

|  |  |             |  |  |  |
|--|--|-------------|--|--|--|
|  |  | FOR BHF USE |  |  |  |
|  |  |             |  |  |  |
|  |  |             |  |  |  |
|  |  |             |  |  |  |

LL2

Supportive Living Facility

2020

STATE OF ILLINOIS

DEPARTMENT OF HEALTHCARE & FAMILY SERVICES

COST REPORT FOR

SUPPORTIVE LIVING FACILITIES

(FISCAL YEAR 2020)

IMPORTANT NOTICE

THIS AGENCY IS REQUESTING DISCLOSURE OF INFORMATION THAT IS NECESSARY TO ACCOMPLISH THE STATUTORY PURPOSE AS OUTLINED IN SECTION 146.265 OF THE 89 IL ADMIN CODE. DISCLOSURE OF THIS INFORMATION IS MANDATORY. FAILURE TO PROVIDE ANY INFORMATION ON OR BEFORE THE DUE DATE WILL RESULT IN CESSATION OF PROGRAM PAYMENTS.

I. Facility ID Number: 1000019

Facility Name: Symphony Resid Lincoln Park

Address: 2437 North Southport Chicago 60614

County: Cook

Telephone Number: ( 773 ) 472-8000 Fax # 773 935-0036

Federal Employer ID Number:

Date Current Owners were Certified: 11/21/2002

Type of Ownership:

VOLUNTARY, NON-PROFIT

Charitable Corp.

Trust

IRS Exemption Code

X PROPRIETARY

Individual

Partnership

Corporation

X "Sub-S" Corp.

Limited Liability Co.

Trust

Other

GOVERNMENTAL

State

County

Other

In the event there are further questions about this report, please contact:

Name: Amanda Springborn Telephone Number: ( 314 ) 925-3838

Email Address:

II. CERTIFICATION BY AUTHORIZED FACILITY OFFICER

I have examined the contents of the accompanying report to the State of Illinois, for the period from 01/01/20 to 12/31/2020 and certify to the best of my knowledge and belief that the said contents are true, accurate and complete statements in accordance with applicable instructions. Declaration of preparer (other than provider) is based on all information of which preparer has any knowledge.

Intentional misrepresentation or falsification of any information in this cost report may be punishable by fine and/or imprisonment.

Officer or Administrator of Provider

(Signed)

(Type or Print Name) Ari Krupp

(Title) Chief Financial Officer

Paid Preparer

(Signed)

(Print Name and Title)

(Firm Name & Address) RSM US LLP 20 N. Martingale Road, Ste. 500, Schaumburg, IL 60173

(Telephone) ( 847 ) 517-7070 Fax ( 847 ) 517-7067

MAIL TO: BUREAU OF HEALTH FINANCE

IL DEPT OF HEALTHCARE AND FAMILY SERVICES

201 S. Grand Avenue East

Springfield, IL 62763-0001

Phone # (217) 782-1630

HFS 3745C (N-4-05)

IL478-2471

III. STATISTICAL DATA

A. Certified units; enter number of units and unit days

Date of change in certified units N/A

|   | 1                                         | 2                     | 3                                | 4                                 |   |
|---|-------------------------------------------|-----------------------|----------------------------------|-----------------------------------|---|
|   | Units at<br>Beginning of<br>Report Period | Type of Apartment     | Units at End of<br>Report Period | Unit Days During<br>Report Period |   |
| 1 | 113                                       | Single Unit Apartment | 113                              | 41,358                            | 1 |
| 2 | 5                                         | Double Unit Apartment | 5                                | 1,830                             | 2 |
| 3 |                                           | Other                 |                                  |                                   | 3 |
| 4 | 118                                       | TOTALS                | 118                              | 43,188                            | 4 |

B. Census-For the entire report period.

|   | 1            | 2                                                   | 3           | 4     | 5      |   |
|---|--------------|-----------------------------------------------------|-------------|-------|--------|---|
|   | Type of Unit | Resident Days by Unit and Primary Source of Payment |             |       |        |   |
|   |              | Medicaid<br>Recipient                               | Private Pay | Other | Total  |   |
| 5 | Single Unit  | 27,438                                              | 3,455       | 5,357 | 36,250 | 5 |
| 6 | Double Unit  |                                                     |             |       |        | 6 |
| 7 | Other        |                                                     |             |       |        | 7 |
| 8 | TOTALS       | 27,438                                              | 3,455       | 5,357 | 36,250 | 8 |

C. Percent Occupancy. (Column 5, line 8 divided by total certified  
bed days on line 4, column 4.) 83.94%

D. Indicate the number of paid bed-hold days the SLF had during this year

None Also, indicate the number of unpaid bed-hold days the SLF  
had during this year. None (Do not include bed-hold days in Section B.)

E. Does page 3 include expenses for services or investments  
not directly related to SLF services?

YES ☐ NO ☒

F. Does the BALANCE SHEET reflect any non-SLF assets?

YES ☐ NO ☒

G. List all services provided by your facility for non-residents.  
(E.g., day care, "meals on wheels", outpatient therapy)

H. ACCOUNTING BASIS

ACCRUAL ☒ MODIFIED CASH\* ☐ CASH\* ☐

I. Is your fiscal year identical to your tax year? ☒ YES ☐ NO

Tax Year: 12/31/20 Fiscal Year: 12/31/20

\* All facilities other than governmental must report on the accrual basis.

J. Does the facility have any Illinois Housing Development Authority Loans  
outstanding? No If yes, did the facility make all of the  
required payments of interest and principal? N/A  
If no, explain. N/A

K. Does the facility have any loans from the Federal Home Loan Bank  
outstanding? No If yes, did the facility make all of the  
required payments of interest and principal? N/A  
If no, explain. N/A

L. Does the facility have any loans from the IL Dept of Commerce and  
Economic Opportunity outstanding? No If yes, did the facility  
make all of the required payments of interest and principal? N/A  
If no, explain. N/A

## STATE OF ILLINOIS

Page 3

Facility Name: Symphony Resid Lincoln Park

Report Period Beginning:

01/01/20

Ending:

12/31/2020

## IV. COST CENTER EXPENSES (please round to the nearest dollar)

| Operating Expenses |                                                               | Costs Per General Ledger |                |                  |                  | Reclassifications<br>and Adjustments | Adjusted<br>Total |           |
|--------------------|---------------------------------------------------------------|--------------------------|----------------|------------------|------------------|--------------------------------------|-------------------|-----------|
|                    |                                                               | Salary/Wage              | Supplies       | Other            | Total            |                                      |                   |           |
|                    | A. General Services                                           | 1                        | 2              | 3                | 4                | 5                                    | 6                 |           |
| 1                  | Dietary and Food Purchase                                     | 300,588                  | 297,875        | 1,662            | 600,125          | 623                                  | 600,748           | 1         |
| 2                  | Housekeeping, Laundry and Maintenance                         | 398,199                  | 4,023          | 110,627          | 512,849          | 2,228                                | 515,077           | 2         |
| 3                  | Heat and Other Utilities                                      |                          |                | 72,231           | 72,231           | 1,158                                | 73,389            | 3         |
| 4                  | Other (specify):                                              |                          |                |                  |                  | 165                                  | 165               | 4         |
| 5                  | <b>TOTAL General Services</b>                                 | <b>698,787</b>           | <b>301,898</b> | <b>184,520</b>   | <b>1,185,205</b> | <b>4,174</b>                         | <b>1,189,379</b>  | <b>5</b>  |
|                    | <b>B. Health Care and Programs</b>                            |                          |                |                  |                  |                                      |                   |           |
| 6                  | Health Care/ Personal Care                                    | 565,169                  | 15,143         | 67,955           | 648,267          | 97,137                               | 745,404           | 6         |
| 7                  | Activities and Social Services                                | 82,581                   |                | 9,721            | 92,302           |                                      | 92,302            | 7         |
| 8                  | Other (specify):                                              |                          |                |                  |                  | 27,914                               | 27,914            | 8         |
| 9                  | <b>TOTAL Health Care and Programs</b>                         | <b>647,750</b>           | <b>15,143</b>  | <b>77,676</b>    | <b>740,569</b>   | <b>125,051</b>                       | <b>865,620</b>    | <b>9</b>  |
|                    | <b>C. General Administration</b>                              |                          |                |                  |                  |                                      |                   |           |
| 10                 | Administrative and Clerical                                   | 272,638                  |                | 869,227          | 1,141,865        | (393,536)                            | 748,329           | 10        |
| 11                 | Marketing Materials, Promotions and Advertising               | 52,594                   |                | 73,127           | 125,721          | (125,721)                            |                   | 11        |
| 12                 | Employee Benefits and Payroll Taxes                           |                          |                | 231,113          | 231,113          |                                      | 231,113           | 12        |
| 13                 | Insurance-Property, Liability and Malpractice                 |                          |                | 77,103           | 77,103           | 828                                  | 77,931            | 13        |
| 14                 | Other (specify):                                              |                          |                |                  |                  | 19,455                               | 19,455            | 14        |
| 15                 | <b>TOTAL General Administration</b>                           | <b>325,232</b>           |                | <b>1,250,570</b> | <b>1,575,802</b> | <b>(498,974)</b>                     | <b>1,076,828</b>  | <b>15</b> |
| 16                 | <b>TOTAL Operating Expense<br/>(Sum of lines 5, 9 and 15)</b> | <b>1,671,769</b>         | <b>317,041</b> | <b>1,512,766</b> | <b>3,501,576</b> | <b>(369,749)</b>                     | <b>3,131,827</b>  | <b>16</b> |
|                    | <b>Capital Expenses</b>                                       |                          |                |                  |                  |                                      |                   |           |
|                    | <b>D. Ownership</b>                                           |                          |                |                  |                  |                                      |                   |           |
| 17                 | Depreciation                                                  |                          |                | 33,288           | 33,288           | 19,344                               | 52,632            | 17        |
| 18                 | Interest                                                      |                          |                | 750              | 750              | (727)                                | 23                | 18        |
| 19                 | Real Estate Taxes                                             |                          |                | 144,451          | 144,451          | 12,065                               | 156,516           | 19        |
| 20                 | Rent -- Facility and Grounds                                  |                          |                | 812,863          | 812,863          | 2,079                                | 814,942           | 20        |
| 21                 | Rent -- Equipment                                             |                          |                | 29,961           | 29,961           | 9,438                                | 39,399            | 21        |
| 22                 | Other (specify):                                              |                          |                |                  |                  |                                      |                   | 22        |
| 23                 | <b>TOTAL Ownership</b>                                        |                          |                | <b>1,021,313</b> | <b>1,021,313</b> | <b>42,199</b>                        | <b>1,063,512</b>  | <b>23</b> |
| 24                 | <b>GRAND TOTAL (Sum of lines 16 and 23)</b>                   | <b>1,671,769</b>         | <b>317,041</b> | <b>2,534,079</b> | <b>4,522,889</b> | <b>(327,550)</b>                     | <b>4,195,339</b>  | <b>24</b> |

Detail lines 29 and 35 of Page 5 starting in C12. DO NOT DRAG AND DROP CELLS.

The amounts in column F will transfer to the Adj. Summary column automatically.  
The amounts in the Adj. Summary column are linked to pages Summary A and B.

| STATE OF ILLINOIS        |                                          |             |    | Page 3A    |
|--------------------------|------------------------------------------|-------------|----|------------|
| The Ivy                  |                                          |             |    |            |
| Report Period Beginning: |                                          |             |    | 01/01/20   |
| Ending:                  |                                          |             |    | 12/31/2020 |
| Sch. V Line              |                                          |             |    |            |
| NON-ALLOWABLE EXPENSES   |                                          |             |    |            |
|                          | Amount                                   | Reference   |    |            |
| 1                        | Remove marketing salary                  | \$ (52,294) | 11 | 1          |
| 2                        | Marketing expense                        | (73,127)    | 11 | 2          |
| 3                        | Coffee Shop                              |             | 1  | 3          |
| 4                        | Purchase Discounts                       |             | 1  | 4          |
| 5                        | Incontinent Products                     |             | 6  | 5          |
| 6                        | Other revenue                            | (4,821)     | 10 | 6          |
| 7                        | Interest Income                          | (750)       | 18 | 7          |
| 8                        | Cable TV                                 | (7,126)     | 10 | 8          |
| 9                        | Penalties                                | (57,171)    | 10 | 9          |
| 10                       | Trust Overcharges                        | 0           | 10 | 10         |
| 11                       | Bad Debt Expense                         | (218,760)   | 10 | 11         |
| 12                       | Depreciation Straight Line               | 2,446       | 17 | 12         |
| 13                       | To adjust real estate taxes              | 9,025       | 19 | 13         |
| 14                       | To adjust Lease Tax-Admin                | (1,292)     | 10 | 14         |
| 15                       | To adjust Donations & Contributions-Admi | (6,200)     | 10 | 15         |
| 16                       |                                          |             |    | 16         |
| 17                       |                                          |             |    | 17         |
| 18                       | Maestro Allocation                       |             |    | 18         |
| 19                       | Dietary                                  | 623         | 1  | 19         |
| 20                       | Utilities                                | 1,158       | 3  | 20         |
| 21                       | Maintenance Expense                      | 2,393       | 2  | 21         |
| 22                       | Clinical Salaries                        | 97,044      | 6  | 22         |
| 23                       | Contract Nursing                         | 93          | 6  | 23         |
| 24                       | Employee Benefits Clinical               | 27,914      | 8  | 24         |
| 25                       | Management Fees                          | (234,130)   | 10 | 25         |
| 26                       | Professional Fees                        | 24,384      | 10 | 26         |
| 27                       | Diagn. Fees, Subscriptions, Etc.         | 4,468       | 10 | 27         |
| 28                       | Clerical & General Salaries              | 67,636      | 10 | 28         |
| 29                       | Clerical & General Expenses              | 33,055      | 10 | 29         |
| 30                       | Seminars & Educations                    | 245         | 10 | 30         |
| 31                       | Transportation                           | 4,466       | 10 | 31         |
| 32                       | Insurance                                | 828         | 13 | 32         |
| 33                       | Employee Benefits Administration         | 19,455      | 14 | 33         |
| 34                       | Depreciation                             | 16,898      | 17 | 34         |
| 35                       | Interest Expense                         | 23          | 18 | 35         |
| 36                       | Real Estate Tax                          | 3,040       | 19 | 36         |
| 37                       | Building Rental                          | 2,079       | 20 | 37         |
| 38                       | Equipment Rental                         | 5,991       | 21 | 38         |
| 39                       | Auto Lease                               | 3,447       | 21 | 39         |
| 40                       |                                          |             |    | 40         |
| 41                       |                                          |             |    | 41         |
| 42                       |                                          |             |    | 42         |
| 43                       |                                          |             |    | 43         |
| 44                       |                                          |             |    | 44         |
| 45                       |                                          |             |    | 45         |
| 46                       |                                          |             |    | 46         |
| 47                       |                                          |             |    | 47         |
| 48                       |                                          |             |    | 48         |
| 49                       |                                          |             |    | 49         |
| 50                       |                                          |             |    | 50         |
| 51                       |                                          |             |    | 51         |
| 52                       |                                          |             |    | 52         |
| 53                       |                                          |             |    | 53         |
| 54                       |                                          |             |    | 54         |
| 55                       |                                          |             |    | 55         |
| 56                       |                                          |             |    | 56         |
| 57                       |                                          |             |    | 57         |
| 58                       |                                          |             |    | 58         |
| 59                       |                                          |             |    | 59         |
| 60                       |                                          |             |    | 60         |
| 61                       |                                          |             |    | 61         |
| 62                       |                                          |             |    | 62         |
| 63                       |                                          |             |    | 63         |
| 64                       |                                          |             |    | 64         |
| 65                       |                                          |             |    | 65         |
| 66                       |                                          |             |    | 66         |
| 67                       |                                          |             |    | 67         |
| 68                       |                                          |             |    | 68         |
| 69                       |                                          |             |    | 69         |
| 70                       |                                          |             |    | 70         |
| 71                       |                                          |             |    | 71         |
| 72                       |                                          |             |    | 72         |
| 73                       |                                          |             |    | 73         |
| 74                       |                                          |             |    | 74         |
| 75                       |                                          |             |    | 75         |
| 76                       |                                          |             |    | 76         |
| 77                       |                                          |             |    | 77         |
| 78                       |                                          |             |    | 78         |
| 79                       |                                          |             |    | 79         |
| 80                       |                                          |             |    | 80         |
| 81                       |                                          |             |    | 81         |
| 82                       |                                          |             |    | 82         |
| 83                       |                                          |             |    | 83         |
| 84                       |                                          |             |    | 84         |
| 85                       |                                          |             |    | 85         |
| 86                       |                                          |             |    | 86         |
| 87                       |                                          |             |    | 87         |
| 88                       |                                          |             |    | 88         |
| 89                       |                                          |             |    | 89         |
| 90                       |                                          |             |    | 90         |
| 91                       |                                          |             |    | 91         |
| 92                       |                                          |             |    | 92         |
| 93                       |                                          |             |    | 93         |
| 94                       |                                          |             |    | 94         |
| 95                       |                                          |             |    | 95         |
| 96                       |                                          |             |    | 96         |
| 97                       |                                          |             |    | 97         |
| 98                       |                                          |             |    | 98         |
| 99                       |                                          |             |    | 99         |
| 100                      |                                          |             |    | 100        |
| 101                      | Total                                    | (327,550)   |    | 101        |

| Sch V   | Adj. Summary |
|---------|--------------|
| Line 1  | 0            |
| Line 2  | 0            |
| Line 3  | 0            |
| Line 4  | 0            |
| Line 5  | 0            |
| Line 6  | 0            |
| Line 7  | 0            |
| Line 8  | 0            |
| Line 9  | 0            |
| Line 10 | 0            |
| Line 11 | 0            |
| Line 12 | 0            |
| Line 13 | 0            |
| Line 14 | 0            |
| Line 15 | 0            |
| Line 16 | 0            |
| Line 17 | 0            |
| Line 18 | 0            |
| Line 19 | 0            |
| Line 20 | 0            |
| Line 21 | 0            |
| Line 22 | 0            |
| Line 23 | 0            |
| Line 24 | 0            |

Facility Name: Symphony Resid Lincoln Park

Report Period Beginning: 01/01/20 Ending: 12/31/2020

V. STAFFING AND SALARY COSTS (Please report each line separately.)

|    | Personnel                      | Number of FTE | Average Hourly Wage |    |
|----|--------------------------------|---------------|---------------------|----|
| 1  | Registered Nurses              | 1.26          | \$ 35.53            | 1  |
| 2  | Licensed Practical Nurses      | 3.61          | 30.53               | 2  |
| 3  | Certified Nurse Assistants     | 8.89          | 15.80               | 3  |
| 4  | Activity Director & Assistants | 2.67          | 16.07               | 4  |
| 5  | Social Service Workers         |               |                     | 5  |
| 6  | Head Cook                      |               |                     | 6  |
| 7  | Cook Helpers/Assistants        | 9.30          | 15.54               | 7  |
| 8  | Dishwashers                    |               |                     | 8  |
| 9  | Maintenance Workers            | 4.91          | 19.08               | 9  |
| 10 | Housekeepers                   | 6.88          | 17.52               | 10 |
| 11 | Laundry                        |               |                     | 11 |
| 12 | Managers                       |               |                     | 12 |
| 13 | Other Administrative           | 1.00          | 50.56               | 13 |
| 14 | Clerical                       | 4.42          | 19.86               | 14 |
| 15 | Marketing                      | 1.58          | 17.87               | 15 |
| 16 | Other                          |               |                     | 16 |
| 17 | Total (lines 1 thru 16)        | 44.52         | \$                  | 17 |

VII. RELATED ORGANIZATIONS

A. Enter below the names of all related organizations. Attach an additional schedule if necessary.

| RELATED SLF's & HEALTH CARE BUSINESSES |        |
|----------------------------------------|--------|
| Name 1                                 | City 2 |
| See Attached SCH 4A                    |        |
|                                        |        |
|                                        |        |
|                                        |        |

VI. (A) STATEMENT OF COMPENSATION AND OTHER PAYMENTS TO OWNERS, RELATIVES AND MEMBERS OF THE BOARD OF DIRECTORS.

|       | NAME and FUNCTION | Ownership Interest | Average Hours Per Work Week Devoted to this Business | Amount of Compensation for this Reporting Period |   |
|-------|-------------------|--------------------|------------------------------------------------------|--------------------------------------------------|---|
| 1     | N/A               |                    |                                                      | \$                                               | 1 |
| 2     |                   |                    |                                                      |                                                  | 2 |
| 3     |                   |                    |                                                      |                                                  | 3 |
| 4     |                   |                    |                                                      |                                                  | 4 |
| 5     |                   |                    |                                                      |                                                  | 5 |
| Total |                   |                    |                                                      | \$                                               | 6 |

VI. (B) Management fees paid to unrelated parties

|       | Amount of Fee |      |
|-------|---------------|------|
| 1     | \$            | 1    |
| 2     |               | 2    |
| Total |               | \$ 3 |

OTHER RELATED BUSINESS ENTITIES

| Name 3                      | City 4      | Type of Business 5 |
|-----------------------------|-------------|--------------------|
| Maestro Consulting Services | Lincolnwood | Bookkeeping        |
| 7257 N. Lincoln Ave.        | Lincolnwood | Building Rental    |
|                             |             |                    |
|                             |             |                    |

B. Does your facility receive services from a parent organization or home office; the costs for which were not included on page 3? YES ☐ NO ☒

Name of related entity: N/A If yes, what is the value of those services? \$ N/A

(Please attach a separate schedule itemizing those services.)

C. Does page 3 include any costs derived from transactions (including rent) with related parties? YES ☒ NO ☐

If so, please attach a separate schedule detailing the nature of those services, their costs as they appear on your books and the underlying cost to the related party (i.e., not including markup).

**The IVY**  
**12/31/2020**  
**Schedule 4A**

| VII. A                                                                   |                 |
|--------------------------------------------------------------------------|-----------------|
| <u>Related Organizations: Related SLF's &amp; Health Care Businesses</u> | <u>City</u>     |
| Symphony of California Gardens                                           | Chicago         |
| Maplecrest Care Center                                                   | Belvidere       |
| Northwoods Care Center                                                   | Belvidere       |
| Symcare Village                                                          | Swansea         |
| Symphony Aria                                                            | Hillside        |
| Symphony At 87th Street                                                  | Chicago         |
| Symphony At Midway                                                       | Chicago         |
| Symphony At The Tillers                                                  | Oswego          |
| Symphony Of Bronzeville                                                  | Chicago         |
| Symphony of Buffalo Grove                                                | Buffalo Grove   |
| Symphony of Chesterton                                                   | Chesterton, IN  |
| Symphony of Chicago West                                                 | Chicago         |
| Symphony of Crestwood                                                    | Crestwood       |
| Symphony of Crown Point                                                  | Crown Point, IN |
| Symphony of Dyer                                                         | Dyer, IN        |
| Symphony of Evanston                                                     | Evanston        |
| Symphony of Glendale                                                     | Gelendale, WI   |
| Symphony of Joliet                                                       | Joliet          |
| Symphony of Lincoln Park                                                 | Chicago         |
| Symphony of Morgan Park                                                  | Chicago         |
| Symphony of Orchard Valley                                               | Aurora          |
| Symphony of South Shore                                                  | Chicago         |
| Symphony of Hanover Park                                                 | Hanover Park    |
| Woodcare V Inc.                                                          | Brighton, MI    |
| Cliffside Company LLC                                                    | St. Joseph, MI  |
| Symphony Applewood                                                       | Woodhaven, MI   |
| Symphony Linden                                                          | Linden, MI      |
| Symphony Tri-Cities                                                      | Bay City, MI    |

Facility Name: Symphony Resid Lincoln Park

Report Period Beginning:

01/01/20

Ending:

12/31/2020

VIII. OWNERSHIP COSTS

A. Purchase price of land 4,919 Year land was acquired 2004

B. Building Depreciation -- Including Fixed Equipment. Round all numbers to the nearest dollar. \*Total units on this schedule must agree with page 2.

|    | 1<br>Units*                      | FOR BHF USE ONLY | 2<br>Year<br>Acquired | 3<br>Year<br>Constructed | 4<br>Cost  | 5<br>Current Book<br>Depreciation | 6<br>Life<br>in Years | 7<br>Straight Line<br>Depreciation | 8<br>Adjustments | 9<br>Accumulated<br>Depreciation |    |
|----|----------------------------------|------------------|-----------------------|--------------------------|------------|-----------------------------------|-----------------------|------------------------------------|------------------|----------------------------------|----|
| 1  |                                  |                  |                       |                          | \$         | \$                                |                       | \$                                 | \$               | \$                               | 1  |
| 2  | Allocated from 7257              |                  |                       | 2004                     | 44,268     |                                   | 35                    | 1,265                              | 1,265            | 21,660                           | 2  |
| 3  |                                  |                  |                       |                          |            |                                   |                       |                                    |                  |                                  | 3  |
| 4  |                                  |                  |                       |                          |            |                                   |                       |                                    |                  |                                  | 4  |
| 5  |                                  |                  |                       |                          |            |                                   |                       |                                    |                  |                                  | 5  |
|    | Improvement Type                 |                  |                       |                          |            |                                   |                       |                                    |                  |                                  |    |
| 6  | Various                          |                  |                       | 1994                     | 5,181      |                                   | 20                    |                                    |                  | 5,181                            | 6  |
| 7  | Various                          |                  |                       | 1995                     | 17,463     |                                   | 20                    |                                    |                  | 17,463                           | 7  |
| 8  | Various                          |                  |                       | 1996                     | 20,188     |                                   | 20                    |                                    |                  | 20,188                           | 8  |
| 9  | Various                          |                  |                       | 1997                     | 13,006     |                                   | 20                    |                                    |                  | 13,006                           | 9  |
| 10 | Various                          |                  |                       | 1998                     | 4,476      |                                   | 20                    |                                    |                  | 4,476                            | 10 |
| 11 | Various                          |                  |                       | 1999                     | 52,138     |                                   | 20                    |                                    |                  | 52,138                           | 11 |
| 12 | Various                          |                  |                       | 2001                     | 40,555     |                                   | 20                    | 2,028                              | 2,028            | 39,544                           | 12 |
| 13 | Various                          |                  |                       | 2002                     | 30,820     |                                   | 20                    | 1,541                              | 1,541            | 28,597                           | 13 |
| 14 | Various                          |                  |                       | 2003                     | 10,154     |                                   | 20                    | 508                                | 508              | 8,887                            | 14 |
| 15 | Various                          |                  |                       | 2004                     | 33,240     |                                   | 20                    | 1,662                              | 1,662            | 27,425                           | 15 |
| 16 | Total from supplemental Page 5's |                  |                       |                          | 505,486    | 27,972                            |                       | 27,302                             | (670)            | 128,591                          | 16 |
| 17 | TOTAL (lines 1 thru 16)          |                  |                       |                          | \$ 776,975 | \$ 27,972                         |                       | \$ 34,306                          | \$ 6,334         | \$ 367,156                       | 17 |

C. Equipment Depreciation -- Including Transportation.

|    | Type                    | 1<br>Cost  | 2<br>Current Book<br>Depreciation | 3<br>Straight Line<br>Depreciation | 4<br>Adjustments | 5<br>Life<br>in Years | 6<br>Accumulated<br>Depreciation |    |
|----|-------------------------|------------|-----------------------------------|------------------------------------|------------------|-----------------------|----------------------------------|----|
| 18 | Movable Equipment       | \$ 163,801 | \$ 5,316                          | \$ 18,326                          | 13,010           |                       | \$ 73,200                        | 18 |
| 19 | Vehicles                | 272        |                                   |                                    |                  |                       | 272                              | 19 |
| 20 | TOTAL (lines 18 and 19) |            | \$ 5,316                          | \$ 18,326                          | 13,010           |                       | \$ 73,472                        | 20 |

D. Depreciable Non-Care Assets Included in General Ledger.

|    | 1<br>Description and Year Acquired | 2<br>Cost | 3<br>Current Book<br>Depreciation | 4<br>Accumulated<br>Depreciation |    |
|----|------------------------------------|-----------|-----------------------------------|----------------------------------|----|
| 21 | N/A                                | \$        | \$                                | \$                               | 21 |
| 22 |                                    |           |                                   |                                  | 22 |
| 23 |                                    |           |                                   |                                  | 23 |
| 24 | TOTALS (lines 21, 22 and 23)       |           | \$                                | \$                               | 24 |

**XI. OWNERSHIP COSTS (continued)**

**B. Building and Improvement Costs-Including Fixed Equipment. (See instructions.) Round all numbers to nearest dollar.**

| 1  | 2                                                                        | 3                | 4          | 5                         | 6             | 7                          | 8           | 9                        | 10 |
|----|--------------------------------------------------------------------------|------------------|------------|---------------------------|---------------|----------------------------|-------------|--------------------------|----|
|    | Improvement Type**                                                       | Year Constructed | Cost       | Current Book Depreciation | Life in Years | Straight Line Depreciation | Adjustments | Accumulated Depreciation |    |
| 1  | <b>Totals from Page 5, Carried Forward</b>                               |                  | \$         | \$                        |               | \$                         | \$          | \$                       | 1  |
| 2  | <a href="#">Installation Of Wireless Internet System</a>                 | 2010             | 7,681      |                           | 20            | 384                        | 384         | 4,032                    | 2  |
| 3  | <a href="#">Cabinets For Dining Room</a>                                 | 2010             | 4,660      |                           | 20            | 233                        | 233         | 2,447                    | 3  |
| 4  | <a href="#">Remove Wallpaper &amp; Paint</a>                             | 2010             | 4,650      |                           | 20            | 233                        | 233         | 2,445                    | 4  |
| 5  | <a href="#">Add Hand-Held Transmitters</a>                               | 2010             | 2,405      |                           | 20            | 120                        | 120         | 1,261                    | 5  |
| 6  | <a href="#">Install Granite Counter Tops</a>                             | 2010             | 1,812      |                           | 20            | 91                         | 91          | 954                      | 6  |
| 7  | <a href="#">Install Pantry, Cabinets &amp; Counter Tops In Kitchen</a>   | 2011             | 7,016      |                           | 20            | 351                        | 351         | 3,333                    | 7  |
| 8  | <a href="#">New Granite For Front Lobby Desk</a>                         | 2011             | 2,350      |                           | 20            | 118                        | 118         | 1,120                    | 8  |
| 9  | <a href="#">Beauty Shop Counter Tops, Cabinets, Flooring</a>             | 2011             | 13,105     |                           | 20            | 655                        | 655         | 6,224                    | 9  |
| 10 | <a href="#">Install Wireless Emergency Call System - Nurses' Station</a> | 2012             | 4,913      |                           | 20            | 246                        | 246         | 2,090                    | 10 |
| 11 | <a href="#">Elevator 4-South Car: Brake, Drop Ceiling, Generator</a>     | 2012             | 83,272     |                           | 20            | 4,164                      | 4,164       | 35,393                   | 11 |
| 12 | <a href="#">Paint 1St Flr Hallway,Lobby,Offices,Rear Parking Lot</a>     | 2013             | 4,161      |                           | 20            | 208                        | 208         | 1,560                    | 12 |
| 13 | <a href="#">Carpet Dining Room</a>                                       | 2013             | 14,520     |                           | 20            | 726                        | 726         | 5,445                    | 13 |
| 14 | <a href="#">Sealcoat &amp; Restripe Parking Lot</a>                      | 2013             | 4,500      |                           | 20            | 225                        | 225         | 1,688                    | 14 |
| 15 | <a href="#">Test &amp; Install New Brakes On Elevator #5</a>             | 2013             | 5,155      |                           | 20            | 258                        | 258         | 1,935                    | 15 |
| 16 | <a href="#">Replace Rectifier Board In Elevators 4 &amp; 5</a>           | 2014             | 4,610      |                           | 20            | 231                        | 231         | 1,498                    | 16 |
| 17 | <a href="#">Install 20 Metal Window Covers - Stairway</a>                | 2014             | 2,550      |                           | 20            | 128                        | 128         | 829                      | 17 |
| 18 | <a href="#">Wifi Cabling Project</a>                                     | 2015             | 20,056     |                           | 20            | 1,003                      | 1,003       | 6,017                    | 18 |
| 19 | <a href="#">1 Ton Minisplit System In Computer Room On 6Th Fl</a>        | 2015             | 3,525      |                           | 20            | 176                        | 176         | 1,058                    | 19 |
| 20 | <a href="#">2Nd/4Th Floor Corridor Carpet</a>                            | 2017             | 19,184     |                           | 20            | 959                        | 959         | 3,837                    | 20 |
| 21 | <a href="#">Phone System</a>                                             | 2017             | 6,419      |                           | 20            | 321                        | 321         | 1,284                    | 21 |
| 22 | <a href="#">Painting and wallpaper 2nd and 4th floor hallways</a>        | 2018             | 20,687     |                           | 20            | 1,591                      | 1,591       | 4,385                    | 22 |
| 23 | <a href="#">2 Elevator Door Restrictor</a>                               | 2018             | 6,890      |                           | 20            | 1,378                      | 1,378       | 4,678                    | 23 |
| 24 | <a href="#">New down spouts-6 inch galvanized 4 down spouts</a>          | 2019             | 4,200      |                           | 20            | 210                        | 210         | 434                      | 24 |
| 25 | <a href="#">Carpeting</a>                                                | 2019             | 3,572      |                           | 20            | 179                        | 179         | 299                      | 25 |
| 26 | <a href="#">Elevator Modernization</a>                                   | 2019             | 163,740    |                           | 20            | 8,187                      | 8,187       | 11,006                   | 26 |
| 27 |                                                                          |                  |            |                           |               |                            |             |                          | 27 |
| 28 | <a href="#">Fire Alarm System</a>                                        | 2019             | 14,911     |                           | 20            | 746                        | 746         | 990                      | 28 |
| 29 |                                                                          |                  |            |                           |               |                            |             |                          | 29 |
| 30 | <a href="#">Boiler Pipe-Flue pipe 22 inches on boiler #3.</a>            | 2019             | 2,950      |                           | 20            | 148                        | 148         | 159                      | 30 |
| 31 |                                                                          |                  |            |                           |               |                            |             |                          | 31 |
| 32 | <a href="#">Tie to financials</a>                                        |                  |            | 25,384                    |               |                            | (25,384)    |                          | 32 |
| 33 |                                                                          |                  |            |                           |               |                            |             |                          | 33 |
| 34 | <b>TOTAL (lines 1 thru 33)</b>                                           |                  | \$ 433,493 | \$ 25,384                 |               | \$ 23,268                  | \$ (2,116)  | \$ 106,401               | 34 |

\*\*Improvement type must be detailed in order for the cost report to be considered complete.

XI. OWNERSHIP COSTS (continued)
 

B. Building and Improvement Costs-Including Fixed Equipment. (See instructions.) Round all numbers to nearest dollar.

| 1  | Improvement Type**                            | 3<br>Year<br>Constructed | 4<br>Cost  | 5<br>Current Book<br>Depreciation | 6<br>Life<br>in Years | 7<br>Straight Line<br>Depreciation | 8<br>Adjustments | 9<br>Accumulated<br>Depreciation |    |
|----|-----------------------------------------------|--------------------------|------------|-----------------------------------|-----------------------|------------------------------------|------------------|----------------------------------|----|
| 1  | Totals from Page 5A, Carried Forward          |                          | \$ 433,493 | \$ 25,384                         |                       | \$ 23,268                          | \$ (2,116)       | \$ 106,401                       | 1  |
| 2  | Fire alarm system                             | 2020                     | 11,803     | 727                               | 20                    | 727                                |                  | 727                              | 2  |
| 3  | Elevator Modernization                        | 2020                     | 27,290     | 1,715                             | 20                    | 1,715                              |                  | 1,715                            | 3  |
| 4  | Suburban Elevator ladders, guards             | 2020                     | 2,900      | 146                               | 20                    | 146                                |                  | 146                              | 4  |
| 5  |                                               |                          |            |                                   |                       |                                    |                  |                                  | 5  |
| 6  |                                               |                          |            |                                   |                       |                                    |                  |                                  | 6  |
| 7  |                                               |                          |            |                                   |                       |                                    |                  |                                  | 7  |
| 8  |                                               |                          |            |                                   |                       |                                    |                  |                                  | 8  |
| 9  |                                               |                          |            |                                   |                       |                                    |                  |                                  | 9  |
| 10 |                                               |                          |            |                                   |                       |                                    |                  |                                  | 10 |
| 11 |                                               |                          |            |                                   |                       |                                    |                  |                                  | 11 |
| 12 |                                               |                          |            |                                   |                       |                                    |                  |                                  | 12 |
| 13 |                                               |                          |            |                                   |                       |                                    |                  |                                  | 13 |
| 14 |                                               |                          |            |                                   |                       |                                    |                  |                                  | 14 |
| 15 |                                               |                          |            |                                   |                       |                                    |                  |                                  | 15 |
| 16 | Allocated from Maestro Consulting Services    | 2003                     | 360        |                                   | 20                    | 18                                 | 18               | 308                              | 16 |
| 17 | Allocated from Maestro Consulting Services    | 2004                     | 7,311      |                                   | 20                    | 365                                | 365              | 6,111                            | 17 |
| 18 | Allocated from Maestro Consulting Services    | 2005                     | 433        |                                   | 20                    | 22                                 | 22               | 344                              | 18 |
| 19 | Allocated from Maestro Consulting Services    | 2006                     | 588        |                                   | 20                    | 29                                 | 29               | 422                              | 19 |
| 20 | Allocated from Maestro Consulting Services    | 2008                     | 619        |                                   | 20                    | 31                                 | 31               | 380                              | 20 |
| 21 | Allocated from Maestro Consulting Services    | 2009                     | 9,973      |                                   | 20                    | 499                                | 499              | 5,789                            | 21 |
| 22 | Allocated from Maestro Consulting Services    | 2010                     | 1,533      |                                   | 20                    | 76                                 | 76               | 805                              | 22 |
| 23 | Allocated from Maestro Consulting Services    | 2011                     | 83         |                                   | 20                    | 4                                  | 4                | 42                               | 23 |
| 24 | Allocated from Maestro Consulting Services    | 2012                     | 92         |                                   | 20                    | 5                                  | 5                | 40                               | 24 |
| 25 | Allocated from Maestro Consulting Services    | 2014                     | 1,153      |                                   | 20                    | 58                                 | 58               | 381                              | 25 |
| 26 | Allocated from Maestro Consulting Services    | 2015                     | 324        |                                   | 20                    | 16                                 | 16               | 86                               | 26 |
| 27 | Allocated from Maestro Consulting Services    | 2016                     | 1,421      |                                   | 20                    | 71                                 | 71               | 481                              | 27 |
| 28 | Allocated from Maestro Consulting Services    | 2017                     | 190        |                                   | 20                    | 9                                  | 9                | 38                               | 28 |
| 29 | Allocated from Maestro Consulting Services    | 2020                     | 307        |                                   | 20                    | 8                                  | 8                | 8                                | 29 |
| 30 |                                               |                          |            |                                   |                       |                                    |                  |                                  | 30 |
| 31 | Allocated from 7257 N. Lincoln Avenue-Maestro | 2015                     | 698        |                                   | 20                    | 47                                 | 47               | 248                              | 31 |
| 32 | Allocated from 7257 N. Lincoln Avenue-Maestro | 2005                     | 4,035      |                                   | 20                    | 145                                | 145              | 3,393                            | 32 |
| 33 | Allocated from 7257 N. Lincoln Avenue-Maestro | 2004                     | 880        |                                   | 20                    | 43                                 | 43               | 726                              | 33 |
| 34 | TOTAL (lines 1 thru 33)                       |                          | \$ 505,486 | \$ 27,972                         |                       | \$ 27,302                          | \$ (670)         | \$ 128,591                       | 34 |

\*\*Improvement type must be detailed in order for the cost report to be considered complete.

Facility Name: Symphony Resid Lincoln Park

Report Period Beginning: 01/01/20

Ending: 2/31/2020

IX. RENTAL COSTS

A. Building and Fixed Equipment

1. Name of Party Holding Lease: Invesque

2. Does the facility also pay real estate taxes in addition to rental amount shown below on line 7, column 4?

☒ YES ☐ NO

|   |                                   | 1<br>Year<br>Constructed | 2<br>Number<br>of Units | 3<br>Date of<br>Lease | 4<br>Rental<br>Amount | 5<br>Total Yrs.<br>of Lease | 6<br>Total Years<br>Renewal Option* |   |
|---|-----------------------------------|--------------------------|-------------------------|-----------------------|-----------------------|-----------------------------|-------------------------------------|---|
| 3 | Original Building                 |                          | 120                     | / /                   | \$ 812,863            | 15                          | 15                                  | 3 |
| 4 | Additions                         |                          |                         | / /                   |                       |                             |                                     | 4 |
| 5 |                                   |                          |                         | / /                   |                       |                             |                                     | 5 |
| 6 | Allocated from Maestro Consulting |                          |                         | / /                   | 2,079                 |                             |                                     | 6 |
| 7 | TOTAL                             |                          | 120                     |                       | \$ 814,942            |                             |                                     | 7 |

8. Is movable equipment rental included in building rental?

☐ YES ☒ NO

9. Rental amount for movable equipment \$ 35,952

10. If the facility rents any vehicles which are used for care-related purposes, please attach a schedule detailing the model year and make, the rental expense for this period and the use of the vehicle.

X. INTEREST EXPENSE

| 1  |                              | 2         |    | 3                 | 4            | 6              |          | 7             | 8                        | 9                             |    |
|----|------------------------------|-----------|----|-------------------|--------------|----------------|----------|---------------|--------------------------|-------------------------------|----|
|    | Name of Lender               | Related** |    | Purpose of Loan   | Date of Note | Amount of Note |          | Maturity Date | Interest Rate (4 Digits) | Reporting Period Int. Expense |    |
|    |                              | YES       | NO |                   |              | Original       | Balance  |               |                          |                               |    |
|    | A. Directly Facility Related |           |    |                   |              |                |          |               |                          |                               |    |
|    | Long-Term                    |           |    |                   |              |                |          |               |                          |                               |    |
| 1  | LifeMed                      | X         |    | Pharmacy Services | 1/1/18       | \$ 6,197,033   | \$ 7,868 | 1/1/24        | 0.0750                   | \$ 668                        | 1  |
| 2  | Omnicare                     |           | X  | Pharmacy Services | 11/27/17     | 2,170,337      |          | 10/20/20      | 0.0750                   | 4                             | 2  |
| 3  |                              |           |    |                   | / /          |                |          | / /           |                          |                               | 3  |
|    | Working Capital              |           |    |                   |              |                |          |               |                          |                               |    |
| 4  | Allocated from Maestro       |           |    |                   | / /          |                |          | / /           |                          | 23                            | 4  |
| 5  |                              |           |    |                   | / /          |                |          | / /           |                          |                               | 5  |
| 6  |                              |           |    |                   | / /          |                |          | / /           |                          |                               | 6  |
| 7  | TOTAL Facility Related       |           |    |                   |              | \$ 8,367,370   | \$ 7,868 |               |                          | \$ 695                        | 7  |
|    | B. Non-Facility Related      |           |    |                   |              |                |          |               |                          |                               |    |
| 8  | Cyber Ins                    |           |    |                   | / /          |                |          | / /           |                          | 78                            | 8  |
| 9  | Offset Interest Income       |           |    |                   | / /          |                |          | / /           |                          | -750                          | 9  |
| 10 | TOTALS (lines 7, 8 and 9)    |           |    |                   |              | \$ 8,367,370   | \$ 7,868 |               |                          | \$ 23                         | 10 |

\* If there is an option to buy the building, please provide complete details on an attached schedule.

\*\* If there is any overlap in ownership between the facility and the lender, this must be indicated in column 2.

## STATE OF ILLINOIS

Page 7

Facility Name: **Symphony Resid Lincoln Park**Report Period Beginning: **01/01/20**Ending: **12/31/2020****XI. BALANCE SHEET - Unrestricted Operating Fund.**As of **12/31/2020**

(last day of reporting year)

|    |                                                                                    | 1<br>Operating | 2<br>After<br>Consolidation* |    |
|----|------------------------------------------------------------------------------------|----------------|------------------------------|----|
|    | <b>A. Current Assets</b>                                                           |                |                              |    |
| 1  | Cash on Hand and in Banks                                                          | \$ 33,833      | \$ 33,833                    | 1  |
| 2  | Cash-Patient Deposits                                                              |                |                              | 2  |
| 3  | Accounts & Short-Term Notes Receivable-Patients (less allowance <u>1,223,898</u> ) | 538,711        | 538,711                      | 3  |
| 4  | Supply Inventory (priced at )                                                      |                |                              | 4  |
| 5  | Short-Term Investments                                                             |                |                              | 5  |
| 6  | Prepaid Insurance                                                                  | 3,078          | 3,078                        | 6  |
| 7  | Other Prepaid Expenses                                                             | 9,020          | 9,020                        | 7  |
| 8  | Accounts Receivable (owners or related parties)                                    |                |                              | 8  |
| 9  | Other(specify):                                                                    |                |                              | 9  |
| 10 | <b>TOTAL Current Assets</b><br>(sum of lines 1 thru 9)                             | \$ 584,642     | \$ 584,642                   | 10 |
|    | <b>B. Long-Term Assets</b>                                                         |                |                              |    |
| 11 | Long-Term Notes Receivable                                                         |                |                              | 11 |
| 12 | Long-Term Investments                                                              |                |                              | 12 |
| 13 | Land                                                                               |                | 4,919                        | 13 |
| 14 | Buildings, at Historical Cost                                                      |                | 44,268                       | 14 |
| 15 | Leasehold Improvements, at Historical Cost                                         | 421,493        | 732,707                      | 15 |
| 16 | Equipment, at Historical Cost                                                      | 28,056         | 164,073                      | 16 |
| 17 | Accumulated Depreciation (book methods)                                            | (65,555)       | (440,628)                    | 17 |
| 18 | Deferred Charges                                                                   |                |                              | 18 |
| 19 | Organization & Pre-Operating Costs                                                 |                |                              | 19 |
| 20 | Accumulated Amortization -<br>Organization & Pre-Operating Costs                   |                |                              | 20 |
| 21 | Restricted Funds                                                                   |                |                              | 21 |
| 22 | Other Long-Term Assets (specify):                                                  |                |                              | 22 |
| 23 | Other(specify): <u>See Sch 7A</u>                                                  | 3,941,165      | 3,941,165                    | 23 |
| 24 | <b>TOTAL Long-Term Assets</b><br>(sum of lines 11 thru 23)                         | \$ 4,325,159   | \$ 4,446,504                 | 24 |
| 25 | <b>TOTAL ASSETS</b><br>(sum of lines 10 and 24)                                    | \$ 4,909,801   | \$ 5,031,146                 | 25 |

|    |                                                                 | 1<br>Operating | 2<br>After<br>Consolidation* |    |
|----|-----------------------------------------------------------------|----------------|------------------------------|----|
|    | <b>C. Current Liabilities</b>                                   |                |                              |    |
| 26 | Accounts Payable                                                | \$ 33,625      | \$ 33,625                    | 26 |
| 27 | Officer's Accounts Payable                                      |                |                              | 27 |
| 28 | Accounts Payable-Patient Deposits                               |                |                              | 28 |
| 29 | Short-Term Notes Payable                                        | 7,868          | 7,868                        | 29 |
| 30 | Accrued Salaries Payable                                        |                |                              | 30 |
| 31 | Accrued Taxes Payable                                           | 62,230         | 62,230                       | 31 |
| 32 | Accrued Interest Payable                                        |                |                              | 32 |
| 33 | Deferred Compensation                                           |                |                              | 33 |
| 34 | Federal and State Income Taxes                                  |                |                              | 34 |
|    | <b>Other Current Liabilities(specify):</b>                      |                |                              |    |
| 35 | <u>See Sch 7A</u>                                               | 711,604        | 736,349                      | 35 |
| 36 |                                                                 |                |                              | 36 |
| 37 | <b>TOTAL Current Liabilities</b><br>(sum of lines 26 thru 36)   | \$ 815,327     | \$ 840,072                   | 37 |
|    | <b>D. Long-Term Liabilities</b>                                 |                |                              |    |
| 38 | Long-Term Notes Payable                                         |                |                              | 38 |
| 39 | Mortgage Payable                                                |                |                              | 39 |
| 40 | Bonds Payable                                                   |                |                              | 40 |
| 41 | Deferred Compensation                                           |                |                              | 41 |
|    | <b>Other Long-Term Liabilities(specify):</b>                    |                |                              |    |
| 42 | <u>See Sch 7A</u>                                               | 3,095,213      | 3,095,213                    | 42 |
| 43 |                                                                 |                |                              | 43 |
| 44 | <b>TOTAL Long-Term Liabilities</b><br>(sum of lines 38 thru 43) | \$ 3,095,213   | \$ 3,095,213                 | 44 |
| 45 | <b>TOTAL LIABILITIES</b><br>(sum of lines 37 and 44)            | \$ 3,910,540   | \$ 3,935,285                 | 45 |
| 46 | <b>TOTAL EQUITY</b>                                             | \$ 999,261     | \$ 1,095,861                 | 46 |
| 47 | <b>TOTAL LIABILITIES AND EQUITY</b><br>(sum of lines 45 and 46) | \$ 4,909,801   | \$ 5,031,146                 | 47 |

\*(See instructions.)

Schedule 7A

XI. Balance Sheet  
B. Long-Term Assets  
Line 23: Other long-term assets

| Description                                       | Operating |
|---------------------------------------------------|-----------|
| 118000 SIL Fixed Assets - Construction in Process | 19,683    |
| 127015 SIL Due to/From - Symcare ML               | 3,830,280 |
| 128002 SIL Due To/From - Maestro                  | 24,937    |
| 129110 SIL Due To/From - Ivy - OLD                | 66,265    |
|                                                   |           |
|                                                   | 3,941,165 |

XI. Balance Sheet  
C. Current Liabilities  
Line 35: Other current Liabilities

| Description                                             | Operating |
|---------------------------------------------------------|-----------|
| 200101 SIL Accrued Payables - Professional Fees         | 24,217    |
| 200120 SIL Accrued Payables - Health Insurance          | 17,430    |
| 200121 SIL Accrued Payable - Dental Insurance           | (204)     |
| 200122 SIL Accrued Payables - Vision Insurance          | (20)      |
| 200123 SIL Accrued Payables - Life Insurance            | 4,615     |
| 200124 SIL Accrued Payables - Short Term Disability     | (5,221)   |
| 200200 SIL Accrued Payables - Payroll                   | 15,818    |
| 200210 SIL Accrued Payables - Vacation Benefits         | 78,679    |
| 200290 SIL Accrued Payables - 401K Deductions           | 1,269     |
| 200291 SIL Accrued Payables - 401K Loan Repayments      | (108)     |
| 200295 SIL Accrued Payables - Heart and Soul Foundation | (1)       |
| 200350 SIL Fringe Benefits - Flow Through               | 473       |
| 200600 SIL Accrued Payables - Management Fees           | (1,239)   |
| 200700 SIL Accrued Payables - RE Taxes                  | 128,731   |
| 200900 SIL Accrued Payables - Rent                      | (19,375)  |
| 200950 SIL Accrued Payables - Sales Tax                 | 187       |
| 201000 SIL Accrued Payables - Resident Trust            | 31,832    |
| 202000 SIL Deferred Rent                                | 454,441   |
| 202100 SIL Deferred Income                              | (19,920)  |
|                                                         |           |
|                                                         | 711,604   |

XI. Balance Sheet  
C. Other Long- Term Liabilities  
Line 42: Other Long term Liabilities

| Description                                          | Operating |
|------------------------------------------------------|-----------|
| 120108 SIL Due To/From - Evanston Healthcare LLC     | 3,310     |
| 120112 SIL Due To/From - Lincoln Park LLC            | 3,091,415 |
| 127013 SIL Due To/From - Symphony Financial Services | 488       |
|                                                      |           |
|                                                      | 3,095,213 |

Facility Name: Symphony Resid Lincoln Park

Report Period Beginning: 01/01/20

Ending:

12/31/2020

**XII. INCOME STATEMENT (attach any explanatory footnotes necessary to reconcile this Schedule to Schedule IV.)**

| 1  |                                                                  |              |    |
|----|------------------------------------------------------------------|--------------|----|
|    | I. Revenue                                                       | Amount       |    |
|    | <b>A. SLF Resident Care</b>                                      |              |    |
| 1  | Gross SLF Resident Revenue                                       | \$ 4,682,196 | 1  |
| 2  | Discounts and Allowances                                         |              | 2  |
| 3  | <b>SUBTOTAL Resident Care (line 1 minus line 2)</b>              | \$ 4,682,196 | 3  |
|    | <b>B. Other Operating Revenue</b>                                |              |    |
| 4  | Special Services                                                 |              | 4  |
| 5  | Other Health Care Services                                       |              | 5  |
| 6  | Special Grants                                                   |              | 6  |
| 7  | Gift and Coffee Shop                                             | (711)        | 7  |
| 8  | Barber and Beauty Care                                           |              | 8  |
| 9  | Non-Resident Meals                                               | (2,887)      | 9  |
| 10 | Laundry                                                          |              | 10 |
| 11 | <b>SUBTOTAL OTHER OPERATING REVENUE (sum of lines 4 thru 10)</b> | \$ (3,598)   | 11 |
|    | <b>C. Non-Operating Revenue</b>                                  |              |    |
| 12 | Contributions                                                    |              | 12 |
| 13 | Interest and Other Investment Income                             | 12,996       | 13 |
| 14 | <b>SUBTOTAL Non-Operating Revenue (sum of lines 12 and 13)</b>   | \$ 12,996    | 14 |
|    | <b>D. Other Revenue (specify):</b>                               |              |    |
| 15 | See Sch 8A                                                       | 246,016      | 15 |
| 16 |                                                                  |              | 16 |
| 17 | <b>SUBTOTAL Other Revenue (sum of lines 15 and 16)</b>           | \$ 246,016   | 17 |
| 18 | <b>TOTAL REVENUE (sum of lines 3, 11, 14 and 17)</b>             | \$ 4,937,610 | 18 |

| 2  |                                                                |              |    |
|----|----------------------------------------------------------------|--------------|----|
|    | II. Expenses                                                   | Amount       |    |
|    | <b>A. Operating Expenses</b>                                   |              |    |
| 19 | General Services                                               | 1,185,205    | 19 |
| 20 | Health Care/ Personal Care                                     | 740,569      | 20 |
| 21 | General Administration                                         | 1,575,802    | 21 |
|    | <b>B. Capital Expense</b>                                      |              |    |
| 22 | Ownership                                                      | 1,021,313    | 22 |
|    | <b>C. Other Expenses</b>                                       |              |    |
| 23 | Special Cost Centers                                           |              | 23 |
| 24 | Non-Operating Expenses                                         |              | 24 |
| 25 | Other (specify):                                               |              | 25 |
| 26 |                                                                |              | 26 |
| 27 |                                                                |              | 27 |
| 28 | <b>TOTAL EXPENSES (sum of lines 19 thru 27)</b>                | \$ 4,522,889 | 28 |
| 29 | <b>Income Before Income Taxes (line 18 minus line 28)</b>      | \$ 414,721   | 29 |
| 30 | <b>Income Taxes</b>                                            | \$           | 30 |
| 31 | <b>NET INCOME OR LOSS FOR THE YEAR (line 29 minus line 30)</b> | \$ 414,721   | 31 |
|    | <b>III. Net Resident Care Revenue detailed by Payer Source</b> |              |    |
| 32 | Medicaid - Net Inpatient Revenue                               | \$ 3,797,440 | 32 |
| 33 | Private Pay - Net Inpatient Revenue                            | 446,393      | 33 |
| 34 | Medicare - Net Inpatient Revenue                               |              | 34 |
| 35 | Other-(specify) <u>MAIP</u>                                    | (45,721)     | 35 |
| 36 | Other-(specify) <u>Managed Care</u>                            | 484,084      | 36 |
| 37 | <b>TOTAL (This total must agree to Line 3)</b>                 | \$ 4,682,196 | 37 |

Schedule 8A

XII. Income Sheet

D. Other Revenue

Line 15: Other Revenue

| Description                                                    | Operating      |
|----------------------------------------------------------------|----------------|
| RSM400315 SIL Other revenue                                    | 5,944          |
| 400301-ASSL SIL Incontinent Products - Revenue-Assisted Living | 206            |
| 400310-OTHR SIL Rental Income - Other Revenue-Other            | 31,450         |
| 400315-OTHR SIL COVID Income-Other                             | 208,416        |
|                                                                | <u>246,016</u> |