street Operations LLC, d/b/a Fox Hill center  
 Depreciation Expense Report  
 As of September 30, 2019

Sch 23 Total Depm 615.81  
 Sch 29 total Depm Adj 66,285.70  
 Total Depm Expense 66,901.51

1,171,262.54

642,294.44 66,901.51 709,195.95

Locati	G/L Asset	Acct Desc Sys	Description	In Svc Date	AcquiredValue PT	DeprMeth	EstLife	Depreciable Basis	Prior Accum Depreciation 9/30/2018	Current YTD Depreciation	Current Accum Depreciation 9/30/2019
56001	150100	Movable E009245	(2) Task Chari, itei	12/31/2011	641.04 P	SLMM	06 07	641.04	641.04	-	641.04
56001	150100	Movable E009246	(2)Chairs, item #C	12/31/2011	594.56 P	SLMM	06 07	594.56	594.56	-	594.56
56001	150110	Movable E009143	HP LASERJET 12	12/31/2011	1.02 P	NoDep	00 00	1.02	-	-	-
56001	150110	Movable E009144	HP LASERJET 12	12/31/2011	10.92 P	NoDep	00 00	10.92	-	-	-
56001	150110	Movable E009147	CABLING FOR D	12/31/2011	40.80 P	NoDep	00 00	40.80	-	-	-
56001	150110	Movable E009161	Analog phones w/i	12/31/2011	1.24 P	NoDep	00 00	1.24	-	-	-
56001	150110	Movable E009257	(1)HP 17" Flat Pan	12/31/2011	15.19 P	SLMM	00 04	15.19	15.19	-	15.19
56001	150110	Movable E009258	(1)APC Smart-UP!	12/31/2011	69.90 P	SLMM	00 04	69.90	69.90	-	69.90
56001	150110	Movable E009259	(1)HP 17" Flat Pan	12/31/2011	15.00 P	SLMM	00 04	15.00	15.00	-	15.00
56001	150110	Movable E009260	Cortelco 240085-V	12/31/2011	23.02 P	SLMM	00 04	23.02	23.02	-	23.02
56001	150110	Movable E009273	HP 17" flat panel r	12/31/2011	52.84 P	SLMM	01 02	52.84	52.84	-	52.84
56001	150110	Movable E009275	HP 19" monitor, as	12/31/2011	64.87 P	SLMM	01 03	64.87	64.87	-	64.87
56001	150110	Movable E009290	PGP licenses deplc	12/31/2011	28.88 P	SLMM	02 05	28.88	28.88	-	28.88
56001	150110	Movable E009291	CoreCal & Office	12/31/2011	321.66 P	SLMM	02 05	321.66	321.66	-	321.66
56001	150110	Movable E009293	1 1 Yr Onsite to 3	12/31/2011	38.87 P	SLMM	02 06	38.87	38.87	-	38.87
56001	150110	Movable E009294	1 Lenovo ThinkCe	12/31/2011	540.35 P	SLMM	02 06	540.35	540.35	-	540.35
56001	150110	Movable E009306	HP SB LE1901W	12/31/2011	133.52 P	SLMM	02 08	133.52	133.52	-	133.52
56001	150115	Movable E009272	HP Laserjet P2035	12/31/2011	157.46 P	SLMM	03 02	157.46	157.46	-	157.46
56001	150117	Movable E009229	installation and har	12/31/2011	176.96 P	SLMM	02 10	176.96	176.96	-	176.96
56001	150117	Movable E009242	(1) 5402 DIGITIA	12/31/2011	218.40 P	SLMM	03 07	218.40	218.40	-	218.40
56001	150085	Movable E009322	4 Deluxe automati	1/31/2012	540.17 P	SLMM	10 00	540.17	360.14	54.02	414.16
56001	150087	Movable E009323	28" floor sweeper	2/29/2012	3,447.74 P	SLMM	05 00	3,447.74	3,447.74	-	3,447.74
56001	150057	Bldg Imp 009325	Remove existing fl	3/31/2012	6,684.31 R	SLMM	10 00	6,684.31	4,344.79	668.43	5,013.22
56001	150085	Movable E009324	4 Deluxe Automati	3/31/2012	574.20 P	SLMM	10 00	574.20	373.24	57.42	430.66
56001	150088	Movable E009326	Misc assets acquir	4/30/2012	537.00 P	SLMM	00 08	537.00	537.00	-	537.00
56001	150088	Movable E009327	4 Genesis Visco m	4/30/2012	1,254.93 P	SLMM	03 00	1,254.93	1,254.93	-	1,254.93
56001	150085	Movable E009328	(2) EX2 20x20 wh	5/31/2012	347.90 P	SLMM	10 00	347.90	220.34	34.79	255.13
56001	150085	Movable E009332	Hot food table serv	6/30/2012	2,208.42 P	SLMM	10 00	2,208.42	1,380.25	220.84	1,601.09
56001	150100	Movable E009331	Credit Card Machi	6/30/2012	499.00 P	SLMM	02 06	499.00	499.00	-	499.00
56001	150110	Movable E009333	1 Asus 19" LCD	7/31/2012	120.28 P	SLMM	03 00	120.28	120.28	-	120.28
56001	150050	Bldg Imp 009335	2 Taco heat pumps	8/31/2012	5,300.00 R	SLMM	20 00	5,300.00	1,612.08	265.00	1,877.08
56001	150050	Bldg Imp 009336	Webter oil pump	8/31/2012	1,230.00 R	SLMM	20 00	1,230.00	374.13	61.50	435.63
56001	150085	Movable E009334	3 shelf utility cart	8/31/2012	1,920.68 P	SLMM	10 00	1,920.68	1,168.42	192.07	1,360.49
56001	150087	Movable E009338	Readyspace Carpet	9/30/2012	8,936.46 P	SLMM	05 00	8,936.46	8,936.46	-	8,936.46
56001	150087	Movable E009339	Air mover upright	9/30/2012	2,502.09 P	SLMM	05 00	2,502.09	2,502.09	-	2,502.09
56001	150117	Movable E009337	Cabbling	9/30/2012	532.00 P	SLMM	07 00	532.00	456.00	76.00	532.00
56001	150110	Movable E009340	1 Asus 19" LCD	10/31/2012	120.81 P	SLMM	03 00	120.81	120.81	-	120.81
56001	150050	Bldg Imp 009341	Amtrol SX-90V ex	12/31/2012	1,329.38 R	SLMM	20 00	1,329.38	382.20	66.47	448.67
56001	150050	Bldg Imp 009346	2 Taco PumpsMF1	1/31/2013	5,973.10 R	SLMM	20 00	5,973.10	1,692.41	298.66	1,991.07
56001	150080	Movable E009343	Attendant Rolling	2/28/2013	608.30 P	SLMM	07 00	608.30	485.19	86.90	572.09
56001	150080	Movable E009344	Reliant 600 Series	2/28/2013	3,397.73 P	SLMM	07 00	3,397.73	2,710.09	485.39	3,195.48
56001	150080	Movable E009345	2 Attendant Vital S	2/28/2013	4,004.94 P	SLMM	07 00	4,004.94	3,194.45	572.14	3,766.59
56001	150088	Movable E009342	9 MATTRESS GE	2/28/2013	2,918.54 P	SLMM	03 00	2,918.54	2,918.54	-	2,918.54
56001	150110	Movable E009349	1 APC SmartUPS	3/31/2013	741.73 P	SLMM	03 00	741.73	741.73	-	741.73
56001	150110	Movable E009350	1 APC UPS Netwc	3/31/2013	249.19 P	SLMM	03 00	249.19	249.19	-	249.19
56001	150080	Movable E009352	Fold Up Portable V	4/30/2013	1,358.07 P	SLMM	07 00	1,358.07	1,050.89	194.01	1,244.90
56001	150085	Movable E009351	STEAMER, 6-PAI	4/30/2013	5,201.56 P	SLMM	10 00	5,201.56	2,817.53	520.16	3,337.69
56001	150117	Movable E009353	Cabbling Add pho	5/31/2013	532.00 P	SLMM	07 00	532.00	405.33	76.00	481.33
56001	150055	Bldg Imp 009355	Vinyl coverings gu	6/30/2013	55,833.64 R	SLMM	15 00	55,833.64	19,541.76	3,722.24	23,264.00
56001	150055	Bldg Imp 009356	5 exterior steel doc	6/30/2013	20,266.58 R	SLMM	15 00	20,266.58	7,093.32	1,351.11	8,444.43
56001	150085	Movable E009354	3 Deluxe Automati	6/30/2013	437.65 P	SLMM	10 00	437.65	229.79	43.77	273.56
56001	150080	Movable E009359	GE 11,600 BTU w	7/31/2013	773.52 P	SLMM	07 00	773.52	570.92	110.50	681.42
56001	150085	Movable E009357	7 Qt. Replacement	7/31/2013	869.92 P	SLMM	10 00	869.92	449.45	86.99	536.44
56001	150085	Movable E009358	2 Deluxe Automati	7/31/2013	284.26 P	SLMM	10 00	284.26	146.89	28.43	175.32
56001	150057	Bldg Imp 009361	Video surveillance	8/31/2013	21,240.22 R	SLMM	10 00	21,240.22	10,797.11	2,124.02	12,921.13
56001	150075	Non Mova 009362	Amtrol expansion	8/31/2013	1,342.50 P	SLMM	10 00	1,342.50	682.44	134.25	816.69
56001	150075	Non Mova 009363	Amtrol expansion	8/31/2013	1,342.50 P	SLMM	10 00	1,342.50	682.44	134.25	816.69
56001	150100	Movable E009360	5 drawer file cabin	8/31/2013	1,275.46 P	SLMM	10 00	1,275.46	648.38	127.55	775.93
56001	150050	Bldg Imp 009367	Burner booster	9/30/2013	8,820.00 R	SLMM	20 00	8,820.00	2,205.00	441.00	2,646.00
56001	150085	Movable E009364	OmniCycle Elite R	9/30/2013	15,633.45 P	SLMM	10 00	15,633.45	7,816.75	1,563.35	9,380.10
56001	150085	Movable E009365	4 Deluxe Automati	9/30/2013	577.82 P	SLMM	10 00	577.82	288.91	57.78	346.69
56001	150085	Movable E009366	4 Deluxe Automati	9/30/2013	577.82 P	SLMM	10 00	577.82	288.91	57.78	346.69
56001	150055	Bldg Imp 009369	Vinyl coverings gu	10/31/2013	52,499.90 R	SLMM	15 00	52,499.90	17,208.28	3,499.99	20,708.27
56001	150088	Movable E009368	10 MATTRESS,G	10/31/2013	3,256.01 P	SLMM	03 00	3,256.01	3,256.01	-	3,256.01
56001	150050	Bldg Imp 014044	Burner booster	11/30/2013	9,380.00 R	SLMM	20 00	9,380.00	2,266.83	469.00	2,735.83
56001	150110	Movable E014043	1 HP LaserJet PRC	11/30/2013	323.51 P	SLMM	03 00	323.51	323.51	-	323.51
56001	150050	Bldg Imp 014138	Circulator pump or	12/31/2013	2,064.79 R	SLMM	20 00	2,064.79	490.39	103.24	593.63
56001	150085	Movable E014166	Liquid blender and	12/31/2013	721.45 P	SLMM	10 00	721.45	342.71	72.15	414.86
56001	150025	Land Imp 014331	CONCRETE WOF	1/31/2014	1,940.88 R	SLMM	10 00	1,940.88	905.75	194.09	1,099.84
56001	150085	Movable E014332	4 Deluxe Automati	1/31/2014	583.27 P	SLMM	10 00	583.27	272.21	58.33	330.54
56001	150025	Land Imp 014403	CONCRETE SIDE	2/28/2014	2,812.95 R	SLMM	10 00	2,812.95	1,289.29	281.30	1,570.59
56001	150050	Bldg Imp 014402	Easy Heat ADKS 1	2/28/2014	1,807.15 R	SLMM	20 00	1,807.15	414.15	90.36	504.51

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 Depreciation Expense Report  
 As of September 30, 2019

Sch 23 Total Depm 615.81  
 Sch 29 total Depm Adj 66,285.70  
 Total Depm Expense 66,901.51

1,171,262.54

642,294.44 66,901.51 709,195.95

Locati	G/L Asset	Acct Desc	Sys	Description	In Svc Date	AcquiredValue	PT	DeprMeth	EstLife	Depreciable Basis	Prior Accum	Current YTD	Current Accum
											Depreciation	Depreciation	Depreciation
											9/30/2018	9/30/2019	9/30/2019
56001	150088	Movable E014404		12 MATTRESS,G	2/28/2014	3,907.22	P	SLMM	03 00	3,907.22	3,907.22	-	3,907.22
56001	150050	Bldg Imp 014483		Underground stora	3/31/2014	11,693.53	R	SLMM	20 00	11,693.53	2,631.06	584.68	3,215.74
56001	150050	Bldg Imp 014484		Underground stora	3/31/2014	92,014.02	R	SLMM	20 00	92,014.02	20,703.16	4,600.70	25,303.86
56001	150050	Bldg Imp 014723		Underground stora	5/31/2014	1,169.85	R	SLMM	20 00	1,169.85	253.46	58.49	311.95
56001	150050	Bldg Imp 014724		Fire hydrant replac	5/31/2014	7,763.55	R	SLMM	20 00	7,763.55	1,682.12	388.18	2,070.30
56001	150110	Movable E014722		Asus 19 in wide LJ	5/31/2014	118.03	P	SLMM	03 00	118.03	118.03	-	118.03
56001	150100	Movable E014881		Credit Card Machi	6/30/2014	77.46	P	SLMM	10 00	77.46	32.93	7.75	40.68
56001	150110	Movable E014883		HP LJ M425DN &	6/30/2014	533.35	P	SLMM	03 00	533.35	533.35	-	533.35
56001	150110	Movable E014884		HP LJ M425DN &	6/30/2014	533.35	P	SLMM	03 00	533.35	533.35	-	533.35
56001	150117	Movable E014882		Data line drop inst	6/30/2014	718.22	P	SLMM	07 00	718.22	436.05	102.60	538.65
56001	150075	Non Mova 015028		1st install on Com	7/31/2014	2,067.50	P	SLMM	10 00	2,067.50	861.46	206.75	1,068.21
56001	150075	Non Mova 015029		1st install Compre	7/31/2014	2,400.00	P	SLMM	10 00	2,400.00	1,000.00	240.00	1,240.00
56001	150075	Non Mova 015030		Final install Comp	7/31/2014	2,067.50	P	SLMM	10 00	2,067.50	861.46	206.75	1,068.21
56001	150075	Non Mova 015031		Final install Comp	7/31/2014	2,400.00	P	SLMM	10 00	2,400.00	1,000.00	240.00	1,240.00
56001	150085	Movable E015027		Deluxe Automatic	7/31/2014	449.30	P	SLMM	10 00	449.30	187.21	44.93	232.14
56001	150085	Movable E015119		3 Deluxe Automati	8/31/2014	449.01	P	SLMM	10 00	449.01	183.35	44.90	228.25
56001	150055	Bldg Imp 015354		7 exterior steel doc	11/30/2014	27,579.18	R	SLMM	15 00	27,579.18	7,048.01	1,838.61	8,886.62
56001	150085	Movable E015437		1.6 cu ft medical g	12/31/2014	527.54	P	SLMM	10 00	527.54	197.81	52.75	250.56
56001	150088	Movable E015436		20 MATTRESS,G	12/31/2014	6,512.03	P	SLMM	03 00	6,512.03	6,512.03	-	6,512.03
56001	150050	Bldg Imp 015626		Grease trap manho	2/28/2015	7,200.00	R	SLMM	20 00	7,200.00	1,290.00	360.00	1,650.00
56001	150055	Bldg Imp 015625		Exterior doors and	2/28/2015	2,190.81	R	SLMM	15 00	2,190.81	523.35	146.05	669.40
56001	150110	Movable E015624		Two Way Radio,V	2/28/2015	366.83	P	SLMM	03 00	366.83	366.83	-	366.83
56001	150050	Bldg Imp 015759		(2) 30 amp circuits	3/31/2015	1,200.00	R	SLMM	20 00	1,200.00	210.00	60.00	270.00
56001	150080	Movable E015758		Sales and Use Tax	3/31/2015	457.00	P	SLMM	07 00	457.00	228.52	65.29	293.81
56001	150085	Movable E015757		Maxwell Thomas,	3/31/2015	457.45	P	SLMM	10 00	457.45	160.12	45.75	205.87
56001	150110	Movable E016124		Infocus projector	4/30/2015	509.86	P	SLMM	03 00	509.86	509.86	-	509.86
56001	150075	Non Mova 016373		1st install on kitch	6/30/2015	1,950.00	P	SLMM	10 00	1,950.00	633.75	195.00	828.75
56001	150080	Movable E016371		2 Attendant Vital S	6/30/2015	4,302.39	P	SLMM	07 00	4,302.39	1,997.54	614.63	2,612.17
56001	150085	Movable E016372		Countertop Ice Nu	6/30/2015	3,188.35	P	SLMM	10 00	3,188.35	1,036.23	318.84	1,355.07
56001	150075	Non Mova 016495		Compressor for kit	7/31/2015	1,950.00	P	SLMM	10 00	1,950.00	617.50	195.00	812.50
56001	150075	Non Mova 016496		Parts and labor for	7/31/2015	903.98	P	SLMM	10 00	903.98	286.27	90.40	376.67
56001	150080	Movable E016497		Wired up 2 new w:	7/31/2015	553.02	P	SLMM	07 00	553.02	250.17	79.00	329.17
56001	150080	Movable E016498		2 bases for washer:	7/31/2015	638.10	P	SLMM	07 00	638.10	288.67	91.16	379.83
56001	150050	Bldg Imp 016744		Wiring and wrap a	9/30/2015	1,935.00	R	SLMM	20 00	1,935.00	290.25	96.75	387.00
56001	150080	Movable E016742		GE Zoneline PTA	9/30/2015	1,280.08	P	SLMM	07 00	1,280.08	548.61	182.87	731.48
56001	150080	Movable E016743		2 UniMac washers	9/30/2015	27,733.95	P	SLMM	07 00	27,733.95	11,885.97	3,961.99	15,847.96
56001	150050	Bldg Imp 017036		E stop on generato	10/31/2015	1,059.75	R	SLMM	20 00	1,059.75	154.55	52.99	207.54
56001	150085	Movable E017035		VACCINE ALL-R	10/31/2015	1,081.29	P	SLMM	10 00	1,081.29	315.38	108.13	423.51
56001	150025	Land Imp 017224		flagpole	11/30/2015	1,223.03	R	SLMM	10 00	1,223.03	346.52	122.30	468.82
56001	150080	Movable E017225		Digital Lift Scale,	11/30/2015	751.87	P	SLMM	07 00	751.87	304.32	107.41	411.73
56001	150050	Bldg Imp 017319		install for Rada Th	12/31/2015	3,100.00	R	SLMM	20 00	3,100.00	426.25	155.00	581.25
56001	150050	Bldg Imp 017320		2nd and final instal	12/31/2015	3,785.00	R	SLMM	20 00	3,785.00	520.44	189.25	709.69
56001	150050	Bldg Imp 017362		Piping and wiring :	12/31/2015	1,776.20	R	SLMM	20 00	1,776.20	244.23	88.81	333.04
56001	150088	Movable E017318		First install on cor	12/31/2015	3,208.54	P	SLMM	03 00	3,208.54	2,941.15	267.39	3,208.54
56001	150080	Movable E017543		24 in and (2) 19 in	2/29/2016	345.63	P	SLMM	07 00	345.63	127.57	49.38	176.95
56001	150085	Movable E017603		4 Economy Overb	2/29/2016	297.90	P	SLMM	10 00	297.90	76.96	29.79	106.75
56001	150085	Movable E017891		Mirage Cadet Cou	4/30/2016	314.37	P	SLMM	10 00	314.37	75.98	31.44	107.42
56001	150088	Movable E018084		14 MATTRESS,G	6/30/2016	4,487.21	P	SLMM	03 00	4,487.21	3,365.42	1,121.79	4,487.21
56001	150075	Non Mova 018242		1st install payment	7/31/2016	2,280.00	P	SLMM	10 00	2,280.00	494.00	228.00	722.00
56001	150080	Movable E018243		Rice Lake Fold-Up	7/31/2016	1,919.15	P	SLMM	07 00	1,919.15	594.04	274.17	868.21
56001	150057	Bldg Imp 018343		Access control sys	8/31/2016	5,640.80	R	SLMM	10 00	5,640.80	1,175.17	564.08	1,739.25
56001	150075	Non Mova 018342		Kitchen A/C coil	8/31/2016	2,785.00	P	SLMM	10 00	2,785.00	580.21	278.50	858.71
56001	150087	Movable E018344		Air Circulator,30 I	8/31/2016	380.71	P	SLMM	05 00	380.71	158.63	76.14	234.77
56001	150057	Bldg Imp 018457		50% deposit on lu	9/30/2016	43,750.00	R	SLMM	10 00	43,750.00	8,750.00	4,375.00	13,125.00
56001	150057	Bldg Imp 018732		Supply & installati	12/31/2016	43,750.00	R	SLMM	10 00	43,750.00	7,656.25	4,375.00	12,031.25
56001	150080	Movable E019084		Invacare Perfecto2	3/31/2017	1,024.11	P	SLMM	07 00	1,024.11	219.46	146.31	365.77
56001	150080	Movable E019085		Welch Allyn Ear V	3/31/2017	466.86	P	SLMM	07 00	466.86	100.05	66.70	166.75
56001	150080	Movable E019086		Attendant Connect	3/31/2017	2,134.74	P	SLMM	07 00	2,134.74	457.44	304.96	762.40
56001	150088	Movable E019083		10 MATTRESS,G	3/31/2017	3,137.33	P	SLMM	03 00	3,137.33	1,568.67	1,045.78	2,614.45
56001	150050	Bldg Imp 019486		Updated Main Dra	7/31/2017	2,193.65	R	SLMM	20 00	2,193.65	127.96	109.68	237.64
56001	150057	Bldg Imp 019485		Upgrade Geron Co	7/31/2017	3,498.92	R	SLMM	10 00	3,498.92	408.21	349.89	758.10
56001	150050	Bldg Imp 019557		Touchscreen nurse	8/31/2017	3,391.50	R	SLMM	20 00	3,391.50	183.72	169.59	353.31
56001	150075	Non Mova 019558		Compressor and fil	8/31/2017	3,617.50	P	SLMM	10 00	3,617.50	391.89	361.74	753.63
56001	150075	Non Mova 019559		Compressor and fil	8/31/2017	3,617.50	P	SLMM	10 00	3,617.50	391.89	361.74	753.63
56001	150088	Movable E019586		7 MATTRESS,GE	9/30/2017	2,196.13	P	SLMM	03 00	2,196.13	732.04	732.04	1,464.08
56001	150085	Movable E019816		Whirlpool Refrige	10/31/2017	587.04	P	SLMM	10	587.04	53.81	58.70	112.52
56001	150050	Bldg Imp 019880		Square D Panel	11/30/2017	5,530.20	R	SLMM	20	5,530.20	230.43	276.51	506.94
56001	150080	Movable E019879		Digital Lift Scale	11/30/2017	756.13	P	SLMM	7	756.13	90.02	108.02	198.03
56001	150085	Movable E019878		(2) 18 in (2) 20 in	11/30/2017	1,286.21	P	SLMM	10	1,286.21	107.18	128.62	235.81
56001	150088	Movable E019877		7 MATTRESS,GE	11/30/2017	2,196.13	P	SLMM	3	2,196.13	610.04	732.04	1,342.08
56001	150046	Financing #009330		Est Building value	12/31/2017	6,088,327.66	R	RemVI	22 06	6,088,327.66	2,112,227.00		2,112,227.00
56001	150085	Movable E019963		Filter for Ice Make	12/31/2017	163.69	P	SLMM	10	163.69	12.28	16.37	28.6

22 South Street Operations LLC, d/b/a Fox Hill center  
 Depreciation Expense Report  
 As of September 30, 2019

Sch 23 Total Deprn 615.81  
 Sch 29 total Deprn Adj 66,285.70  
 Total Deprn Expense 66,901.51

1,171,262.54

642,294.44 66,901.51 709,195.95

Locati	G/L Asset	Acct Desc Sys	Description	In Svc Date	AcquiredValue PT	DeprMeth	EstLife	Depreciable Basis	Prior Accum	Current YTD	Current Accum	
									Depreciation	Depreciation	Depreciation	
									9/30/2018	2,019.00	9/30/2019	
56001	150085	Movable E019964	Counter Cubelet Ic	12/31/2017	5,743.22	P	SLMM	10	5,743.22	430.74	574.32	1,005.06
56001	150088	Movable E020451	(10) Visco Select M	5/31/2018	2,469.07	P	SLMM	3	2,469.07	274.34	823.02	1,097.36
56001	150050	Bldg Imp 020542	North Day Room I	6/30/2018	1,992.00	R	SLMM	20	1,992.00	24.90	99.60	124.50
56001	150080	Movable E020540	Flat Screen TV	6/30/2018	170.14	P	SLMM	7	170.14	6.08	24.31	30.38
56001	150088	Movable E020541	(10) Visco Select M	6/30/2018	2,469.07	P	SLMM	3	2,469.07	205.76	823.02	1,028.78
56001	150057	Bldg Imp 020714	Birch Wood Door	8/31/2018	4,215.00	R	SLMM	10	4,215.00	35.13	421.50	456.63
56001	150057	Bldg Imp 020715	Dish Room Janitor	8/31/2018	1,595.99	R	SLMM	10	1,595.99	13.30	159.60	172.90
56001	150080	Movable E020713	Built In Cool Only	8/31/2018	2,263.79	P	SLMM	7	2,263.79	26.95	323.40	350.35
56001	150080	Movable E020764	Vital Signs Monitc	9/30/2018	4,039.40	P	SLMM	7	4,039.40	-	577.06	577.06
56001	150085	Movable E020763	2 - Wheelchairs	9/30/2018	486.18	P	SLMM	10	486.18	-	48.62	48.62
56001	150100	Movable E020762	Office Chair	9/30/2018	187.07	P	SLMM	10	187.07	-	18.71	18.71
56001	150016	Financing 009329	Establish land valu	10/1/2018	(1,080,000.00)	R	NoDep	00 00	(1,080,000.00)	-	-	-
56001	150046	Financing 009330	Est Building value	10/1/2018	#####	R	RemVI	22 06	6,088,327.66	(2,112,227.00)	-	(2,112,227.00)
56001	150025	Land Imp 020864	Parking lot repave	10/31/2018	34,350.00	R	SLMM	10	34,350.00	-	3,148.75	3,148.75
56001	150080	Movable E020863	5 Insignia Residen	10/31/2018	669.65	P	SLMM	7	669.65	-	87.69	87.69
56001	150088	Movable E020861	10 Mattresses	10/31/2018	2,469.07	P	SLMM	3	2,469.07	-	754.44	754.44
56001	150050	Bldg Imp 021091	8 new shower valv	12/31/2018	4,550.00	R	SLMM	20	4,550.00	-	170.63	170.63
56001	150085	Movable E021089	Low Profile Modu	12/31/2018	3,655.23	P	SLMM	10	3,655.23	-	274.14	274.14
56001	150085	Movable E021090	Filter for Ice Make	12/31/2018	453.88	P	SLMM	10	453.88	-	34.04	34.04
56001	150117	Movable E021088	data drop fax line i	12/31/2018	398.81	P	SLMM	7	398.81	-	42.73	42.73
56001	150085	Movable E021380	5 - Aluminun Tray	3/31/2019	7,518.90	P	SLMM	10	7,518.90	-	375.95	375.95
56001	150085	Movable E021605	Two Silo Radiant l	5/31/2019	1,408.05	P	SLMM	10	1,408.05	-	46.94	46.94
56001	150080	Movable E021654	3 RCA 24" Class F	6/30/2019	303.07	P	SLMM	7	303.07	-	10.82	10.82
56001	150080	Movable E021807	UniMac Dryer	7/31/2019	3,184.12	P	SLMM	7	3,184.12	-	75.81	75.81
56001	150055	Bldg Imp 021958	Rebuild Boiler #4	8/31/2019	1,452.15	R	SLMM	7	1,452.15	-	17.29	17.29
56001	150055	Bldg Imp 021959	Rebuild Boiler #4	8/31/2019	3,929.15	R	SLMM	7	3,929.15	-	46.78	46.78
56001	150080	Movable E021960	Rebuilt Dryer	8/31/2019	1,952.05	P	SLMM	5	1,952.05	-	32.53	32.53
56001	150085	Movable E022037	Aluminum Tray D	9/30/2019	1,503.81	P	SLMM	10	1,503.81	-	-	-
56001	150085	Movable E022038	Gemini Wheelchai	9/30/2019	894.00	P	SLMM	10	894.00	-	-	-



**Annual Report of Long-Term Care Facility**

**Amortization Schedule\***

Name of Facility			License No.		Report for Year Ended			Page	of
22 South Street Operations LLC, d/b/a Fox Hill center			2370		9/30/2019			24	37
Item	Date of Acquisition		Length of Amortization	Cost to Be Amortized	Accumulated Amort. to Beginning of Year's Operations	Basis for Computing Amortization**	Rate %	Amortization for This Year	Totals
	Month	Year							
<b>A. Organization Expense</b>									
1.									
2.									
3.									
A-4. Subtotal									
<b>B. Mortgage Expense</b>									
1.									
2.									
3.									
B-4. Subtotal									
<b>C. Leasehold Improvements and Other</b>									
1. Acquired prior to this report period									
2. Disposals (attach schedule)									
3. Acquired during this report period (attach schedule)									
C-4. Subtotal									
<b>D. Total Amortization</b>									

\* 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; OR
- C. Remaining Life of Lease; OR
- D. Actual Life if owned by Related Party.

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

Name of Facility 22 South Street Operations LLC, d/b/a	License No. 2370	Report for Year Ended 9/30/2019	Page 25	of 37
<b>11. Property Questionnaire</b>				
<b>Part A</b>				
Is the property either owned by the Facility or leased from a Related Party?*		<input type="radio"/> Yes	<input checked="" type="radio"/> No	If "Yes," complete Part B. If "No," complete Part C.
*If any owner or operator of this facility is related by family, marriage, ownership, ability to control or business association to any person or organization from whom buildings are leased, then it is considered a related party transaction.				
Description	Total			
1. Date Land Purchased	n/a			
2. Date Structure Completed	n/a			
3. If <b>NOT</b> Original Owner, Date of Purchase				
4. Date of Initial Licensure				
5. Total Licensed Bed Capacity	150			
6. Square Footage				
7. Acquisition Cost				
a. Land	n/a			
b. Building	n/a			
<b>Part B - Owner and Related Parties</b>	1st Mortgage	2nd Mortgage	3rd Mortgage	4th Mortgage
1. Financing				
a. Type of Financing (e.g., fixed, variable)				
b. Date Mortgage Obtained				
c. Interest Rate for the Cost Year				
d. Term of Mortgage (number of years)				
e. Amount of Principal Borrowed				
f. Principal balance outstanding as of				
<b>Complete if Mortgage was Refinanced During Current Cost Year</b>				
g. Type of Financing (e.g., fixed, variable)				
h. Date of Refinancing				
i. New Interest Rate				
j. Term of Mortgage (number of years)				
k. Amount of Principal Borrowed				
l. Principal Outstanding on Note Paid-Off				
<b>Part C - Arms-Length Leases for Real Property Improvements Only</b>				
Name and Address of Lessor	Property Leased	Date of Lease	Term of Lease	Annual Amount of Lease
Next HC-JV	Facility Lease	2/1/2019 -1/31	15 years	246,337
587 Fifth Avenue New York, NY 10017				

**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 Year Ended	Page	of
22 South Street Operations LLC, d/b/	2370	9/30/2019	26	37
Item	Total	CCNH	RHNS	(Specify)
12. Interest				
A. Building, Land Improvement & Non-Movable Equipment				
1. First Mortgage	\$			
Name of Lender	Rate			
Address of Lender				
2. Second Mortgage	\$			
Name of Lender	Rate			
Address of Lender				
3. Third Mortgage	\$			
Name of Lender	Rate			
Address of Lender				
4. Fourth Mortgage	\$			
Name of Lender	Rate			
Address of Lender				
B. CHEFA Loan Information				
1. Original Loan Amount	\$			
2. Loan Origination Date				
3. Interest Rate %				
4. Term				
5. CHEFA Interest Expense				
12 B7. <b>Total Building Interest Expense</b> (A1 - A4 + B5)	\$			

*(Carry Subtotals forward to next page)*

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

Name of Facility		License No.		Report for Year Ended		Page	of
22 South Street Operations LLC, d		2370		9/30/2019		27	37
Item				Total	CCNH	RHNS	(Specify)
Subtotals Brought Forward:							
12. C. Movable Equipment							
1. Automotive Equipment				\$			
A. Item		Rate	Amount				
Lender							
Address of Lender							
2. Other (Specify)				\$			
A. Item		Rate	Amount				
Lender							
Address of Lender							
B. Item		Rate	Amount				
Lender							
Address of Lender							
12. C. 3. Total Movable Equipment Interest Expense (C1 + 2)				\$			
12. D. Other Interest Expense (Specify)				\$			
13. <b>Total All Interest Expense (12B7 + 12C3 + 12D)</b>				\$			
14. Insurance							
a. Insurance on Property (buildings only)				\$ 10,293	10,293		
b. Insurance on Automobiles				\$			
c. Insurance other than Property (as specified above)							
1. Umbrella (Blanket Coverage)				\$ 185,555	185,555		
2. Fire and Extended Coverage				\$			
3. Other (Specify)				\$			
14d. <b>Total Insurance Expenditures (14a + b + c)</b>				\$ 195,848	195,848		
15. <b>Total All Expenditures (A-13 thru C-14)</b>				\$ 10,569,388	10,569,388		

### D. Adjustments to Statement of Expenditures

Name of Facility			License No.	Report for Year Ended	Page	of	
22 South Street Operations LLC, d/b/a Fox Hill center			2370	9/30/2019	28	37	
Item No.	Page No.	Line No.	Item Description	Total Amount of Decrease	CCNH	RHNS	(Specify)
<b>Page 10 - Salaries and Wages</b>							
1.			Outpatient Service Costs	\$			
2.			Salaries not related to Resident Care	\$			
3.			Occupational Therapy	\$			
4.			Other - See attached Schedule	\$ 5,647	5,647		
<b>Page 13 - Professional Fees</b>							
5.	13	B-8-c	Resident Care Physicians **	\$			
6.		B-10	Occupational Therapy	\$			
7.			Other - See attached Schedule	\$ 718,157	718,157		
<b>Pages 15 &amp; 16 - Administrative and General</b>							
8.			Discriminatory Benefits	\$			
9.	15	1-c	Bad Debts	\$ 73,608	73,608		
10.			Accounting	\$			
10a.			Legal	\$			
11.			Telephone	\$			
12.			Cellular Telephone	\$			
13.			Life insurance premiums on the life of Owners, Partners, Operators	\$			
14.			Gifts, flowers and coffee shops	\$			
15.			Education expenditures to colleges or universities for tuition and related costs for owners and employees	\$			
16.			Travel for purposes of attending conferences or seminars outside the continental U.S. Other out-of-state travel in excess of one representative	\$			
17.			Automobile Expense (e.g. personal use)	\$			
18.	16	m-2 &	Unallowable Advertising *	\$ 7,444	7,444		
19.			Income Tax / Corporate Business Tax	\$			
20.			Fund Raising / Contributions	\$ 2,064	2,064		
21.			Unallowable Management Fees	\$ (21,070)	(21,070)		
22.			Barber and Beauty	\$			
23.			Other - See attached Schedule	\$ 88,595	88,595		
<b>Page 18 - Dietary Expenditures</b>							
24.			Meals to employees, guests and others who are not residents	\$			
<b>Page 19 - Laundry Expenditures</b>							
25.			Laundry services to employees, guests and others who are not residents	\$			
<b>Page 20 - Housekeeping Expenditures</b>							
26.			Housekeeping services to employees, guests and others who are not residents	\$			
Subtotal (Items 1 - 26)				\$ 874,445	874,445		

\* 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.

## Schedule of Other Salaries Adjustment

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
10	2	Administrator's salary disallowed	\$ 5,647	\$ -	\$ -
0	0		0 \$ -	\$ -	\$ -
0	0		0 \$ -	\$ -	\$ -
0	0		0 \$ -	\$ -	\$ -
<b>Total Other Salaries Adjustment</b>			\$ 5,647	\$ -	\$ -

## Schedule of Fees Adjustments

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
13	5	Description	\$ 238,834	\$ -	\$ -
13	5	Rehabilitation Services	\$ 123,555	\$ -	\$ -
13	9	Rehabilitation Services	\$ 45,533	\$ -	\$ -
13	10	Speech Therapist	\$ 263,006	\$ -	\$ -
13	12	Occupational Therapist	\$ 60	\$ -	\$ -
13	12	Other	\$ 8,396	\$ -	\$ -
13	12	Other	\$ 38,773	\$ -	\$ -
<b>Total Other Fees Adjustments</b>			\$ 718,157	\$ -	\$ -

## Schedule of Other A&amp;G Adjustments

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
16	m-13	Collection Fees	\$ 23,098	\$ -	\$ -
16	m-13	Estimated Accrual	\$ (452)	\$ -	\$ -
16	m-13	Non-recurring Charges	\$ (5,285)	\$ -	\$ -
16	m-13	Dues to Chamber of Commerce	\$ 450	\$ -	\$ -
16	m-13	Penalty	\$ -	\$ -	\$ -
16	m-12		0 \$ -	\$ -	\$ -
15	l-a-1	adj workers comp	\$ 70,785	\$ -	\$ -
0	0		0 \$ -	\$ -	\$ -
0	0		0 \$ -	\$ -	\$ -
<b>Total Other A&amp;G Adjustments</b>			\$ 88,595	\$ -	\$ -

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

Name of Facility				License No.	Report for Year Ended	Page	of
22 South Street Operations LLC, d/b/a Fox Hill center				2370	9/30/2019	29	37
Item No.	Page No.	Line No.	Item Description	Total Amount of Decrease	CCNH	RHNS	(Specify)
Subtotals Brought Forward				\$ 874,445	874,445		
<b>Page 20 - Resident Care Supplies***</b>							
27.	20	5-a-2	Prescription Drugs	\$ 240,644	240,644		
28.	20	5-d	Ambulance/Limousine	\$ 4,058	4,058		
29.	20	5-f	X-rays, etc	\$ 9,408	9,408		
30.	20	5-h	Laboratory	\$ 46,317	46,317		
31.			Medical Supplies	\$			
32.	20	5-e-2	Oxygen (non emergency)	\$ 11,924	11,924		
33.			Occupational Therapy	\$			
34.			Other - See Attached Schedule	\$ 33,783	33,783		
<b>Page 22 - Maintenance and Property</b>							
35.			Excess Movable Equipment Depreciation See Attached Schedule	\$ (66,286)	(66,286)		
36.			Depreciation on Unallowable Motor Vehicles	\$			
37.			Unallowable Property and Real Estate Taxes	\$			
38.			Rental of Building Space or Rooms	\$			
39.			Other - See Attached Schedule	\$			
<b>Page 27 - Insurance</b>							
40.			Mortgage Insurance	\$			
41.			Property Insurance	\$			
<b>Other - Miscellaneous</b>							
42.			Other - Indirect	\$ 41,637	41,637		
43.			Interest Income on Account Rec.	\$			
44.			Other - Miscellaneous Administrative	\$ 100,918	100,918		
45.			Management Fees Direct	\$			
46.			Management Fees Indirect	\$			
47.			Other - Direct	\$			
<b>Not For Profit Providers Only</b>							
48.			Building/Non Movable Eq. Depreciation Unallowable Building Interest - See Attached Schedule	\$			
<b>49. Total Amount of Decrease (Items 1 - 48)</b>				\$ 1,296,848	1,296,848		

\*\*\* 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.





<b>Total Other Adjustments</b>			\$ 41,637	\$ -	\$ -

Schedule of Other - Miscellaneous Administrative Adjustments

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
27	14c1	General liability Insurance Adjust	\$ 100,918	\$ -	\$ -
<b>Total Other Adjustments</b>			\$ 100,918	\$ -	\$ -

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
<b>Total Other Adjustments</b>			\$ -	\$ -	\$ -

Schedule of Unallowable Building Interest

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
0	0		\$ -	\$ -	\$ -
0	0		\$ -	\$ -	\$ -
0	0		\$ -	\$ -	\$ -
0	0		\$ -	\$ -	\$ -
0	0		\$ -	\$ -	\$ -
0	0		\$ -	\$ -	\$ -
0	0		\$ -	\$ -	\$ -
0	0		\$ -	\$ -	\$ -
<b>Total Unallowable Building Interest</b>			\$ -	\$ -	\$ -

## F. Statement of Revenue

Name of Facility	License No.	Report for Year Ended		Page	of
22 South Street Operations LLC, d/b/a Fo 2370		9/30/2019		30	37
Item	Total	CCNH	RHNS	(Specify)	
<b>I. Resident Room, Board &amp; Routine Care Revenue</b>					
1. a. Medicaid Residents ( <i>CT only</i> )	\$ 12,528,905	12,528,905			
b. Medicaid Room and Board Contractual Allowance **	\$ (6,603,267)	(6,603,267)			
2. a. Medicaid ( <i>All other states</i> )	\$				
b. Other States Room and Board Contractual Allowance **	\$				
3. a. Medicare Residents ( <i>all inclusive</i> )	\$ 1,330,844	1,330,844			
b. Medicare Room and Board Contractual Allowance **	\$ (438,327)	(438,327)			
4. a. Private-Pay Residents and Other	\$ 2,610,818	2,610,818			
b. Private-Pay Room and Board Contractual Allowance **	\$ (809,690)	(809,690)			
<b>II. Other Resident Revenue</b>					
1. a. Prescription Drugs - Medicare	\$ 119,086	119,086			
b. Prescription Drugs - Medicare Contractual Allowance **	\$ (39,222)	(39,222)			
c. Prescription Drugs - Non-Medicare	\$ 152,099	152,099			
d. Prescription Drugs - Non-Medicare Contractual Allowance **	\$ (49,782)	(49,782)			
2. a. Medical Supplies - Medicare	\$ 6	6			
b. Medical Supplies - Medicare Contractual Allowance **	\$ (2)	(2)			
c. Medical Supplies - Non-Medicare	\$				
d. Medical Supplies - Non-Medicare Contractual Allowance **	\$				
3. a. Physical Therapy - Medicare	\$ 493,651	493,651			
b. Physical Therapy - Medicare Contractual Allowance **	\$ (162,589)	(162,589)			
c. Physical Therapy - Non-Medicare	\$ 393,122	393,122			
d. Physical Therapy - Non-Medicare Contractual Allowance **	\$ (129,149)	(129,149)			
4. a. Speech Therapy - Medicare	\$ 96,140	96,140			
b. Speech Therapy - Medicare Contractual Allowance **	\$ (31,665)	(31,665)			
c. Speech Therapy - Non-Medicare	\$ 83,009	83,009			
d. Speech Therapy - Non-Medicare Contractual Allowance **	\$ (26,425)	(26,425)			
5. a. Occupational Therapy - Medicare	\$ 568,151	568,151			
b. Occupational Therapy - Medicare Contractual Allowance **	\$ (187,126)	(187,126)			
c. Occupational Therapy - Non-Medicare	\$ 429,195	429,195			
d. Occupational Therapy - Non-Medicare Contractual Allowance **	\$ (137,041)	(137,041)			
6. a. Other ( <i>Specify</i> ) - Medicare	\$ 35,876	35,876			
b. Other ( <i>Specify</i> ) - Non-Medicare	\$ 200,673	200,673			
<b>III. Total Resident Revenue</b> (Section I. thru Section II.)	\$ 10,427,290	10,427,290			
<b>IV. Other Revenue*</b>					
1. Meals sold to guests, employees & others	\$				
2. Rental of rooms to non-residents	\$				
3. Telephone	\$				
4. Rental of Television and Cable Services	\$				
5. Interest Income ( <i>Specify</i> )	\$ 21	21			
6. Private Duty Nurses' Fees	\$				
7. Barber, Coffee, Beauty and Gift shops	\$ 10,843	10,843			
8. Other ( <i>Specify</i> )	\$ 785	785			
<b>V. Total Other Revenue</b> (1 thru 8)	\$ 11,649	11,649			
<b>VI. Total All Revenue</b> (III +V)	\$ 10,438,938	10,438,938			

\* 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.



### G. Balance Sheet

Name of Facility	License No.	Report for Year Ended	Page	of
22 South Street Operations LLC, d/b/a F	2370	9/30/2019	31	37
Account			Amount	
<b>Assets</b>				
A. Current Assets				
1. Cash ( <i>on hand and in banks</i> )			\$	5,893
2. Resident Accounts Receivable (Less Allowance for Bad Debts)			\$	1,163,597
3. Other Accounts Receivable (Excluding Owners or Related Parties)			\$	15,502
4. Inventories			\$	54,711
5. Prepaid Expenses			\$	24,232
a. _____				
b. _____				
c. _____				
d. See Schedule		24,232		
6. Interest Receivable			\$	
7. Medicare Final Settlement Receivable			\$	
8. Other Current Assets ( <i>itemize</i> )			\$	
_____				
_____				
See Schedule				
<b>A-9. Total Current Assets</b> (Lines A1 thru 8)			\$	1,263,934
B. Fixed Assets				
1. Land			\$	
2. Land Improvements	*Historical Cost _____		\$	
	Accum. Depreciation _____	Net		
3. Buildings	*Historical Cost _____	5,381	\$	5,321
	Accum. Depreciation _____	60	Net	
4. Leasehold Improvements	*Historical Cost _____		\$	
	Accum. Depreciation _____	Net		
5. Non-Movable Equipment	*Historical Cost _____		\$	
	Accum. Depreciation _____	Net		
6. Movable Equipment	*Historical Cost _____	23,132	\$	22,576
	Accum. Depreciation _____	556	Net	
7. Motor Vehicles	*Historical Cost _____		\$	
	Accum. Depreciation _____	Net		
8. Minor Equipment-Not Depreciable			\$	
9. Other Fixed Assets ( <i>itemize</i> )			\$	
_____				
See Schedule				
<b>B-10. Total Fixed Assets</b> (Lines B1 thru 9)			\$	27,897

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



### G. Balance Sheet (cont'd)

Name of Facility 22 South Street Operations LLC, d/b/a	License No. 2370	Report for Year Ended 9/30/2019	Page 32	of 37
Account			Amount	
Total Brought Forward:			\$	1,291,831
C. Leasehold or like property recorded for Equity Purposes.				
1. Land			\$	
2. Land Improvements		*Historical Cost _____ Accum. Depreciation _____ Net	\$	
3. Buildings		*Historical Cost _____ Accum. Depreciation _____ Net	\$	
4. Non-Movable Equipment		*Historical Cost _____ Accum. Depreciation _____ Net	\$	
5. Movable Equipment		*Historical Cost _____ Accum. Depreciation _____ Net	\$	
6. Motor Vehicles		*Historical Cost _____ Accum. Depreciation _____ Net	\$	
7. Minor Equipment-Not Depreciable			\$	
C-8 <b>Total Leasehold or Like Properties</b> (C1 thru 7)			\$	
D. Investment and Other Assets				
1. Deferred Deposits			\$	
2. Escrow Deposits			\$	
3. Organization Expense		*Historical Cost _____ Accum. Depreciation _____ Net	\$	
4. Goodwill (Purchased Only)			\$	
5. Investments Related to Resident Care ( <i>itemize</i> )			\$	
			\$	
6. Loans to Owners or Related Parties ( <i>itemize</i> )			\$	
Name and Address	Amount	Loan Date		
7. Other Assets ( <i>itemize</i> )			\$	(804,124)
I/C Due to/Due From Owned		(804,124)		
I/C Due to/Due From Multicare				
See Schedule				
D-8. <b>Total Investments and Other Assets</b> (Lines D1 thru 7)			\$	(804,124)
D-9. <b>Total All Assets</b> (Lines A9 + B10 + C8 + D8)			\$	487,707

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





**G. Balance Sheet (cont'd)**

Name of Facility 22 South Street Operations LLC, d/b/a Fox		License No. 2370	Report for Year Ended 9/30/2019	Page 34	of 37	
Account				Amount		
Total Brought Forward:				1,116,414		
<b>Liabilities (cont'd)</b>						
B. Long-Term Liabilities						
1. Loans Payable-Equipment ( <i>itemize</i> )						
\$						
Name of Lender	Purpose	Amount	Date Due			
2. Mortgages Payable				\$		
3. Loans from Owners or Related Parties ( <i>itemize</i> )				\$		
Name and Address of Lender	Amount	Loan Date				
4. Other Long-Term Liabilities ( <i>itemize</i> )				\$ 1,856		
LT Debt-Financing Obligation						
Escheatable Funds		1,856				
See Schedule						
B-5. <b>Total Long-Term Liabilities</b> (Lines B1 thru 4)				\$ 1,856		
C. <b>Total All Liabilities</b> (Lines A-13 + B-5)				\$ 1,118,270		

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

Name of Facility	License No.	Report for Year Ended	Page	of
22 South Street Operations LLC, d/b/a	2370	9/30/2019	35	37
Account			Amount	
<b>A. Reserves</b>				
1. Reserve for value of leased land			\$	
2. Reserve for depreciation value of leased buildings and appurtenances to be amortized			\$	
3. Reserve for depreciation value of leased personal property ( <i>Equity</i> )			\$	
4. Reserve for leasehold real properties on which fair rental value is based			\$	
5. Reserve for funds set aside as donor restricted			\$	
6. Total Reserves			\$	
<b>B. Net Worth</b>				
1. Owner's Capital			\$	
2. Capital Stock			\$	
3. Paid-in Surplus			\$	2,096,903
4. Treasury Stock			\$	
5. Cumulated Earnings			\$	(2,597,013)
6. Gain or Loss for Period			\$	(130,452)
	10/1/2018	thru	9/30/2019	
7. Total Net Worth			\$	(630,562)
<b>C. Total Reserves and Net Worth</b>			\$	(630,562)
<b>D. Total Liabilities, Reserves, and Net Worth</b>			\$	487,708

### H. Changes in Total Net Worth

Name of Facility 22 South Street Operations LLC, d/b/a F	License No. 2370	Report for Year Ended 9/30/2019	Page 36	of 37
Account			Amount	
A. Balance at End of Prior Period as shown on Report of 09/30/2018			\$	(500,112)
B. Total Revenue <i>(From Statement of Revenue Page 30)</i>			\$	10,438,939
C. Total Expenditures <i>(From Statement of Expenditures Page 27)</i>			\$	10,569,389
D. Net Income or Deficit			\$	(130,450)
E. Balance			\$	(630,562)
F. Additions				
1. Additional Capital Contributed <i>(itemize)</i>				
2. Other <i>(itemize)</i>				
F-3. Total Additions			\$	
G. Deductions				
1. Drawings of Owners/Operators/Partners <i>(Specify)</i>			\$	
Name and Address <i>(No., City, State, Zip)</i>		Title	Amount	
2. Other Withdrawings <i>(Specify)</i>			\$	
Purpose		Amount		
3. Total Deductions			\$	
H. <b>Balance at End of Period</b>			\$	(630,562)

### I. Preparer's/Reviewer's Certification

Name of Facility 22 South Street Operations LLC, d/b/a Fox	License No. 2370	Report for Year Ended 9/30/2019	Page 37	of 37
<i>Check appropriate category</i>				
<input checked="" type="checkbox"/> Chronic and Convalescent Nursing Home only (CCNH)	<input type="checkbox"/> Rest Home with Nursing Supervision only (RHNS)	<input type="checkbox"/> (Specify)		
<b>Preparer/Reviewer Certification</b>				
<p>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.</p>				
Signature of Preparer		Title		Date Signed
Printed Name of Preparer				
Thomas Farnan				
Address Address			Phone Number	
200 Brickstone Square, Andover, MA 01810			978-247-5029	
Contacted Person Regarding Additional Information Needed Regarding This Report			Phone Number	
Thomas Farnan			978-247-5029	
Contact Email Address				
Thomas.Farnan@genesishcc.com				