## **State of Connecticut**



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

Name of Facility (as I								
Harborside CT Limite	ed Partnership -	d/b/a: Madiso	on House					
Address (No. & Stree	et, City, State, Z	ip Code)						
34 Wildwood Avenue	e, Madison, CT (	06443						
Type of Facility								
☑ Chronic and C Nursing Home	onvalescent e only (CCNH)		Rest Home wit Supervision on (RHNS)	_	_	(Specify)		
Report for Year Begin	nning		Report for Yea	r Ending				
10/1/2018 9/30/2019								
License Numbers:		CCNH 2201-C	RHNS		(Specify)			dicare Provider 07-5405
Medicaid Provider Nu	ımbers:	CC 21444	CNH	RH	INS		ICI	F-IID
For Department Use	e Only							
Sequence Number	Signed and	Date	Sequence N	lumber	Signed a	nd Notariz	od	Date Received
Assigned	Notarized	Received	Assign	ed	Signed a	iiu ivotariz	cu	Date Received
	<u> </u>		•		•			

## **General Information**

Name of Facility (as licensed)	License No.	Report for Year Ended	Page	of
Harborside CT Limited Partnership - d/b/a: Madison H	2201-C	9/30/2019	1	37

### Administrator's/Owner's Certification

MISREPRESENTATION OR FALSIFICATION OF ANY INFORMATION CONTAINED IN THIS COST REPORT MAY BE PUNISHABLE BY FINE AND/OR IMPRISIONMENT 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 Harborside CT Limited Partnership - d/b/a: Madison House [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)			Printed Name (Owner)	
Patrick Townsend				
Subscribed and Sworn to before me:	State of	Date	Signed (Notary Public)	Comm. Expires
Address of Notary Public	<u>'</u>	<u>.</u>	-	

(Notary Seal)

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# State of Connecticut **Department of Social Services**

55 Farmington Avenue, Hartford, Connecticut 06105

Data Required for Real Wage Adjus	stm	ent		Page	of
				1A	37
Name of Facility	Period Covered:			From	То
Harborside CT Limited Partnership - d/b/a: Madison House			10/1/2018	9/30/2019	
Address of Facility					
34 Wildwood Avenue, Madison, CT 06443		1		1	
Report Prepared By		Phone Num		Date	
Thomas Farnan		978-247-50	29	12/28/2019	
Item		Total	CCNH	RHNS	(Specify)
1. Dietary wages paid	\$				
2. Laundry wages paid	\$				
3. Housekeeping wages paid	\$				
4. Nursing wages paid	\$	2,237,026	2,237,026		
5. All other wages paid	\$	360,308	360,308		
6. Total Wages Paid	\$	2,597,334	2,597,334		
7. Total salaries paid	\$	317,438	317,438		
8. Total Wages and Salaries Paid (As per page 10 of Report)	\$	2,914,772	2,914,772		

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

		ne No. of Fac -245-8008	ility	Report for Ye 9/30/2019	ar Ended	Page 2	of 37	
Name of Facility (as shown on license)	203		85		ate Zin )		37	
Harborside CT Limited Partnership - d/b/a: Madison Hou	ıse	Address ( <i>No. &amp; Street, City, State, Zip</i> ) 34 Wildwood Avenue, Madison, CT 06443						
CCNH		RHNS		(Specify)	1, 01 00.	Medicare F	rovide	r No.
License Numbers: 2201-C				(1 ))		07-5405		
Type of Facility (Check appropriate box(es))	1							
☐ Chronic and Convalescent Nursing Home only (CCNH)		Home with lervision only			(Specify)	)		
Type of Ownership (Check appropriate box)								
O Proprietorship O LLC O Partnership	0	Profit Corp.	0	Non-Profit Con	rp. O	Government	ОТ	rust
If this facility opened or closed during report year provid	e:		Date	e Opened	Date Clo	sed		
Has there been any change in ownership	_							
or operation during this report year?	0	Yes	0	No	If "Yes,"	explain full	у.	
Administrator								
Name of Administrator				Nursing Ho	ome			
Patrick Townsend				Administrat	or's	1484		
				License 1	No.:			
Other Operators/Owners who are assistant administrators	s (full	or part time)	of th	•				
Name				License 1	No.:			

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

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# **General Information and Questionnaire Partners/Members**

		_	_		_
Name of Facility		License No.	Report for Y	ear Ended	Page of
Harborside CT Limited Partner	rship - d/b/a: Madison H	2201-C	9/30/2019		3 37
	1			State(a) and/	or Town(s) in
I IN CD	1: /11.0	D .	. 11		
Legal Name of Part		Business A			egistered
Harborside CT Limited Partner	rship - d/b/a: Madison	101 East State S	Street,	PA	
House		Kennett Square,	PA 19348		
		,			
			1		1
Name of Partners/Members	Business Ac	ddress	,	Title	% Owned
See Attached					
					l

# **General Information and Questionnaire Corporate Owners**

Name of Facility	License No.	Report for Year	Ended	Page	of		
Harborside CT Limited Partnership - d/b/a: M	2201-C	9/30/2019		3A	37		
If this facility is owned or operated as a corpo		e following inform	nation:	tion:			
Legal Name of Corporation		ess Address	State(s) in W	hich Incorp	orated		
				No. Sł	nares		
Name of Directors, Officers	Busine	ess Address	Title	Held by			
See Attached							
Names of Stockholders Owning at Least 10%							
of Shares							

CSP-3B Rev. 10/2005

## General Information and Questionnaire Individual Proprietorship

Name of Facility	License No.	Report for Year Ended	Page of
Harborside CT Limited Partnership - d/b/a: Madisc	2201-C	9/30/2019	3B 37
If this facility is owned or operated as an individua		rovide the following informat	ion:
Own	ner(s) of Facility		

### arborside Connecticut Limited Partnership d/b/a Madison House

## OWNERSHIP DISCLOSURE

#### LICENSEE

### Harborside Connecticut LP

FEIN: 06-1496629

AGENT FOR SERVICE: Corporation Service Company, 50 Weston Street, Hartford CT 06120

Harborside Healthcare I LLC is the General Partner of Harborside Connecticut LP Harborside Healthcare Advisors, LP is the Sole Member of Harborside Healthcare I LLC Harborside Healthcare LLC is the 99% Partner of Harborside Healthcare Advisors LP KHI, LLC is the 1% Partner of Harborside Healthcare Advisors LP SunBridge Healthcare LLC is the 100% Owner of Harborside Healthcare LLC Sun Healthcare Group, Inc. is the 100% Owner of SunBridge Healthcare LLC GHC Holdings II LLC is the 100% Owner of Sun Healthcare Group, Inc. Address for Above Entities: 101 East State Street, Kennett Square, PA 19348 - 610-444-6350

#### Genesis HealthCare LLC

c/o CT Corporation System, 100 Pine Street, Suite 325, Harrisburg, PA, 17101 EIN: 27-3237296

Ownership: GEN Operations II, LLC. (100% membership interest)

#### IT ENTITIES HAVING BENEFICIAL OWNERSHIP

#### GEN Operations II, LLC

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

<u>Ownership</u>

GEN Operations I, LLC (100%)

#### GEN Operations I, LLC

EIN: 27-3237090 101 East State Street Kennett Square, PA 19348

#### FC-GEN Operations Investment, LLC

EIN: 27-3237005 101 East State Street Kennett Square, PA 19348

#### <u>Ownership</u>

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

### <u>Ownership</u>

Sun Healthcare Group, Inc. (100%)

### Sun Healthcare Group, Inc.

EIN: 13-4230695 101 East State Street Kennett Square, PA 19348

#### $\underline{Ownership}$

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

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

<u>Ownership</u>

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

## General Information and Questionnaire Related Parties\*

Name of Facility		Licens	e No.		Report for Year Ended		Page	of
Harborside CT Limited	Partnership - d/b/a: Madison H	(	2201-C		9/30/2019		4	37
_	eiving compensation from the fa	•		_		If "Yes," provide the	e Name/Ad	dress and
marriage, ability to cont	trol, ownership, family or busin	ess asso	ciation?	0	Yes • No	complete the inform	nation on Pa	age 11 of the report.
Are any individuals or c	companies which provide goods	or serv	ices,					
including the rental of p	property or the loaning of funds	to this f	facility,					
related through family a	ssociation, common ownership	, contro	l, or bus	iness	Yes O No			
association to any of the	e owners, operators, or officials	of this	facility?			If "Yes," provide th	e following	information:
	-					•		
		Al	so Provi	des		Indicate Where		
		Goo	ds/Servi	ces to		Costs are Included		
Name of Related	Business	Non-l	Related	Parties	Description of Goods/Services	in Annual Report	Cost	Actual Cost to the
Individual or Company	Address	Yes	No	%**	Provided	Page # / Line #	Reported	Related Party
	101 East State Street, Kennett	•	0					
Genesis Healthcare	Square, PA 19348				Home Office	Pg 16/m12	472,049	472,049
Genesis ElderCare Rehabilitation Services	101 East State Street, Kennett Square, PA 19348	•	0	66%	PT/OT/ST- Direct and Indirect Cost	Pg 13/B5, 9,10	569,942	569,942
Genesis ElderCare Staffing	101 East State Street, Kennett			0070	1 1/01/31- Direct and findheet Cost	1 g 15/D5, 7,10	307,742	307,742
Services	Square, PA 19348	0	•	50%	Staffing Pool	Pg 10/A12, p15-1		
_	101 East State Street, Kennett	•	0					
Services	Square, PA 19348			87%	Medical Director /NP	Pg 13/B8, Pg 10/A12	57,758	57,758
Career Staffing	101 East State Street, Kennett Square, PA 19348	•	0	8/10/2	Outside Agency	Pg 13/B11 pg 10-12, 1:	235,352	235,352
Cureer Starring	101 East State Street, Kennett			0470	Outside Agency	1 g 15/15/11 pg 10-12, 1.	233,332	233,332
Respiratory Health Services	Square, PA 19348	•	0	50%	Respiratory Therapy	Pg 13/B12, Pg 20/C5E	474	474
	101 East State Street, Kennett	•	0					
Liberty Health (Insurance)	Square, PA 19348				Insurance	Pg 27/14	142,537	142,537
Genesis Healthcare	101 East State Street, Kennett Square, PA 19348	•	0		Capital Interest	Page 17, page 26-12A	36,979	36,979
Genesis freatment	5quare, 171 17570				Capital Interest	1 age 17, page 20-12A	30,779	30,979
		0	•					

<sup>\*</sup> Use additional sheets if necessary.

<sup>\*\*</sup> Provide the percentage amount of revenue received from non-related parties.

# **General Information and Questionnaire Basis for Allocation of Costs**

Name of Facility	License No	).	Report for Year Ended	Page	of			
Harborside CT Limited Partnership - d/b/a: Mad	2201-0	2	9/30/2019	5	37			
If the facility is licensed as CDH and/or RCH or	provides A	IDS or TBI	services with special Medicaid	rates, costs				
must be allocated to CCNH and RHNS as follow	rs:							
Item		Method of Allocation						
Dietary		Number of	meals served to residents					
Laundry		Number of pounds processed						
Housekeeping		Number of square feet serviced						
		Number of	hours of routine care provided	by EACH				
Nursing		employee o	classification, i.e., Director (or C	Charge Nur	se),			
		Registered	Nurses, Licensed Practical Nur	ses, Aides	and			
		Attendants						
Direct Resident Care Consultants		Number of	hours of resident care provided	l by EACH				
		specialist (	(See listing page 13 )					
Maintenance and operation of plant		Square feet	t					
Property costs (depreciation)		Square feet	t					
Employee health and welfare	Gross salar	ries						
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 follo	wing questi	ons applical	ole to the cost information prov	ided.				
1. In the preparation of this Report, were all	• Yes	O No	If "No," explain fully why such	h allocation	was not			
costs allocated as required?	o ies	O No	made.					
2. Explain the allocation of related company exp	enses and a	ttach copy	of appropriate supporting data.					
3. Did the Facility appropriately allocate and sel				ie cost cent	ers?			
(e.g., Assisted Living, Home Health, Outpatie	ent Services	, Adult Day	Care Services, etc.)					
	• Yes O No If "No," explain fully why such allocation 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			License No.	Report for Y	ear Ended		Page	of
Harborside CT Limited Partnership - d/b/a	ı: Madisor	House	2201-C	9/30/2019			6	37
		ed * to ners,						
		ators,				Annual		
		icers		Date of	Term of	Amount	Am	ount
Name and Address of Lessor	Yes	No	Description of Items Leased	Lease**	Lease	of Lease	Clai	med
	0	•						
	0	•						
	0	•						
	0	•						
	0	•						
	0	•						
	0	•						
	0	•						
	0	•						
	0	•						
Is a Mileage Log Book Maintained for All	Leased V	ehicles	? O Yes	•	No	Total ***		

Is a Mileage Log Book Maintained for All Leased Vehicles?

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

<sup>\*\*</sup> Attach copies of newly acquired leases.

<sup>\*\*\*</sup> Amount should agree to Page 22, Line 6e.

CSP-7 Rev. 6/95

## General Information and Questionnaire Accounting Basis

Name of Facility	License No.	Report for Year Ended		Page	of
Harborside CT Limited Partnership	2201-C	9/30/2019		7	37
The records of this facility for the p	eriod covered by this report	were maintained on the following basis:	-	<u>.</u>	
Accrual O Cash O	Modified Cash				
Is the accounting basis for this					
1*	Yes	If "No," explain.			
previous period?	No				
Independent Accounting Firm					
Name of Accounting Firm		Address (No. & Street, City, State, Zip Code)			
1 KPMG Peat Marwick		1600 Market Street, Philadelphia, PA 19	103		
2					
3 4					
Services Provided by This Firm (de.	scribe fully )				
1 Year end financial audit			\$	512	
2			\$		
3			\$		
4			\$		
			Charge fo	r Services Pr	ovided
			\$	512	
Are These Charges Reflected in the Expend	iture Portion of This Report? If Yo	es, Specify Expense Classification and Line No.			
• Yes O No					
<b>Legal Services Information</b>					
Name of Legal Firm or Independent				e Number	
1 Goldman Gruder & Woods LL	C		203-899-8		
2 Wiggin And Dana LLP			203-498-4	1400	
3					
4					
5	7: C- 1- )				
Address (No. & Street, City, State, 2					
<ol> <li>200 Connecticut Ave Norwalk,</li> <li>One Century Tower, New Have</li> </ol>					
3	III, C1 00306				
4					
5					
Services Provided by This Firm (de.	scribe fully )				
1 Property Ownership search			\$		
2 Deseased record services			\$		
3			\$		
4			\$		·
5			\$		
			Charge fo	r Services Pr	ovided
			\$		
	iture Portion of This Report? If Yo	es, Specify Expense Classification and Line No.			
⊙ Yes O No					

## **Schedule of Resident Statistics**

Name of Facility	· · · · · · · · · · · · · · · · · · ·						-	r Year Ende	ed		Page	of
Harborside CT Limited Partnership - d/b/a: Madison	House		22	01-C			9/30/2019	9			8	37
					]	Period 10	1 Thru 6/1	30		Period 7/1	1 Thru 9/3	0
		Total	Total									
	Total All	CCNH	RHNS	Total								
	Levels	Level	Level	(Specify)	Total	CCNH	RHNS	(Specify)	Total	CCNH	RHNS	(Specify)
Certified Bed Capacity												
A. On last day of PREVIOUS report period	90	90			90	90			90	90		
B. On last day of THIS report period	89	89			90	90			89	89		
2. Number of Residents												
A. As of midnight of PREVIOUS report period	59	59			59	59			73	73		
B. As of midnight of THIS report period	64	64			73	73			64	64		
3. Total Number of Days Care Provided During Period												
A. Medicare	2,931	2,931			2,312	2,312			619	619		
B. Medicaid (Conn.)	18,378	18,378			13,914	13,914			4,464	4,464		
C. Medicaid (other states)												
D. Private Pay	1,338	1,338			1,054	1,054			284	284		
E. State SSI for RCH												
F. Other (Specify)	1,462	1,462			1,037	1,037			425	425		
G. Total Care Days During Period (3A thru F)	24,109	24,109			18,317	18,317			5,792	5,792		
Total Number of Days Not Included in Figures in 4. 3G for Which Revenue Was Received for Reserved Beds												
A. Medicaid Bed Reserve Days	2	2			2	2						
B. Other Bed Reserve Days	1	1			1	1						
5. Total Resident Days (3G + 4A + 4B)	24,112	24,112			18,320	18,320			5,792	5,792		

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

CSP-9 Rev. 9/2002

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

Name of Facil	•	1.0		License No. Report for Year Ended							Page	of																										
Harborside C	l' Limite	d Partne	Real Part   Pa									37																										
	-	-		-	pacity dur	ring th	ie repoi	t year	?	•	Yes	0	No																									
II ILS			-	1011.	Cl	2020	in Dad	,		Co	nogity Afte	or Changa																										
5			-			iange				Ca	pacity Atte	er Change																										
Date of	CCNH	RHNS	(Specify)		Lost		(	jaine	1																													
Change	(1)	(2)	(2)	(1)	(2)	(2)	(1)	(2)	(2)	CCMI	DIDIG	(9 :6)	D 0	C1																								
	(1)	(2)	(3)	(1)	(2)	(3)	(1)	(2)	(3)		KHNS	(Specify)																										
7/1/2019	X			1						89			Beds decreased	from 90 to 89 on																								
5. If there v	vas any	change i	n certified bed c	apaci	ty during	the re	port ye	ar (as	reporte	ed in item	4 above) p	provide the num	ber of																									
RESIDE	ENT DA	YS for 9	00 days followin	g the	change.																																	
			Change in Re	esiden	t Days					CC	CNH	RHNS	(Spe	ecify)																								
1st chang	ge																																					
2nd chan			Change in Resident Days  CCNH RHN  Rates on September 30 of Cost Year  Medicare Medicaid Self-Pay  CCNH CCNH RHNS CCNH RHNS (Speci																																			
3rd chan																																						
4th chang																																						
6. Number	of Resid	lents and	•	mber			r				10 D		0.1 0.																									
		-	Medicare		Medi	caid				Se	elf-Pay		Other Stat	e Assisted																								
														I																								
														I																								
	Item		CCNH	C	CNH	RI	HNS	CC	CNH	RHNS		RHNS		RHNS		†		RHNS		(Specify)	R.C.H.	ICF-MR																
No. of R			8		46				10																													
Per Dien																																						
a. One b																																						
b. Two l		1	587.95		245.03				439.52																													
c. Three		;												1																								
bed r	ms.																																					
														I																								
7 Total Nu	mbor of	Dhysian	1 Thomas Tract	manta						то	ТАТ	CCNH	DLING	(Specify)																								
				Hems						10			KIINS	(Specify)																								
											2,007	2,007																										
											652	652		]																								
C.	Other													]																								
		hysical	Therapy Treatm	ents							-																											
		re - Part									291	291																										
B.	Medica	id (Excl	usive of Part B)																																			
		orative [	Treatments								168	168																										
	Other										980	980																										
			herapy Treatme								1,439	1,439																										
			tional Therapy	reatn	nents																																	
		re - Part									2,459	2,459																										
В.		-	usive of Part B)																																			
			Treatments																																			
-	2. Rest	oranve	Treatments								568	568																										
		ccunati	onal Therapy Ti	reatm	ents						11,006 14,033	11,006 14,033																										
<i>D</i> .	- Juni U	Jupun	ittitupy II	Treatments						1	17,000	17,033																										

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

CSP-10 Rev. 9/2002

Report of Expenditures - Salaries & Wages

Report of Ex	<u> </u>	- Salalle			T	
Name of Facility	License No.		Report for Yea	r Ended	Page	of
Harborside CT Limited Partnership - d/b/a: Madison House	2201-C		9/30/2019		10	37
Are time records maintained by all individuals receiving con	mpensation?	•	Yes	0	No	
,	·		Total Cost a			
			Total Cost a	iliu Hours		
Item	CCNH	Hours	RHNS	Hours	(Specify)	Hours
A. Salaries and Wages*	CCIVII	Hours	KIINS	Hours	(вресну)	Hours
Operators/Owners (Complete also Sec. I						
of Schedule A1)						
2. Administrator(s) (Complete also Sec. III						
of Schedule A1)	181,278	2,136				
3. Assistant Administrator (Complete also Sec. IV						
of Schedule A1)						
4. Other Administrative Salaries (telephone	05.510	2.051				
operator, clerks, receptionists, etc.)	95,518	3,971				
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	54,594	1.706				
a. Engineer or Chief of Maintenance     b. Other Maintenance Workers	5,300	1,796 395				
8. Laundry Service	3,300	373				
a. Supervisor						
b. Other Laundry Workers						
9. Barber and Beautician Services						
10. Protective Services						
Accounting Services     a. Head Accountant						
b. Other Accountants						
12. Professional Care of Residents						
a. Directors and Assistant Director of Nurses	136,160	2,292				
b. RN		_,_,_				
1. Direct Care	623,191	15,936				
2. Administrative**	33,471	824				
c. LPN	242.120					
1. Direct Care	563,138	20,300				
Administrative**  d. Aides and Attendants	976,253	54,969				
e. Physical Therapists	710,233	27,707				
f. Speech Therapists						
g. Occupational Therapists						
h. Recreation Workers	78,663	4,236				
i. Physicians						
Medical Director     Utilization Review						
Chilization Review     Resident Care***	+				1	
4. Other (Specify)						
Such (Speedy)						
j. Dentists						
k. Pharmacists			_			
1. Podiatrists	12.22					
m. Social Workers/Case Management	126,233	5,360			1	
n. Marketing o. Other (Specify)						
See Attached Schedule	40,974	2,648				
A-13. Total Salary Expenditures	2,914,772	114,863				

<sup>\*</sup> 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.

<sup>\*\*</sup> 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.

<sup>\*\*\*</sup> 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 of Other Salaries and Wages (Page 10)

	CCNH			RHNS				(Specify)		
Position		\$	Hours		\$	Hours		\$	Hours	
Ward Clerks	\$	840	56	\$	-	-	\$	-	-	
Central Supply	\$	5,811	395	\$	-	-	\$	-	-	
Medical Records	\$	27,620	1,750	\$	-	-	\$	-	-	
Coordinator-Staffing Centers	\$	6,703	446	\$	-	-	\$	-	-	
0										
Total	\$	40,974	2,648	\$	-	-	\$	-	-	

## Schedule of Other Fees (Page 13)

	CCNH				RH	NS	(Specify)		
Service		\$	Hour	S	\$	Hours		\$	Hours
Consulting Fees	\$	1,626	n/a		\$ -	-	\$	-	-
Purchased Services	\$	-	n/a		\$ -	-	\$	-	-
Purchased Services	\$	15,813	n/a		\$ -	-	\$	•	-
Purchased Services	\$	574	n/a		\$ -	-	\$	-	-
-	\$	-	n/a		\$ -	-	\$	-	-
	\$	-	n/a		\$ -	-	\$	-	-
	\$	-		-	\$ -	-	\$	-	-
	\$	-		-	\$ -	-	\$	-	-
	\$	-		-	\$ -	-	\$		
	\$	-		-	\$ -	-	\$	-	-
	\$	-		-	\$ -	-	\$		
	\$	-		-	\$ -	-	\$		-
	\$	-		-	\$ -	-	\$		-
	\$	-		-	\$ -	-	\$	-	-
	\$	-		-	\$ -	-	\$		-
	\$	-		-	\$ -	-	\$	-	-
	\$	-		-	\$ -	-	\$	-	-
	\$	-		-	\$ -	-	\$	-	-
Total	\$	18,013		-	\$ -	-	\$	-	-

CSP-11 Rev. 10/2005

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

Name of Facility				License No.		Report for	Report for Year Ended		Page	of
Harborside CT Limited Partnership	- d/b/a: Ma	dison House	e	2201-C		9/30/2019			11	37
	COM	Salary Paid		Fringe Benefits and/or Other Payments	Full Description of	Total Hours	Line Where Claimed on	Name and Address of All	Total Hours	Compensation
Name	CCNH	RHNS	(Specify)	(describe fully)	Services Rendered	Worked	Page 10	Other Employment**	Worked	Received
Section I - Operators/Owners										
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).										

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

<sup>\*\*</sup> Include all employment worked during the cost year.

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

CSP-12 Rev. 10/2005

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

Name of Facility (as licensed)				License No.	Report for Y	ear Ended		Page	of	
Harborside CT Limited Partnership	o - d/b/a: Ma	adison Hou	se	2201-C		9/30/2019			12	37
		Salary Pai	d	Fringe Benefits						
N.	CCNH	RHNS	(S:f)	and/or Other Payments	Full Description of Services Rendered	Total Hours Worked	Line Where Claimed on	Name and Address of All	Total Hours Worked	Compensation Received
Name Section III - Administrators***	CCNII	KIINS	(Specify)	(describe fully)	Services Rendered	worked	Page 10	Other Employment**	worked	Received
Patrick Townsend	73,878				Management of Center	440	2			
Archambault, Tania Marie	103,000				Management of Center	1,616	2			
Cyr,Raymond	4,400				Management of Center	80	2			
Section IV - Assistant Administrators										

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

<sup>\*\*</sup> Include <u>all</u> other employment worked during the cost year.

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

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

CSP-13 Rev. 9/2002

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

B. Report of Ex						
Name of Facility	License No.		Report for Y	ear Ended	Page	of
Harborside CT Limited Partnership - d/b/a: Madisor	2201	1-C	9/30/2019	1.77	13	37
			Total Cost	and Hours	1	
Itom	CCNII	Полия	DIING	Полия	(Specify)	Поль
*B. Direct care consultants paid on a fee	CCNH	Hours	RHNS	Hours	(Specify)	Hours
for service basis in lieu of salary						
(For all such services complete Schedule B1)						
Dietitian						
2. Dentist	9,774	67				
3. Pharmacist	9,116	186				
4. Podiatrist	5,110	100				
5. Physical Therapy						
a. Resident Care	433,169	5,934				
b. Other	133,109	3,731				
6. Social Worker						
7. Recreation Worker						
8. Physicians						
a. Medical Director (entire facility)	45,630	241				
b. Utilization Review	10,000	2.12				
(Title 18 and 19 only) monthly meeting						
c. Resident Care**						
d. Administrative Services facility						
<ol> <li>Infection Control Committee</li> </ol>						
(Quarterly meetings)						
2. Pharmaceutical Committee						
(Quarterly meetings) 3. Staff Development Committee						
(Once annually)						
e. Other (Specify)						
``						
9. Speech Therapist						
a. Resident Care	37,125	476				
b. Other						
10. Occupational Therapist						
a. Resident Care	108,726	1,489				
b. Other						
11. Nurses and aides and attendants						
a. RN						
1. Direct Care	158,953	2,651				
2. Administrative***						
b. LPN						
1. Direct Care	83,296	1,967				
2. Administrative***						
c. Aides						
d. Other						
12. Other (Specify)						
See Attached Schedule	18,013					
B-13 Total Fees Paid in Lieu of Salaries	903,803	13,011				

<sup>\*</sup> 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.

<sup>\*\*</sup> 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.

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

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

Name of Facility	License No.		Report for '	Year Ended	Page	of
Harborside CT Limited Partnership - d/b/a:	Madison Hot 2201-C		9/30/2019		14	37
			to Owners,			
Name & Address of Individual	Full Explanation of Service		rs, Officers	Expla	nation of Re	lationship
Genesis Eldercare Hospitality Services, 101 East	Dietary Services	Yes	No	Common Own	archin	
State Street, Kennett Square, PA 19348		•	0			
Genesis Eldercare Rehabilitation Services, 101 East State Street, Kennett Square, PA 19348	Physical, Occupational, and Speech Therapy	•	0	Common Own		
Genesis Eldercare Physician Services, 101 East State Street, Kennett Square, PA 19348	Medical Director	•	0	Common Own	ership	
Genesis Eldercare Staffing Services, 101 East State Street, Kennett Square, PA 19348	Nursing Pool	•	0	Common Own	ership	
Respiratory Health Services, 515 Fairmount Ave, 6th Floor, Suite 600, Towson, MD 21286	Respiratory and Oxygen Supplies	•	0	Common Own	ership	
		0	•			
		0	•			
		0	•			
		0	•			
		0	•			
		0	•			
		0	•			
		0	•			
		0	•			
		0	•			
		0	•			
		0	•			
		0	•			
		0	•			
		0	•			
		0	•			
		0	•			

<sup>\*</sup> Use additional sheets if necessary.

<sup>\*\*</sup> Refer to Page 4 for definition of related.

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

Name of Facility License No.		Report for Y	ear Ended	Page	of
Harborside CT Limited Partnership - d/b/a: Madi 2201-C		9/30/2019	ear Enaca	15	37
Transcollate of Emined Latinetonic as of a triangle 2201 c		7,50,2017			37
Item		Total	CCNH	RHNS	(Specify)
1. Administrative and General					
a. Employee Health & Welfare Benefits					
1. Workmen's Compensation	\$	128,370	128,370		
2. Disability Insurance	\$				
3. Unemployment Insurance	\$	49,659	49,659		
4. Social Security (F.I.C.A.)	\$	216,183	216,183		
5. Health Insurance	\$	203,828	203,828		
6. Life Insurance (employees only)					
(not-owners and not-operators)	\$				
7. Pensions (Non-Discriminatory)	\$	81,896	81,896		
(not-owners and not-operators)	[				
8. Uniform Allowance	\$				
9. Other ( <i>Specify</i> )	\$	10,113	10,113		
See Attached Schedule					
b. Personal Retirement Plans, Pensions, and	\$				
Profit Sharing Plans for Owners and					
Operators (Discriminatory)*					
c. Bad Debts*	\$	189,358	189,358		
d. Accounting and Auditing	\$	512	512		
e. Legal (Services should be fully described on Page 7)	\$				
f. Insurance on Lives of Owners and	\$				
Operators (Specify )*					
g. Office Supplies	\$	10,121	10,121		
h. Telephone and Cellular Phones					
1. Telephone & Pagers	\$	23,830	23,830		
2. Cellular Phones	\$	2,397	2,397		
i. Appraisal (Specify purpose and	\$				
attach copy )*					
j. Corporation Business Taxes \( \int \text{ranchise tax} \)	\$				
k. Other Taxes (Not related to property - See Page 22)					
1. Income*	\$				
2. Other (Specify)	\$	311	311		
See Attached Schedule	Ī				
3. Resident Day User Fee	\$	420,842	420,842		
Subtotal	\$	1,337,419	1,337,419		

<sup>\*</sup> Facility should self-disallow the expense on Page 28 of the Cost Report.

(Carry Subtotals forward to next page)

Attachment Page 15

## **Schedule of Other Employee Benefits**

Description	CCNH	RHNS	(5	Specify)
Union Health & Welfare	\$ 6	\$ -	\$	-
Union Health & Welfare	\$ 357	\$ -	\$	-
Union Health & Welfare	\$ 7	\$ -	\$	-
Union Health & Welfare	\$ 2	\$ -	\$	-
Union Health & Welfare	\$ 12	\$ -	\$	-
Union Health & Welfare	\$ 40	\$ -	\$	-
Union Health & Welfare	\$ 9,643	\$ -	\$	-
Union Health & Welfare	\$ 47	\$ -	\$	-
0	\$ -	\$ -	\$	-
Total	\$ 10,113	\$ -	\$	-

\_\_\_\_\_\_

## **Schedule of Other Taxes**

Description	CCNH	RHNS	(Specify)
Sales Tax	\$ 311	\$ -	\$ -
Sales Tax	\$ -	\$ -	\$ -
0	\$ -	\$ -	\$ -
0	\$ -	\$ -	\$ -
Total	\$ 311	\$ -	\$ -

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

Name of Facility	License No.		Report for Y	Year Ended	Page	of
Harborside CT Limited Partnership - d/b/a: Madison F	2201-C		9/30/2019		16	37
Item			Total	CCNH	RHNS	(Specify)
	ls Brought Forwa	ard:	1,337,419	1,337,419		
1. Travel and Entertainment						
Resident Travel and Entertainment		\$				
2. Holiday Parties for Staff		\$	153	153		
3. Gifts to Staff and Residents		\$				
4. Employee Travel		\$	7,508	7,508		
5. Education Expenses Related to Seminars an	d Conventions	\$	503	503		
6. Automobile Expense (not purchase or depre	eciation)	\$				
7. Other ( <i>Specify</i> )		\$				
See Attached Schedule						
m. Other Administrative and General Expenses						
1. Advertising Help Wanted (all such expenses	s )	\$				
2. Advertising Telephone Directory (all such e.	xpenses )***	\$				
3. Advertising Other (Specify)***		\$	9,855	9,855		
See Attached Schedule						
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	,	\$	1,980	1,980		
* 8. Dues and Membership Fees to Professional		\$	6,275	6,275		
Associations (Specify )						
See Attached Schedule						
8a. Dues to Chamber of Commerce & Other Non-A	llowable Org.***	\$	205	205		
9. Subscriptions		\$	105	105		
10. Contributions***		\$	637	637		
See Attached Schedule						
11. Services Provided by Contract Specify and	Complete	\$	5,049	5,049		
Schedule C-2, Page 21 for each firm or indi	-	•	.,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
12. Administrative Management Services**	/	\$	294,045	294,045		
13. Other (Specify )		\$	(132,772)	(132,772)		
See Attached Schedule		•	, ,, -,	( )···-)		
C-14 Total Administrative & General Expenditures		\$	1,530,960	1,530,960		

<sup>\*</sup> Do not include Subscriptions, which should go in item 9.

<sup>\*\*</sup> Schedule C-1, Page 17 must be fully completed or this expenditure will not be allowed.

<sup>\*\*\*</sup> 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	\$ -	\$ -	\$	-
0	\$ -	\$ -	\$	-
Total Other Travel and Entertainment	\$ -	\$ -	\$	-

#### Schedule of Other Advertising

Description	CCNH	RHNS	(	Specify)
Advertising	\$ 2,760	\$ -	\$	-
Marketing Expense	\$ 2,727	\$ -	\$	-
Marketing Exp- Corporate Spend	\$ 4,360	\$ -	\$	-
Marketing Exp- Corporate Spend	\$ 19	\$ -	\$	-
Marketing Expense	\$ (11)	\$ -	\$	
0	\$ -	\$ -	\$	
0	\$ -	\$ -	\$	
Total Other Advertising	\$ 9,855	\$ -	\$	-

### Schedule of Dues

Description	CCNH	RHNS	(S	pecify)
Licenses & Certifications	\$ 6,480	\$ -	\$	-
Dues to Chamber of Commerce	\$ (205)	\$ -	\$	-
0	\$	\$ -	\$	-
0	\$ -	\$ -	\$	-
0	\$ -	\$ -	\$	-
Total Dues	\$ 6,275	\$ -	\$	-

### Schedule of Contributions

Description	CCNH	RHNS	(S	pecify)
Contributions	\$ 75	\$ -	\$	-
Political Contributions	\$ 562	\$ -	\$	-
0	\$ -	\$ -	\$	-
Total Contributions	\$ 637	\$ -	\$	-

### Schedule of Other Administrative and General

Description		CCNH	RHNS	(Specify)
Bank Service Charges		\$ 2,819	\$ -	s -
Collection Fees		\$ 8,087	self-disallowed	s -
Education Expense		\$ 5	\$ -	\$ -
Employee Physicals		\$ 8,554	\$ -	\$ -
Employee Relations		\$ 953	\$ -	\$ -
Printing		\$ 182	\$ -	\$ -
Training Expense		\$ 467	\$ -	\$ -
Fines & Penalties		\$ -	self-disallowed	\$ -
Miscellaneous		\$ (2)	\$ -	\$ -
Rental Expense		\$ 358	\$ -	\$ -
Accrued Expense Estimation		\$ 728	self-disallowed	\$ -
Landlord Operating Taxes		\$ 2,400	\$ -	\$ -
State Tax Annual Report Filing		\$ -	\$ -	\$ -
Recruiting Fees		\$ -	\$ -	\$ -
Recruiting Fees		\$ -	\$ -	\$ -
Non-recurring Charges	Self-disallowed	\$ (157,323)	\$ -	\$ -
	0	\$ -	\$ -	s -
	0	\$ -	\$ -	\$ -
	0	\$ -	\$ -	\$ -
	0	\$ -	\$ -	\$ -
Total Other Administrative and General		\$ (132,772)	S -	\$ -

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

Name of Facility Harborside CT Limited Partnership - d/b/s	License No. 2201-C	Report for Year Ended 9/30/2019	Page of 17   37
Name & Address of Individual or Company Supplying Service Genesis Health Ventures, 101 East St., Kennett Square, PA 19348	Cost of Management Service 472,049	Full Description of Mgmt. Service Provided  Mgmt Services, Property Mgmt Assisting, MIS, Personnel, Compliance	Indicate Where Costs are Included in Annual Report Page #/Line # pg 16 m-12
Genesis Health Ventures, 101 East St., Kennett Square, PA 19348	36,979	Capital Interest	pg 26 12-A-1

<sup>\*</sup> 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)

		11		i Page 5)			1 _	
	ne of Facility		Licens		Report for Y	ear Ended	Page	of
Harl	porside CT Limited Partnership - d/b/a: Madiso	on H		2201-C	9/30/2019		18	37
	Item			Total	CCNH	RHNS	(Speci	fy)
2.	Dietary							
	a. In-House Preparation & Service							
	1. Raw Food		\$	120,425	120,425			
	2. Non-Food Supplies		\$	18,990	18,990			
	3. Other ( <i>Specify</i> )		\$	(300)	(300)			
	· · · · · · · · · · · · · · · · · · ·		-					
	b. Purchased Services (by contract other		\$	456,036	456,036			
	than through Management Services)							
	(Complete Schedule C-2 att. Page 21)							
	c. Other (Specify)		\$					
	(~r 40 )		_ Ψ					
2D.	Total Dietary Expenditures $(2a + b + c + d)$		\$	595,151	595,151			
==			Ψ	333,131	333,131			
25				T . 1	COM	DIDIG	(0.	<b>C</b> >
	Dietary Questionnaire			Total	CCNH	RHNS	(Speci	fy)
F.	Resident Meals: Total no. of meals served pe	r day	/: <b>*</b>					
G.	Is cost of employee meals included in 2D?	0	Yes	•	No			
						If yes, specify		
H.	Did you receive revenue from employees?	0	Yes	•	No	amt.		
т	W/L:	Car	4 D	49 (Dana/I in a l	[4)	ant.		
I.	Where is the revenue received reported in the	Cos	i Kepor	i: (Page/Line)	item)			
_	Is cost of meals provided to persons other	_		_		If yes, specify		
J.	than employees or residents (i.e., Board	O	Yes	•	No	cost.		
	Members, Guests) included in 2D?							
K.	Is any revenue collected from these people?	$\circ$	Yes	•	No	If yes, specify		
11.	is any revenue concerca from these people.		1 05		110	amt.		
L.	Where is the revenue received reported in the	Cos	t Repor	t? (Page/Line	Item)			
	Is cost of food (other than meals, e.g.,							
	snacks at monthly staff meetings, board	_	<b>3</b> 7	_	3.7	If yes, specify		
M.	meetings) provided to employees included	O	Yes	•	No	cost.		
	in 2D?							
						If yes, specify		
N.	Is any revenue collected from employees?	0	Yes	•	No	amt.		
	WH 1.4 1.4 4.4	<u> </u>	4 D	49 (D /T: 3	T	uiiit.		
O.	Where is the revenue received reported in the	Cos	t Kepor	t! (Page/Line)	item)			

<sup>\*</sup> 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)

	ne of Facility	License		Report for Y		Page	of
Hart	porside CT Limited Partnership - d/b/a: Madison Ho	2	201-C	9/30/2019	1	19	37
	Item		Total	CCNH	RHNS	(S <sub>1</sub>	pecify)
3.	Laundry a. In-House Processing* 1. Bed linens, cubicle curtains, draperies,	Lbs.					
	gowns and other resident care items washed, ironed, and/or processed.***	Amt. \$	4,187	4,187			
	2. Employee items including uniforms, gowns, etc. washed, ironed and/or	Lbs.					
	processed.***	Amt. \$					
	3. Personal clothing of residents	Lbs.					
	washed, ironed, and/or processed.***	Amt. \$					
	4. Repair and/or purchase of linens.***	Lbs.					
		Amt. \$	-1,270		1		
	b. Purchased Services (by contract other than through Management Services) (Complete Schedule C-2 att. Page 21)	\$	132,724	132,724			
	c. Other (Specify)	\$					
	Total Laundry Expenditures (3a + b + c)	\$	135,641	135,641			
3E. F.	Laundry Questionnaire  Is cost of employee laundry included in 3D? O	Yes	•	No	If yes, specify cost.		
G.	Did you receive revenue from employees?	Yes	•	No	If yes, specify amt.		
Н.	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?	Yes	•	No	If yes, specify cost.		
J.	Did you receive revenue from these people? O	Yes	•	No	If yes, specify amt.		
K.	Where is the revenue received reported in the Cost	Report?		(Page/Line	Item)		

<sup>\*</sup> 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.

<sup>\*\*\*</sup> 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.	Repo	rt for Year E	nded	Page	of
Harborside CT Limited Partnership - d/b/a: Ma	2201-C		9/30/2019		20	37
Item			Total	CCNH	RHNS	(Specify)
4. Housekeeping	Sq. Ft. Serviced					
a. In-House Care	by Personnel					
1. Supplies - Cleaning (Mops,	Amt.	\$	9,282	9,282		
pails, brooms, etc.)						
b. Purchased Services (by contract other	Sq. Ft. Serviced					
than through Management Services)	by Personnel					
(Complete Schedule C-2 att.	Amt.	\$	200,531	200,531		
Page 21)						
C. Other (Specify)		\$				
4D. Total Housekeeping Expenditures (4a +	b+c)	\$	209,813	209,813		
5. Resident Care (Supplies)**	,					
a. Prescription Drugs***		_				
1. Own Pharmacy		\$				
2. Purchased from		\$	179,599	179,599		
b. Medicine Cabinet Drugs		\$	7,756	7,756		
c. Medical and Therapeutic Supplies		\$	73,700	73,700		
d. Ambulance/Limousine***		\$	111	111		
e. Oxygen						
1. For Emergency Use		\$				
2. Other***		\$	4,086	4,086		
f. X-rays and Related Radiological		\$	4,323	4,323		
Procedures***						
g. Dental (Not dentists who should be inc	luded under	\$				
salaries or fees)						
h. Laboratory***		\$	29,468	29,468		
i. Recreation		\$	16,422	16,422		
j. Direct Management Services*		\$				
k. Indirect Management Services*		\$				
1. Other (Specify)****		\$	43,108	43,108		
See Attached Schedule						
5M. Total Resident Care Expenditures (5a - 5	5j)	\$	358,573	358,573		

<sup>\*</sup> Schedule C-1, Page 17 must be fully completed or this expenditure will not be allowed.

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

<sup>\*\*\*</sup> Facility should self-disallow the expense on Page 29 of the Cost Report.

<sup>\*\*\*\*</sup> ICFMR's should provide a detailed schedule of all Day Program Costs.

## **Schedule of Other Resident Care**

Description	CCNH	RHNS	(S	Specify)
Incontinency	\$ 32,695	\$ -	\$	-
Incontinency - Rebates	\$ (10)	\$ -	\$	-
Advertising-Help Wanted	\$ 2,087	\$ -	\$	-
Books, Dues & Subscriptions	\$ 120	\$ -	\$	-
Education Expense	\$ 801	\$ -	\$	-
Supplies	\$ 656	\$ -	\$	-
Supplies	\$ 3,295	\$ -	\$	-
Supplies	\$ 39	\$ -	\$	-
Office Supplies	\$ -	\$ -	\$	-
Office Supplies	\$ 61	\$ -	\$	-
Office Supplies	\$ 155	\$ -	\$	-
Training Expense	\$ -	\$ -	\$	-
Rental Expense	\$ 318	\$ -	\$	-
Rental Expense	\$ 5,235	\$ -	\$	-
Consolidated Billing	\$ 446	\$ -	\$	-
Miscellaneous	\$ (1,077)	\$ -	\$	-
Miscellaneous	\$ (40)	\$ -	\$	-
Tuition Reimbursement	\$ -	\$ -	\$	-
Miscellaneous	\$ (3,702)	\$ -	\$	-
Licenses & Certifications	\$ -	\$ -	\$	-
Supplies	\$ -	\$ -	\$	-
T&E-Entertainment	\$ 28	\$ -	\$	-
T&E-Lodging/Transportation	\$ 2,003	\$ -	\$	-
<b>Total Other Resident Care</b>	\$ 43,108	\$ -	\$	-

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

Name of Facility		License No.	Report for Year Ende							
Harborside CT Limited Partr	nership - d/b/a: Madiso	2201-C	9/30/2019	9/30/2019				37		
		Related ** to Owners, Operators, Officers					*	T		
Name of Individual or Company	Address	Yes	No	Explanation of Relationship	Full Explanation of Service Provided*	CCNH	RHNS	(Specify)	Pg	Line
Healthcare Services Group	Drive, Bensalem, PA 19020	0	•	Vendor Contracted	Laundry Purchased Services	132,724				3b
Healthcare Services Group	Drive, Bensalem, PA 19020	0	•	Vendor Contracted	Housekeeping Purchased Services	200,531			20	4b
Healthcare Services Group	Drive, Bensalem, PA 19020	0	•	Vendor Contracted	Dietary Purchased Services	456,036			18	2b
		0	•							
		0	•							
	_	0	•							
		0	•							
		0	•							
		0	•							
		0	•							
		0	•							
		0	•							
		0	•							$\vdash$
		0	•							

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

<sup>\*\*</sup> Refer to Page 4 for definition of related.

<sup>\*\*\*</sup> Please cross-reference amount to the appropriate page in the Annual Report (Pages 16, 18, 19, 20 or 22).

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

Name of Facility License No.	Report for Ye	Page of		
Harborside CT Limited Partnership - d/b/a: M 2201-C	9/30/2019	22   37		
Item	Total	CCNH	RHNS	(Specify)
6. Maintenance & Operation of Plant				
a. Repairs & Maintenance	\$ 276,732	276,732		
b. Heat	\$ 28,144	28,144		
c. Light & Power	\$ 165,642	165,642		
d. Water	\$ 59,269	59,269		
e. Equipment Lease (Provide detail on page 6)	\$			
f. Other (itemize)	\$			
See Attached Schedule				
6g. Total Maint. & Operating Expense (6a - 6f)	\$ 529,788	529,788		
7. Depreciation (complete schedule page 23*)				
a. Land Improvements	\$			
b. Building & Building Improvements	\$ 440	440		
c. Non-Movable Equipment	\$			
d. Movable Equipment	\$ 564	564		
*7e. <i>Total Depreciation Costs</i> $(7a + b + c + d)$	\$ 1,004	1,004		
8. Amortization (Complete att. Schedule Page 24*)				
a. Organization Expense	\$			
b. Mortgage Expense	\$			
c. Leasehold Improvements	\$			
d. Other ( <i>Specify</i> )	\$			
*8e. Total Amortization Costs $(8a + b + c + d)$	\$			
9. Rental payments on leased real property less				
real estate taxes included in item 10b	\$ 460	460		
10. Property Taxes				
a. Real estate taxes paid by owner	\$			
b. Real estate taxes paid by lessor	\$ 170,353	170,353		
c. Personal property taxes	\$			
11. <i>Total Property Expenses</i> (7e + 8e + 9 + 10)	\$ 171,817	171,817		

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

## **Schedule of Other Repairs and Maintenance**

Description	CCNH	RHNS	(5	Specify)
0	\$ -	\$ -	\$	-
0	\$ -	\$ -	\$	
0	\$ -	\$ -	\$	
0	\$ -	\$ -	\$	
0	\$ -	\$ -	\$	-
0	\$ -	\$ -	\$	-
0	\$ -	\$ -	\$	-
0	\$ -	\$ -	\$	-
0	\$ -	\$ -	\$	-
0	\$ -	\$ -	\$	-
0	\$ -	\$ -	\$	-
0	\$ -	\$ -	\$	-
0	\$ -	\$ -	\$	-
0	\$ -	\$ -	\$	-
0	\$ -	\$ -	\$	-
0	\$ -	\$ -	\$	-
0	\$ -	\$ -	\$	-
Total Other Repairs and Maintenance	\$ -	\$ -	\$	-

\_\_\_\_\_

## **Annual Report of Long-Term Care Facility** CSP-23 Rev. 10/2006

**Depreciation Schedule** 

N CE . :116-						iauon Sc	neadie	D	1. 1		D	. c
Name of Facility Harborside CT Limited Partnership - d/b/a: Madison House				License No. 2201-C			Report for Year E 9/30/2019	naea	Page 23	of 37		
Transonside C1 Enimed Farmership - d/o/a. Wadison flouse					2201	<u>-C</u>			T	1	23	3/
					H 10 .	т.		Accumulated	M (1 1 C			
					Historical Cost	Less	G tt D	Depreciation to	Method of	11 61	D : .:	
Duomonto Italia				Exclusive of	Salvage Value	Cost to Be	Beginning of Year's Operations	Computing Depreciation	Useful Life	Depreciation for This Year	T-4-1-	
Property Item					Land	value	Depreciated	Operations	Depreciation	Life	for this year	Totals
A. Land Improvements					25.560		25.560	0.000	C /I	** .		
1. Acquired prior to this report period					25,569		25,569		S/L	Various		
2. Disposals (attach schedule)	1 1	1.1.			(25,569)		(25,569)	(9,009)				
3. Acquired during this report period (attach	ch sched	dule)										
A-4. Subtotal												
B. Building and Building Improvements					207.602		207.602	46,000	C T		(0)	
Acquired prior to this report period					287,692		287,692	46,080	S/L	Various	(0)	
2. Disposals (attach schedule)					(287,692)		(287,692)	(46,080)			110	
3. Acquired during this report period (attack)	ch scheo	dule)			48,568		48,568				440	
B-4. Subtotal												440
C. Non-Movable Equipment												
Acquired prior to this report period					402,972		402,972	195,463	S/L	Various		
2. Disposals (attach schedule)					(402,972)		(402,972)	(195,463)				
3. Acquired during this report period (attack)	ch scheo	dule)										
C-4. Subtotal	-											
	Is a m	ileage										
	logb	ook						Accumulated				
	maint	ained?	Date of A	equisition	Historical Cost	Less		Depreciation to	Method of			
					Exclusive of	Salvage	Cost to Be	Beginning of	Computing	Useful	Depreciation	
	Yes	No	Month	Year	Land	Value	Depreciated	Year's Operations	Depreciation	Life	for This Year	Totals
D. Movable Equipment												
1. Motor Vehicles (Specify name, model												
and year of each vehicle)												
a.												
b.												
c.												
d.												
2. Movable Equipment					205045		205015	22.2	G 7.			
a. Acquired prior to this report period					206,043		206,043	99,313	S/L	Various	0	
b. Disposals (attach schedule)					(206,043)		(206,043)	(99,313)				
c. Acquired during this report period												
(attach schedule)					31,374		31,374				564	
D-3. Subtotal												564
E. Total Depreciation												1,004

## Schedule of Land Improvements Acquired during this report period

Senedule of Land Improven	ichts Acquired during this report period		Useful	
Acquisition Date	Description of Item	Cost	Life	Depreciation
Additions:	•			
Total additions for Land Im	provement	\$ -		\$ -
Deletions:				
10/1/2018 Various	Asset Deletions	\$ (25,569	9)	
Total deletions for Land Im	provement	\$ (25,569	9)	\$ -
total aciclions for Land III	provement	\$ (25,50)	7	Ψ

<sup>\*</sup>Ties to Page 23, Line A3

## Schedule of Building Improvements Acquired during this report period

			Useful		
Acquisition Date	Description of Item	 Cost	Life	Depr	eciation
Additions:					
6/30/2019	Toto Drake Transitional Tank Toilet	\$ 554	09 06	\$	1
6/30/2019	New Exhaust fan/hood in kitchen	\$ 7,071	09 06	\$	18
8/31/2019	New backflow preventer	\$ 1,745	09 04	\$	1
8/31/2019	pmt 1 for replacement of 1 - 24,000 BTU water source heat pump	\$ 3,263	09 04	\$	2
8/31/2019	Pmt 1 for replacement of 6 - 9,000 BTU water source heat pumps	\$ 15,788	09 04	\$	14
8/31/2019	50% Deposit for replacement of two water source heat pumps	\$ 6,030	09 04	\$	5
9/30/2019	Replaced smoked dector w/upgraded tech	\$ 524	09 03	\$	-
9/30/2019	Horizontal water source heat pump 42,000 BTU	\$ 4,060	09 03	\$	-
9/30/2019	Replaced the B-1 Accelerator for sprinkler system	\$ 2,338	09 03	\$	-
9/30/2019	Two Swivel Rebuild Kits for repairs	\$ 2,483	09 03	\$	-
9/30/2019	High Performance Water Filter System ESOTMFSE02	\$ 4,711	09 03	\$	-
				\$	-
Total additions for	Building Improvemen	\$ 48,568		\$	44
Deletions:					
10/1/2018	Various Asset Deletions	\$ (285,417)			
10/1/2018	Reversal Sep 2018 Accruals - Cluff Carpet One Floor & Home	\$ (2,275)			
Total deletions for l	Building Improvement	\$ (287,692)		\$	-

<sup>\*</sup>Ties to Page 23, Line B3

## Schedule of Non-Movable Equipment Acquired during this report period

	de la companya de la		Useful	
<b>Acquisition Date</b>	Description of Item	Cost	Life	Depreciation
Additions:				

<sup>\*\*</sup>Ties to Page 23, Line A2

<sup>\*\*</sup>Ties to Page 23, Line B2

						ttachment Pages 23 24
Total additions for	Non-Movable Equipmen	\$ -	•		\$ -	*
Deletions:						
10/1/2018	Various Asset Deletions	\$ (402,9	72)			
_				_		
Total deletions for l	Non-Movable Equipmen	\$ (402,9	72)		\$ -	**

<sup>\*</sup>Ties to Page 23, Line C3
\*\*Ties to Page 23, Line C2

Useful

Acquisition Date	Description of Item	Cost	Life	Depr	eciation
Additions:	·				
3/31/2019	2 - Spots Vital Signs Monitors&2 - Mobile Stands	\$ 4,253	07 00	\$	304
1/31/2019	2 Large Bussing Carts	\$ 823	09 11	\$	55
2/28/2019	Direct Supply Beverage Cart	\$ 607	09 10	\$	36
2/28/2019	Tracer SX5 wheelchairs 18"D Adjustable Height Arms & Hemi Elevating Leg	\$ 238	09 10	\$	14
4/30/2019	Mobile Hot Buffet Cart	\$ 3,000	09 08	\$	129
9/30/2019	10 UCXT Beds w/ Assist Devices	\$ 18,449	09 03	\$	-
9/30/2019	Commercial Disposal 1HP	\$ 1,080	09 03	\$	-
	Chain Saw 16 Bar Length	\$ 509	05 00	\$	25
9/30/2019	10 Mattresses	\$ 2,414	03 00	\$	-
				\$	-
Total additions for 1	Movable Equipmen	\$ 31,374		\$	564
Deletions:					
10/1/2018	Various Asset Deletions	\$ (201,306)			
10/1/2018	Reversal September 2018 DSSI Accrual	\$ (4,736)			
	·				
Total deletions for M	Movable Equipmen	\$ (206,043)		\$	_

<sup>\*</sup>Ties to Page 23, Line D2c
\*\*Ties to Page 23, Line D2b

## Schedule of Leasehold Improvements Acquired during this report periods

			Useful	
Acquisition Date	Description of Item	Cost	Life	Depreciation
Additions:	•			_
Total additions for Leasehold Im	provemen	\$ -		\$ -
Deletions:				
Total deletions for Leasehold Im	provemen	\$ -		\$ -

<sup>\*</sup>Ties to Page 24, Line C3

<sup>\*\*</sup>Ties to Page 23, Line D2b

<sup>\*\*</sup>Ties to Page 24, Line C2

S7004   150025   Land Imp   010871   000   Outside po   5/31/2016   (15,728.74)   R   SLMM   10   00   3,141,00   (1,649)									, 2018	Oct 1,	As of Oc					
Simple   S	ed	Delete					922,275.75)									
S7004   ISO025	/30/2018			EstLife	DeprMeth	PT	ed Asset	De	n Svc Date	ptior Ir	Descripti	Ex	Sys	Acct Desc	G/L Asset	Locati
	,839.61)	(4,8	15,728.74	07 07	SLMM	R	(15,728.74)	5	5/31/2016	le po	Outside	000	010871	Land Imp	150020	57004
57004         150050         Bidg Imp 012743         000         Water Sou         1231/2017         (7,240.00) R         SLMM         6         7,240.00         (9.30           57004         150050         Bidg Imp 012765         000         Additional         4/30/2018         (3,1281.11) R         SLMM         5         3,1281.11         (2,305           57004         150050         Bidg Imp 012766         000         Daikin wal         4/30/2018         (2,165.01) R         SLMM         5         7,657.20         (56.50)           57004         150050         Bidg Imp 012929         000         Sprinkler b         6/30/2018         (3,307.85) R         SLMM         5         7,657.20         (56.50)           57004         150050         Bidg Imp 012294         000         Smrker b         6/30/2018         (3,310.55) R         SLMM         6         3,3710.55         (16.80           57004         150057         Bidg Imp 001778         000         Repairs to         2/28/2013         (2,992.69) R         SLMM         10         00         2,992.69         (1,670           57004         150057         Bidg Imp 011285         000         Manningto         10/31/2016         (3,433.041) R         SLMM         0	,649.03)	(1,6	3,141.00	10 00	SLMM	R	(3,141.00)	3	6/30/2013	or si	Exterior	000	007495	Land Imp	150025	57004
57004   150050   Bldg Imp   012765   000   Additional   4/30/2018   (3.1.281.11) R   SLMM   5   3.1.281.11   (2.300   57004   150050   Bldg Imp   012766   000   Additional   4/30/2018   (7.657.20) R   SLMM   5   2.165.01   (159   57004   150050   Bldg Imp   012766   000   Daikin wat   4/30/2018   (7.657.20) R   SLMM   5   2.165.01   (159   57004   150050   Bldg Imp   012928   000   Sprinkler   6/30/2018   (3.7.055) R   SLMM   5   3.7.057.20   (563   57004   150055   Bldg Imp   012929   000   Sprinkler   6/30/2018   (3.7.055) R   SLMM   5   3.7.055.70   (168   57004   150057   Bldg Imp   0017120   000   Repairs to   228/2013   (2.9.20.90) R   SLMM   06   03   69/26.81   (11,140   57004   150057   Bldg Imp   001728   000   Plywood fl 8/31/2013   (3.7.19.15) R   SLMM   10   00   1.3.719.15   (6.9.73   57004   150057   Bldg Imp   011825   000   Mamingto   10/31/2016   (34,530.41) R   SLMM   07   02   34,530.41   (9.234   57004   150057   Bldg Imp   011825   000   ROUNDE   3/31/2017   (2.824.66) R   SLMM   06   09   2.282.466   (627   7.7004   150057   Bldg Imp   011825   000   Flank floor   4/30/2017   (2.3.053.46) R   SLMM   06   09   2.282.466   (627   7.7004   150057   Bldg Imp   012237   000   Vinylan   9/30/2017   (2.3.053.46) R   SLMM   06   09   2.282.466   (627   7.7004   150057   Bldg Imp   012237   000   Vinylan   9/30/2017   (2.3.03.346) R   SLMM   06   09   2.3.053.46   (627   7.7004   150057   Bldg Imp   012237   000   Vinylan   9/30/2017   (2.3.03.346) R   SLMM   06   03   3.7.053.46   (627   7.7004   150057   Bldg Imp   012237   000   2.000	,520.41)	(2,5	6,698.98	08 05	SLMM	R	(6,698.98)	,	7/31/2015	Gea	Braun G	000	009850	Land Imp	150025	57004
\$7004   150050   Bldg Imp   012765   000	(905.00)															
\$7004   150050   Bidg Imp 012766   000   Daikin war   4/30/2018   (7,657.20) R   SLMM   5   7,657.20   (56.57004   150050   Bidg Imp 012929   000   Sprinkler   6/30/2018   (3,3710.55) R   SLMM   5   3,3710.55   (16.88   16.57004   150055   Bidg Imp 012929   000   Sprinkler   6/30/2018   (3,710.55) R   SLMM   5   3,710.55   (16.88   16.57004   150055   Bidg Imp 001729   000   Sun Valuar   9/30/2017   (69,626.81) R   SLMM   10 00   2,992.69   (1,670   16.57004   150057   Bidg Imp 001736   000   Plywood fl 8/31/2013   (13,719.15) R   SLMM   10 00   13,719.15   (6,973   16.57004   150057   Bidg Imp 011825   000   Manningto   10,31/2016   (3,4,530.41) R   SLMM   0.0 00   3,453.041   (9,234   150057   Bidg Imp 011825   000   ROUNDE   3/31/2017   (2,824.66) R   SLMM   0.0 00   2,824.66   (627   7,57004   150057   Bidg Imp 011888   000   Plank floor   4/30/2017   (2,363.34) R   SLMM   0.6 08   7,708.18   (1,637   7,57004   150057   Bidg Imp 012237   000   Virylan   9/30/2017   (2,363.34) R   SLMM   0.6 08   7,708.18   (1,637   7,57004   150057   Bidg Imp 012231   000   Deposit for   10/31/2016   (3,530.46) R   SLMM   0.6 08   7,708.18   (1,637   7,57004   150057   Bidg Imp 012472   000   Exposit for   10/31/2017   (2,500.0.00) R   SLMM   0.6 08   3,708.18   (1,637   7,57004   150057   Bidg Imp 012472   000   Sun Valuar   12/1/2012   (186.828.00.0) P   SLMM   0.0 0   9,571.50   (3,184   7,57004   150075   Non Mova 006809   000   Sun Valuar   12/1/2012   (186.828.00.0) P   SLMM   0.0 0   12,315.00   (6,054   7,004   150075   Non Mova 008167   000   Sin Istal   10/31/2013   (2,315.00) P   SLMM   0.0 0   12,315.00   (6,054   7,004   150075   Non Mova 008167   000   Sin Istal   10/31/2015   (3,235.00) P   SLMM   0.0 0   12,315.00   (6,054   7,004   150075   Non Mova 008167   000   Sin Istal   11/30/2015   (3,235.00) P   SLMM   0.0 0   12,315.00   (8,309   7,004   150075   Non Mova 001858   000   Final Istal   11/30/2015   (3,235.00) P   SLMM   0.0 0   12,315.00   (3,308   3,304   3,304   3,304   3,304   3,304   3,304   3,	,300.08)		*													
\$7004   150050   Bldg Imp   012928   000   Sprinkler   6/30/2018   (3,307.85)   R. SLMM   5   43,307.85   (1,968   57004   150055   Bldg Imp   012929   000   Sprinkler   6/30/2018   (3,710.55)   R. SLMM   5   3,710.55   (168   57004   150055   Bldg Imp   012784   000   Sun Valua   9/30/2017   (69,626.81)   R. SLMM   10   00   2,992.69   (1,670   57004   150057   Bldg Imp   007786   000   Plyword fl   83,12013   (2,992.69)   R. SLMM   10   00   13,715,15   (6,973   57004   150057   Bldg Imp   011285   000   Manningto   10/31/2016   (34,530.41)   R. SLMM   00   00   13,175,15   (6,973   57004   150057   Bldg Imp   011285   000   Manningto   10/31/2016   (34,530.41)   R. SLMM   00   00   2,824.66   (627   57004   150057   Bldg Imp   011285   000   Manningto   10/31/2016   (34,530.41)   R. SLMM   06   09   2,824.66   (627   57004   150057   Bldg Imp   011287   000   Vinyl plan   9/30/2017   (23,053.46)   R. SLMM   06   03   23,053.46   (3,688   57004   150057   Bldg Imp   012317   000   Vinyl plan   9/30/2017   (23,053.46)   R. SLMM   06   03   23,053.46   (3,688   57004   150057   Bldg Imp   012472   000   220	(159.19)															
\$7004   150055   Bldg Imp   012294   000   Sprinkler   \$6/30/2018   (3,710,55) R   SLMM   5   3,710,55   (168   57004   150055   Bldg Imp   017170   000   Repairs to   228/2013   (2,992,69) R   SLMM   10   00   2,992,69   (1,670   150057   150057   Bldg Imp   007170   000   Repairs to   228/2013   (2,992,69) R   SLMM   10   00   2,992,69   (1,670   150057   150057   Bldg Imp   011285   000   Maningto   103/10216   (34,530,41) R   SLMM   10   00   13,719,15   (6,973   150057   150057   Bldg Imp   011825   000   Maningto   103/10216   (34,530,41) R   SLMM   06   07   02   34,530,41   (9,244   150057   150057   Bldg Imp   011825   000   ROUNDE   3/31/2017   (2,824,66) R   SLMM   06   09   2,824,66   (627   7,708,18) R   SLMM   06   09   2,824,66   (627   7,708,18) R   SLMM   06   09   2,824,66   (627   7,704,18) R   SLMM   06   03   23,053,46   (3,688   7,704   150057   SLMM   06   00   SLMM   06	(563.03)		,													
57004   150055   Bldg Imp   01710   000   Repairs   028/2013   (2,992.69) R   SLMM   00   0.3   69,626.81   (11,140   150057   150057   Bldg Imp   007710   000   Repairs   028/2013   (2,992.69) R   SLMM   10   00   2,992.69   (1,670   150057   150057   Bldg Imp   007786   000   Plywood fl   8/31/2013   (1,3719.15) R   SLMM   00   0.3,719.15   (6,973.57004   150057   Bldg Imp   011825   000   Manningto   10/31/2016   (34,530.41) R   SLMM   07   02   34,530.41   (9,234.50)   (2,255.00)   (3,250.50)   (3,250			*				, ,				-			· 1		
57004   150057   Bldg Imp 007170   000   Repairs to   228/2013   (2,992.69) R   SLMM   10 00   2,992.69   (1,670	(168.66)		*								-			· 1		
57004   150057   Bldg Imp 001786   000   Plywood fl   8/31/2013   (13,719.15) R   SLMM   10 00   13,719.15   (6,973   15,0004   150057   Bldg Imp 011825   000   ROUNDEI   3/31/2017   (2,824.66) R   SLMM   06 09   2,824.66   (627, 57004   150057   Bldg Imp 011888   000   Plank floor   4/30/2017   (7,708.18) R   SLMM   06 08   7,708.18   (1,637, 57004   150057   Bldg Imp 012371   000   Vinyl plan   3/02/2017   (23,053.46) R   SLMM   06 08   7,708.18   (1,637, 57004   150057   Bldg Imp 012371   000   Deposit fo   10/31/2017   (23,053.46) R   SLMM   06 03   23,053.46   (3,688, 57004   150057   Bldg Imp 012472   000   2nd paym   12/31/2017   (10,600.00) R   SLMM   6   25,000.00   (3,716, 57004   150057   Sldg Imp 012472   000   2nd paym   12/31/2017   (10,600.00) R   SLMM   06 01   10,600.00   (1,325, 57004   150075   Non Mova 000796   000   (2) 2hp M   4/30/2013   (9,571.50) P   SLMM   09 00   186,280.00   (120,737, 57004   150075   Non Mova 0008167   000   Ist install   10/31/2013   (12,315.00) P   SLMM   10 00   12,315.00   (6,634, 57004   150075   Non Mova 008167   000   SI mismall   11/30/2015   (6,992.51) P   SLMM   10 00   12,315.00   (6,849, 57004   150075   Non Mova 0010224   000   Final instal   11/30/2015   (52,235.00) P   SLMM   08 01   52,235.00   (18,309, 57004   150075   Non Mova 0101224   000   Final instal   11/30/2015   (52,235.00) P   SLMM   08 01   52,235.00   (18,309, 57004   150075   Non Mova 0101623   000   Cooling to 11/30/2015   (3,690.00) P   SLMM   08 01   52,235.00   (18,309, 57004   150075   Non Mova 0101623   000   Cooling to 11/30/2015   (3,690.00) P   SLMM   07 00   3,7335   (122,37004   150075   Non Mova 010163   000   Chemical   6/30/2016   (1,414.93) P   SLMM   07 00   5,610.00   (1,638, 57004   150075   Non Mova 010163   000   Chemical   6/30/2016   (1,414.93) P   SLMM   07 00   3,7335   (122,735.00   Non Mova 010120   000   Shectrock   7/31/2017   (2,673.64) P   SLMM   06 05   2,734.64   (497,57004   150075   Non Mova 012103   000   Shectrock   7/31/2017   (2,673.87) P   SLMM		2														
57004   150057   Bldg Imp   011825   000   Manningto   10/31/2016   (34,530,41) R   SLMM   07 02   34,530,41   (9,234,57004   150057   Bldg Imp   011825   000   ROUNDEI   3/31/2017   (2,824,66) R   SLMM   06 09   2,824,66   (627,57004   150057   Bldg Imp   011825   000   Vinyl plan   9/30/2017   (7,708,18) R   SLMM   06 08   7,708,18   (1,637,57004   150057   Bldg Imp   012317   000   Deposit fo   10/31/2017   (25,000,00) R   SLMM   06 03   23,053,46   (3,688,57004   150057   Bldg Imp   012311   000   Deposit fo   10/31/2017   (25,000,00) R   SLMM   06 03   23,053,46   (3,688,57004   150057   Bldg Imp   012472   000   24 payme   12/31/2017   (10,600,00) R   SLMM   06   05,000,00   (1,325,57004   150075   Non Mova 0007269   000   (2) 2hp M   4/30/2013   (9,571,50) P   SLMM   10 00   9,571,50   (5,184,57004   150075   Non Mova 0007269   000   (2) 2hp M   4/30/2013   (2,315,00) P   SLMM   10 00   12,315,00   (6,054,57004   150075   Non Mova 0008167   000   Binal instal   12/31/2013   (1,315,00) P   SLMM   10 00   12,315,00   (6,054,57004   150075   Non Mova 009517   000   3 Daikin aj   3/31/2015   (5,9235,00) P   SLMM   08 09   6,992,51   (2,797,57004   150075   Non Mova 009517   000   Binal instal   11/30/2015   (52,235,00) P   SLMM   08 01   52,235,00   (18,309,57004   150075   Non Mova 010229   000   Einal instal   11/30/2015   (52,235,00) P   SLMM   08 01   52,235,00   (18,309,57004   150075   Non Mova 010358   000   Final instal   11/30/2015   (52,235,00) P   SLMM   08 01   52,235,00   (18,309,57004   150075   Non Mova 010358   000   Final instal   12/31/2015   (1,610,00) P   SLMM   08 01   52,235,00   (1,643,57004   150075   Non Mova 010358   000   Final instal   12/31/2015   (1,610,00) P   SLMM   07 00   3,9335   (122,300,00) P   SLMM   07 00   3,9335   (123,300,00) P   SLMM   07 00   3,9335   (123,300,0											-					
S7004											•					
	(627.70)		*							-	-					
57004   150057   Bldg Imp   012237   000   Vinyl plan   9/30/2017   (23,053.46) R   SLMM   06   03   23,053.46   (3,688   57004   150057   Bldg Imp   012311   000   Deposit for   10/31/2017   (25,000.00) R   SLMM   6   25,000.00   (3,716   57004   150057   Non Mova 006809   000   Sun Valuar   12/1/2012   (186,280.00) P   SLMM   09   00   186,280.00   (120,737   75004   150075   Non Mova 007269   000   (2) 2lp pM   4/30/2013   (12,315.00) P   SLMM   10   00   9,571.50   (5,184   57004   150075   Non Mova 008167   000   Final instal   10/31/2013   (12,315.00) P   SLMM   10   00   12,315.00   (6,054   57004   150075   Non Mova 009517   000   3 Daikin aj   3/31/2015   (6,992.51) P   SLMM   08   09   6,992.51   (2,797   75004   150075   Non Mova 010224   000   Final instal   11/30/2015   (52,235.00) P   SLMM   08   01   52,235.00   (18,309   57004   150075   Non Mova 010224   000   Final instal   11/30/2015   (52,235.00) P   SLMM   08   01   52,235.00   (18,309   57004   150075   Non Mova 010225   000   Cooling to   11/30/2015   (52,235.00) P   SLMM   08   01   52,235.00   (18,309   57004   150075   Non Mova 010225   000   Cooling to   11/30/2015   (32,235.00) P   SLMM   08   01   52,235.00   (18,309   57004   150075   Non Mova 010358   000   Final instal   12/31/2015   (11,610.00) P   SLMM   08   01   52,235.00   (18,309   57004   150075   Non Mova 010358   000   Final instal   12/31/2015   (11,610.00) P   SLMM   08   01   11,610.00   (3,990   57004   150075   Non Mova 010915   000   Chemical   6/30/2016   (1,414.93) P   SLMM   07   06   5,610.00   (1,643   57004   150075   Non Mova 0101359   000   Chemical   6/30/2016   (1,414.93) P   SLMM   07   07   07   07   07   07   07																
S7004   150057   Bldg Imp   012311   000   Deposit for   10/31/2017   (25,000.00) R   SLMM   6   25,000.00   (3,716   57004   150075   Brown Mova 006809   000   2nd payme   12/31/2017   (10,600.00) R   SLMM   6   10,600.00   (1,325   57004   150075   Non Mova 007269   000   (2) 2hp Mc   4/30/2013   (9,571.50) P   SLMM   09   00   186,280.00   (120,737   15004   150075   Non Mova 007976   000   Ist install   10/31/2013   (12,315.00) P   SLMM   10   00   9,571.50   (6,844   150075   Non Mova 008167   000   Ist install   12/31/2013   (12,315.00) P   SLMM   10   00   12,315.00   (6,844   150075   Non Mova 009517   000   3 Daikin al   3/31/2015   (6,992.51) P   SLMM   08   09   6,992.51   (2,797   57004   150075   Non Mova 010219   000   Ist install   11/30/2015   (52,235.00) P   SLMM   08   01   52,235.00   (18,309   150075   Non Mova 010225   000   Cooling to   11/30/2015   (52,235.00) P   SLMM   08   01   52,235.00   (18,309   150075   Non Mova 010225   000   Cooling to   11/30/2015   (4,690.00) P   SLMM   08   01   52,235.00   (18,309   150075   Non Mova 010025   000   AO Smith   3/31/2015   (11,610.00) P   SLMM   08   01   11,610.00   (3,990   150075   Non Mova 010915   000   AO Smith   3/31/2016   (379.35) P   SLMM   07   09   379.35   (122   150075   Non Mova 010915   000   Kitche/laun   6/30/2016   (344.33) P   SLMM   07   06   5,610.00   (3,888   150075   Non Mova 011359   000   Hot water   11/30/2016   (13,090.00) P   SLMM   07   07   07   07   07   07   07																
15005   150075   15	,716.22)		,													
57004         150075         Non Mova 006809         000         Sun Valual         12/1/2012         (186,280.00) P         SLMM         09 00         186,280.00         (120,737.57004         150075         Non Mova 007269         000         (2) 2hp Mc         4/30/2013         (9,571.50) P         SLMM         10 00         9,571.50         (5,184.57004         150075         Non Mova 007976         000         1st install c         10/31/2013         (12,315.00) P         SLMM         10 00         12,315.00         (6,054.57004         150075         Non Mova 008167         000         Final instal         12/31/2013         (12,315.00) P         SLMM         00         12,315.00         (5,849.57004         150075         Non Mova 009517         000         3 Daikin aj         3/31/2015         (6,992.51) P         SLMM         08 09         6,992.51         (2,797.57004         150075         Non Mova 010224         000         Final instal         11/30/2015         (32,235.00) P         SLMM         08 01         52,235.00         (18,309.57004         150075         Non Mova 010225         000         Cooling to 11/30/2015         (4,690.00) P         SLMM         08 01         52,235.00         (18,309.57004         150075         Non Mova 010238         000         Final instal         11/30/2015         (4,690.00	,325.00)		10,600.00													
57004         150075         Non Mova 007269         000         (2) 2hp Mc         4/30/2013         (9,571.50) P         SLMM         10 00         9,571.50         (5,184.57004           57004         150075         Non Mova 007976         000         1st install t         10/31/2013         (12,315.00) P         SLMM         10 0         12,315.00         (6,054.57004           57004         150075         Non Mova 008167         000         3 Daikin aj         3/31/2015         (6,992.51) P         SLMM         00 01         12,315.00         (5,849.57004           57004         150075         Non Mova 010219         000         1st install t         11/30/2015         (52,235.00) P         SLMM         08 09         6,992.51         (2,797.57004         150075         Non Mova 010224         000         Final instal 11/30/2015         (52,235.00) P         SLMM         08 01         52,235.00         (18,309.57004         150075         Non Mova 010328         000         Cooling to 11/30/2015         (52,235.00) P         SLMM         08 01         4,690.00         (18,309.57004         150075         Non Mova 010388         000         Final instal 11/30/2015         (1,610.00) P         SLMM         08 00         11,610.00         9         379.35         (122         57004	,737.06)	(120,7	186,280.00	09 00	SLMM	P	186,280.00)	2	12/1/2012	alua	Sun Valı	000			150075	57004
57004         150075         Non Mova 008167         000         Final instal         12/31/2013         (12,315.00) P         SLMM         10         00         12,315.00         (5,849.57004)           57004         150075         Non Mova 009517         000         3 Daikin aj         3/31/2015         (6,992.51) P         SLMM         08         09         6,992.51         (2,797.5704)           57004         150075         Non Mova 010224         000         Final instal         11/30/2015         (52,235.00) P         SLMM         08         01         52,235.00         (18,309.57004)           57004         150075         Non Mova 010225         000         Cooling to         11/30/2015         (4,690.00) P         SLMM         08         01         52,235.00         (18,309.57004)           57004         150075         Non Mova 010358         000         Final instal         12/31/2015         (11,610.00) P         SLMM         08         01         1,690.00         (1,643.57004)         150075         Non Mova 010915         000         Chemical instal         12/31/2015         (11,610.00) P         SLMM         07         09         379.35         (122         11,610.00         10         11,610.00         11,610.00         10         11,61	,184.56)	(5,1	9,571.50	10 00	SLMM			3	4/30/2013	рΜι	(2) 2hp l	000	007269	Non Mova	150075	57004
57004         150075         Non Mova 009517         000         3 Daikin aj         3/31/2015         (6,992.51) P         SLMM         08 09         6,992.51         (2,797.57004         150075         Non Mova 010219         000         1st install 1         11/30/2015         (52,235.00) P         SLMM         08 01         52,235.00         (18,309.57004         150075         Non Mova 010225         000         Cooling to 11/30/2015         (52,235.00) P         SLMM         08 01         52,235.00         (18,309.57004         150075         Non Mova 010258         000         Cooling to 11/30/2015         (4,690.00) P         SLMM         08 01         14,690.00         (18,309.57004         150075         Non Mova 010358         000         Final instal 12/31/2015         (11,610.00) P         SLMM         08 01         11,610.00         (3,990.00)         379.35         (122.00)         150075         Non Mova 010558         000         Final instal 12/31/2016         (379.35) P         SLMM         08 01         11,610.00         (3,990.00)         379.35         (122.00)         150075         Non Mova 010915         000         Chemical 1         6/30/2016         (1,414.93) P         SLMM         07 06         5,610.00         1,414.93         (424.30)         1,414.93         1,414.93         (424.30)         1,	,054.88)	(6,0	12,315.00	10 00	SLMM	P	(12,315.00)	3	10/31/2013	tall (	1st insta	000	007976	Non Mova	150075	57004
57004         150075         Non Mova 010219         000         1st install         11/30/2015         (52,235.00) P         SLMM         08 01         52,235.00         (18,309.57004           57004         150075         Non Mova 010225         000         Cooling to         11/30/2015         (52,235.00) P         SLMM         08 01         52,235.00         (18,309.57004           57004         150075         Non Mova 010225         000         Cooling to         11/30/2015         (1,600.00) P         SLMM         08 01         4,690.00         (1,643.00)           57004         150075         Non Mova 010623         000         AO Smith         3/31/2016         (379.35) P         SLMM         07 09         379.35         (122.57004         150075         Non Mova 010915         000         Chemical I         6/30/2016         (379.35) P         SLMM         07 09         379.35         (122.57004         150075         Non Mova 010915         000         Chemical I         6/30/2016         (5,610.00) P         SLMM         07 06         5,610.00         (1,683.57004         150075         Non Mova 011359         000         Hot water         11/30/2016         (13,090.00) P         SLMM         07 06         5,610.00         (1,683.57004         150075         Non Mov	,849.63)	(5,8	12,315.00	10 00	SLMM	P	(12,315.00)	3	12/31/2013			000	008167	Non Mova	150075	57004
57004         150075         Non Mova 010224         000         Final instal         11/30/2015         (52,235.00) P         SLMM         08 01         52,235.00         (18,309.57004           57004         150075         Non Mova 010225         000         Cooling to 11/30/2015         (4,690.00) P         SLMM         08 01         4,690.00         (1,643.57004           57004         150075         Non Mova 010623         000         AO Smith         3/31/2016         (379.35) P         SLMM         07 09         379.35         (122.57004         150075         Non Mova 010915         000         Chemical I 6/30/2016         (1,414.93) P         SLMM         07 06         1,414.93         (424.57004         150075         Non Mova 010915         000         Kitche/lau         6/30/2016         (5,610.00) P         SLMM         07 06         5,610.00         (1,683.57004         150075         Non Mova 011359         000         Hot water         11/30/2016         (13,090.00) P         SLMM         07 01         13,090.00         (3,388.57004         150075         Non Mova 011824         000         Walk in co         3/31/2017         (9,092.93) P         SLMM         06 07         18,185.85         (3,683.57004         150075         Non Mova 012101         000         Sheetrock         <	,797.00)	(2,7	6,992.51	08 09	SLMM	P	(6,992.51)	;	3/31/2015	in aj	3 Daikin	000	009517	Non Mova	150075	57004
57004   150075   Non Mova 010225   000   Cooling to   11/30/2015   (4,690.00) P   SLMM   08 01   4,690.00   (1,643.57004   150075   Non Mova 010358   000   Final instal   12/31/2015   (11,610.00) P   SLMM   08 00   11,610.00   (3,990.57004   150075   Non Mova 010623   000   AO Smith   3/31/2016   (379.35) P   SLMM   07 09   379.35   (122.57004   150075   Non Mova 010915   000   Chemical   6/30/2016   (1,414.93) P   SLMM   07 06   1,414.93   (424.57004   150075   Non Mova 010916   000   Kitche/laun   6/30/2016   (5,610.00) P   SLMM   07 06   5,610.00   (1,683.57004   150075   Non Mova 011359   000   Hot water   11/30/2016   (13,090.00) P   SLMM   07 01   13,090.00   (3,388.57004   150075   Non Mova 011824   000   Walk in co   3/31/2017   (9,092.93) P   SLMM   06 09   9,092.93   (2,020.57004   150075   Non Mova 011956   000   Walk in co   5/31/2017   (18,185.85) P   SLMM   06 07   18,185.85   (3,683.57004   150075   Non Mova 012101   000   Sheetrock   7/31/2017   (244.30) P   SLMM   06 05   244.30   (44.57004   150075   Non Mova 012102   000   Electric for   7/31/2017   (27,34.64) P   SLMM   06 05   2,734.64   (497.57004   150075   Non Mova 012103   000   New Sheet   7/31/2017   (2,734.64) P   SLMM   06 05   3,110.00   (565.57004   150075   Non Mova 012103   000   Sheetrock   7/31/2017   (635.12) P   SLMM   06 05   3,110.00   (565.57004   150075   Non Mova 012105   000   Sheetrock   7/31/2017   (635.12) P   SLMM   06 05   635.12   (115.57004   150075   Non Mova 012106   000   Sheetrock   7/31/2017   (635.12) P   SLMM   06 05   635.12   (15.57004   150075   Non Mova 012107   000   Sheetrock   7/31/2017   (635.12) P   SLMM   06 05   635.12   (15.57004   150075   Non Mova 012107   000   Sheetrock   7/31/2017   (635.12) P   SLMM   06 05   635.12   (15.57004   150075   Non Mova 012107   000   Sheetrock   7/31/2017   (108.02) P   SLMM   06 05   635.12   (15.57004   150080   Movable E006810   000   Supplies-V   7/31/2017   (24.150.00) P   SLMM   07 00   2,4150.00   (20,125.57004   150080   Movable E006810   000   Supp	,309.18)	(18,3			SLMM	P	(52,235.00)	,	11/30/2015	tall 1	1st insta					
57004         150075         Non Mova 010358         000         Final instal         12/31/2015         (11,610.00) P         SLMM         08 00         11,610.00         (3,990.57004         150075         Non Mova 010623         000         AO Smith         3/31/2016         (379.35) P         SLMM         07 09         379.35         (122.57004         150075         Non Mova 010915         000         Chemical I         6/30/2016         (1,414.93) P         SLMM         07 06         1,414.93         (424.57004         150075         Non Mova 010916         000         Kitche/lau         6/30/2016         (5,610.00) P         SLMM         07 06         5,610.00         (1,683.57004         150075         Non Mova 011359         000         Hot water         11/30/2016         (13,090.00) P         SLMM         07 01         13,090.00         (3,388.57004         150075         Non Mova 011956         000         Walk in co         3/31/2017         (9,092.93) P         SLMM         06 09         9,092.93         (2,020.500.57004         150075         Non Mova 012101         000         Sheetrock         7/31/2017         (18,185.85) P         SLMM         06 09         18,185.85         3,683.57004         150075         Non Mova 012101         000         Sheetrock         7/31/2017         (2,44.30) P	,309.18)	2														
57004         150075         Non Mova 010623         000         AO Smith         3/31/2016         (379.35) P         SLMM         07 09         379.35         (122.57004 150075)           57004         150075         Non Mova 010915         000         Chemical I 6/30/2016         (1,414.93) P         SLMM         07 06         1,414.93         (424.57004 150075)           57004         150075         Non Mova 011359         000         Hot water 11/30/2016         (13,090.00) P         SLMM         07 01         13,090.00         (3,388.57004 150075)         Non Mova 011824         000         Walk in co         3/31/2017         (9,092.93) P         SLMM         07 01         13,090.00         (3,388.57004 150075)         Non Mova 011824         000         Walk in co         3/31/2017         (9,092.93) P         SLMM         06 09         9,092.93         (2,020.00)         (2,020.00)         150075         Non Mova 011956         000         Walk in co         3/31/2017         (18,185.85) P         SLMM         06 07         18,185.85         (3,683.57)         (3,004.10)         150075         Non Mova 012101         000         Sheetrock         7/31/2017         (244.30) P         SLMM         06 05         244.30         (44.50)         (44.50)         (45.500.00)         (45.500.00) <t< td=""><td>,643.93)</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	,643.93)															
57004         150075         Non Mova 010915         000         Chemical I (6/30/2016)         (1,414.93) P         SLMM         07 06         1,414.93         (424.57004)           57004         150075         Non Mova 010916         000         Kitche/lau         6/30/2016         (5,610.00) P         SLMM         07 06         5,610.00         (1,683.57004)           57004         150075         Non Mova 011359         000         Hot water: 11/30/2016         (13,090.00) P         SLMM         07 01         13,090.00         (3,388.57004)           57004         150075         Non Mova 011824         000         Walk in co         3/31/2017         (9,092.93) P         SLMM         06 09         9,092.93         (2,020.57004)           57004         150075         Non Mova 012101         000         Sheetrock         7/31/2017         (244.30) P         SLMM         06 07         18,185.85         (3,683.57004)         150075         Non Mova 012102         000         Electric foi         7/31/2017         (244.30) P         SLMM         06 05         244.30         (44.570.5004)         150075         Non Mova 012103         000         New Sheet         7/31/2017         (2,734.64) P         SLMM         06 05         3,110.00         565.57004         150075																
57004         150075         Non Mova 010916         000         Kitche/lau         6/30/2016         (5,610.00) P         SLMM         07 06         5,610.00         (1,683.57004           57004         150075         Non Mova 011359         000         Hot water         11/30/2016         (13,090.00) P         SLMM         07 01         13,090.00         (3,388.57004           57004         150075         Non Mova 011824         000         Walk in co         3/31/2017         (9,092.93) P         SLMM         06 09         9,092.93         (2,020.57004           57004         150075         Non Mova 011956         000         Walk in co         5/31/2017         (18,185.85) P         SLMM         06 07         18,185.85         (3,683.57004           57004         150075         Non Mova 012101         000         Sheetrock         7/31/2017         (244.30) P         SLMM         06 05         244.30         (44.570.57004         (44.570.57004         150075         Non Mova 012103         000         New Sheet         7/31/2017         (2,734.64) P         SLMM         06 05         2,734.64         (497.57004         (497.57004         150075         Non Mova 012103         000         Sheetrock         7/31/2017         (635.12) P         SLMM         06 05	(122.37)															
57004         150075         Non Mova 011359         000         Hot water         11/30/2016         (13,090.00) P         SLMM         07 01         13,090.00         (3,388)           57004         150075         Non Mova 011824         000         Walk in co         3/31/2017         (9,092.93) P         SLMM         06 09         9,092.93         (2,020)           57004         150075         Non Mova 011956         000         Walk in co         5/31/2017         (18,185.85) P         SLMM         06 07         18,185.85         (3,683)           57004         150075         Non Mova 012101         000         Sheetrock         7/31/2017         (244.30) P         SLMM         06 05         244.30         (44           57004         150075         Non Mova 012102         000         Electric for         7/31/2017         (2,734.64) P         SLMM         06 05         2,734.64         (497.00)           57004         150075         Non Mova 012103         000         New Sheet         7/31/2017         (3,110.00) P         SLMM         06 05         3,110.00         (565.00)           57004         150075         Non Mova 012104         000         Sheetrock         7/31/2017         (96.18) P         SLMM         06 05			*													
57004         150075         Non Mova 011824         000         Walk in co         3/31/2017         (9,092.93) P         SLMM         06 09         9,092.93         (2,020.00)           57004         150075         Non Mova 011956         000         Walk in co         5/31/2017         (18,185.85) P         SLMM         06 07         18,185.85         (3,683.00)           57004         150075         Non Mova 012101         000         Sheetrock         7/31/2017         (244.30) P         SLMM         06 05         244.30         (44.570.00)           57004         150075         Non Mova 012102         000         Electric for         7/31/2017         (2,734.64) P         SLMM         06 05         2,734.64         (497.00)           57004         150075         Non Mova 012103         000         New Sheet         7/31/2017         (3,110.00) P         SLMM         06 05         3,110.00         (565.00)           57004         150075         Non Mova 012104         000         Electrical ' 7/31/2017         (635.12) P         SLMM         06 05         35.12         (115.00)           57004         150075         Non Mova 012105         000         Sheetrock         7/31/2017         (96.18) P         SLMM         06 05 <td< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></td<>																
57004         150075         Non Mova 011956         000         Walk in co         5/31/2017         (18,185.85) P         SLMM         06 07         18,185.85         (3,683.57004           57004         150075         Non Mova 012101         000         Sheetrock         7/31/2017         (244.30) P         SLMM         06 05         244.30         (44.570.00)           57004         150075         Non Mova 012102         000         Electric for 7/31/2017         (2,734.64) P         SLMM         06 05         2,734.64         (497.00)           57004         150075         Non Mova 012103         000         New Sheet         7/31/2017         (3,110.00) P         SLMM         06 05         3,110.00         (565.00)           57004         150075         Non Mova 012104         000         Electrical Notes (7/31/2017)         (635.12) P         SLMM         06 05         3,110.00         (565.00)           57004         150075         Non Mova 012105         000         Sheetrock         7/31/2017         (96.18) P         SLMM         06 05         96.18         (17.00)           57004         150075         Non Mova 012106         000         Supplies-V         7/31/2017         (108.02) P         SLMM         06 05         108.02							` ' /									
57004         150075         Non Mova 012101         000         Sheetrock         7/31/2017         (244.30) P         SLMM         06 05         244.30         (44.57)           57004         150075         Non Mova 012102         000         Electric for         7/31/2017         (2,734.64) P         SLMM         06 05         2,734.64         (497.65)           57004         150075         Non Mova 012103         000         New Sheet         7/31/2017         (3,110.00) P         SLMM         06 05         3,110.00         (565.57)           57004         150075         Non Mova 012104         000         Electrical ' 7/31/2017         (635.12) P         SLMM         06 05         635.12         (115.57)           57004         150075         Non Mova 012105         000         Sheetrock         7/31/2017         (96.18) P         SLMM         06 05         96.18         (17.57)         (17.57)         (15.07)         108.02         19.07 </td <td>,683.22)</td> <td></td>	,683.22)															
57004         150075         Non Mova 012102         000         Electric for 7/31/2017         (2,734.64) P         SLMM         06 05         2,734.64         (497.57004)           57004         150075         Non Mova 012103         000         New Sheet 7/31/2017         (3,110.00) P         SLMM         06 05         3,110.00         (565.57004)         (565.57004)         150075         Non Mova 012104         000         Electrical V         7/31/2017         (635.12) P         SLMM         06 05         635.12         (115.57004)         150075         Non Mova 012105         000         Sheetrock         7/31/2017         (96.18) P         SLMM         06 05         96.18         (17.57004)         150075         Non Mova 012106         000         Supplies-V         7/31/2017         (108.02) P         SLMM         06 05         96.18         (17.57004)         150075         Non Mova 012107         000         Sheetrock         7/31/2017         (108.02) P         SLMM         06 05         108.02         (19.57004)         150075         Non Mova 012107         000         Sheetrock         7/31/2017         (26.73) P         SLMM         06 05         26.73         (4.57004)         150080         Movable E006810         000         Sun Valual         12/1/2012         (24,150.00) P	(44.41)															
57004         150075         Non Mova 012103         000         New Sheet         7/31/2017         (3,110.00) P         SLMM         06 05         3,110.00         (565.57004         150075         Non Mova 012104         000         Electrical ' 7/31/2017         (635.12) P         SLMM         06 05         635.12         (115.57004         150075         Non Mova 012105         000         Sheetrock         7/31/2017         (96.18) P         SLMM         06 05         96.18         (17.57004         150075         Non Mova 012106         000         Supplies-V         7/31/2017         (108.02) P         SLMM         06 05         108.02         (19.57004         150075         Non Mova 012107         000         Sheetrock         7/31/2017         (26.73) P         SLMM         06 05         26.73         (4.57004         150080         Movable E006810         000         Sun Valual         12/1/2012         (24,150.00) P         SLMM         07 00         24,150.00         (20,125.57004         150080         Movable E007785         000         Hoyer lift:         8/31/2013         (2,963.87) P         SLMM         07 00         2,963.87         (2,152.57004         150080         Movable E007892         000         Attendant I         9/30/2013         (7,716.65) P         SLMM         07 00	(497.21)															
57004         150075         Non Mova 012105         000         Sheetrock         7/31/2017         (96.18) P         SLMM         06 05         96.18         (17.5704           57004         150075         Non Mova 012106         000         Supplies-V         7/31/2017         (108.02) P         SLMM         06 05         108.02         (19.5704           57004         150075         Non Mova 012107         000         Sheetrock         7/31/2017         (26.73) P         SLMM         06 05         26.73         (4.5704           57004         150080         Movable E006810         000         Sun Valual         12/1/2012         (24,150.00) P         SLMM         07 00         24,150.00         (20,125.00)           57004         150080         Movable E007785         000         Hoyer lift:         8/31/2013         (2,963.87) P         SLMM         07 00         2,963.87         (2,152.00)           57004         150080         Movable E007892         000         Attendant I         9/30/2013         (7,716.65) P         SLMM         07 00         7,716.65         (5,511.00)           57004         150080         Movable E008600         000         Huntleigh         4/30/2014         (790.69) P         SLMM         07 00	(565.46)		3,110.00	06 05	SLMM			7	7/31/2017	heet	New Sho	000	012103	Non Mova	150075	57004
57004         150075         Non Mova 012106         000         Supplies-V         7/31/2017         (108.02) P         SLMM         06 05         108.02         (19.02)           57004         150075         Non Mova 012107         000         Sheetrock         7/31/2017         (26.73) P         SLMM         06 05         26.73         (4.02)           57004         150080         Movable E006810         000         Sun Valual         12/1/2012         (24,150.00) P         SLMM         07 00         24,150.00         (20,125.02) <td>(115.48)</td> <td>(1</td> <td>635.12</td> <td>06 05</td> <td>SLMM</td> <td>P</td> <td>(635.12)</td> <td>7</td> <td>7/31/2017</td> <td>ical 1</td> <td>Electrica</td> <td>000</td> <td>012104</td> <td>Non Mova</td> <td>150075</td> <td>57004</td>	(115.48)	(1	635.12	06 05	SLMM	P	(635.12)	7	7/31/2017	ical 1	Electrica	000	012104	Non Mova	150075	57004
57004         150075         Non Mova 012107         000         Sheetrock         7/31/2017         (26.73) P         SLMM         06 05         26.73         (4.57004)           57004         150080         Movable E006810         000         Sun Valual         12/1/2012         (24,150.00) P         SLMM         07 00         24,150.00         (20,125.00)           57004         150080         Movable E007785         000         Hoyer lift:         8/31/2013         (2,963.87) P         SLMM         07 00         2,963.87         (2,152.00)           57004         150080         Movable E007892         000         Attendant I         9/30/2013         (7,716.65) P         SLMM         07 00         7,716.65         (5,511.00)           57004         150080         Movable E008600         000         Huntleigh:         4/30/2014         (790.69) P         SLMM         07 00         790.69         (498.00)	(17.49)	(	96.18	06 05	SLMM	P	(96.18)	7	7/31/2017	ock	Sheetroc	000	012105	Non Mova	150075	57004
57004         150080         Movable E006810         000         Sun Valual         12/1/2012         (24,150.00) P         SLMM         07 00         24,150.00         (20,125.50)           57004         150080         Movable E007785         000         Hoyer lift:         8/31/2013         (2,963.87) P         SLMM         07 00         2,963.87         (2,152.50)           57004         150080         Movable E007892         000         Attendant I         9/30/2013         (7,716.65) P         SLMM         07 00         7,716.65         (5,511.50)           57004         150080         Movable E008600         000         Huntleigh         4/30/2014         (790.69) P         SLMM         07 00         790.69         (498.50)	(19.65)	(			SLMM	P	(108.02)	7	7/31/2017	es-V	Supplies	000	012106	Non Mova		
57004       150080       Movable E007785       000       Hoyer lift:       8/31/2013       (2,963.87) P       SLMM       07 00       2,963.87       (2,152.7004)         57004       150080       Movable E007892       000       Attendant l       9/30/2013       (7,716.65) P       SLMM       07 00       7,716.65       (5,511.7004)         57004       150080       Movable E008600       000       Huntleigh       4/30/2014       (790.69) P       SLMM       07 00       790.69       (498.700.69)	(4.87)															
57004 150080 Movable E007892 000 Attendant I 9/30/2013 (7,716.65) P SLMM 07 00 7,716.65 (5,511.57004 150080 Movable E008600 000 Huntleigh I 4/30/2014 (790.69) P SLMM 07 00 790.69 (498.57004 150080 Movable E008600 000 Huntleigh I 4/30/2014 (790.69) P SLMM 07 00 790.69	,125.00)															
57004 150080 Movable E 008600 000 Huntleigh 4/30/2014 (790.69) P SLMM 07 00 790.69 (498.	,152.34)															
5/004 150080 Movable E008946 000 Attendant //31/2014 (2,004.18) P SLIVIN 0/00 2,004.18 (1,192.	(498.90)						` /			-	-					
	,609.13) (139.05)						` '									
	(31.44)															
	(53.88)															
	(33.70)															
	(10.96)						` /									
	,151.40)															
	(249.33)															
	,492.85)	,					` /						E007977	Movable E		
	(109.16)	(1	231.99		SLMM	P	(231.99)	ļ	1/31/2014	my (	Econom	000	E008330	Movable E	150085	57004
	,239.59)	(3,2	7,019.11		SLMM	P	(7,019.11)			•	•	000	008511	Movable E		57004
	(210.94)										_		E008599	Movable E		
	(100.52)															
	(198.85)									-						
	(98.29)															
	(88.65)															
57004 150085 Movable E 009511 000 Tracer EX: 3/31/2015 (130.98) P SLMM 08 09 130.98 (52.	(52.40)	(	130.98	08 09	SLMM	Р	(130.98)	,	3/31/2015	EX.	racer E	000	116600	Movable E	150085	5/004

57004	150085	Movable E009512	000	Tracer IV '	3/31/2015	(353.98) P	SLMM	08 09	353.98	(141.61)
57004	150085	Movable E009513	000	Tracer EX	3/31/2015	(247.96) P	SLMM	08 09	247.96	(99.19)
57004	150085	Movable E009604	000	Direct Cho	4/30/2015	(147.15) P	SLMM	08 08	147.15	(58.02)
57004	150085	Movable E010133	000	Direct Cho	10/31/2015	(1,476.14) P	SLMM	08 02	1,476.14	(527.19)
57004	150085	Movable E010293	000	3-Gallon C	12/31/2015	(2,043.06) P	SLMM	08 00	2,043.06	(702.29)
57004	150085	Movable E010354	000	Scale Redu	12/31/2015	(184.02) P	SLMM	08 00	184.02	(63.25)
57004	150085	Movable E010625	000	Manitowic	3/31/2016	(4,131.70) P	SLMM	07 09	4,131.70	(1,332.80)
57004	150085	Movable E010757	000	Medical gr	4/30/2016	(527.54) P	SLMM	07 08	527.54	(166.29)
57004	150085	Movable E010914	000	GEN ONL	6/30/2016	(16,176.62) P	SLMM	07 06	16,176.62	(4,852.98)
57004	150085	Movable E011522	000	Food Proce	1/31/2017	(1,010.71) P	SLMM	06 11	1,010.71	(243.55)
57004	150085	Movable E011621	000	2 Direct Cl	2/28/2017	(148.85) P	SLMM	06 10	148.85	(34.49)
57004	150085	Movable E011622	000	5 Tracer E	2/28/2017	(629.90) P	SLMM	06 10	629.90	(145.96)
57004	150085	Movable E011823	000	Camshelvi	3/31/2017	(3,178.48) P	SLMM	06 09	3,178.48	(706.34)
57004	150085	Movable E012033	000	Thurmadul	6/30/2017	(5,657.80) P	SLMM	06 06	5,657.80	(1,088.04)
57004	150085	Movable E012672	000	23 Baja, In	3/31/2018	(830.33) P	SLMM	5	830.33	(72.20)
57004	150085	Movable E012760	000	18 in and 2	4/30/2018	(525.58) P	SLMM	5	525.58	(38.64)
57004	150085	Movable E012761	000	WHEELC	4/30/2018	(255.92) P	SLMM	5	255.92	(18.82)
57004	150085	Movable E013087	000	(20) Beside	8/31/2018	(4,419.79) P	SLMM	5	4,419.79	(69.06)
57004	150087	Movable E007172	000	Turbidity r	2/28/2013	(973.94) P	SLMM	05 00	973.94	(973.94)
57004	150087	Movable E009510	000	Yard Macl	3/31/2015	(1,043.21) P	SLMM	05 00	1,043.21	(730.24)
57004	150087	Movable E010621	000	Attendant 1	3/31/2016	(1,177.31) P	SLMM	05 00	1,177.31	(588.65)
57004	150088	Movable E006811	000	Sun Valua	12/1/2012	(1,300.00) P	SLMM	03 00	1,300.00	(1,300.00)
57004	150088	Movable E007359	000	15 MATTI	5/31/2013	(3,621.38) P	SLMM	03 00	3,621.38	(3,621.38)
57004	150088	Movable E007654	000	MATTRES	7/31/2013	(4,705.99) P	SLMM	03 00	4,705.99	(4,705.99)
57004	150088	Movable E010620	000	30 MATTI	3/31/2016	(9,411.98) P	SLMM	03 00	9,411.98	(7,843.33)
57004	150088	Movable E011521	000	10 MATTI	1/31/2017	(3,137.33) P	SLMM	03 00	3,137.33	(1,742.97)
57004	150088	Movable E012670	000	DermaFloa	3/31/2018	(2,143.14) P	SLMM	3	2,143.14	(357.19)
57004	150088	Movable E012759	000	Panacea O	4/30/2018	(190.35) P	SLMM	3	190.35	(26.44)
57004	150088	Movable E012762	000	MATTRES	4/30/2018	(387.28) P	SLMM	3	387.28	(53.79)
57004	150100	Movable E008730	000	Credit Car	5/31/2014	(73.07) P	SLMM	09 07	73.07	(33.06)
57004	150100	Movable E011887	000	Brother Int	4/30/2017	(319.04) P	SLMM	06 08	319.04	(67.80)
57004	150100	Movable E013168	000	Light Duty	9/30/2018	(138.38) P	SLMM	5	138.38	-
57004	150110	Movable E006812	000	Sun Valua	12/1/2012	(23,440.00) P	SLMM	02 00	23,440.00	(23,440.00)
57004	150110	Movable E010353	000	1 HP OJ 8	12/31/2015	(126.38) P	SLMM	03 00	126.38	(115.85)
57004	150050	Bldg Imp		Sept 2018	9/30/2018	(2,275.15) P	SLMM		(2,275.15)	0
57004	150080	Movable Equip		Sept 2018	9/30/2018	(4,736.38) P	SLMM		(4,736.38)	0

	Current in Accum Depreciation 9/30/2019  .02 8,630.63 .10 1,963.13 .95 3,589.36 .67 2,111.67 .22 8,556.30 .00 592.19 .44 2,094.47 .57 10,630.11 .11 910.77 .29 22,280.58 .27 1,970.19
Section   Sect	n in Accum percentation 9/30/2019 .02 8,630.63 .10 1,963.13 .95 3,589.36 .67 2,111.67 .22 8,556.30 .00 592.19 .44 2,094.47 .57 10,630.11 .11 910.77 .29 22,280.58 .27 1,970.19
15000   1500	9/30/2019 .02 8,630.63 .10 1,963.13 .95 3,589.36 .667 2,111.67 .22 8,556.30 .00 592.19 .44 2,094.47 .57 10,630.11 .11 910.77 .29 22,280.58 .27 1,970.19
1900   1900	.10 1,963.13 .95 3,589.36 .67 2,111.67 .22 8,556.30 .00 592.19 .44 2,094.47 .57 10,630.11 .11 910.77 .29 22,280.58 .27 1,970.19
1900   1900	.95 3,589.36 .67 2,111.67 .22 8,556.30 .00 592.19 .44 2,094.47 .57 10,630.11 .11 910.77 .29 22,280.58 .227 1,970.19
57001   15005   Bidg   pm   1274-00   Mare Source Hear Pump	2,111.67 2,22 8,556.30 .00 592.19 .44 2,094.47 .57 10,630.11 .11 910.77 .29 22,280.58 .27 1,970.19
1909   1909	.00 592.19 .44 2,094.47 .57 10,630.11 .11 910.77 .29 22,280.58 .27 1,970.19
59004   190050   Bilgi mps   012750 00   Dails water source heat pump   430/2018   7,657.20   R S.IAMI   5   7,657.20   1,050.50	.44 2,094.47 .57 10,630.11 .11 910.77 .29 22,280.58 .27 1,970.19
57004   15005   Bilgs   mp   01242 000   Sprealta-Park Main Replacement A-Wing   6,002018   3,710.5 R   S.MM   5   3,710.5   114,622   11,140.20   11, 500.4   500.7   500.4   500.7	.11 910.77 .29 22,280.58 .27 1,970.19
1900  1900	22,280.58 2.27 1,970.19
1900  1900	.27 1,970.19
1900   1900   1900   1886   Imp   11285 00   Numingroup plank Hooring   10312001   34,330.41   R   23,436.61   23,248.88   63,770   1900   1900   1800   1	.92 8 345 85
1900  1900	
150057   1	5.47 1,114.17
1909  1909	5.81 2,954.80 5.55 7,377.10
19075   150975   Non Movat005899 000 San Valuation - PPE Fixed Equip 10 yea   19075   15097	6.67 7,882.89
19075   Non Movat007269 000   22 ph Meyers submensible pumps	3,091.67
150075   150075   150076   1	7.78 141,434.84 7.15 6,141.71
150705   150707   1	.50 7,286.38
150701   150707   Non Moval-010219 000   Istinatal for new cooling tower (2)   11590215   52,2255.00   P. SLAM (8 01 52,235.00   18,309.18   8,3	
150015   150075   Non-Movabil 10225   000 Cooling tower valves   1130/2015   4,690.00   P SLMM 08 01   4,690.00   1,630.93   1,630	.76 27,041.94
150075   150075   Non-Movabili (150075   No	27,041.94 1.10 2,428.03
	1.19 5,950.13
15001   150075   Non Mowale (101916   000   Kitchel laundry hot water storage tank   13002016   13,0000   P. SLAM 07 06   5,610.00   3,388.00   2,57004   150075   Non Mowale (11329 000   Hot water tank   13,002016   13,0000   P. SLAM 07 01   13,0000   3,388.00   2,57004   150075   Non Mowale (11329 000   Walk in cooler/freezer   53,112017   13,002016   13,000   P. SLAM 06 09   9,902.93   2,002.66   1,00075   Non Mowale (11950 000   Walk in cooler/freezer   53,112017   244.30   P. SLAM 06 07   13,185.85   3,638.22   3,00075   Non Mowale (1102) 000   Sheetrock for Walk-in-Freezer   73,112017   244.30   P. SLAM 06 05   2,44.30   44.41   15,000   Non Mowale (1102) 000   Sheetrock for Walk-in-Freezer   73,112017   3,110.00   P. SLAM 06 05   3,110.00   555.46   15,000	i.46 187.83 i.62 672.11
15001   150075   Non Mowate   11309   150070   150075   Non Mowate   130070   150075   150070   150070   150070   150070   150070   150070   150070   150070   150070   150070   150070   150070   150070   150070	.75 2,664.75
150075   Non Mowal-011956 000   Walk in cooler/freezer   731/2017   18,185.85   SLMM   06 07   18,185.85   3,683.22   3,67004   150075   Non Mowal-01210 000   Electric for Walk-in Freezer   731/2017   2,734.64   P SLMM   06 05   2,734.64   497.21   7,7004   150075   Non Mowal-012103 000   New Shertork for Walk-in Freezer   731/2017   2,734.64   P SLMM   06 05   2,734.64   497.21   7,7004   150075   Non Mowal-012103 000   New Shertork for Walk-in Freezer   731/2017   635.12   P SLMM   06 05   635.12   115.48   15,7004   150075   Non Mowal-012104 000   Electrical Work-Refridgeration Unit   731/2017   065.12   P SLMM   06 05   635.12   115.48   15,7004   150075   Non Mowal-012105 000   Shertock for Walk-in Freezer   731/2017   108.02   P SLMM   06 05   61.81   17.49   15,7004   150075   Non Mowal-012105 000   Shertock for Walk-in Freezer   731/2017   108.02   P SLMM   06 05   108.02   19.65   15,7004   150085   Non Mowal-012107 000   Shertock for Walk-in Freezer   731/2017   108.02   P SLMM   06 05   108.02   19.65   15,7004   150080   Non-walk-12107 000   Shertock for Walk-in Freezer   731/2017   108.02   P SLMM   06 05   108.02   19.65   15,7004   150080   Non-walk-12107 000   Shertock for Walk-in Freezer   731/2017   12,002   24,150.00   P SLMM   06 05   108.02   19.65   15,7004   150080   Non-walk-1200778   109.00   Non-walk-120078   109.00   Non-walk-120078   109.00   Non-walk-1200798   109.00   10	.17 5,685.17
150075   Non Moval 12101 000   Shectrock for Walk-in Freezer   7/31/2017   24/4.30   Non Moval 101210 000   Shectrock for Walk-in Freezer   7/31/2017   3,110.00   P   SLMM   06 15   2,714/6   47/21   7/37/401   150075   Non Moval 101210 300   New Shectrock for Walk-in Freezer   7/31/2017   3,110.00   P   SLMM   06 15   3,110.00   565.46   7/37/401   150075   Non Moval 101210 40 000   Shectrock for Walk-in Freezer   7/31/2017   7/31/2017   96.18   P   SLMM   06 15   56.512   15.48   15.700   150075   Non Moval 101210 000   Shectrock for Walk-in Freezer   7/31/2017   7/31/2017   96.18   P   SLMM   06 15   05.12   15.48   15.700   150075   Non Moval 101210 000   Shectrock for Walk-in Freezer   7/31/2017   26.73   P   SLMM   06 15   05.12   15.48   15.700   150075   Non Moval 101210 000   Shectrock for Walk-in Freezer   7/31/2017   26.73   P   SLMM   06 15   05.20   16.500   15.700	3,586.67 1.03 6,760.25
150075   Non MovabI21203 000   New Sheetrock for Walk-in Freezer   731/2017   3,110.00   P. SLAMM 06 05   3,110.00   565.46   5.7004   150075   Non MovabI21204 000   Sheetrock for Walk-in Freezer   731/2017   625.12   P. SLAMM 06 05   635.12   115.48   77004   150075   Non MovabI21206 000   Sheetrock for Walk-in Freezer   731/2017   108.02   P. SLAMM 06 05   635.12   115.48   77004   150075   Non MovabI21206 000   Sheetrock for Walk-in Freezer   731/2017   108.02   P. SLAMM 06 05   635.12   115.48   17.49   17.50070   150075   Non MovabI21207 000   Sheetrock for Walk-in Freezer   731/2017   108.02   P. SLAMM 07 00   2,643.73   4.87   17.50070   150080   Movable Ecol08510 000   Movable Ecol08510 000   Movable Ecol0850   Mova	.34 84.75
15075   15075   15075   15075   15076   15075   15076   15075   15076   15075   15076   15075   15076   15075   15076   15075   15076   15075   15076   1507	.63 948.84 .63 1,079.09
150075   Non Movabl01210 000 Supplies-Walk-in Freezer Project   731/2017   26.73   P. SLMM 06 05   108.02   19.65   108.02   19.65   108.02   19.65   108.02   19.65   108.02   108.0	.90 220.38
150075   Non Movable 101070 000 Sheetrock for Walk-in Freezer   73/12011	33.38 37.50
150080	.43 9.30
150080	23,575.00
	2,575.75 3.38 6,614.29
150080	.96 611.86
57004   150080   Movable Et011623 000   2 LED HDTV   33 1/2017   141.45   P   SLMM   06 10   600.07   139.05	i.31 1,479.27 i.65 6,452.78
57004   150080   Movable E.011955 000   Sales and Use Tax   S31/2017   197.00   P   SLMM   06 07   266.00   33.88   S57004   150080   Movable E.012673 000   Sales & Use Tax   S33/1/2018   126.00   P   SLMM   06 04   197.00	.04 228.09
S7004   150080   Movable E.012170   000   Sales & Use Tax   S31/2017   197.00   P   SLMM   60   04   197.00   33.70   150080   Movable E.012673   000   Sales and Use Tax   3/31/2018   126.00   P   SLMM   5   126.00   10.96   1.096   1.	.33 52.77 .21 95.09
\$7004   150085   Movable E.012763   000   UniMac Washers and Dryers   4/30/2018   42,859.05   Novable E.007976   000   418x16 Veranda wheelchairs   6/30/2013   474.92   Veranda wheelchairs   10/31/2013   3,036.32   Veranda wheelchairs   10/31/2014   231.99   Veranda wheelchairs   10/31/2014   231.99   Veranda wheelchairs   10/31/2014   13/12014   13	.35 65.05
57004   150085   Movable E.007496 000   4 l8x16 Veranda wheelchairs   630/2013   3,036.32   7 sLMM   10 00   3,74.92   249.33   1,7004   150085   Movable E.007977 000   2 UCXT beds w/janels   10/31/2013   3,036.32   7 sLMM   10 00   3,036.32   1,492.85   1,492.85   1,41.61   1,492.85   1,41.61   1,492.85   1,41.61   1,492.85   1,41.61   1,492.85   1,41.61   1,492.85   1,41.61   1,492.85   1,41.61   1,492.85   1,41.61   1,492.85   1,41.61   1,492.85   1,44.94   1,492.85   1,492.85   1,44.94   1,492.85   1,	36.16
57004   150085   Movable E.008330   000   Economy Overbed Table Walmut V   1/31/2014   231.99   P   SLMM   09   11   231.99   109.16   57004   150085   Movable E.008591   000   0mic Cycle Elite Rehab System   3/31/2014   7/019.11   P   SLMM   09   09   7/019.11   3,239.59   57004   150085   Movable E.008849   000   Big Blue Board   4/30/2014   446.68   P   SLMM   09   08   461.68   210.94   57004   150085   Movable E.008844   000   wheelchair   6/30/2014   224.69   P   SLMM   09   06   224.69   100.52   57004   150085   Movable E.008845   000   Regency XL Wheelchair 20-22-24   6/30/2014   444.48   P   SLMM   09   06   224.69   98.29   57004   150085   Movable E.009027   000   22 inch Tracer IV wheelchair   8/31/2014   222.69   P   SLMM   09   04   224.69   98.29   57004   150085   Movable E.009027   000   Tracer EX2 Wheelchair, Stock,   8/31/2014   202.66   P   SLMM   09   04   202.66   88.65   57004   150085   Movable E.009951   000   Tracer EX2 Wheelchair, Stock,   3/31/2015   339.88   P   SLMM   08   09   353.98   141.61   57004   150085   Movable E.009951   000   Tracer EX2 Wheelchair, Stock,   3/31/2015   339.88   P   SLMM   08   09   353.98   141.61   57004   150085   Movable E.009513   000   Tracer EX2 Wheelchair, Stock,   3/31/2015   247.96   P   SLMM   08   09   353.98   141.61   57004   150085   Movable E.009513   000   Tracer EX2 Wheelchair, Stock,   3/31/2015   247.96   P   SLMM   08   09   247.96   99.19   57004   150085   Movable E.009513   000   Tracer EX2 Wheelchair, Stock,   3/31/2015   247.96   P   SLMM   08   09   247.96   99.19   57004   150085   Movable E.010130   000   Direct Choice Overbed Table   10/31/2015   147.15   P   SLMM   08   02   147.15   58.02   147.04   P   SLMM   08   00   148.02   147.04   147.04   P   SLMM   08   00   148.02   147.04	.81 11,723.21 .49 296.82
S7004   150085   Movable E.008519   000   Big Blue Board   Movable E.008599   000   Big Blue Board   Movable E.008599   Movable E.008845   000   Movable E.008845   000   Movable E.008845   000   Regency XL Wheelchair   G30/2014   244.69   P. SLMM   09 06   244.69   100.52	1,796.48
57004   15085   Movable E.008894 000   Melechair   630/2014   461.68   P. SLMM   09 08   461.68   210.94	.09 133.25 .91 4,022.50
57004   150085   Movable E.009026 000   22 inch Tracer IV Wheelchair 20-22-24   8/31/2014   224.69   P   SLMM   09 06   224.69   98.29   98.29   98.20   150085   Movable E.009027 000   Tracer EX2 Wheelchair, Stock,   8/31/2014   202.66   P   SLMM   09 04   222.66   88.65   15004   150085   Movable E.009511 000   Tracer EX2 Wheelchair, Stock,   8/31/2015   130.98   P   SLMM   08 09   130.98   52.40   150085   Movable E.009512 000   Tracer EX2 Wheelchair, Stock,   3/31/2015   310.98   P   SLMM   08 09   353.98   141.61   150085   Movable E.009513 000   Tracer EX2 Wheelchair, Stock,   3/31/2015   247.96   P   SLMM   08 09   247.96   99.19   150085   Movable E.009513 000   Tracer EX2 Wheelchair, Stock,   3/31/2015   247.96   P   SLMM   08 09   247.96   99.19   150085   Movable E.009513 000   Tracer EX2 Wheelchair, Stock,   3/31/2015   147.15   P   SLMM   08 09   247.96   99.19   150085   Movable E.001033 000   Direct Choice Overbed Table   10/31/2015   147.15   P   SLMM   08 09   147.15   158.02   147.04   150085   Movable E.010239 000   3-Gallon Coffee Urn, Single   12/31/2015   147.15   P   SLMM   08 02   1,476.14   527.19   1.50085   Movable E.010239 000   3-Gallon Coffee Urn, Single   12/31/2015   147.02   P   SLMM   08 00   2.043.06   702.29   1.50085   Movable E.0102354 000   Seale Reduction for Coffee Equ   12/31/2015   144.02   P   SLMM   08 00   148.02   63.25   1.50085   Movable E.010257 000   Medical grade refrigerator   4/30/2016   527.54   P   SLMM   07 09   4/31.70   1,332.80   1.50085   Movable E.010194 000   GEN ONLY-801 UCXT Bed WLam. Panel   6/30/2016   16/176.62   P   SLMM   07 06   16/176.62   4.852.98   2.45000   150085   Movable E.011622 000   Food Processor, 3 q.t., 1 HP   1/31/2017   1,010.71   P   SLMM   07 06   16/176.62   4.852.98   2.45000   150085   Movable E.011621 000   2 Direct Choice Overbed Table   2/28/2017   148.85   P   SLMM   06 10   148.85   34.49   1.50085   1.50085   1.50085   1.50085   1.50085   1.50085   1.50085   1.50085   1.50085   1.50085   1.50085   1.50085   1.50085	.19 264.13
57004   150085   Movable E.009026 000   22 inch Tracer IV wheelchair   8/31/2014   224.69   P   SLMM   09 04   224.69   98.29	1.49 128.01 1.39 253.24
57004   150085   Movable E.009512   000   Tracer EX2 Wheelchair, Stock,   3/31/2015   339.8   P. SLMM   08 09   130.98   52.40	.01 127.30
57004         150085         Movable E.009512 000         Tracer IV Wheelchair w/Swingaw         3/31/2015         353.98         P         SLMM         08 09         353.98         141.61           57004         150085         Movable E.009513 000         Tracer EX2 Wheelchair, Stock,         3/31/2015         247.96         P         SLMM         08 09         247.96         99.19           57004         150085         Movable E.001033 000         Direct Choice Overbed Table         4/30/2015         147.15         P         SLMM         08 08         147.15         58.02           57004         150085         Movable E.010133 000         Direct Choice Overbed Table         10/31/2015         1,476.14         P         SLMM         08 02         2,43.06         702.29         2           57004         150085         Movable E.010293 000         3-Gallon Coffee Urn, Single         12/31/2015         1,48.02         P         SLMM         08 02         2,43.06         702.29         2           57004         150085         Movable E.010635 000         Scale Reduction for Coffee Equ         12/31/2015         184.02         P         SLMM         08 0         184.02         63.25           57004         150085         Movable E.010625 000         Manitowic ice ma	i.15 114.80 i.65 72.05
57004   150085   Movable E.0109604 000   Direct Choice Overbed Table   4/30/2015   147.15   P. SLMM 08 08   147.15   58.02	.11 194.72
57004         150085         Movable Ec010133         00         Direct Choice Overbed Table         10/31/2015         1,476.14         P         SLMM         08         02         1,476.14         527.19         2           57004         150085         Movable Ec010293         00         3-Gallon Coffee Urn, Single         12/31/2015         2,043.06         P         SLMM         08         02         2,043.06         700.29         3           57004         150085         Movable Ec010354         00         Scale Reduction for Coffee Equ         12/31/2015         184.02         P         SLMM         08         0         2,043.06         700.29         5           57004         150085         Movable Ec010625         00         Manitowic ice machinw         3/31/2016         4,131.70         P         SLMM         07         9         4,131.70         1,332.80           57004         150085         Movable Ec010757         00         Medical grade refrigerator         4/30/2016         527.54         P         SLMM         07         08         527.54         166.29           57004         150085         Movable Ec01021         00         Food Processor, 3 qt., 1 HP         1/31/2017         1,010.71         P         SLMM	1.19 136.38
57004         150085         Movable E.010354 000         Seale Reduction for Coffee Equ         12/31/2015         184.02         P         SLMM         08 00         184.02         63.25           57004         150085         Movable E.010757 000         Manitowic ice machinw         3/31/2016         4,131.70         P         SLMM         07 09         4,131.70         1,332.80           57004         150085         Movable E.010757 000         Medical grade refrigerator         4/30/2016         527.54         P         SLMM         07 08         527.54         166.29           57004         150085         Movable E.0116122 000         Food Processor, 3 qt., 1 HP         6/30/2016         16,176.62         P         SLMM         07 06         16,176.62         4,882.98         2,4           57004         150085         Movable E.011522 000         Food Processor, 3 qt., 1 HP         1/31/2017         1,010.71         P         SLMM         06 01         1,010.71         243.55           57004         150085         Movable E.011621 000         2 Direct Choice Overbed Table         2/28/2017         148.85         P         SLMM         06 10         148.85         34.49	.45 80.47 .27 771.46
57004         150085         Movable Ec010625 000         Manitowic ice machinw         3/31/2016         4,131.70         P         SLMM         07 09         4,131.70         1,332.80           57004         150085         Movable Ec010757 000         Medical grade refrigerator         4/30/2016         527.54         P         SLMM         07 08         527.54         166.29           57004         150085         Movable Ec010914 000         GEN ONLY:80 UCXT Bed w/Lam. Panel         6/30/2016         16,176.62         P         SLMM         07 06         16,176.62         4,852.98         2,3           57004         150085         Movable Ec011522 000         Food Processor, 3 ct., 1 HP         1/31/2017         1,010.71         P         SLMM         06 10         1 48.85         5           57004         150085         Movable Ec011621 000         2 Direct Choice Overbed Table         2/28/2017         148.85         P         SLMM         06 10         148.85         34.49	.75 1,047.04
57004         150085         Movable E010757 000         Medical grade refrigerator         4/30/2016         527.54         P         SLMM         07 08         527.54         166.29           57004         150085         Movable E010914 000         GEN ONLY:801 UCXT Bed w/Lam. Panel         6/30/2016         16,176.62         P         SLMM         07 06         16/176.62         4,852.98         2,7           57004         150085         Movable E011522         000         Food Processor, 3 qt., 1 HP         1/31/2017         1,010.71         P         SLMM         06 10         148.85         34.49	.05 94.30 .04 2,045.84
57004 150085 Movable E011522 000 Food Processor, 3 qt., 1 HP 1/31/2017 1,010.71 P SLMM 06 11 1,010.71 243.55 57004 150085 Movable E011621 000 2 Direct Choice Overbed Table 2/28/2017 148.85 P SLMM 06 10 148.85 34.49	.56 257.85
57004 150085 Movable Ec011621 000 2 Direct Choice Overbed Table 2/28/2017 148.85 P SLMM 06 10 148.85 34.49	0.90 7,683.88 0.17 419.72
	.80 60.29
	0.22 255.18 0.41 1,253.75
	5.59 2,034.63
	5.07 238.27
	.12 143.76 .18 70.00
	.96 953.02
57004 150087 Movable Ec007172 000 Turbidity meter 2/28/2013 973.94 P SLMM 05 00 973.94 973.94 57004 150087 Movable Ec009510 000 Yard Machines 30" Two Stage 3/31/2015 1,043.21 P SLMM 05 00 1,043.21 730.24 2	- 973.94 3.64 938.88
57004 150087 Movable Ec010621 000 Attendant Bladder Scanner Prob 3/31/2016 1,177.31 P SLMM 05 00 1,177.31 588.65 2	.46 824.11
57004 150088 Movable Ec006811 000 Sun Valuation - PPE Moveable Equip 3 y 12/1/2012 1,300.00 P SLMM 03 00 1,300.00 1,300.00 57004 150088 Movable Ec007359 000 15 MATTRESS,GENESIS VISCO SELEC 5/31/2013 3,621.38 P SLMM 03 00 3,621.38 3,621.38	- 1,300.00 - 3,621.38
37004 150088 Movable E007654 000 MATTRESS,GEN,CTM VISCO SELEC 731(2013 4,025.9 F SLMM 03 00 4,705.99 4,705.99 4,705.99 5	- 3,621.38 - 4,705.99
	.65 9,411.98
	2,788.75 3.38 1,071.57
57004 150088 Movable Ec012759 000 Panacea Original Foam Mattress 4/30/2018 190.35 P SLMM 3 190.35 26.44	.45 89.89
57004 150088 Movable E/012762 000 MATTRESS, ADV PE, 36X80X6.75 4/30/2018 387.28 P SLMM 3 387.28 53.79 57004 150100 Movable E/008730 000 Credit Card Machine 5/31/2014 73.07 P SLMM 09 07 73.07 33.06	0.09 182.88 0.70 41.76
57004 150100 Movable Ec011887 000 Brother IntelliFax 4100e Laser FAX 4/30/2017 319.04 P SLMM 06 08 319.04 67.80	.51 122.31
57004 150100 Movable Ec013168 000 Light Duty Task Chair 9/30/2018 138.38 P SLMM 5 138.38 -	7.68 27.68

57004	150110	Movable Ec006812 000 Sun Valuation - PPE IS Equip - 3 Year	12/1/2012	23,440.00 P	SLMM	02 00	23,440.00	23,440.00	-	23,440.00	
57004	150110	Movable Ec010353 000 1 HP OJ 8100 Printer, tag & white cable	12/31/2015	126.38 P	SLMM	03 00	126.38	115.85	10.53	126.38	
57004	150050	Bldg Imp Sept 2018 Accruals	9/30/2018	2,275.15 P	SLMM		2,275.15				
57004	150080	Movable Equip Sept 2018 Accruals	9/30/2018	4,736.38 P	SLMM		4,736.38				
57004	150050	Bldg Imp Reverals Sept 2018 Accruals	10/1/2018	(2,275.15) P	SLMM		(2,275.15)				
57004	150080	Movable Equip Reverals Sept 2018 Accruals	10/1/2018	(4,736.38) P	SLMM		(4,736.38)				
57004	150050	Bldg Imp 013325 000 Flooring	12/31/2018	11,613.42 P	SLMM	20	11,613.42	-	435.50	435.50	435.5033
57004	150057	Bldg Imp 013326 000 New Floors	12/31/2018	80,219.47 P	SLMM	10	80,219.47	-	6,016.46	6,016.46	6016.46
57004	150057	Bldg Imp 013243 000 New floors and cove base coils	10/31/2018	2,275.15 P	SLMM	10	2,275.15	-	208.56	208.56	208.5554
57004	150085	Movable Ec013242 000 24 curtains for windows	10/31/2018	4,736.38 P	SLMM	10	4,736.38	-	434.17	434.17	434.1682
57004	150117	Movable Ec013339 000 Cabling for phone systems	11/30/2018	2,924.63 P	SLMM	7	2,924.63	-	348.17	348.17	348.1702
57004	150050	Bldg Imp 013978 000 Toto Drake Transitional Tank Toilet	06/30/19	554.19 P	SLMM	10	554.19	-	13.85	13.85	13.85475
57004	150050	Bldg Imp 013980 000 New Exhaust fan/hood in kitchen	06/30/19	7,071.00 P	SLMM	10	7,071.00	-	176.78	176.78	176.775
57004	150050	Bldg Imp 014173 000 New backflow preventer	08/31/19	1,745.20 P	SLMM	10	1,745.20	-	14.54	14.54	14.54333
57004	150050	Bldg Imp 014174 000 pmt 1 for replacement of 1 - 24,000 BTU water source heat pump	08/31/19	3,262.50 P	SLMM	10	3,262.50	-	27.19	27.19	27.1875
57004	150050	Bldg Imp 014175 000 Pmt 1 for replacement of 6 - 9,000 BTU water source heat pumps	08/31/19	15,787.50 P	SLMM	10	15,787.50	-	131.56	131.56	131.5625
57004	150050	Bldg Imp 014176 000 50% Deposit for replacement of two water source heat pumps	08/31/19	6,030.00 P	SLMM	10	6,030.00	-	50.25	50.25	50.25
57004	150050	Bldg Imp 014253 000 Replaced smoked dector w/upgraded tech	09/30/19	524.31 P	SLMM	10	524.31	-	-	-	0
57004	150050	Bldg Imp 014257 000 Horizontal water source heat pump 42,000 BTU	09/30/19	4,060.00 P	SLMM	10	4,060.00	-	-	-	0
57004	150050	Bldg Imp 014258 000 Replaced the B-1 Accelerator for sprinkler system	09/30/19	2,338.37 P	SLMM	10	2,338.37	-	-	-	0
57004	150050	Bldg Imp 014259 000 Two Swivel Rebuild Kits for repairs	09/30/19	2,483.27 P	SLMM	10	2,483.27	-	-	-	0
57004	150050	Bldg Imp 014260 000 High Performance Water Filter System ESOTMFSE02	09/30/19	4,711.20 P	SLMM	10	4,711.20	-	-	-	0
57004	150080	Movable Ec013675 000 2 - Spots Vital Signs Monitors&2 - Mobile Stands	03/31/19	4,252.55 P	SLMM	7	4,252.55	-	303.75	303.75	303.7536
57004	150085	Movable Ec013496 000 2 Large Bussing Carts	01/31/19	823.13 P	SLMM	10	823.13	-	54.88	54.88	54.87533
57004	150085	Movable Ec013588 000 Direct Supply Beverage Cart	02/28/19	607.16 P	SLMM	10	607.16	-	35.42	35.42	35.41767
57004	150085	Movable Ec013589 000 Tracer SX5 wheelchairs 18"D Adjustable Height Arms & Hemi E	02/28/19	237.98 P	SLMM	10	237.98	-	13.88	13.88	13.88217
57004	150085	Movable Ec013785 000 Mobile Hot Buffet Cart	04/30/19	3,000.13 P	SLMM	10	3,000.13	-	125.01	125.01	125.0054
57004	150085	Movable Ec014255 000 10 UCXT Beds w/ Assist Devices	09/30/19	18,449.25 P	SLMM	10	18,449.25	-	-	-	0
57004	150085	Movable Ec014256 000 Commercial Disposal 1HP	09/30/19	1,080.10 P	SLMM	10	1,080.10	-	-	-	0
57004	150087	Movable Ec013979 000 Chain Saw 16 Bar Length	06/30/19	509.42 P	SLMM	7	509.42	-	18.19	18.19	18.19357
57004	150088	Movable Ec014254 000 10 Mattresses	09/30/19	2,414.25 P	SLMM	3	2,414.25	-	-	-	0

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

CSP-24 Rev. 10/2006

# **Amortization Schedule\***

Nam	e of Facility	License No.		Report for Yea	r Ended	Page	of			
Harb	orside CT Limited Partnership - d/b/a: M	2201-C		9/30/2019			24	37		
		Date of Acquisition				Accumulated Amort. to Beginning of	Basis for			
				Length of	Cost to Be	Year's	Computing	Rate	Amortization	
	Item	Month	Year	Amortization	Amortized	Operations	Amortization**	%	for This Year	Totals
A.	Organization Expense									
	1.									
	2.									
	3.									
A-4.	Subtotal									
B.	Mortgage Expense									
	1.									
	2.									
	3.									
B-4.	Subtotal									
C.	<b>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									
D.	Total Amortization									

<sup>\*</sup> Straight-line method must be 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.

<sup>\*\*</sup> Specify which of the following bases were used:

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

Name of Facility Harborside CT Limited Partnership - d  License No. 220	o. )1-C	Report for Year En	ded		Page of 25   37
11. Property Questionnaire					,
Part A					
Is the property either owned by the Facility or leased from a Related Party?*	0	Yes	•	No	If "Yes," complete Part B. If "No," complete Part C.
*If any owner or operator of this facility is related business association to any person or organization related party transaction.					
Description		Total			
Date Land Purchased		n/a			
2. Date Structure Completed		n/a			
If <b>NOT</b> Original Owner, Date of Purchas     Date of Initial Licensure	se				
Date of Initial Licensure     Total Licensed Bed Capacity		89			
6. Square Footage		69			
7. Acquisition Cost					
a. Land		n/a			
b. Building		n/a			
Part B - Owner and Related Parties		1st Mortgage	2nd Mortgage	3rd Mortgage	4th Mortgage
1. Financing					
a. Type of Financing (e.g., fixed, variab	ole)				
b. Date Mortgage Obtained					
c. Interest Rate for the Cost Year					
<ul><li>d. Term of Mortgage (number of years)</li><li>e. Amount of Principal Borrowed</li></ul>					
f. Principal balance outstanding as of					
Complete if Mortgage was Refinanced					
During Current Cost Year	ı				
g. Type of Financing (e.g., fixed, variate	ole)				
h. Date of Refinancing					
i. New Interest Rate					
j. Term of Mortgage (number of years)					
k. Amount of Principal Borrowed					
Principal Outstanding on Note Paid-					
Part C - Arms-Length Leases for Real				m cr	
Name and Address of Lessor		perty Leased			Annual Amount of Lease
SABRA, 101 Sun Ave. NE, Albuquerque, NM 87107	Facility Lea	ase	11/15/10 - 6/30	12/ months	460
SABRA, 101 Sun Ave. NE, Albuquerque, NM 87107					
0/10/					

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 Yea	ar Ended		Page of
Harborside CT Limited Partnership - 2201-C		9/30/2019			26   37
Item		Total	CCNH	RHNS	(Specify)
12. Interest					
A. Building, Land Improvement & Non-Movable	;				
Equipment					
1. First Mortgage	\$	36,979	36,979		
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					
Original Loan Amount	\$				
2. Loan Origination Date					
3. Interest Rate %					
4. Term					
5. CHEFA Interest Expense					
12 B7. Total Building Interest Expense (A1 - A4 + B5)	\$	36,979	36,979		
		(Carm	Subtotals f	orward to n	art naga)

(Carry Subtotals forward to next page)

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

Name of Facility License N	lo.		Report for Ye	ear Ended		Page	of
Harborside CT Limited Partnership 220	1-C		9/30/2019			27	37
Item			Total	CCNH	RHNS	(Spec	eify)
	totals Bro	ught Forward:	36,979	36,979			
12. C. Movable Equipment							
1. Automotive Equipment		\$					
A. Item	Rate	Amount					
Lender							
Address of Lender							
2. Other ( <i>Specify</i> )		\$					
A. Item	Rate	Amount					
Lender							
Address of Lender							
		Ī					
B. Item	Rate	Amount					
Lender							
Address of Lender							
12. C. 3. Total Movable Equipment Intere	st						
Expense (C1 + 2)		\$					
12. D. Other Interest Expense (Specify)		\$					
12 Total All Interest Formance (12D7 + 12C	2 + 12D)	Φ	26.070	26.070			
13. <i>Total All Interest Expense</i> (12B7 + 12C)	3 + 12D)	\$	36,979	36,979			
D (1 111)	lv)	\$	26,280	26,280			
a. Insurance on Property (buildings on b. Insurance on Automobiles	1 <i>y J</i>	\$		20,200			
c. Insurance other than Property (as sp	ecified ab						
1. Umbrella (Blanket Coverage)		\$	116,256	116,256			
2. Fire and Extended Coverage		\$	110,230	110,230			
3. Other ( <i>Specify</i> )		\$					
- (-197)		4					
14d. Total Insurance Expenditures (14a + b	<u>+ c)</u>	\$	142,536	142,536			
15. Total All Expenditures (A-13 thru C-14		<u> </u>		7,529,832			
15. 10m An Expenditures (A-15 infu C-14	)	<u> </u>	1,329,032	1,349,634		1	

# D. Adjustments to Statement of Expenditures

	e of Fa		imited Partnership - d/b/a: Madison House	Lic	cense No. 2201-C	Report for Yea 9/30/2019	r Ended	Page 28	of 37
	Page No.		Item Description		Total Amount of Decrease	CCNH	RHNS	(Spe	cify)
			es and Wages		Beerease	CCIVII	MIIVO	(Spe	city)
1.	10 5	ana n	Outpatient Service Costs	\$					
2.			Salaries not related to Resident Care	\$					
3.			Occupational Therapy	\$					
4.			Other - See attached Schedule	\$	94,347	94,347			
Page	13 - F	Profes	sional Fees	•	- )-	- ,- ,-			
5.			Resident Care Physicians **	\$					
6.			Occupational Therapy	\$					
7.			Other - See attached Schedule	\$	595,407	595,407			
Page	s 15 &	16 -	Administrative and General		,				
8.			Discriminatory Benefits	\$					
9.	15	1-c	Bad Debts	\$	189,358	189,358			
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 *	\$	9,855	9,855			
19.			Income Tax / Corporate Business Tax	\$					
20.			Fund Raising / Contributions	\$	637	637			
21.			Unallowable Management Fees	\$	(178,003)				
22.			Barber and Beauty	\$					
23.			Other - See attached Schedule	\$	(273,229)	(273,229)			
Page	18 - I	)ietar	y Expenditures						
24.			Meals to employees, guests and others						
			who are not residents	\$					
Page	19 - I	aund	ry Expenditures						
25.			Laundry services to employees, guests						
			and others who are not residents	\$					
Page	20 - I	Iouse	keeping Expenditures						
26.			Housekeeping services to employees, guests						
			and others who are not residents	\$					
			Subtotal (Items 1 - 26)	) \$	438,370	438,370			

<sup>\*</sup> All except "Help Wanted".

(Carry Subtotal forward to next page)

<sup>\*\*</sup> 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	(S	pecify)
10	2	Administrator's salary disallowed	\$ 94,347	\$ -	\$	-
0	0	0	\$ -	\$ -	\$	-
0	0	0	\$ -	\$ -	\$	1
0	0	0	\$ -	\$ -	\$	-
<b>Total Othe</b>	r Salaries A	Adjustment	\$ 94,347	\$ -	\$	-

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## **Schedule of Fees Adjustments**

Page Ref	Line Ref	Description	(	CCNH	RHNS	(S <sub>I</sub>	ecify)
13	5	Description	\$	91,723	\$ -	\$	-
13	5	Rehabilitation Services	\$	341,446	\$ -	\$	-
13	9	Rehabilitation Services	\$	37,125	\$ -	\$	-
13	10	Speech Therapist	\$	108,726	\$ -	\$	-
13	12	Occupational Therapist	\$	1	\$ -	\$	-
13	12	Other	\$	15,813	\$ -	\$	-
13	12	Other	\$	574	\$ -	\$	-
<b>Total Othe</b>	r Fees Adji	ustments	\$	595,407	\$ -	\$	-

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## Schedule of Other A&G Adjustments

Page Ref	Line Ref	Description	CCNH	RHNS	(S	pecify)
16	m-13	Description	\$ 8,087	\$ -	\$	-
16	m-13	Collection Fees	\$ 728	\$ -	\$	-
16	m-13	Estimated Accrual	\$ (157,323)	\$ -	\$	-
16	m-13	Non-recurring Charges	\$ 205	\$ -	\$	-
16	m-13	Dues to Chamber of Commerce	\$ 1	\$ -	\$	-
16	m-12	Penalty	\$ -	\$ -	\$	-
15	1-a-1	0	\$ (124,926)	\$ -	\$	-
0	0	adj workers comp	\$ -	\$ -	\$	-
0	0	0	\$ -	\$ -	\$	-
<b>Total Othe</b>	er A&G Ad	justments	\$ (273,229)	\$ -	\$	-

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

			D. Adjustments to Statemen	III	oi Expenu	itures (co	mi u)	
Name	e of Fa	cility		Lic	ense No.	Report for Y	ear Ended	Page of
Harb	orside	CT L	imited Partnership - d/b/a: Madison House		2201-C	9/30/2019		29   37
					Total			
Item	Page	Line			Amount of			
No.	No.	No.	Item Description		Decrease	CCNH	RHNS	(Specify)
			Subtotals Brought Forward	\$	438,370	438,370		
Page	20 - K	Reside	nt Care Supplies***					
27.	20	5-a-2	Prescription Drugs	\$	179,599	179,599		
28.	20	5-d	Ambulance/Limousine	\$	111	111		
29.	20	5-f	X-rays, etc	\$	4,323	4,323		
30.	20	5-h	Laboratory	\$	29,468	29,468		
31.			Medical Supplies	\$				
32.	20	5-e-2	Oxygen (non emergency)	\$	4,086	4,086		
33.			Occupational Therapy	\$				
34.			Other - See Attached Schedule	\$	8,976	8,976		
Page	22 - N	<i>lainte</i>	enance and Property					
35.			Excess Movable Equipment Depreciation					
			See Attached Schedule	\$	(146,292)	(146,292)		
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	\$				
Page	27 - I	nsura	nce					
40.			Mortgage Insurance	\$				
41.			Property Insurance	\$				
Other	r - Mis	scella	neous					
42.			Other - Indirect	\$	9,961	9,961		
43.			Interest Income on Account Rec.	\$				
44.			Other - Miscellaneous Administrative	\$	119,552	119,552		
45.			Management Fees Direct	\$				
46.			Management Fees Indirect	\$				
47.			Other - Direct	\$				
Not I	or Pr	ofit P	roviders Only					
48.			Building/Non Movable Eq. Depreciation					
			Unallowable Building Interest -					
			See Attached Schedule	\$				
49.	Total	Amoi	unt of Decrease (Items 1 - 48)	\$	648,154	648,154		

<sup>\*\*\*</sup> 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.

## **Schedule of Other Ancillary Costs**

Page Ref	Line Ref	Description	CCNH	RHNS	(5	Specify)
20	5-j	Consolidated Billing	\$ 446	\$ -	\$	-
20	5-j	Respiratory Supplies	\$ 3,295	\$ -	\$	-
20	5-j	Respiratory Rental	\$ 5,235	\$ -	\$	-
0	0	0	\$ -	\$ -	\$	-
0	0	0	\$ -	\$ -	\$	-
0	0	0	\$ •	\$ -	\$	-
0	0	0	\$ -	\$ -	\$	-
0	0	0	\$	\$ -	\$	-
<b>Total Othe</b>	r Ancillary	Costs	\$ 8,976	\$ -	\$	-

#### **Schedule of Excess Movable Equipment Depreciation**

Page Ref	Line Ref	Description		CCNH	RHNS	(Sp	ecify)
Page 22	7a	Land Imp	\$	(5,174)	\$ -	\$	-
Page 22	7b	Bldg Imp	\$	(56,212)	\$ -	\$	-
Page 22	7c	Non Movable Equip	\$	(54,759)	\$ -	\$	-
Page 22	7d	Movable Equip	\$	(30,147)	\$ -	\$	-
0	0	0	\$		\$ -	\$	-
0	0	0	\$	-	\$ -	\$	-
Total Exce	ss Movable	Equipment Depreciation	\$	(146,292)	\$ -	\$	-
	•		erro				

**Schedule of Other Property Adjustments** 

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

## **Schedule of Other - Indirect Adjustments**

Page Ref	Line Ref	Description	CCNH	RHNS	(	Specify)
20	5-i	Cable TV - Allowable \$3,600 Account#3005660130	\$ 9,961	\$ -	\$	-
0	0	0	\$ -	\$ -	\$	-
0	0	0	\$ -	\$ -	\$	-
0	0	0	\$ -	\$ -	\$	-
0	0	0	\$ -	\$ -	\$	-
0	0	0	\$ -	\$ -	\$	-
0	0	0	\$ -	\$ -	\$	-

Total Other Adjustments	\$ 9,961	\$ -	\$ -

## Schedule of Other - Miscellaneous Administrative Adjustments

Page Ref		Description	(	CCNH	R	HNS	(Spe	ecify)
27	14c1	General liability Insurance Adjust	\$	119,552	\$	-	\$	-
	_							
<b>Total Other</b>	r Adjustme	nts	\$	119,552	\$	-	\$	-

Page Ref	Line Ref	Description	CCNH	RHNS	(Specify)
<b>Total Othe</b>	r Adjustme	nts	\$ -	\$ -	\$ -

## Schedule of Unallowable Building Interest

Page Ref	Line Ref	Description	CCNH	RHNS	(Sp	ecify)
0	0	0	\$ -	\$ -	\$	-
0	0	0	\$ -	\$ -	\$	-
0	0	0	\$ -	\$ -	\$	-
0	0	0	\$ -	\$ -	\$	-
0	0	0	\$ -	\$ -	\$	-
0	0	0	\$ -	\$ -	\$	-
0	0	0	\$ -	\$ -	\$	-
<b>Total Unall</b>	owable Bui	ilding Interest	\$ -	\$ -	\$	-

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

CSP-30 Rev.10/2005

## F. Statement of Revenue

Name of Facility License No.  Harborside CT Limited Partnership - d/b/¿2201-C		Report for Yo 9/30/2019	ear Ended		Page of 30   37
Item		Total	CCNH	RHNS	(Specify)
I. Resident Room, Board & Routine Care Revenue					
1. a. Medicaid Residents (CT only)	\$	7,549,341	7,549,341		
b. Medicaid Room and Board Contractual Allowance **	\$	(3,116,385)	(3,116,385)		
2. a. Medicaid (All other states )	\$				
b. Other States Room and Board Contractual Allowance **	\$				
3. a. Medicare Residents (all inclusive)	\$	1,217,536	1,217,536		
b. Medicare Room and Board Contractual Allowance **	\$	(295,620)	(295,620)		
4. a. Private-Pay Residents and Other	\$	1,230,492	1,230,492		
b. Private-Pay Room and Board Contractual Allowance **	\$	(354,645)	(354,645)		
II. Other Resident Revenue		(22 )2 2)	(22 )2 2)		
1. a. Prescription Drugs - Medicare	\$	105,373	105,373		
b. Prescription Drugs - Medicare Contractual Allowance **	\$	(25,585)	(25,585)		1
c. Prescription Drugs - Non-Medicare	\$	82,879	82,879		
d. Prescription Drugs - Non-Medicare Contractual Allowance **	\$	(24,509)	(24,509)		+
a. Medical Supplies - Medicare	\$	552	552		1
b. Medical Supplies - Medicare Contractual Allowance **	\$	(134)	(134)		1
c. Medical Supplies - Non-Medicare	\$	759	759		_
d. Medical Supplies - Non-Medicare Contractual Allowance **	\$	(313)	(313)		1
3. a. Physical Therapy - Medicare	\$	455,830	455,830		1
b. Physical Therapy - Medicare Contractual Allowance **	\$	(110,676)	(110,676)		
c. Physical Therapy - Non-Medicare	\$		159,260		
d. Physical Therapy - Non-Medicare Contractual Allowance **	\$	159,260	(49,987)		
Speech Therapy - Medicare  4. a. Speech Therapy - Medicare	\$	(49,987)			
b. Speech Therapy - Medicare Contractual Allowance **	\$	111,656	111,656		
		(27,110)	(27,110)		
c. Speech Therapy - Non-Medicare d. Speech Therapy - Non-Medicare Contractual Allowance **	\$ \$	37,357	37,357		
		(12,807)	(12,807)		+
5. a. Occupational Therapy - Medicare	\$ \$	596,101	596,101		+
b. Occupational Therapy - Medicare Contractual Allowance **		(144,734)	(144,734)		1
c. Occupational Therapy - Non-Medicare	\$	190,309	190,309		+
d. Occupational Therapy - Non-Medicare Contractual Allowance **	\$	(58,805)	(58,805)		
6. a. Other (Specify) - Medicare	\$	13,466	13,466		1
b. Other (Specify) - Non-Medicare	\$	7,212	7,212		
III. Total Resident Revenue (Section I. thru Section II.)	\$	7,536,812	7,536,812		
IV. Other Revenue*					
Meals sold to guests, employees & others	\$				
2. Rental of rooms to non-residents	\$				
3. Telephone	\$				
4. Rental of Television and Cable Services	\$	7,969	7,969		<u> </u>
5. Interest Income (Specify)	\$	11	11		<u> </u>
6. Private Duty Nurses' Fees	\$				
7. Barber, Coffee, Beauty and Gift shops	\$	17,131	17,131		
8. Other ( <i>Specify</i> )	\$	96,558	96,558		
V. Total Other Revenue (1 thru 8)	\$	121,669	121,669		
VI. Total All Revenue (III+V)	\$	7,658,481	7,658,481		

<sup>\*</sup> Facility should off-set the appropriate expense on Page 28 or Page 29 of the Cost Report.

<sup>\*\*</sup> Facility should report all contractual allowances and/or payer discounts.

#### Schedule of Other Resident Revenue - Medicare

#### Related Exp

Page Ref	Description		C	CNH	RE	INS	(Speci	ify)
II-6-a	Medicare	X-Ray	\$	2,941	\$	-	\$	-
II-6-a	Medicare	Laboratory	\$	11,677	\$	-	\$	-
II-6-a	Medicare	Respiratory Thera	\$	-	\$	-	\$	-
II-6-a	Medicare	Nursing Treatmen	\$	-	\$	-	\$	-
II-6-a	Medicare	Audiology	\$	75	\$	-	\$	-
II-6-a	Medicare	Incontinency	\$	-	\$	-	\$	-
II-6-a	Medicare	Oxygen & Supplie	\$	-	\$	-	\$	-
II-6-a	Medicare	Physician Visit	\$	-	\$	-	\$	-
II-6-a	Medicare	Ambulance	\$	-	\$	-	\$	-
II-6-a	Medicare	Flu Shot	\$	3,091	\$	-	\$	-
II-6-a	Medicare Contractual	X-Ray	\$	(714)	\$	-	\$	-
II-6-a	Medicare Contractual	Laboratory	\$	(2,835)	\$	-	\$	-
II-6-a	Medicare Contractual	Respiratory Thera	\$	-	\$	-	\$	-
II-6-a	Medicare Contractual	Nursing Treatmen	\$	-	\$	-	\$	-
II-6-a	Medicare Contractual	Audiology	\$	(18)	\$	-	\$	-
II-6-a	Medicare Contractual	Incontinency	\$	-	\$	-	\$	-
II-6-a	Medicare Contractual	Oxygen & Supplie	\$	-	\$	-	\$	-
II-6-a	Medicare Contractual	Physician Visit	\$	-	\$	-	\$	-
II-6-a	Medicare Contractual	Ambulance	S	-	\$	-	\$	-
II-6-a	Medicare Contractual	Flu Shot	S	(751)	\$	-	\$	-
Total Othe	r Resident Revenue - Medicare		\$	13,466	\$	-	\$	-

## Schedule of Other Non-Medicare Resident Revenue

#### Related Exp

Page Ref	Description		CCN	H	RHN	S	(Specif	y)
II-6-b	Medicaid X	K-Ray	S	156	\$	-	\$	-
II-6-b	Medicaid L	aboratory	\$	1,031	\$	-	\$	-
II-6-b	Medicaid R	Respiratory Thera	\$	-	\$	-	\$	-
II-6-b	Medicaid	Nursing Treatmen	\$	-	\$	-	\$	-
II-6-b	Medicaid A	Audiology	S	-	\$	-	\$	-
II-6-b	Medicaid I	ncontinency	\$	-	\$	-	\$	-
II-6-b	Medicaid C	Oxygen & Supplie	\$	-	\$	-	\$	-
II-6-b	Medicaid P	Physician Visit	\$	-	\$	-	\$	-
II-6-b	Medicaid A	Ambulance	S	-	\$	-	\$	-
II-6-b	Medicaid F	lu Shot	S	-	\$	-	\$	-
II-6-b	Contractuals-Medicaid X	K-Ray	S	(64)	\$	-	S	-
II-6-b	Contractuals-Medicaid L	aboratory	S	(426)	\$	-	S	-
II-6-b	Contractuals-Medicaid R	Respiratory Thera	S	-	\$	-	S	-
II-6-b	Contractuals-Medicaid	Nursing Treatmen	S	-	\$	-	S	-
II-6-b	Contractuals-Medicaid A	Audiology	S	-	\$	-	S	-
II-6-b	Contractuals-Medicaid I	ncontinency	S	-	\$	-	S	-
II-6-b	Contractuals-Medicaid C	Oxygen & Supplie	S	-	\$	-	S	-
II-6-b		Physician Visit	S	-	\$	-	S	-
II-6-b		Ambulance	S	-	S	-	S	-
II-6-b		lu Shot	S	-	S	-	S	-
II-6-b		K-Rav	S	272	S	-	S	-
II-6-b	Non-Medicaid L	aboratory	S	8,881	\$	-	S	-
II-6-b	Non-Medicaid R	Respiratory Thera	S	-	\$	-	S	-
II-6-b	Non-Medicaid	Nursing Treatmen	S	-	\$	-	S	-
II-6-b	Non-Medicaid A	Audiology	S	-	\$	-	S	-
II-6-b	Non-Medicaid In	ncontinency	S	-	\$	-	S	-
II-6-b	Non-Medicaid C	Oxygen & Supplie	S	-	\$	-	S	-
II-6-b	Non-Medicaid P	Physician Visit	S	-	\$	-	S	-
II-6-b	Non-Medicaid A	Ambulance	S	-	\$	-	S	-
II-6-b	Non-Medicaid F	lu Shot	S	-	\$	-	S	-
II-6-b	Non-Medicaid C	Capitation Contrac	S	-	\$	-	\$	-
II-6-b	Contractuals-Non-Medicaid X	K-Ray	\$	(78)	\$	-	\$	-
II-6-b	Contractuals-Non-Medicaid L	aboratory	S (	2,560)	\$	-	\$	-
II-6-b	Contractuals-Non-Medicaid R	Respiratory Thera	S	-	\$	-	S	-
II-6-b	Contractuals-Non-Medicaid	Nursing Treatmen	S	-	\$	-	S	-
II-6-b		Audiology	S	-	\$	-	\$	-
II-6-b	Contractuals-Non-Medicaid In	ncontinency	S	-	\$	-	\$	-
II-6-b	Contractuals-Non-Medicaid C	Oxygen & Supplie	S	-	\$	-	\$	-
II-6-b		Physician Visit	S	-	\$	-	\$	-
II-6-b		Ambulance	S	-	\$	-	\$	-
II-6-b		lu Shot	S	-	\$	-	S	-
II-6-b	Contractuals-Non-Medicaid C	Capitation Contrac	S	-	\$	-	\$	-
T-4-1 Odb	er Resident Revenue		S	7.212	S	-	S	-

#### Interest Income

#### Account

Page Ref	Account	Balance		CCNH	RHNS	(Sp	ecify)
IV-5	Interest On Overdue Accounts		\$	11	\$ -	\$	-
0	0		\$	-	\$ -	\$	-
0	0		\$	-	\$ -	\$	-
Total Inter	rest Income		S	11	\$ -	\$	-

Schedule of Other Revenue

Page Ref	Description		CCNI	I	RHNS		(Specify)	
IV-8	POSTAGE 630370-1020		\$	1	\$	-	\$	-
IV-8	REHABCARE SETTLEMENT ADMINISTRATOR		S	600	\$	-	\$	-
IV-8	MISC TRIAL EXPENSE - JUSTINE GUCKIN		S	71	\$	-	\$	-
IV-8	630530 MRC/ Medical Record		S	71	\$	-	\$	-
IV-8	630530 MCR R CRETELLA / Medical Record		S	127	\$	-	\$	-
IV-8	Reclass to Contra Meal 610104-3030		S	15	\$	-	\$	-
IV-8	Record Misc Income related to business interuption claim from Dec 2017 pi	pe burst	\$ 95	673	\$	-	\$	-
0	0		S	-	\$	-	\$	-
0	0		S	-	\$	-	\$	-
Total Othe	r Revenue		\$ 96	558	S	-	\$	-

\_\_\_\_\_

# **G.** Balance Sheet

Name of Facility	License No.	Report for Year Ended	Page	of
Harborside CT Limited Partnership -	d/l 2201-C	9/30/2019	31	37
	Account		Aı	nount
Assets				
A. Current Assets				
1. Cash (on hand and in banks	')		\$	6,737
2. Resident Accounts Receiva	ble (Less Allowance	for Bad Debts)	\$	820,389
3. Other Accounts Receivable	(Excluding Owners of	or Related Parties)	\$	477
4 Inventories			\$	36,814
5. Prepaid Expenses			\$	43,330
a				
h				
с				
d. See Schedule		43,330		
6. Interest Receivable			\$	
7. Medicare Final Settlement l			\$	
8. Other Current Assets (itemi.	ze		\$	
			_	
See Schedule				
A-9. Total Current Assets (Lines A	l thru 8)		\$	907,747
B. Fixed Assets				
1. Land			\$	
2. Land Improvements	*Historical Cost	. <del> </del>	\$	
	Accum. Depreciat			
3. Buildings	*Historical Cost	48,568	\$	48,128
	Accum. Depreciat	tion 440 Net		
4. Leasehold Improvements	*Historical Cost		\$	
	Accum. Depreciat	ion Net		
5. Non-Movable Equipment	*Historical Cost		\$	
	Accum. Depreciat		Φ.	20.010
6. Movable Equipment	*Historical Cost	31,374	\$	30,810
- X X X X X X X X X X X X X X X X X X X	Accum. Depreciat	ion 564 Net	<b>A</b>	
7. Motor Vehicles	*Historical Cost		\$	
	Accum. Depreciat	ion Net	<b>A</b>	
8. Minor Equipment-Not Depr	eciable		\$	
9. Other Fixed Assets ( <i>itemize</i>	)		\$	
	,			
See Schedule				
B-10. Total Fixed Assets (Lines I	31 thru 9)		\$	78,938

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

		Description		
	a5d	Prepaid Expenses	\$	- 20.210
	a5d a5d	Prepaid Property Tax Prepaid Personal Property Tax	\$	39,210 4,120
	a5d	Prepaid Personal Property Tax	S	-
-4-1 D	.: F		S	43,330
наі г гер	oaid Expen	ses.	3	43,330
		urrent Assets (itemized) Page 31 Line A8 Description		
31	a8d	0		
31	a8d a8d	0		
	a8d	0		
otal Oth	er Current	Assets (Itemize)	s	-
		xed Assets (Itemize) Page 31 Line B9		
age Kei	Lille Kei	Description		
		ixed Assets (Itemize)	\$	-
		ssets Page 32 Line D7		
age Kei	Line Ref	Description		
otal Oth	er Assets		s	-
Schedule (				
		yable (Itemize) Page 33 Line A2 Description		
age Ref			S	
age Ref	Line Ref		S	-
Page Ref	Line Ref	Description  urrent Liabilities (Itemize) Page 33 Line A12	S	-
Page Ref  Fotal Note Schedule (	Line Ref	Description  urrent Liabilities (Itemize) Page 33 Line A12 Description Accr Exp Other	S	-
Page Ref  Fotal Note Schedule of 33 33	Line Ref	Description  urrent Liabilities (Itemize) Page 33 Line A12  Description Acer Exp Other Acer Exp Other	S	2,460
Page Ref  Fotal Note Schedule of Page Ref  33  33  33  33	es Payable Of Other C Line Ref a12d a12d a12d a12d	Description  urrent Liabilities (Itemize) Page 33 Line A12  Description Accr Exp Other Accr Exp Water and Sewer Accr Exp Gas Accr Exp Gas Accr Exp Electricity	\$ \$ \$	2,460 1,312 5,375
Fotal Note Schedule of Schedule of Sage Ref 33 33 33 33 33	Es Payable of Other C Line Ref a12d a12d a12d a12d a12d a12d	Description  urrent Liabilities (Itemize) Page 33 Line A12  Description Accr Exp Other Accr Exp Gas Accr Exp Electricity Deferred Revenue	\$ \$ \$	2,460 1,312 5,375 7,942
Cotal Note Schedule of Sage Ref  33  33  33  33  33	es Payable Of Other C Line Ref a12d a12d a12d a12d	Description  Interest Liabilities (Itemize) Page 33 Line A12  Description  Acer Exp Other  Acer Exp Water and Sewer  Acer Exp Gas  Acer Exp Electricity  Deferred Revenue  Ark Credit Gross Up Liability	\$ \$ \$	2,460 1,312 5,375
Fotal Note Schedule of Page Ref 33 33 33 33 33 33 33 33 33	es Payable  of Other C  Line Ref al2d al2d al2d al2d al2d al2d al2d al2d	Description  urrent Liabilities (Itemize) Page 33 Line A12  Description Accr Exp Other Accr Exp Other Accr Exp Gas Accr Exp Electricity Deferred Revenue A/R Credit Gross Up Liability Accrded Provider/Bed Tax Accr Gross Red Tast-FY11	\$ \$ \$ \$ \$ \$	2,460 1,312 5,375 7,942 165,855 101,190 2,640
Cotal Note Cochedule of Sage Ref  33  33  33  33  33  33  33	s Payable of Other C Line Ref al2d al2d al2d al2d al2d al2d al2d al2d	Description  urrent Liabilities (Itemize) Page 33 Line A12  Description Acer Exp Other Acer Exp Water and Sewer Acer Exp Water and Sewer Acer Exp Electricity Deferred Revenue AR Credit Gross Up Liability Accrued Provider/Bed Tax Acer Gross Ree Tax-FY11 Acer Gross Ree Tax-FY11 Acer Gross Ree Tax-FY12	\$ \$ \$ \$ \$ \$ \$	2,460 1,312 5,375 7,942 165,855 101,190 2,640 2,400
Page Ref  Schedule 6  Page Ref  33  33  33  33  33  33  33  33  33	s Payable of Other C Line Ref a12d a12d a12d a12d a12d a12d a12d a12d	Description  urrent Liabilities (Itemize) Page 33 Line A12  Description Acer Exp Other Acer Exp Water and Sewer Acer Exp Electricity Deferred Revenue AR Credit Gross Up Liability Accruded Provider Bed Tax Acer Gross Ree Tax-FY11 Acer Gross Ree Tax-FY11 Acer Gross Ree Tax-FY11 Acer Gross Ree Tax-FY12	\$ \$ \$ \$ \$ \$ \$ \$	2,460 1,312 5,375 7,942 165,855 101,190 2,640 2,400 2,400
Page Ref Fotal Note Schedule of 33 33 33 33 33 33 33 33 33 33 33 33 33	s Payable s Payable c line Ref al2d al2d al2d al2d al2d al2d al2d al2d	Description  urrent Liabilities (Itemize) Page 33 Line A12  Description  Acer Exp Other Acer Exp Other Acer Exp Gas Acer Exp Gas Acer Exp Electricity Deferred Revenue  A'R Credit Gross Up Liability Acer Gross Ree Tax-FY11 Acer Gross Ree Tax-FY12 Acer Gross Ree Tax-FY13 Acer Gross Ree Tax-FY13 Acer Gross Ree Tax-FY14 Acer Gross Re Tax-FY14 Acer Gross Ree Tax-FY14 Acer Gross Ree Tax-FY14 Acer Gross Ree Tax-FY14 Acer Gross Ree Tax-FY14	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	2,460 1,312 5,375 7,942 165,855 101,190 2,640 2,400 2,400 2,400 2,400
Page Ref	Line Ref	Description  urrent Liabilities (Itemize) Page 33 Line A12  Description Accr Exp Other Accr Exp Other Accr Exp Gas Accr Exp Electricity Deferred Revenue Ale Credit Gross Up Liability Accr Gross Rec Tax-FY11 Accr Gross Rec Tax-FY11 Accr Gross Rec Tax-FY11 Accr Gross Rec Tax-FY13 Accr Gross Rec Tax-FY14 Accr Gross Rec Tax-FY14 Accr Gross Rec Tax-FY14 Accr Gross Rec Tax-FY15 Accr Gross Rec Tax-FY15 Accr Gross Rec Tax-FY15 Accr Gross Rec Tax-FY16	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	2,460 1,312 5,375 7,942 165,855 101,190 2,640 2,400 2,400 2,400 2,400 2,400 2,400
" Page Ref	Line Ref	Description  Intrent Liabilities (Itemize) Page 33 Line A12  Description  Acer Exp Other Acer Exp Water and Sewer Acer Exp Gas Acer Exp Electricity  Deferred Revenue Arc R-crid fross Up Liability Acer Gross Rec Tax-FY11 Acer Gross Rec Tax-FY11 Acer Gross Rec Tax-FY12 Acer Gross Rec Tax-FY14 Acer Gross Rec Tax-FY14 Acer Gross Rec Tax-FY15 Acer Gross Rec Tax-FY15 Acer Gross Rec Tax-FY16	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	2,460 1,312 5,375 7,942 165,855 101,190 2,640 2,400 2,400 2,400 2,400 2,400 2,400
2	Line Ref	Description  urrent Liabilities (Itemize) Page 33 Line A12  Description Accr Exp Other Accr Exp Other Accr Exp Gas Accr Exp Electricity Deferred Revenue Ale Credit Gross Up Liability Accr Gross Rec Tax-FY11 Accr Gross Rec Tax-FY11 Accr Gross Rec Tax-FY11 Accr Gross Rec Tax-FY13 Accr Gross Rec Tax-FY14 Accr Gross Rec Tax-FY14 Accr Gross Rec Tax-FY14 Accr Gross Rec Tax-FY15 Accr Gross Rec Tax-FY15 Accr Gross Rec Tax-FY15 Accr Gross Rec Tax-FY16	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	2,460 1,312 5,375 7,942 165,855 101,190 2,640 2,400 2,400 2,400 2,400 2,400 2,400
2 age Ref 2 age Ref 2 age Ref 3 age	Line Ref	Description  urrent Liabilities (Itemize) Page 33 Line A12  Description Accr Exp Other Accr Exp Uniter and Sewer Accr Exp Gas Acer Exp Electricity Deferred Revenue Alr Credit Gross Up Liability Accrued Provider Pad Tax Accr Gross Re Tax-FY11 Accr Gross Rec Tax-FY11 Accr Gross Rec Tax-FY13 Accr Gross Rec Tax-FY14 Accr Gross Rec Tax-FY14 Accr Gross Rec Tax-FY15 Accr Gross Rec Tax-FY15 Accr Gross Rec Tax-FY16 Accr Gross Rec Tax-FY17	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	2,460 1,312 5,375 7,942 165,855 101,190 2,640 2,400 2,400 2,400 2,400 2,400 2,400 4,200
Page Ref  Schedule of Schedule	Line Ref	Description  urrent Liabilities (Itemize) Page 33 Line A12  Description Acer Exp Other Acer Exp Other Acer Exp Gas Acer Exp Electricity Deferred Revenue AIR Credit Gross Up Liability Acered Provided Fiber Tax Acer Gross Rec Tax-FY11 Acer Gross Rec Tax-FY12 Acer Gross Rec Tax-FY13 Acer Gross Rec Tax-FY15 Acer Gross Rec Tax-FY15 Acer Gross Rec Tax-FY15 Acer Gross Rec Tax-FY16 Acer Gross Rec Tax-FY16 Acer Gross Rec Tax-FY17 Acer Gross Rec Tax-FY17 Acer Gross Rec Tax-FY18  Acer Gross Rec Tax-FY18	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	2,460 1,312 5,375 7,942 165,855 101,190 2,640 2,400 2,400 2,400 2,400 4,200 60
Page Ref  Schedule to Schedule	Line Ref    Separate   Content   Con	Description  urrent Liabilities (Itemize) Page 33 Line A12  Description Acer Exp Other Acer Exp Other Acer Exp Gas Acer Exp Electricity Deferred Revenue AR Credit Gross Up Liability Acerned Provider/Bed Tax Acer Gross Ree Tax-FY11 Acer Gross Ree Tax-FY11 Acer Gross Ree Tax-FY12 Acer Gross Ree Tax-FY14 Acer Gross Ree Tax-FY15 Acer Gross Ree Tax-FY16 Acer Gross Ree Tax-FY16 Acer Gross Ree Tax-FY16 Acer Gross Ree Tax-FY17 Acer Gross Ree Tax-FY18  Liabilities (Itemize)	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	2,460 1,312 5,375 7,942 165,855 101,190 2,640 2,400 2,400 2,400 2,400 2,400 2,400 4,200
Schedule of Schedu	Line Ref  ss Payable  ss Payable  for Other C  Line Ref  al 2d  a	Description  urrent Liabilities (Itemize) Page 33 Line A12  Description  Accr Exp Other  Accr Exp Uniter and Sewer  Accr Exp Gas  Accr Exp Electricity  Deferred Revenue  AR Credit Gross Up Liability  Accr Gross Rec Tax-FY11  Accr Gross Rec Tax-FY11  Accr Gross Rec Tax-FY11  Accr Gross Rec Tax-FY14  Accr Gross Rec Tax-FY15  Accr Gross Rec Tax-FY15  Accr Gross Rec Tax-FY16  Accr Gross Rec Tax-FY16  Accr Gross Rec Tax-FY17  Accr Gross Rec Tax-FY18  Accr Gross Rec Tax-FY18  Accr Gross Rec Tax-FY18  Accr Gross Rec Tax-FY18  Accr Gross Res Tax-FY18  Accr Gross Res Tax-FY18  Accr Gross Res Tax-FY18  Liabilities (Itemize)	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	2,460 1,312 5,375 7,942 165,855 101,190 2,640 2,400 2,400 2,400 2,400 4,200 60
Fotal Note  Schedule of Schedu	Line Ref  ss Payable  ss Payable  for Other C  Line Ref  al 2d  a	Description  urrent Liabilities (Itemize) Page 33 Line A12  Description Acer Exp Other Acer Exp Other Acer Exp Gas Acer Exp Electricity Deferred Revenue AR Credit Gross Up Liability Acerned Provider/Bed Tax Acer Gross Ree Tax-FY11 Acer Gross Ree Tax-FY11 Acer Gross Ree Tax-FY12 Acer Gross Ree Tax-FY14 Acer Gross Ree Tax-FY15 Acer Gross Ree Tax-FY16 Acer Gross Ree Tax-FY16 Acer Gross Ree Tax-FY16 Acer Gross Ree Tax-FY17 Acer Gross Ree Tax-FY18  Liabilities (Itemize)	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	2,460 1,312 5,375 7,942 165,855 101,190 2,640 2,400 2,400 2,400 2,400 4,200 60
chedule of age Ref 33 33 33 33 33 33 33 33 33 33 33 33 33	Line Ref  ss Payable  ss Payable  for Other C  Line Ref  al 2d  a	Description  urrent Liabilities (Itemize) Page 33 Line A12  Description  Accr Exp Other  Accr Exp Uniter and Sewer  Accr Exp Gas  Accr Exp Electricity  Deferred Revenue  AR Credit Gross Up Liability  Accr Gross Rec Tax-FY11  Accr Gross Rec Tax-FY11  Accr Gross Rec Tax-FY11  Accr Gross Rec Tax-FY14  Accr Gross Rec Tax-FY15  Accr Gross Rec Tax-FY15  Accr Gross Rec Tax-FY16  Accr Gross Rec Tax-FY16  Accr Gross Rec Tax-FY17  Accr Gross Rec Tax-FY18  Accr Gross Rec Tax-FY18  Accr Gross Rec Tax-FY18  Accr Gross Rec Tax-FY18  Accr Gross Res Tax-FY18  Accr Gross Res Tax-FY18  Accr Gross Res Tax-FY18  Liabilities (Itemize)	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	2,460 1,312 5,375 7,942 165,855 101,190 2,640 2,400 2,400 2,400 2,400 4,200 60
Page Ref  Cotal Note  Cage Ref  33  33  33  33  33  33  33  33  33	Line Ref    Separate   Content   Con	Description  urrent Liabilities (Itemize) Page 33 Line A12  Description  Accr Exp Other  Accr Exp Uniter and Sewer  Accr Exp Gas  Accr Exp Electricity  Deferred Revenue  AR Credit Gross Up Liability  Accr Gross Rec Tax-FY11  Accr Gross Rec Tax-FY11  Accr Gross Rec Tax-FY11  Accr Gross Rec Tax-FY14  Accr Gross Rec Tax-FY15  Accr Gross Rec Tax-FY15  Accr Gross Rec Tax-FY16  Accr Gross Rec Tax-FY16  Accr Gross Rec Tax-FY17  Accr Gross Rec Tax-FY18  Accr Gross Rec Tax-FY18  Accr Gross Rec Tax-FY18  Accr Gross Rec Tax-FY18  Accr Gross Res Tax-FY18  Accr Gross Res Tax-FY18  Accr Gross Res Tax-FY18  Liabilities (Itemize)	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	2,460 1,312 5,375 7,942 165,855 101,190 2,640 2,400 2,400 2,400 2,400 4,200 60

# G. Balance Sheet (cont'd)

	3		License No.	Report for Year Ended		Page	of
Harb	orsi	ide CT Limited Partnership - d/	2201-C	9/30/2019		32	37
			Account			Amount	
				Total Brought Forward	: \$	986	5,685
C.	Le	asehold or like property recorde	ed for Equity Purpose	S.			
	1.	Land			\$		
	2.	Land Improvements	*Historical Cost				
			Accum. Depreciation	n Net	\$		
	3.	Buildings	*Historical Cost				
			Accum. Depreciation	n Net	\$		
	4.	Non-Movable Equipment	*Historical Cost				
			Accum. Depreciation	n Net	\$		
	5.	Movable Equipment	*Historical Cost				
			Accum. Depreciation	n Net	\$		
	6.	Motor Vehicles	*Historical Cost				
			Accum. Depreciation	n Net	\$		
		Minor Equipment-Not Deprec			\$		
C-8		tal Leasehold or Like Properti	es (C1 thru 7)		\$		
D.	Inv	vestment and Other Assets					
	1.	Deferred Deposits			\$		
		Escrow Deposits			\$		
	3.	Organization Expense	*Historical Cost				
			Accum. Depreciation	n Net	\$		
	4.	( )			\$		
	5.	Investments Related to Reside	ent Care (temize)		\$		
				1			
	6.	Loans to Owners or Related P	arties (itemize)		\$		
		Name and Address	Amount	Loan Date			
-	7	Other Assets (itemize)	<u> </u>		\$	(2.207	7 205)
	7.	I/C Due to/Due From Own	ad	(2.207.205)	Φ	(3,297	·,493)
		I/C Due to/Due From Mult		(3,297,295)			
		See Schedule					
D 8	To	tal Investments and Other Ass		\$	(2.207	7 205)	
		tal All Assets (Lines A9 + B10			\$	(3,297	
レ-9.	10	em 110 110000 (Lilles A)   DIU	- Co - Do)		Φ	(2,310	<i>1</i> ,010)

<sup>\*</sup> 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 Fac			License No.	Report for Year	Ended	Page	of
Harborside C	CT Li	mited Partnership - d/b/a: M	2201-C	9/30/2019		33	37
			Account			Ar	nount
Liabilities							
A.	Cu	rrent Liabilities					
	1.	Trade Accounts Payable				\$	377,251
	2.	Notes Payable (itemize)				\$	
		See Schedule					
	3.	Loans Payable for Equipme	ent Current nortion	) (itemize )		\$	
	<i>J</i> .	Name of Lender	Purpose	Amount	Date Due	Ψ	
		Traine of Lender	1 urpose	Timount	Bute Bue		
	4.	Accrued Payroll (Exclusive	of Owners and/or S	tockholders only)		\$	137,733
	5.	Accrued Payroll (Owners a		only)		\$	
	6.	Accrued Payroll Taxes Pay				\$	(2,143)
	7.	Medicare Final Settlement				\$	
	8.	Medicare Current Financin	<u> </u>			\$	
	9.	Mortgage Payable (Current				\$	
		. Interest Payable (Exclusive	of Owner and/or Re	elated Parties)		\$	
		. Accrued Income Taxes*				\$	
	12.	. Other Current Liabilities (in	temize)			\$	305,434
A 12	<b>T</b>	tal Cumant Linkilitian /Lin	og A 1 them 12)	See Schedule	305,434	<u>ф</u>	010 275
A-13	. 10	tal Current Liabilities (Line	5 A1 ullu 12)		,	\$	818,275

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

(Carry Total forward to next page)

# G. Balance Sheet (cont'd)

	License No.	Report for Year Ended		Page	of
Harborside CT Limited Partnership - d/b/a: N	2201-C	9/30/2019		34	37
Account					unt
		Total Broug	ght Forward:		818,275
Liabilities (cont'd)					
B. Long-Term Liabilities					
1. Loans Payable-Equipment (i	temize)		\$		
Name of Lender	Purpose	Amount	Date Due		
2. Mortgages Payable					
3. Loans from Owners or Rela	ted Parties (itemize)		\$		
Name and Address of Lender	Amount	Loan D	ate		
			_		
			_		
			_		
			_		
			_		
			_		
			_		
			_		
			_		
4 Othor I T I: 1:1''	(itami-a)		\$		109,071
$\mathcal{E}$					109,071
LT Debt-Financing Obligation 103,760					
Escheatable Funds 5,311					
0 01 11					
See Schedule					100.071
B-5. Total Long-Term Liabilities (Lines B1 thru 4)			\$		109,071
C. Total All Liabilities (Lines A-13 + B-5)			\$		927,346

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

	License No. Report for Year Ended 9/30/2019	Page 35	of   37
1141	Account		ount
A.	Reserves		
	1. Reserve for value of leased land	\$	
	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.	Net Worth		
	1. Owner's Capital	\$	
	2. Capital Stock	\$	
	3. Paid-in Surplus	\$	
	4. Treasury Stock	\$	
	5. Cumulated Earnings	\$	(2,695,724)
	6. Gain or Loss for Period 10/1/2018 thru 9/30/2019	\$	(542,232)
	7. Total Net Worth	\$	(3,237,956)
C.	Total Reserves and Net Worth	\$	(3,237,956)
D.	Total Liabilities, Reserves, and Net Worth	\$	(2,310,610)

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

CSP-36 Rev. 6/95

# H. Changes in Total Net Worth

	e of Facility License No.	Report for Year	Ended	Page	of		
Harb	orside CT Limited Partnership - d/b 2201-C	9/30/2019		36	37		
Account					Amount		
A. Balance at End of Prior Period as shown on Report of 09/30/2018				\$	(3,366,606)		
B.	Total Revenue (From Statement of Revenue Page 30)			\$	7,658,482		
C.	Total Expenditures (From Statement of Expenditures	Page 27)		\$	7,529,832		
D.	Net Income or Deficit			\$	128,650		
E.	Balance			\$	(3,237,956)		
F.	Additions  1. Additional Capital Contributed (itemize)  2. Other (itemize)						
F-3. G.	Total Additions Deductions 1. Drawings of Owners/Operators/Partners (Specify)			\$			
	Name and Address (No., City, State, Zip)	Title	Amount	Þ			
		Titte		<b>\$</b>			
	Purpose	Amo	unt				
	3. Total Deductions			\$			
H.	Balance at End of Period 09/30	/19		\$	(3,237,956)		

# I. Preparer's/Reviewer's Certification

Name of Facility	*		Report for Year Ended	Page	of		
Harborside CT Limited Partnership - d/b/a:	2201-C		9/30/2019	37	37		
Check appropriate category							
Chronic and Convalescent Nursing Home only (CCNH)	Rest Home with Nursing Supervision only (RHNS)	□ (Specify)					
Preparer/Reviewer Certification							
I have prepared and reviewed this report and am familiar with the applicable regulations governing its preparation. have read the most recent Federal and State issued field audit reports for the Facility and have inquired of appropriate personnel as to the possible inclusion in this report of expenses which are not reimbursable under the applicable regulations. All non-reimbursable expenses of which I am aware (except those expenses known to be automatically removed in the State rate computation system) as a result of reading reports, inquiry or other services performed by me are properly reported as such in this report on Pages 28 and 29 (adjustments to statement of expenditures). Further, the data contained in this report is in agreement with the books and records, as provided to me, by the Facility.							
Signature of Preparer	Title		Date Signed				
Printed Name of Preparer							
Thomas Farnan							
Addres 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							