

		FOR BHF USE					

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**2017**  
**STATE OF ILLINOIS**  
**DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES**  
**FINANCIAL AND STATISTICAL REPORT (COST REPORT)**  
**FOR LONG-TERM CARE FACILITIES**  
**(FISCAL YEAR 2017)**

IMPORTANT NOTICE  
 THIS AGENCY IS REQUESTING DISCLOSURE OF INFORMATION THAT IS NECESSARY TO ACCOMPLISH THE STATUTORY PURPOSE AS OUTLINED IN 210 ILCS 45/3-208. DISCLOSURE OF THIS INFORMATION IS MANDATORY. FAILURE TO PROVIDE ANY INFORMATION ON OR BEFORE THE DUE DATE WILL RESULT IN CESSATION OF PROGRAM PAYMENTS. THIS FORM HAS BEEN APPROVED BY THE FORMS MANAGEMENT CENTER.

<p><b>I. IDPH License ID Number:</b> <u>0007435</u></p> <p><b>Facility Name:</b> <u>Central Baptist Village</u></p> <p><b>Address:</b> <u>4747 N Canfield Ave</u> <u>Norridge</u> <u>60706</u>        Number City Zip Code</p> <p><b>County:</b> <u>Cook</u></p> <p><b>Telephone Number:</b> <u>708-583-8555</u> Fax # <u>708-583-8455</u></p> <p><b>HFS ID Number:</b> <u>145853</u></p> <p><b>Date of Initial License for Current Owners:</b> <u>11/1/1978</u></p> <p><b>Type of Ownership:</b></p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> VOLUNTARY, NON-PROFIT</td> <td><input type="checkbox"/> PROPRIETARY</td> <td><input type="checkbox"/> GOVERNMENTAL</td> </tr> <tr> <td>  <input checked="" type="checkbox"/> Charitable Corp.</td> <td>  <input type="checkbox"/> Individual</td> <td>  <input type="checkbox"/> State</td> </tr> <tr> <td>  <input type="checkbox"/> Trust</td> <td>  <input type="checkbox"/> Partnership</td> <td>  <input type="checkbox"/> County</td> </tr> <tr> <td><b>IRS Exemption Code</b> _____</td> <td>  <input type="checkbox"/> Corporation</td> <td>  <input type="checkbox"/> Other _____</td> </tr> <tr> <td></td> <td>  <input type="checkbox"/> "Sub-S" Corp.</td> <td></td> </tr> <tr> <td></td> <td>  <input type="checkbox"/> Limited Liability Co.</td> <td></td> </tr> <tr> <td></td> <td>  <input type="checkbox"/> Trust</td> <td></td> </tr> <tr> <td></td> <td>  <input type="checkbox"/> Other _____</td> <td></td> </tr> </table> <p><b>In the event there are further questions about this report, please contact:</b>  <b>Name:</b> <u>Chris Joos</u>      <b>Telephone Number:</b> _____  <b>Email Address:</b> _____</p>	<input checked="" type="checkbox"/> VOLUNTARY, NON-PROFIT	<input type="checkbox"/> PROPRIETARY	<input type="checkbox"/> GOVERNMENTAL	<input checked="" type="checkbox"/> Charitable Corp.	<input type="checkbox"/> Individual	<input type="checkbox"/> State	<input type="checkbox"/> Trust	<input type="checkbox"/> Partnership	<input type="checkbox"/> County	<b>IRS Exemption Code</b> _____	<input type="checkbox"/> Corporation	<input type="checkbox"/> Other _____		<input type="checkbox"/> "Sub-S" Corp.			<input type="checkbox"/> Limited Liability Co.			<input type="checkbox"/> Trust			<input type="checkbox"/> Other _____		<p><b>II. CERTIFICATION BY AUTHORIZED FACILITY OFFICER</b></p> <p>I have examined the contents of the accompanying report to the State of Illinois, for the period from <u>01/01/2017</u> to <u>12/31/2017</u> 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.</p> <p>Intentional misrepresentation or falsification of any information in this cost report may be punishable by fine and/or imprisonment.</p> <table border="1"> <tr> <td rowspan="2" style="width: 15%;"><b>Officer or Administrator of Provider</b></td> <td>(Signed) _____</td> <td>(Date) _____</td> </tr> <tr> <td>(Type or Print Name) <u>Lori Altman</u></td> <td></td> </tr> <tr> <td></td> <td>(Title) <u>Chief Financial Officer</u></td> <td></td> </tr> <tr> <td rowspan="4"><b>Paid Preparer</b></td> <td>(Signed) _____</td> <td>(Date) _____</td> </tr> <tr> <td>(Print Name and Title) <u>Chris Joos</u> <u>Partner</u></td> <td></td> </tr> <tr> <td>(Firm Name &amp; Address) <u>Plante Moran, PLLC</u> <u>250 S. High Street, Suite 100, Columbus, OH, 43215</u></td> <td></td> </tr> <tr> <td>(Telephone) <u>(614) 222-9040</u> Fax # <u>(248) 233-8811</u></td> <td></td> </tr> </table> <p><b>MAIL TO: BUREAU OF HEALTH FINANCE</b>  <b>ILLINOIS DEPT OF HEALTHCARE AND FAMILY SERVICES</b>  <b>201 S. Grand Avenue East</b>  <b>Springfield, IL 62763-0001</b>      <b>Phone # (217) 782-1630</b></p>	<b>Officer or Administrator of Provider</b>	(Signed) _____	(Date) _____	(Type or Print Name) <u>Lori Altman</u>			(Title) <u>Chief Financial Officer</u>		<b>Paid Preparer</b>	(Signed) _____	(Date) _____	(Print Name and Title) <u>Chris Joos</u> <u>Partner</u>		(Firm Name & Address) <u>Plante Moran, PLLC</u> <u>250 S. High Street, Suite 100, Columbus, OH, 43215</u>		(Telephone) <u>(614) 222-9040</u> Fax # <u>(248) 233-8811</u>	
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Facility Name & ID Number Central Baptist Village

# 0007435 Report Period Beginning: 01/01/2017 Ending: 12/31/2017

**III. STATISTICAL DATA**

A. Licensure/certification level(s) of care; enter number of beds/bed days, (must agree with license). Date of change in licensed beds N/A

	1	2	3	4	
	Beds at Beginning of Report Period	Licensure Level of Care	Beds at End of Report Period	Licensed Bed Days During Report Period	
1	120.00	Skilled (SNF)	120	43,800	1
2		Skilled Pediatric (SNF/PED)			2
3		Intermediate (ICF)			3
4		Intermediate/DD			4
5	30.00	Sheltered Care (SC)	30	10,950	5
6		ICF/DD 16 or Less			6
7	150	TOTALS	150	54,750	7

B. Census-For the entire report period.

	1 Level of Care	2 3 4 5 Patient Days by Level of Care and Primary Source of Payment				
		2 Medicaid Recipient	3 Private Pay	4 Other	5 Total	
8	SNF	9,005	25,995	4,146	39,146	8
9	SNF/PED					9
10	ICF					10
11	ICF/DD					11
12	SC		10,756		10,756	12
13	DD 16 OR LESS					13
14	TOTALS	9,005	36,751	4,146	49,902	14

C. Percent Occupancy. (Column 5, line 14 divided by total licensed bed days on line 7, column 4.) 91.15%

D. How many bed reserve days during this year were paid by the Department? None (Do not include bed reserve days in Section B.)

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

Meals on Wheels

F. Does the facility maintain a daily midnight census? Yes

G. Do pages 3 & 4 include expenses for services or investments not directly related to patient care?  
YES  NO

H. Does the BALANCE SHEET (page 17) reflect any non-care assets?  
YES  NO

I. On what date did you start providing long term care at this location?  
Date started 11/19/1978

J. Was the facility purchased or leased after January 1, 1978?  
YES  Date 11/19/1978 NO

K. Was the facility certified for Medicare during the reporting year?  
YES  NO  If YES, enter number of beds certified 68 and days of care provided 2,676

Medicare Intermediary \_\_\_\_\_

**IV. ACCOUNTING BASIS**

ACCRUAL  MODIFIED CASH\*  CASH\*

Is your fiscal year identical to your tax year? YES  NO

Tax Year: 12/31/2017 Fiscal Year: 12/31/2017

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

Facility Name & ID Number Central Baptist Village # 0007435 Report Period Beginning: 01/01/2017 Ending: 12/31/2017

**V. COST CENTER EXPENSES (throughout the report, please round to the nearest dollar)**

	Operating Expenses	Costs Per General Ledger				Reclass-ification 5	Reclassified Total 6	Adjust-ments 7	Adjusted Total 8	FOR BHF USE ONLY	
		Salary/Wage 1	Supplies 2	Other 3	Total 4					9	10
	<b>A. General Services</b>										
1	Dietary	718,392	90,808	209,951	1,019,151		1,019,151		1,019,151		1
2	Food Purchase		592,666		592,666		592,666	(45,000)	547,666		2
3	Housekeeping	149,656	31,844	41,857	223,357		223,357		223,357		3
4	Laundry	42,805	28,387		71,192		71,192		71,192		4
5	Heat and Other Utilities			186,062	186,062		186,062		186,062		5
6	Maintenance	84,501	117,817	155,264	357,582		357,582		357,582		6
7	Other (specify):* Security and Waste R	28,824		41,175	69,999		69,999		69,999		7
8	<b>TOTAL General Services</b>	1,024,178	861,522	634,309	2,520,009		2,520,009	(45,000)	2,475,009		8
	<b>B. Health Care and Programs</b>										
9	Medical Director			34,956	34,956		34,956		34,956		9
10	Nursing and Medical Records	3,950,706	165,181	60	4,115,947		4,115,947		4,115,947		10
10a	Therapy			435,205	435,205		435,205		435,205		10a
11	Activities	218,835	37,010	695	256,540		256,540		256,540		11
12	Social Services	126,270	19,408	1,574	147,252		147,252	(8,618)	138,634		12
13	CNA Training										13
14	Program Transportation	22,441		8,008	30,449		30,449		30,449		14
15	Other (specify):*										15
16	<b>TOTAL Health Care and Programs</b>	4,318,252	221,599	480,498	5,020,349		5,020,349	(8,618)	5,011,731		16
	<b>C. General Administration</b>										
17	Administrative	312,995			312,995		312,995		312,995		17
18	Directors Fees										18
19	Professional Services			168,134	168,134		168,134	(16,030)	152,104		19
20	Dues, Fees, Subscriptions & Promotions			40,896	40,896		40,896	(3,920)	36,976		20
21	Clerical & General Office Expenses	496,472	85,740	55,357	637,569		637,569	(28,469)	609,100		21
22	Employee Benefits & Payroll Taxes			1,829,816	1,829,816		1,829,816	(75,576)	1,754,240		22
23	Inservice Training & Education										23
24	Travel and Seminar			34,150	34,150		34,150		34,150		24
25	Other Admin. Staff Transportation			4,654	4,654		4,654		4,654		25
26	Insurance-Prop.Liab.Malpractice			91,727	91,727		91,727		91,727		26
27	Other (specify):* Marketing & Donatio	265,035	49,645	20,695	335,375		335,375	(335,375)			27
28	<b>TOTAL General Administration</b>	1,074,502	135,385	2,245,429	3,455,316		3,455,316	(459,370)	2,995,946		28
29	<b>TOTAL Operating Expense (sum of lines 8, 16 &amp; 28)</b>	6,416,932	1,218,506	3,360,236	10,995,674		10,995,674	(512,988)	10,482,686		29

\*Attach a schedule if more than one type of cost is included on this line, or if the total exceeds \$1000.

NOTE: Include a separate schedule detailing the reclassifications made in column 5. Be sure to include a detailed explanation of each reclassification.

**Central Baptist Village**  
**0007435**  
**12/31/2017**  
**PG3 Supplemental Detail**

MCDACT	CLIENT_ACT	DESC	Balance	
7625.10	060-51010-00	Security Services Salary	57,822.57	
		Less ILU Portion	<u>(28,998.02)</u>	50.15%
			28,824.55	<i>Line 7, Column 1</i>
7520.00	060-54010-03	Maint - Waste Removal	69,410.00	
7625.20	110-53010-01	Fin Serv - Security Maintenance and Repairs	<u>13,188.00</u>	
			82,598.00	
		Less ILU Portion	<u>(41,422.90)</u>	50.15%
			41,175.10	<i>Line 7, Column 3</i>
9755.10	100-51010-00	Mktg - Wages/Salaries Marketing	262,701.00	
9755.10	100-51010-01	Mktg - ETO Expenses	<u>(5,037.00)</u>	
9755.10	100-51010-03	Mktg - Census Bonus	<u>79,200.00</u>	
			336,864.00	
		Less ILU Portion	<u>(71,828.84)</u>	21.32%
			265,035.16	<i>Line 27, Column 1</i>
9755.30	100-52100-01	Mktg - Miscellaneous Employee Expenses M	134.00	
9755.30	100-52100-03	Mktg - Public Relations Facility	4,154.00	
9755.30	100-52100-04	Mktg - Public Relations Give Aways	1,180.00	
9755.30	100-52100-05	Mktg - Public Relations Events	3,096.00	
9755.30	100-52100-06	Mktg - Public Relations Civic Organization	2,015.00	
9755.30	100-52100-09	Mktg - LSN Satisfaction Surveys	1,299.00	
9755.30	100-52100-10	Mktg - Marketing Collateral	2,250.00	
9755.30	100-53010-00	Mktg - Background Checks	740.00	
9755.30	100-55040-00	Mktg - Digital Advertising	480.00	
9755.30	100-55040-01	Mktg - Traditional Advertising	6,980.00	
9755.30	100-55040-02	Mktg - Direct Mail	14,045.00	
9755.30	100-55050-00	Mktg - Newsletter	4,074.00	
9755.30	100-55070-00	Mktg - Referrals - Resident/Employee	13,155.00	
9755.30	100-56010-00	Mktg - Website Maintenance	1,259.00	
9755.30	100-56010-03	Mktg - Development - Expenses	1,096.00	
9755.30	100-59020-00	Mktg - Travel/Entertainment Marketing	404.00	
9755.30	100-59040-00	Mktg - Education/Seminars Marketing	249.00	
9755.30	100-59060-01	Mktg - Office Supplies Facility	2,111.00	
9755.30	100-59060-02	Mktg - Postage Expense Facility	1,335.00	
9755.30	100-59060-03	Mktg - Operating Supplies	80.00	
9755.30	100-59070-00	Mktg - Printing Expense Marketing	<u>2,964.00</u>	
			63,100.00	
		Less ILU Portion	<u>(13,454.69)</u>	21.32%
			49,645.31	<i>Line 27, Column 2</i>
9755.20	100-55040-06	Mktg - Design Services	8,040.00	
9755.20	100-55040-07	Mktg - Software Services	<u>6,790.00</u>	
			14,830.00	
		Less ILU Portion	<u>(3,162.17)</u>	21.32%
			11,667.83	
9760.00	120-59110-12	Admin & Board - Chapel Disbursements	<u>9,027.00</u>	
			20,694.83	<i>Line 27, Column 3</i>

Facility Name &amp; ID Number

Central Baptist Village

#0007435

Report Period Beginning:

01/01/2017

Ending:

12/31/2017

## V. COST CENTER EXPENSES (continued)

	Capital Expense	Cost Per General Ledger				Reclass-ification 5	Reclassified Total 6	Adjust-ments 7	Adjusted Total 8	FOR BHF USE ONLY		
		Salary/Wage 1	Supplies 2	Other 3	Total 4					9	10	
	<b>D. Ownership</b>											
30	Depreciation			1,186,188	1,186,188		1,186,188		1,186,188			30
31	Amortization of Pre-Op. & Org.											31
32	Interest											32
33	Real Estate Taxes											33
34	Rent-Facility & Grounds											34
35	Rent-Equipment & Vehicles			3,226	3,226		3,226	(3,226)				35
36	Other (specify):* <b>State Tax</b>			1,129	1,129		1,129	(1,129)				36
37	<b>TOTAL Ownership</b>			1,190,543	1,190,543		1,190,543	(4,355)	1,186,188			37
	<b>Ancillary Expense</b>											
	<b>E. Special Cost Centers</b>											
38	Medically Necessary Transportation											38
39	Ancillary Service Centers		11,681	174,570	186,251		186,251		186,251			39
40	Barber and Beauty Shops											40
41	Coffee and Gift Shops		361	236	597		597	(597)				41
42	Provider Participation Fee			287,382	287,382		287,382		287,382			42
43	Other (specify):* <b>See PG5A for offse</b>			207,539	207,539		207,539	(207,539)				43
44	<b>TOTAL Special Cost Centers</b>		12,042	669,727	681,769		681,769	(208,136)	473,633			44
45	<b>GRAND TOTAL COST (sum of lines 29, 37 &amp; 44)</b>	6,416,932	1,230,548	5,220,506	12,867,986		12,867,986	(725,479)	12,142,507			45

\*Attach a schedule if more than one type of cost is included on this line, or if the total exceeds \$1000.



Central Baptist VillageID# 0007435Report Period Beginning: 01/01/2017Ending: 12/31/2017

NON-ALLOWABLE EXPENSES		Amount	Sch. V Line Reference	
1	Independent Living	\$ 0	43	1
2	Non-Allowable Benefits (Marketing & ILU)	(75,576)	22	2
3	Gift Shop	(597)	41	3
4	Chapel Fund Receipts	(8,618)	12	4
5		0		5
6	Bank Charges	(8,469)	21	6
7	Investment Expenses	(41,537)	43	7
8	Trust Fee Expenses	(77,727)	43	8
9	Family Council Projects	(2,443)	43	9
10	TC Men's Club Expenditures	(994)	43	10
11	Community/Family Outreach	(128)	43	11
12	Meals on Wheels	(45,000)	02	12
13	Fitness Center Expense	(73,837)	43	13
14	Non-Allowable Legal	(16,030)	19	14
15	IDPH AL License	(3,920)	20	15
16	Vending Rental Costs	(3,226)	35	16
17	Katherine Hasbargen Expenditures	(729)	43	17
18	Vanderbeck Funds	(9,527)	43	18
19	Resident Council Expenditures	(155)	43	19
20	Family Outreach	(462)	43	20
21		0		21
22		0		22
23		0		23
24		0		24
25		0		25
26		0		26
27		0		27
28		0		28
29		0		29
30		0		30
31		0		31
32		0		32
33		0		33
34		0		34
35		0		35
36		0		36
37		0		37
38		0		38
39		0		39
40		0		40
41		0		41
42		0		42
43		0		43
44		0		44
45		0		45
46		0		46
47		0		47
48		0		48
49	<b>Total</b>	(368,975)		49

## STATE OF ILLINOIS

Summary A

Facility Name & ID Number Central Baptist Village# 0007435

Report Period Beginning:

01/01/2017

Ending:

12/31/2017

## SUMMARY OF PAGES 5, 5A, 6, 6A, 6B, 6C, 6D, 6E, 6F, 6G, 6H AND 6I

	Operating Expenses	PAGES	PAGE	PAGE	PAGE	PAGE	PAGE	PAGE	PAGE	PAGE	PAGE	PAGE	SUMMARY	
	A. General Services	5 & 5A	6	6A	6B	6C	6D	6E	6F	6G	6H	6I	TOTALS	
													(to Sch V, col.7)	
1	Dietary	0	0	0	0	0	0	0	0	0	0	0	0	1
2	Food Purchase	(45,000)	0	0	0	0	0	0	0	0	0	0	(45,000)	2
3	Housekeeping	0	0	0	0	0	0	0	0	0	0	0	0	3
4	Laundry	0	0	0	0	0	0	0	0	0	0	0	0	4
5	Heat and Other Utilities	0	0	0	0	0	0	0	0	0	0	0	0	5
6	Maintenance	0	0	0	0	0	0	0	0	0	0	0	0	6
7	Other (specify):*	0	0	0	0	0	0	0	0	0	0	0	0	7
8	<b>TOTAL General Services</b>	<b>(45,000)</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>(45,000)</b>	<b>8</b>
	<b>B. Health Care and Programs</b>													
9	Medical Director	0	0	0	0	0	0	0	0	0	0	0	0	9
10	Nursing and Medical Records	0	0	0	0	0	0	0	0	0	0	0	0	10
10a	Therapy	0	0	0	0	0	0	0	0	0	0	0	0	10a
11	Activities	0	0	0	0	0	0	0	0	0	0	0	0	11
12	Social Services	(8,618)	0	0	0	0	0	0	0	0	0	0	(8,618)	12
13	CNA Training	0	0	0	0	0	0	0	0	0	0	0	0	13
14	Program Transportation	0	0	0	0	0	0	0	0	0	0	0	0	14
15	Other (specify):*	0	0	0	0	0	0	0	0	0	0	0	0	15
16	<b>TOTAL Health Care and Programs</b>	<b>(8,618)</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>(8,618)</b>	<b>16</b>
	<b>C. General Administration</b>													
17	Administrative	0	0	0	0	0	0	0	0	0	0	0	0	17
18	Directors Fees	0	0	0	0	0	0	0	0	0	0	0	0	18
19	Professional Services	(16,030)	0	0	0	0	0	0	0	0	0	0	(16,030)	19
20	Fees, Subscriptions & Promotions	(3,920)	0	0	0	0	0	0	0	0	0	0	(3,920)	20
21	Clerical & General Office Expenses	(28,469)	0	0	0	0	0	0	0	0	0	0	(28,469)	21
22	Employee Benefits & Payroll Taxes	(75,576)	0	0	0	0	0	0	0	0	0	0	(75,576)	22
23	Inservice Training & Education	0	0	0	0	0	0	0	0	0	0	0	0	23
24	Travel and Seminar	0	0	0	0	0	0	0	0	0	0	0	0	24
25	Other Admin. Staff Transportation	0	0	0	0	0	0	0	0	0	0	0	0	25
26	Insurance-Prop.Liab.Malpractice	0	0	0	0	0	0	0	0	0	0	0	0	26
27	Other (specify):*	(335,375)	0	0	0	0	0	0	0	0	0	0	(335,375)	27
28	<b>TOTAL General Administration</b>	<b>(459,370)</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>(459,370)</b>	<b>28</b>
29	<b>TOTAL Operating Expense</b> <b>(sum of lines 8,16 &amp; 28)</b>	<b>(512,988)</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>(512,988)</b>	<b>29</b>



STATE OF ILLINOIS

Summary B

Facility Name & ID Number Central Baptist Village

# 0007435

Report Period Beginning:

01/01/2017

Ending:

12/31/2017

SUMMARY OF PAGES 5, 5A, 6, 6A, 6B, 6C, 6D, 6E, 6F, 6G, 6H AND 6I

	Capital Expense	PAGES	PAGE	PAGE	PAGE	PAGE	PAGE	PAGE	PAGE	PAGE	PAGE	PAGE	SUMMARY TOTALS	
	D. Ownership	5 & 5A	6	6A	6B	6C	6D	6E	6F	6G	6H	6I	(to Sch V, col.7)	
30	Depreciation	0	0	0	0	0	0	0	0	0	0	0	0	30
31	Amortization of Pre-Op. & Org.	0	0	0	0	0	0	0	0	0	0	0	0	31
32	Interest	0	0	0	0	0	0	0	0	0	0	0	0	32
33	Real Estate Taxes	0	0	0	0	0	0	0	0	0	0	0	0	33
34	Rent-Facility & Grounds	0	0	0	0	0	0	0	0	0	0	0	0	34
35	Rent-Equipment & Vehicles	(3,226)	0	0	0	0	0	0	0	0	0	0	(3,226)	35
36	Other (specify):*	(1,129)	0	0	0	0	0	0	0	0	0	0	(1,129)	36
37	<b>TOTAL Ownership</b>	<b>(4,355)</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>(4,355)</b>	<b>37</b>
	<b>Ancillary Expense</b>													
	<b>E. Special Cost Centers</b>													
38	Medically Necessary Transportation	0	0	0	0	0	0	0	0	0	0	0	0	38
39	Ancillary Service Centers	0	0	0	0	0	0	0	0	0	0	0	0	39
40	Barber and Beauty Shops	0	0	0	0	0	0	0	0	0	0	0	0	40
41	Coffee and Gift Shops	(597)	0	0	0	0	0	0	0	0	0	0	(597)	41
42	Provider Participation Fee	0	0	0	0	0	0	0	0	0	0	0	0	42
43	Other (specify):*	(207,539)	0	0	0	0	0	0	0	0	0	0	(207,539)	43
44	<b>TOTAL Special Cost Centers</b>	<b>(208,136)</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>(208,136)</b>	<b>44</b>
45	<b>GRAND TOTAL COST</b> <b>(sum of lines 29, 37 &amp; 44)</b>	<b>(725,479)</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>(725,479)</b>	<b>45</b>

**VII. RELATED PARTIES**

**A. Enter below the names of ALL owners and related organizations (parties) as defined in the instructions. Use Page 6-Supplemental as necessary.**

1 OWNERS		2 RELATED NURSING HOMES		3 OTHER RELATED BUSINESS ENTITIES		
Name	Ownership %	Name	City	Name	City	Type of Business
None		None		None		

**B. Are any costs included in this report which are a result of transactions with related organizations? This includes rent, management fees, purchase of supplies, and so forth.**  YES  NO

If yes, costs incurred as a result of transactions with related organizations must be fully itemized in accordance with the instructions for determining costs as specified for this form.

1	2	3 Cost Per General Ledger	4	5 Cost to Related Organization	6	7	8 Difference: Adjustments for Related Organization Costs (7 minus 4)	
Schedule V	Line	Item	Amount	Name of Related Organization	Percent of Ownership	Operating Cost of Related Organization		
1	V		\$			\$	\$	1
2	V							2
3	V							3
4	V							4
5	V							5
6	V							6
7	V							7
8	V							8
9	V							9
10	V							10
11	V							11
12	V							12
13	V							13
14	<b>Total</b>		\$			\$	\$ *	14

\* Total must agree with the amount recorded on line 34 of Schedule VI.



Facility Name & ID Number Central Baptist Village # 0007435 Report Period Beginning: 01/01/2017 Ending: 12/31/2017

VII. RELATED PARTIES (continued)

C. Statement of Compensation and Other Payments to Owners, Relatives and Members of Board of Directors.

**NOTE: ALL owners ( even those with less than 5% ownership) and their relatives who receive any type of compensation from this home must be listed on this schedule.**

	1 Name	2 Title	3 Function	4 Ownership Interest	5 Compensation Received From Other Nursing Homes*	6 Average Hours Per Work Week Devoted to this Facility and % of Total Work Week		7 Compensation Included in Costs for this Reporting Period**		8 Schedule V. Line & Column Reference
						Hours	Percent	Description	Amount	
1	<b>SEE ATTACHED BOARD OF DIRECTORS</b>								\$	1
2										2
3										3
4										4
5										5
6										6
7										7
8										8
9										9
10										10
11										11
12										12
13								<b>TOTAL</b>	\$	13

\* If the owner(s) of this facility or any other related parties listed above have received compensation from other nursing homes, attach a schedule detailing the name(s) of the home(s) as well as the amount paid. THIS AMOUNT MUST AGREE TO THE AMOUNTS CLAIMED ON THE THE OTHER NURSING HOMES' COST REPORTS.

\*\* This must include all forms of compensation paid by related entities and allocated to Schedule V of this report (i.e., management fees). FAILURE TO PROPERLY COMPLETE THIS SCHEDULE INDICATING ALL FORMS OF COMPENSATION RECEIVED FROM THIS HOME, ALL OTHER NURSING HOMES AND MANAGEMENT COMPANIES MAY RESULT IN THE DISALLOWANCE OF SUCH COMPENSATION

**CENTRAL BAPTIST VILLAGE**  
**BOARD OF DIRECTORS**

*Officers:*

**PRESIDENT**

Mr. John M. Smith  
962 Chapel Court South  
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N.A.B. Board Member  
Village Green Baptist Church  
200 S. Lambert Road  
Glen Ellyn, Illinois 60137-6590  
(630) 469-4400

**VICE-PRESIDENT**

Dr. James L. Renke  
303 Quarry Ridge Circle  
Sugar Grove, IL 60554  
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N.A.B. Board Member  
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200 S. Lambert Road  
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Ms. Julie Adams  
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Community Board Member

**SECRETARY**

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Community Board Member

*Board Members:*

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**Community Board Member**

*Note: Copies of Board Minutes, correspondence, etc., should also be distributed to the following:*

**Ms. Dawn Mondschein**  
Executive Director  
Central Baptist Village  
4747 N. Canfield Avenue  
Norridge, Illinois 60706  
C: (708) 642-0526  
W: (708) 583-8511  
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**Mr. Joseph Horwitz, Attorney**  
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[idolaw@Horwitz.comcastbiz.net](mailto:idolaw@Horwitz.comcastbiz.net)

**Ms. Lori Altman, Chief Financial Officer**  
Central Baptist Village  
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W: (708) 583-8555  
Fax: (708) 583-8455

Facility Name & ID Number Central Baptist Village

# 0007435

Report Period Beginning:

01/01/2017

Ending: 2/31/2017

VIII. ALLOCATION OF INDIRECT COSTS

A. Are there any costs included in this report which were derived from allocations of central office or parent organization costs? (See instructions.) YES  NO

B. Show the allocation of costs below. If necessary, please attach worksheets.

Name of Related Organization \_\_\_\_\_

Street Address \_\_\_\_\_

City / State / Zip Code \_\_\_\_\_

Phone Number ( ) \_\_\_\_\_

Fax Number ( ) \_\_\_\_\_

1	2	3	4	5	6	7	8	9	
Schedule V Line Reference	Item	Unit of Allocation (i.e., Days, Direct Cost, Square Feet)	Total Units	Number of Subunits Being Allocated Among	Total Indirect Cost Being Allocated	Amount of Salary Cost Contained in Column 6	Facility Units	Allocation (col.8/col.4)x col.6	
1					\$	\$		\$	1
2									2
3									3
4									4
5									5
6									6
7									7
8									8
9									9
10									10
11									11
12									12
13									13
14									14
15									15
16									16
17									17
18									18
19									19
20									20
21									21
22									22
23									23
24									24
25	TOTALS				\$	\$		\$	25



**IX. INTEREST EXPENSE AND REAL ESTATE TAX EXPENSE**

**A. Interest: (Complete details must be provided for each loan - attach a separate schedule if necessary.)**

1	2	3	4	5	6	7	8	9	10											
										Name of Lender	Related**		Purpose of Loan	Monthly Payment Required	Date of Note	Amount of Note		Maturity Date	Interest Rate (4 Digits)	Reporting Period Interest Expense
											YES	NO				Original	Balance			
<b>A. Directly Facility Related</b>																				
<b>Long-Term</b>																				
1	2007 Bond Series		X	Construction & Renovation		6/15/07	\$ 23,285,000	\$ 19,605,000	11/15/2039	VARIABLE	\$ 1,079,643	1								
2												2								
3												3								
4												4								
5												5								
<b>Working Capital</b>																				
6												6								
7												7								
8												8								
9	<b>TOTAL Facility Related</b>						\$ 23,285,000	\$ 19,605,000			\$ 1,079,643	9								
<b>B. Non-Facility Related*</b>																				
10	Interest Income										(1,079,643)	10								
11												11								
12												12								
13												13								
14	<b>TOTAL Non-Facility Related</b>						\$	\$			\$ (1,079,643)	14								
15	<b>TOTALS (line 9+line14)</b>						\$ 23,285,000	\$ 19,605,000			\$	15								

16) Please indicate the total amount of mortgage insurance expense and the location of this expense on Sch. V.      \$ NONE                      Line # N/A

\* Any interest expense reported in this section should be adjusted out on page 5, line 14 and, consequently, page 4, col. 7. (See instructions.)

\*\* If there is ANY overlap in ownership between the facility and the lender, this must be indicated in column 2. (See instructions.)

**IX. INTEREST EXPENSE AND REAL ESTATE TAX EXPENSE (continued)**

**B. Real Estate Taxes**

**Important, please see the next worksheet, "RE\_Tax". The real estate tax statement and bill must accompany the cost report.**

1. Real Estate Tax accrual used on 2016 report.		\$	1
2. Real Estate Taxes paid during the year: (Indicate the tax year to which this payment applies. If payment covers more than one year, detail below.)		\$	2
3. Under or (over) accrual (line 2 minus line 1).		\$	3
4. Real Estate Tax accrual used for 2017 report. (Detail and explain your calculation of this accrual on the lines below.)		\$	4
5. Direct costs of an appeal of tax assessments which has NOT been included in professional fees or other general operating costs on Schedule V, sections A, B or C. <b>(Describe appeal cost below. Attach copies of invoices to support the cost and a copy of the appeal filed with the county.)</b>		\$	5
6. Subtract a refund of real estate taxes. You must offset the full amount of any direct appeal costs classified as a real estate tax cost plus one-half of any remaining refund. <b>TOTAL REFUND \$ _____ For _____ Tax Year. (Attach a copy of the real estate tax appeal board's decision.)</b>		\$	6
7. Real Estate Tax expense reported on Schedule V, line 33. This should be a combination of lines 3 thru 6.		\$	7
Real Estate Tax History:			
Real Estate Tax Bill for Calendar Year:	2012	8	
	2013	9	
	2014	10	
	2015	11	
	2016	12	
			<b>FOR BHF USE ONLY</b>
	13	FROM R. E. TAX STATEMENT FOR 2016 \$	13
	14	PLUS APPEAL COST FROM LINE 5 \$	14
	15	LESS REFUND FROM LINE 6 \$	15
	16	AMOUNT TO USE FOR RATE CALCULATION \$	16

**NOTES:**

1. Please indicate a negative number by use of brackets( ). Deduct any overaccrual of taxes from prior year.
2. If facility is a non-profit which pays real estate taxes, you must attach a denial of an application for real estate tax exemption unless the building is rented from a for-profit entity.  
**This denial must be no more than four years old at the time the cost report is filed.**

# 2016 LONG TERM CARE REAL ESTATE TAX STATEMENT

FACILITY NAME Central Baptist Village COUNTY Cook

FACILITY IDPH LICENSE NUMBER 0007435

CONTACT PERSON REGARDING THIS REPORT Chris Joos

TELEPHONE (614) 222-9040 FAX #: (248) 233-8811

**A. Summary of Real Estate Tax Cost**

Enter the tax index number and real estate tax assessed for 2016 on the lines provided below. Enter only the portion of the cost that applies to the operation of the nursing home in Column D. Real estate tax applicable to any portion of the nursing home property which is vacant, rented to other organizations, or used for purposes other than long term care must not be entered in Column D. Do not include cost for any period other than calendar year 2016.

	(A)	(B)	(C)	(D)
	<u>Tax Index Number</u>	<u>Property Description</u>	<u>Total Tax</u>	<u>Tax Applicable to Nursing Home</u>
1.	_____	_____	\$ _____	\$ _____
2.	_____	_____	\$ _____	\$ _____
3.	_____	_____	\$ _____	\$ _____
4.	_____	_____	\$ _____	\$ _____
5.	_____	_____	\$ _____	\$ _____
6.	_____	_____	\$ _____	\$ _____
7.	_____	_____	\$ _____	\$ _____
8.	_____	_____	\$ _____	\$ _____
9.	_____	_____	\$ _____	\$ _____
10.	_____	_____	\$ _____	\$ _____
		<b>TOTALS</b>	\$ _____	\$ _____

**B. Real Estate Tax Cost Allocations**

Does any portion of the tax bill apply to more than one nursing home, vacant property, or property which is not directly used for nursing home services?            YES            NO

If YES, attach an explanation and a schedule which shows the calculation of the cost allocated to the nursing home. (Generally the real estate tax cost must be allocated to the nursing home based upon sq. ft. of space used.)

**C. Tax Bills**

Attach a copy of the original 2016 tax bills which were listed in Section A to this statement. Be sure to use the 2016 tax bill which is normally paid during 2017.

**PLEASE NOTE: *Payment information from the Internet* or otherwise is *not considered acceptable tax bill documentation* . Facilities located in Cook County are required to provide copies of their original **second installment** tax bill.**

Facility Name & ID Number Central Baptist Village

# 0007435 Report Period Beginning:

01/01/2017 Ending:

12/31/2017

X. BUILDING AND GENERAL INFORMATION:

A. Square Feet: 100,046 B. General Construction Type: Exterior Brick Frame Number of Stories 2

C. Does the Operating Entity? [X] (a) Own the Facility [ ] (b) Rent from a Related Organization. [ ] (c) Rent from Completely Unrelated Organization.

(Facilities checking (a) or (b) must complete Schedule XI. Those checking (c) may complete Schedule XI or Schedule XII-A. See instructions.)

D. Does the Operating Entity? [X] (a) Own the Equipment [ ] (b) Rent equipment from a Related Organization. [X] (c) Rent equipment from Completely Unrelated Organization.

(Facilities checking (a) or (b) must complete Schedule XI-C. Those checking (c) may complete Schedule XI-C or Schedule XII-B. See instructions.)

E. List all other business entities owned by this operating entity or related to the operating entity that are located on or adjacent to this nursing home's grounds (such as, but not limited to, apartments, assisted living facilities, day training facilities, day care, independent living facilities, CNA training facilities, etc.)

List entity name, type of business, square footage, and number of beds/units available (where applicable).

Retirement Center

F. Does this cost report reflect any organization or pre-operating costs which are being amortized? [ ] YES [ ] NO

If so, please complete the following:

1. Total Amount Incurred: 2. Number of Years Over Which it is Being Amortized: 3. Current Period Amortization: 4. Dates Incurred:

Nature of Costs:

(Attach a complete schedule detailing the total amount of organization and pre-operating costs.)

XI. OWNERSHIP COSTS:

A. Land.

Table with 5 columns: 1 Use, 2 Square Feet, 3 Year Acquired, 4 Cost, and an unlabeled column. Row 1: Facility, 1955, \$78,131. Row 2: (blank), (blank), (blank). Row 3: TOTALS, \$78,131.

Facility Name &amp; ID Number Central Baptist Village

# 0007435

Report Period Beginning:

01/01/2017 Ending:

12/31/2017

**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	
	Beds*	FOR BHF USE ONLY	Year Acquired	Year Constructed	Cost	Current Book Depreciation	Life in Years	Straight Line Depreciation	Adjustments	Accumulated Depreciation
4	150		1984	1978	\$ 1,924,051	\$	35	\$	\$	\$
5										
6										
7										
8										
	Improvement Type**									
9	Various		1978		741,182		20			
10	Various		1979		7,014		20			
11	Various		1982		43,548		20			
12	Various		1983		121,447		20			
13	Various		1984		20,402		20			
14	Various		1985		6,955		20			
15	Various		1986		3,755		20			
16	Various		1988		15,124		20			
17	Various		1989		896,689		20			
18	Various		1990		1,958,028		20			
19	Various		1991		104,310		20			
20	Various		1992		201,338		20			
21	Various		1993		139,141		20			
22	Various		1994		115,592		20			
23	Various		1995		292,495		20			
24	Various		1996		17,999		20			
25	Various		1997		74,429		20			
26	Various		1998		1,742,405		20			
27	Various		1999		158,583		20			
28	Various		2000		145,352		20			
29	Various		2001		69,964		20			
30	Various		2002		5,701,939		20			
31	Various		2003		8,252		20			
32	Various		2004		68,635		20			
33	Various		2005		45,687		20			
34	Various		2006		965,657		20			
35	Various		2007		2,610,864		20			
36	Various		2008		209,097		20			

\*Total beds on this schedule must agree with page 2.

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

See Page 12A, Line 70 for total

XI. OWNERSHIP COSTS (continued)

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

1 Improvement Type**		3 Year Constructed	4 Cost	5 Current Book Depreciation	6 Life in Years	7 Straight Line Depreciation	8 Adjustments	9 Accumulated Depreciation	
37	Various	2009	\$ 215,930	\$	20	\$	\$	\$	37
38	Various	2010	243,526		20				38
39	Various	2011	400,532		20				39
40									40
41									41
42									42
43									43
44									44
45									45
46									46
47									47
48									48
49									49
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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	TOTAL (lines 4 thru 69)		\$ 19,269,922	\$		\$	\$	\$	70

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

Facility Name &amp; ID Number Central Baptist Village

# 0007435

Report Period Beginning:

01/01/2017 Ending: 12/31/2017

## 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	
	Improvement Type**	Year Constructed	Cost	Current Book Depreciation	Life in Years	Straight Line Depreciation	Adjustments	Accumulated Depreciation	
1	<b>Totals from Page 12A, Carried Forward</b>		\$ 19,269,922	\$		\$	\$	\$	1
2	Century Sprinkler (Sprinkler Replacement) (21,941)	2012	11,848		20				2
3	Gewalt Hamilton (Plumbing Project) (11,072)	2012	5,979		20				3
4	John'S Electric (Rewire Chiller Pumps)	2012	4,600		20				4
5	Keganivo Group (Plumbing Project) (5,128)	2012	2,770		20				5
6	Kovilic Construction (Concrete Project) (11,608)	2012	6,268		20				6
7	Kovilic Construction (Plumbing Project) (95,000)	2012	51,300		20				7
8	Kovilic Construction (Plumbing Project) (76,000)	2012	41,040		20				8
9	Kovilic Construction (Plumbing Project) (19,000)	2012	10,260		20				9
10	Mark'S Sewer (Sump Pump) (10,825)	2012	5,846		20				10
11	Nelson Harkins (Lower Level Construction) (3,633)	2012	1,962		20				11
12	Skender (Lower Level Construction) (17,974)	2012	9,706		20				12
13	Skender (Window Project) (31,774)	2012	7,506		20				13
14	Wma Consulting (Plumbing Project) (16,730)	2012	9,034		20				14
15	Westside Mechanical/Heat Exchangers	2013	3,875		20				15
16	Roc'S Plumbing/Replace Grease Pits	2013	11,800		20				16
17	Roc'S Plumbing/Maint Shop Sump Pump (4,000)	2013	2,160		20				17
18	Roc'S Plumbing/Replace Drains & Pipes	2013	6,169		20				18
19	Westside Mechanical/Heat Pumps (20,960)	2013	4,951		20				19
20	Black Hawk/Parking Lot Paving (5,725)	2013	3,092		20				20
21	Raupp Fence/Fence Project	2013	3,361		20				21
22	Bittner/Tuckpointing	2013	11,250		20				22
23	Roc'S Plumbing/Maint Shop Sump Replace (5,948)	2013	3,212		20				23
24	Raupp Fence Co/Fence Project	2013	7,014		20				24
25	Roc'S Plumbing/Drain Pipe Replace Maint Shop (2,983)	2013	1,611		20				25
26	Jp Mechanical/Motor Hot Water Heater	2013	4,581		20				26
27	Jp Mechanical/Circulator Pump (2,746)	2013	1,483		20				27
28	Johnstone Supply/Exhaust Fans (3,867)	2013	2,088		20				28
29	Jp Mechanical/Heat Pump Compressors (3,362)	2013	1,815		20				29
30	Ati/Phone System(185077.79)	2014	99,942		20				30
31	Jp Mechanical/Blower Motor(4500)	2014	2,430		20				31
32	Elevator Technicians/Np 1 , 2, & Dock Elevator Door Restrictors(	2014	1,690		20				32
33	Roc'S Plumbing/Kitchen Piping New Cleanout(6080)	2014	3,283		20				33
34	<b>TOTAL (lines 1 thru 33)</b>		\$ 19,613,848	\$		\$	\$	\$	34

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

Facility Name &amp; ID Number Central Baptist Village

# 0007435

Report Period Beginning:

01/01/2017 Ending: 12/31/2017

**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	
	Improvement Type**	Year Constructed	Cost	Current Book Depreciation	Life in Years	Straight Line Depreciation	Adjustments	Accumulated Depreciation	
1	<b>Totals from Page 12B, Carried Forward</b>		\$ 19,613,848	\$		\$	\$	\$	1
2	Stanton Mechanical/Rtu 4 Replacement(21290)	2014	11,497		20				2
3	Roc'S Plumbing/Kitchen Piping New Cleanout(7260)	2014	3,920		20				3
4	Ecolab/Install Steamer Into Wall & Replace Gas Lines(2595.63)	2014	1,402		20				4
5	Stanton Mechanical/Domestic Water Line Replace(6560.77)	2014	3,543		20				5
6	Stanton Mechanical/Fire Damper Repair(6658)	2014	3,595		20				6
7	Rocs Plumbing/Replace Piping Np1 Basement(13500)	2014	7,290		20				7
8	Stanton Mechanical/Fire Damper Repair(6425)	2014	3,470		20				8
9	Fox Valley/Pressure Gauge Fire Pump Room(3455)	2014	1,866		20				9
10	Crg Company/Round Tubing To Rail In East & South/East(4550)	2014	2,457		20				10
11	Crg Company/Orange Ave Gate Replacement(2600)	2014	1,404		20				11
12	Stanton Mechanical/Heat Exchanger Board Room(3800)	2014	2,052		20				12
13	Direct Supply/Hvac Units For Res Rooms(36600)	2014	36,600		20				13
14	Roc'S Plumbing/Replace Rtz Valve(10500)	2014	10,500		20				14
15	Tyco/Np2 Elevator Card Reader(3058)	2014	3,058		20				15
16	Reconstruct Pavilion Patio Into Meditation Garden	2014	4,008		20				16
17	Install Service Elevator Sprinkler System	2014	6,043		20				17
18	Heat Pump Compressors	2014	5,039		20				18
19	Repaired Leak In Drop Ceiling In Front Entrance Of Np	2014	2,913		20				19
20	Hitchcock Design/Memory Garden (8,436.37)	2015	4,556		20				20
21	Stone Forest/Memory Garden Fountain (3,243.00)	2015	1,751		20				21
22	Hitchcock Design/Memory Garden (5,057.58)	2015	2,731		20				22
23	Crg Co/Chapel Restroom Update (4,250.00)	2015	2,295		20				23
24	Stone Forest/Memory Garden (4,743.00)	2015	2,561		20				24
25	Anderson Lock/Card Reader Employee Patio (3,475.32)	2015	1,877		20				25
26	Manas Torcom/Café Floor (4,673.00)	2015	2,523		20				26
27	Thornapple Landscapes/Memory Garden (51,030.78)	2015	27,557		20				27
28	Thornapple Landscapes/Memory Garden (36,712.09)	2015	19,825		20				28
29	Thornapple Landscapes/Memory Garden (60,918.74)	2015	32,896		20				29
30	Thornapple Landscapes/Memory Garden (16,517.96)	2015	8,920		20				30
31	Keganivo Group/Memory Garden (4,500.00)	2015	2,430		20				31
32	Dominick Fedele/Tree Work (4,950.00)	2015	2,673		20				32
33	De Marr Sealcoating/Sealcoat Parking Lot (13,459.96)	2015	7,268		20				33
34	<b>TOTAL (lines 1 thru 33)</b>		\$ 19,844,368	\$		\$	\$	\$	34

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



Facility Name &amp; ID Number Central Baptist Village

# 0007435

Report Period Beginning:

01/01/2017 Ending: 12/31/2017

## 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	
	Improvement Type**	Year Constructed	Cost	Current Book Depreciation	Life in Years	Straight Line Depreciation	Adjustments	Accumulated Depreciation	
1	<b>Totals from Page 12C, Carried Forward</b>		\$ 19,844,368	\$		\$	\$	\$	1
2	Stanton Mechanical/Hot Water Boiler (6,767.00)	2015	3,654						2
3	Crestwood/Gp Upgrade (4,290.00)	2015	2,317						3
4	Elevator Technicians/Elevators (2,500.00)	2015	1,350						4
5	Stanton Mechanical/Hot Water Boiler (16,200.00)	2015	8,748						5
6	Crestwood/Gp Upgrade (2,802.95)	2015	1,514						6
7	Roc'S Plumbing/Drain Pipes (Board Room) (8,875.00)	2015	4,793						7
8	Roc'S Plumbing/Pavilion Ejector Pumps	2015	5,800						8
9	Anderson Lock/Admin Door	2015	3,475						9
10	Anderson Lock/Np Entry Door	2015	3,475						10
11	Anderson Lock/Digital Keypads	2015	4,671						11
12	Roc'S Plumbing/Hot Water Storage Tanks	2015	10,000						12
13	Anderson Lock/Lower Level Door Closures	2015	2,860						13
14	Centimark/Roof Repair	2015	4,950						14
15	Keganivo Group/Np Resident Interactive Area	2015	7,841						15
16	Roc'S Plumbing/Hot Water Storage Tank	2015	22,843						16
17	Schamback/Interactive Area-Demo/Electric/Floor/Paint/Drywall	2015	54,835						17
18	Anderson Lock/Np Interactive Area	2015	2,545						18
19	Westside Mechanical/Heat Pumps (2,503.24)	2015	591						19
20	Manas Torcom/Unit Flooring (4,167.46)	2015	984						20
21	Emcor Services/Heat Pumps (20,180.00)	2015	4,767						21
22	Nurse Call System	2015	2,569						22
23	Anderson Lock/Lower Level Auto Door Opener (2,614)	2016	1,303						23
24	Affordable Tuckpointing/Tuckpointing (3,710)	2016	1,848						24
25	Stanton Mechanical/Control System (124,200)	2016	61,913						25
26	Stanton Mechanical/Chiller	2016	133,800						26
27	Stanton Mechanical/Kitchen Make Up Air Handler	2016	73,890						27
28	Waukegan Roofing/Upper-Lower Roof	2016	201,062						28
29	Stanton Mechanical/Duct Work On Roof	2016	12,609						29
30	Krause Electrical/Kitchen Make Up Air	2016	14,998						30
31	Waukegan Roofing/Upper-Lower Roof	2016	134,260						31
32	Stanton Mechanical/Air Roof Top Replace	2016	9,000						32
33	Stanton Mechanical/Upper-Lower Roof	2016	12,221						33
34	<b>TOTAL (lines 1 thru 33)</b>		\$ 20,655,854	\$		\$	\$	\$	34

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

Facility Name &amp; ID Number Central Baptist Village

# 0007435

Report Period Beginning:

01/01/2017 Ending: 12/31/2017

## 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	
	Improvement Type**	Year Constructed	Cost	Current Book Depreciation	Life in Years	Straight Line Depreciation	Adjustments	Accumulated Depreciation	
1	<b>Totals from Page 12D, Carried Forward</b>		\$ 20,655,854	\$		\$	\$	\$	1
2	Stanton Mechanical/Upper-Lower Roof	2016	4,645		20				2
3	Stanton Mechanical/Upper-Lower Roof	2016	3,525		20				3
4	Stanton Mechanical/Air Roof Top Replace	2016	5,221		20				4
5	Stanton Mechanical/Make Up Air Handler	2016							5
6	Waukegan Roofing/Upper-Lower Roof	2016	3,450		20				6
7	Np Lounge	2016	108,091		30				7
8	Fox Valley/Magnetic Door Holders	2016	2,720		5				8
9	Stanton Mechanical/Control System	2016	7,454		10				9
10	Air Roof Top Replacement	2016	28,123		20				10
11	Concrete Repair/Retaining Wall	2016	6,480		10				11
12	1st Floor Painting	2017	16,994		5				12
13	1st Floor Carpeting	2017	87,758		5				13
14	Admin Bathroom Remodel	2017	1,423		5				14
15	Concrete Patio	2017	10,099		30				15
16	Rehab Room Remodel - Design and architect drawings, finishes se	2017	6,739		5				16
17	Rehab Room Remodel - Shelving, Storage, & Mirrors	2017	3,897		5				17
18	1st Floor Carpeting	2017	1,234		5				18
19	Landscaping	2017	11,281		5				19
20	Landscaping Lighting	2017	4,462		5				20
21	Foundation Repair	2017	1,655		10				21
22	Lot Reseal	2017	5,635		3				22
23	Basement Tile	2017	2,398		10				23
24	Heat Pump - Nursing	2017	4,504		3				24
25	Fire Alarm Panel	2017	1,494		5				25
26	Disposal of Telephone System (included in 2002 capital additions,	2002	(212,326)		15				26
27									27
28									28
29									29
30									30
31									31
32									32
33				970,461		970,461		3,520,637	33
34	<b>TOTAL (lines 1 thru 33)</b>		\$ 20,772,810	\$ 970,461		\$ 970,461	\$	\$ 3,520,637	34

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

XI. OWNERSHIP COSTS (continued)

C. Equipment Costs-Excluding Transportation. (See instructions.)

	Category of Equipment	1 Cost	Current Book Depreciation 2	Straight Line Depreciation 3	4 Adjustments	Component Life 5	Accumulated Depreciation 6	
71	Purchased in Prior Years	\$ 3,176,407	\$ 196,988	\$ 196,988	\$	Various	\$ 1,951,413	71
72	Current Year Purchases	196,257	18,739	18,739		Various	18,739	72
73	Fully Depreciated Assets	208,014				Various	208,014	73
74								74
75	TOTALS	\$ 3,580,678	\$ 215,727	\$ 215,727	\$		\$ 2,178,166	75

D. Vehicle Costs. (See instructions.)\*

	1 Use	Model, Make and Year 2	Year Acquired 3	4 Cost	Current Book Depreciation 5	Straight Line Depreciation 6	7 Adjustments	Life in Years 8	Accumulated Depreciation 9	
76		See Attached Schedule	Various	\$ 105,840	\$	\$	\$	5	\$ 105,840	76
77		Central States Bus Sales - 2008 F	2008	59,743				5	59,743	77
78		Small Pick Up Truck	2009	14,995				5	14,995	78
79										79
80	TOTALS			\$ 180,578	\$	\$	\$		\$ 180,578	80

E. Summary of Care-Related Assets

		1 Reference	2 Amount	
81	Total Historical Cost	(line 3, col.4 + line 70, col.4 + line 75, col.1 + line 80, col.4) + (Pages 12B thru 12I, if applicable)	\$ 24,612,197	81
82	Current Book Depreciation	(line 70, col.5 + line 75, col.2 + line 80, col.5) + (Pages 12B thru 12I, if applicable)	\$ 1,186,188	82
83	Straight Line Depreciation	(line 70, col.7 + line 75, col.3 + line 80, col.6) + (Pages 12B thru 12I, if applicable)	\$ 1,186,188	83 **
84	Adjustments	(line 70, col.8 + line 75, col.4 + line 80, col.7) + (Pages 12B thru 12I, if applicable)	\$	84
85	Accumulated Depreciation	(line 70, col.9 + line 75, col.6 + line 80, col.9) + (Pages 12B thru 12I, if applicable)	\$ 5,879,381	85

F. Depreciable Non-Care Assets Included in General Ledger. (See instructions.)

	1 Description & Year Acquired	2 Cost	Current Book Depreciation 3	Accumulated Depreciation 4	
86	See Attached Schedule	\$ 14,541,183	\$ 204,886	\$ 12,173,762	86
87	Note (expense is excluded from PG3 & 4)				87
88					88
89					89
90					90
91	TOTALS	\$ 14,541,183	\$ 204,886	\$ 12,173,762	91

G. Construction-in-Progress

	Description	Cost	
92	Nurse Call System	\$ 25,211	92
93	Wander Management System	9,840	93
94			94
95		\$ 35,050	95

\* Vehicles used to transport residents to & from day training must be recorded in XI-F, not XI-D.

\*\* This must agree with Schedule V line 30, column 8.

**Central Baptist Village**  
**12/31/17 Vehicles**

Class	Dept	Description	laced in Servic	Life Yr	Life Mo	Book Cost	1/1/2016	12 Months	12/31/2016
							Beg Accum Depr	Depreciation	End Accum Depr
ATAM	Admin	Vehicle - Hanc	7/30/2004	5	60	53,990	53,990	-	53,990
ATAM	Admin	Vehicle - Buick	10/11/2004	5	60	21,128	21,128	-	21,128
ATAM	Admin	Vehicle - Ford	10/21/2005	5	60	30,722	30,722	-	30,722
ATAM	Admin	Vehicle - Bus (	3/10/2008	5	60	59,743	59,743	-	59,743
ATAM	Admin	Vehicle - Smal	4/8/2009	5	60	14,995	14,995	-	14,995
						180,578	180,578	-	180,578

**Central Baptist Village**  
**Summary Independent Living Assets**  
**12/31/2017**

	<b>Asset Cost</b>	<b>2017 Depreciation</b>	<b>2017 Accum</b>
<b>2015 and Prior Assets</b>	13,700,778.00	104,146.00	12,049,169.00
<b>2016 Assets</b>	344,037.41	50,492.70	74,346.60
<b>2017 Assets</b>	496,367.87	50,246.86	50,246.86
	<u>14,541,183.28</u>	<u>204,885.56</u>	<u>12,173,762.46</u>

**Central Baptist Village**  
**2015 and prior Depreciable Non-Care Assets Summary**

<b>Year Acquired</b>	<b>Cost</b>	<b>2016 Depr</b>	<b>2016 Accum</b>	<b>2017 Depr</b>	<b>2017 Accum</b>
Total 2009	12,177,931	19,127	11,552,346	19,127	11,571,473
Total 2010	104,612	6,558	45,907	6,558	52,465
Total 2011	484,785	30,731	184,387	30,731	215,118
Total 2012	189,997	10,049	50,245	10,049	60,294
Total 2013	257,130	12,857	51,428	12,857	64,285
Total 2014	221,246	11,062	33,186	11,062	44,248
Total 2015	265,077	13,762	27,524	13,762	41,286
	<hr/>				
	13,700,778	104,146	11,945,023	104,146	12,049,169

Central Baptist Village  
12/31/17 Depreciable Non-Care Assets  
2016 Additions

Asset Class	Project #	Date	TOTAL COST	IL PORTION	Life	Vendor/Description	Location	2017 IL DEPR	2017 Accum
EQAM	120-15-007	1/11/2016	240.00	240.00	30.00	Julia Redwine/IL Office	TC	8.00	15.78
EQAM	120-15-007	1/14/2016	92.52	92.52	30.00	Grainger/IL Office	TC	3.08	6.06
EQAM	120-15-007	1/31/2016	99.96	99.96	30.00	Amazon/IL Office	TC	3.33	6.39
EQAM	120-15-007	2/1/2016	1,550.00	1,550.00	30.00	Fox Valley/IL Office	TC	51.67	98.96
EQAM	120-15-007	2/22/2016	449.10	449.10	30.00	Home Depot/IL Office	TC	14.97	27.81
EQAM	120-15-007	3/1/2016	220.00	220.00	30.00	Keganivo/IL Office	TC	7.33	13.46
EQAM	120-15-007	3/2/2016	155.00	155.00	30.00	Julia Redwine/IL Office	TC	5.17	9.47
EQAM	120-15-007	3/9/2016	5,006.00	5,006.00	30.00	Schambach/IL Office	TC	166.87	302.73
EQAM	120-15-007	3/9/2016	8,020.33	8,020.33	30.00	Henricksen/IL Office	TC	267.34	485.02
EQAM	120-15-007	3/9/2016	276.42	276.42	30.00	JRI Interior/IL Office	TC	9.21	16.72
EQES	060-16-008	1/13/2016	425.00	425.00	5.00	Manas Torcom/Flooring	TC	85.00	167.21
EQES	060-16-008	1/13/2016	1,786.09	1,786.09	5.00	Manas Torcom/Flooring	TC	357.22	702.72
EQES	060-16-008	1/13/2016	1,590.88	1,590.88	5.00	Manas Torcom/Flooring	TC	318.18	625.92
EQES	060-16-008	1/13/2016	1,159.70	1,159.70	5.00	Manas Torcom/Flooring	TC	231.94	456.28
EQES	060-16-009	1/13/2016	1,370.80	1,370.80	10.00	Johnstone Supply/AC Heat Pumps	TC	137.08	269.67
EQFS	110-16-001	1/20/2016	1,069.00	536.11	3.00	ccb/Server Software & License	All	178.70	348.13
EQAM	120-15-010	1/20/2016	360.00	360.00	5.00	Wal-Tek/Café Expansion Carryover	TC	72.00	140.26
EQES	060-16-009	1/21/2016	47,750.00	47,750.00	10.00	Stanton Mechanical/AC Heat Pumps	TC	4,775.00	9,289.07
EQFS	110-16-003	1/27/2016	2,802.80	1,405.62	3.00	ccb/Antivirus	All	468.54	903.79
EQES	060-16-017	1/29/2016	809.98	406.21	3.00	Direct Supply/Vacuums	All	135.40	260.45
EQDS	050-16-010	1/31/2016	507.88	254.70	3.00	Edward Don/China	All	84.90	162.84
EQDS	050-16-010	1/31/2016	49.10	24.62	3.00	Edward Don/China	All	8.21	15.74
EQDS	050-16-007	2/1/2016	588.37	295.07	3.00	Edward Don/Blender	All	98.36	188.38
EQDS	050-16-005	2/3/2016	997.21	500.10	3.00	Edward Don/Kitchen Supplies	All	166.70	318.37
EQDS	050-16-010	2/5/2016	2,104.90	1,055.62	3.00	Edward Don/China	All	351.87	670.09
EQDS	050-16-010	2/8/2016	372.44	186.78	3.00	Edward Don/China	All	62.26	118.06
EQAM	120-15-010	2/8/2016	423.20	423.20	5.00	Julia Redwine/Café Expansion Carryover	TC	84.64	160.49
EQDS	050-16-006	2/9/2016	2,601.95	1,304.89	10.00	Edward Don/Range	All	130.49	247.07
EQDS	050-16-008	2/10/2016	5,239.24	2,627.50	3.00	Edward Don/Mixer	All	875.83	1,655.95
EQDS	050-16-002	2/24/2016	907.19	907.19	5.00	Edward Don/Cambro	TC	181.44	336.11
EQES	060-16-005	2/25/2016	2,614.00	1,310.93	5.00	Anderson Lock/Lower Level Auto Door Opener	All	262.19	484.97
EQDS	050-16-003	2/29/2016	1,559.00	781.84	3.00	Mighty Mat/Mats	All	260.61	479.22
EQDS	050-16-004	3/1/2016	268.51	134.66	3.00	Edward Don/Kitchen Carts	All	44.89	82.41
EQES	060-16-017	3/2/2016	809.98	406.21	3.00	Direct Supply/Vacuums	All	135.40	248.24
EQDS	050-16-004	3/4/2016	421.27	211.27	3.00	Edward Don/Kitchen Carts	All	70.42	128.72
EQES	060-16-009	3/4/2016	47,750.00	47,750.00	10.00	Stanton Mechanical/AV Heat Pumps	TC	4,775.00	8,728.07
EQDS	050-16-011	3/8/2016	10,306.31	5,168.65	10.00	Edward Don/Fryer	All	516.87	939.11
EQES	060-16-005	3/8/2016	364.00	182.55	5.00	Anderson Lock/Lower Level Door Opener	All	36.51	66.34
EQDS	050-16-005	3/9/2016	580.29	291.02	3.00	Edward Don/Kitchen Supplies	All	97.01	175.99
EQDS	050-16-001	3/11/2016	695.68	348.89	3.00	Edward Don/Recycle Dumpster	All	116.30	210.35
EQDS	050-16-004	3/15/2016	1,459.21	731.80	3.00	Edward Don/Kitchen Carts	All	243.93	438.55
EQDS	050-16-005	3/18/2016	548.87	275.26	3.00	Edward Don/Kitchen Supplies	All	91.75	164.20
EQDS	050-16-011	3/18/2016	269.61	135.21	10.00	Edward Don/Fryer	All	13.52	24.20
EQES	060-16-006	3/24/2016	683.88	342.97	3.00	Johnstone Supply/HVAC	All	114.32	202.72
EQES	060-16-008	3/24/2016	425.00	425.00	5.00	Manas Torcom/Flooring	TC	85.00	150.72
EQES	060-16-008	3/24/2016	1,170.54	1,170.54	5.00	Manas Torcom/Flooring	TC	234.11	415.13
EQES	060-16-007	3/25/2016	3,710.00	1,860.58	10.00	Affordable Tuckpointing/Tuckpointing	All	186.06	329.41
EQES	060-16-008	4/1/2016	274.12	274.12	5.00	Sherwin Williams/Flooring	TC	54.82	96.02
EQES	060-16-008	4/1/2016	274.12	274.12	5.00	Sherwin Williams/Flooring	TC	54.82	96.02
EQES	060-16-008	4/1/2016	1,459.68	1,459.68	5.00	Sherwin Williams/Flooring	TC	291.94	511.29
EQDS	050-16-010	4/6/2016	540.12	270.87	3.00	Edward Don/China	All	90.29	156.90
EQES	060-16-008	4/11/2016	274.12	274.12	5.00	Sherwin Williams/Flooring	TC	54.82	94.52
EQAM	120-15-007	4/11/2016	234.89	234.89	30.00	Julia Redwine/IL office expansion	TC	7.83	13.50
EQES	060-16-024	4/13/2016	1,617.30	811.08	3.00	Allied Plumbing/Sewer Rodding Machine	All	270.36	464.64
EQES	060-16-008	4/25/2016	781.84	781.84	5.00	Sherwin Williams/Flooring	TC	156.37	263.60
EQES	060-16-008	4/25/2016	190.12	190.12	5.00	Sherwin Williams/Flooring	TC	38.02	64.10
EQES	060-16-001	4/30/2016	1,308.60	656.27	3.00	Amazon/Pond Pump	All	218.76	365.79
EQDS	050-16-005	5/6/2016	146.10	73.27	3.00	Edward Don/Kitchen Supplies	All	24.42	40.44
EQDS	050-16-010	5/6/2016	367.26	184.18	3.00	Edward Don/China	All	61.39	101.65
EQES	060-16-008	5/19/2016	775.84	775.84	5.00	Sherwin Williams/Flooring	TC	155.17	251.41
EQES	060-16-010	5/19/2016	124,200.00	62,286.78	10.00	Stanton Mechanical/Control System	All	6,228.68	10,091.82
EQES	060-16-008	5/24/2016	274.12	274.12	5.00	Sherwin Williams/Flooring	TC	54.82	88.08
EQES	060-16-008	5/25/2016	274.12	274.12	5.00	Sherwin Williams/Flooring	TC	54.82	87.93
EQES	060-16-026	5/31/2016	1,758.88	882.09	10.00	Gazebo	All	88.21	140.02
EQES	060-16-008	6/1/2016	274.12	274.12	5.00	Sherwin Williams/Flooring	TC	54.82	86.88
EQES	060-16-008	6/1/2016	501.72	501.72	5.00	Sherwin Williams/Flooring	TC	100.34	159.02
EQDS	050-16-010	6/3/2016	1,012.99	508.02	3.00	Edward Don/China	All	169.34	267.43
EQES	060-16-006	6/3/2016	123.74	62.06	3.00	Johnstone Supply/HVAC Equipment	All	20.69	32.67
EQAM	120-16-004	6/3/2016	3,000.00	1,504.51	3.00	B Sheridan/NuStep	All	501.50	791.99
EQES	060-16-010	6/16/2016	13,800.00	6,920.75	10.00	Stanton Mechanical/Control System	All	692.08	1,068.37
EQAM	120-16-002	6/16/2016	3,279.00	1,644.43	5.00	Senior TV/TV System Upgrade	All	328.89	507.71
EQES	060-16-027	6/27/2016	1,100.00	551.65	10.00	Cutting Edge/Trees	All	55.17	83.50
EQES	060-16-008	6/28/2016	274.12	274.12	5.00	Sherwin Williams/Flooring	TC	54.82	82.84
EQDS	050-16-009	7/7/2016	3,773.09	1,892.22	3.00	Edward Don/Robcoupe	All	630.74	937.49
EQIL	140-16-001	7/8/2016	941.64	941.64	5.00	Carstens/Cabinet 1st Floor TC	TC	188.33	279.40
EQES	060-16-008	7/21/2016	304.12	304.12	5.00	Sherwin Williams/Flooring	TC	60.82	88.08
EQES	060-16-008	7/21/2016	304.12	304.12	5.00	Sherwin Williams/Flooring	TC	60.82	88.08
EQES	060-16-008	7/21/2016	304.12	304.12	5.00	Sherwin Williams/Flooring	TC	60.82	88.08
EQES	060-16-008	7/21/2016	304.12	304.12	5.00	Sherwin Williams/Flooring	TC	60.82	88.08
EQES	060-16-027	7/21/2016	3,400.00	1,705.11	10.00	Cutting Edge/Trees	All	170.51	246.92
EQES	060-16-008	8/2/2016	501.72	501.72	5.00	Sherwin Williams/Flooring	TC	100.34	142.02
EQDS	050-16-010	8/5/2016	844.67	423.61	3.00	Edward Don/China	All	141.20	198.69
EQES	060-16-008	8/9/2016	1,569.69	1,569.69	5.00	Sherwin Williams/Flooring	TC	313.94	438.31
EQES	060-16-008	8/9/2016	159.80	159.80	5.00	Sherwin Williams/Flooring	TC	31.96	44.62

Central Baptist Village  
12/31/17 Depreciable Non-Care Assets  
2016 Additions

Asset Class	Project #	Date	TOTAL COST	IL PORTION	Life	Vendor/Description	Location	2017 IL DEPR	2017 Accum
EQDS	050-16-005	8/19/2016	135.55	67.98	3.00	Edward Don/Kitchen Supplies	All	22.66	31.02
EQDS	050-16-010	8/19/2016	129.41	64.90	3.00	Edward Don/China	All	21.63	29.61
EQDS	050-16-010	8/26/2016	1,463.87	734.14	3.00	Edward Don/China	All	244.71	330.29
EQES	060-16-016	9/7/2016	819.50	410.98	3.00	Direct Supply/Laundry Cart Covers	All	136.99	180.41
EQFS	110-16-005	9/14/2016	7,937.75	3,980.81	3.00	CDW/Staff Workstations	All	1,326.94	1,722.12
EQFS	110-16-005	9/14/2016	734.18	368.19	3.00	CDW/Staff Workstations	All	122.73	159.28
EQES	060-16-031	9/15/2016	1,825.00	1,825.00	10.00	Stanton Mechanical/TC Compressor	TC	182.50	236.35
EQFS	110-16-005	9/15/2016	805.00	403.71	3.00	CCB/Staff Workstations	All	134.57	174.28
EQFS	110-16-005	9/16/2016	60.30	30.24	3.00	CDW/Staff Workstations	All	10.08	13.03
EQES	060-16-002	9/22/2016	565.11	283.40	30.00	Thornapple/Rebuild Retaining Wall	All	9.45	12.05
EQES	060-16-030	9/22/2016	5,348.00	2,682.04	10.00	RG/Concrete Repair	All	268.20	342.22
EQDS	050-16-005	9/23/2016	42.44	21.28	3.00	Edward Don/Kitchen Supplies	All	7.09	9.03
EQDS	050-16-010	9/23/2016	235.45	118.08	3.00	Edward Don/China	All	39.36	50.11
EQDS	050-16-005	9/28/2016	143.98	72.21	3.00	Edward Don/Kitchen Supplies	All	24.07	30.32
EQDS	050-16-010	9/30/2016	1,948.28	977.07	3.00	Edward Don/China	All	325.69	408.45
EQDS	050-16-010	10/1/2016	(53.00)	(26.58)	3.00	Edward Don/China	All	(8.86)	(11.09)
EQES	060-16-031	10/1/2016	817.25	817.25	10.00	South Side Control/TC Compressor	TC	81.73	102.27
EQES	060-16-032	10/1/2016	2,191.17	1,098.88	3.00	Sealed Air/Carpet Cleaner	All	366.29	458.37
EQES	060-16-008	10/6/2016	816.72	816.72	5.00	Sherwin Williams/Flooring	TC	163.34	202.17
EQES	060-16-008	10/6/2016	464.06	464.06	5.00	Sherwin Williams/Flooring	TC	92.81	114.87
EQDS	050-16-010	10/10/2016	314.34	157.64	3.00	Edward Don/China	All	52.55	64.46
EQDS	050-16-010	10/12/2016	67.67	33.94	3.00	Edward Don/China	All	11.31	13.82
EQDS	050-16-010	10/14/2016	67.67	33.94	3.00	Edward Don/China	All	11.31	13.75
EQDS	050-16-010	10/21/2016	259.96	130.37	3.00	Edward Don/China	All	43.46	52.01
EQES	060-16-030	10/24/2016	6,650.00	3,335.00	10.00	RG Stamping/Concrete Repair	All	333.50	396.37
EQDS	050-16-012	10/27/2016	1,348.00	676.03	10.00	Krause Electrical/Burlodge Carts	All	67.60	79.79
EQDS	050-16-012	10/27/2016	27,269.06	13,675.54	10.00	Burlodge/Burlodge Carts	All	1,367.55	1,614.16
EQFS	110-16-002	10/27/2016	2,268.49	1,137.66	3.00	Virtek/Wireless Access Points	All	379.22	447.60
EQFS	110-16-004	10/27/2016	9,800.18	4,914.83	3.00	Virtek/Virtual Server	All	1,638.28	1,933.70
EQAM	120-16-002	10/27/2016	3,279.00	1,644.43	5.00	Senior TV/TV System Addition	All	328.89	388.19
EQDS	050-16-010	10/28/2016	43.20	21.66	3.00	Edward Don/China	All	7.22	8.50
EQES	060-16-008	11/1/2016	722.06	722.06	5.00	Sherwin Williams/Flooring	TC	144.41	168.48
EQES	060-16-008	11/2/2016	(54.40)	(54.40)	5.00	Sherwin Williams/Flooring	TC	(10.88)	(12.66)
EQDS	050-16-010	11/4/2016	241.10	120.91	3.00	Edward Don/China	All	40.30	46.69
EQAM	120-16-005	11/14/2016	732.55	367.38	5.00	Perkins Eastman/MPR Chairs	All	73.48	83.11
EQES	060-16-008	11/22/2016	1,478.48	1,478.48	5.00	Sherwin Williams/Flooring	TC	295.70	328.01
EQES	060-16-008	11/25/2016	1,285.64	1,285.64	5.00	Sherwin Williams/Flooring	TC	257.13	283.12
EQDS	050-16-010	11/30/2016	2,033.38	1,019.75	3.00	Mikasa/China	All	339.92	369.64
EQDS	050-16-010	12/2/2016	226.55	113.62	3.00	Edward Don/China	All	37.87	40.98
EQES	060-16-017	12/6/2016	809.98	406.21	3.00	Direct Supply/Vacuum	All	135.40	145.02
EQES	060-16-008	12/13/2016	1,210.44	1,210.44	5.00	Sherwin Williams/Flooring	TC	242.09	254.66
EQES	060-16-008	12/13/2016	885.84	885.84	5.00	Sherwin Williams/Flooring	TC	177.17	186.37
EQAM	120-16-007	12/13/2016	4,961.21	4,961.21	5.00	Perkins Eastman/TC Lounge Furniture	TC	992.24	1,043.75
EQAM	120-16-007	12/16/2016	7,805.40	7,805.40	5.00	Furniture Solutions/TC Lounge Furniture	TC	1,561.08	1,629.32
EQAM	120-16-007	12/16/2016	1,951.49	1,951.49	5.00	Furniture Solutions/TC Lounge Furniture	TC	390.30	407.36
EQDS	050-16-010	12/21/2016	472.62	237.02	3.00	Edward Don/China	All	79.01	81.38
EQAM	120-16-005	12/22/2016	28,735.00	14,410.71	5.00	Krueger International/MPR Chairs	All	2,882.14	2,960.89
EQAM	120-16-007	12/23/2016	9,756.76	9,756.76	5.00	Furniture Solutions/TC Lounge Furniture	TC	1,951.35	1,999.34
EQDS	050-16-010	12/30/2016	189.27	94.92	3.00	Edward Don/China	All	31.64	31.81
EQAM	120-16-008	12/30/2016	8,966.56	4,496.76	5.00	Konica/Copier	All	899.35	904.27
EQAM	120-16-008	12/30/2016	8,966.56	4,496.76	5.00	Konica/Copier	All	899.35	904.27
EQAM	120-16-008	12/30/2016	8,966.56	4,496.76	5.00	Konica/Copier	All	899.35	904.27
EQAM	120-16-008	12/30/2016	3,185.08	1,597.33	5.00	Konica/Copier	All	319.47	321.21
EQAM	120-16-008	12/30/2016	3,149.08	1,579.28	5.00	Konica/Copier	All	315.86	317.58
EQAM	120-16-008	12/30/2016	3,149.08	1,579.28	5.00	Konica/Copier	All	315.86	317.58
EQAM	120-16-008	12/30/2016	3,720.00	1,865.59	5.00	Konica/Copier	All	373.12	375.16
EQAM	120-16-008	12/30/2016	1,615.00	809.93	5.00	Konica/Copier	All	161.99	162.87
EQAM	120-16-008	12/30/2016	3,149.08	1,579.28	5.00	Konica/Copier	All	315.86	317.58
EQAM	120-16-007	12/31/2016	1,036.80	1,036.80	5.00	Perkins Eastman/TC Lounge Furniture	TC	207.36	207.93
EQAM	120-16-008	12/31/2016	237.00	118.86	5.00	CCB/Copiers	All	23.77	23.84
			520,566.98	344,037.41				50,492.70	74,346.60



**Central Baptist Village**  
**12/31/17 Depreciable Non-Care Assets**  
**2017 Additions**

Asset Class	Project #	Date	TOTAL COST	IL PORTION	Life	Vendor/Description	Location	2017 IL DEPR	2017 Accum
FF&E	060-17-006	1/1/2017	5,330.00	2,673.01	5	Cutting Edge Painting/1st Floor Painting	All	534.60	534.60
FF&E	100-17-002	1/1/2017	5,133.00	2,574.22	3	MatrixCare/Marix Upgrade	All	858.07	858.07
FF&E	110-17-009	1/3/2017	2,250.00	1,128.38	3	Virtek/Wireless Access Points	All	374.07	374.07
FF&E	050-17-002	1/6/2017	1,818.55	912.01	3	Edward Don/China	All	299.84	299.84
FF&E	060-17-002	1/6/2017	319.12	319.12	5	Sherwin Williams/TC Room Turn	TC	62.95	62.95
FF&E	060-17-002	1/6/2017	319.12	319.12	5	Sherwin Williams/TC Room Turn	TC	62.95	62.95
FF&E	060-17-006	1/11/2017	6,000.00	3,009.02	5	Cutting Edge Painting/1st Floor Painting	All	585.32	585.32
FF&E	060-17-002	1/12/2017	849.76	849.76	5	Sherwin Williams/TC Room Turn	TC	164.83	164.83
FF&E	050-17-004	1/16/2017	4,164.49	2,088.51	3	Edward Don/Heated Cabinet	All	667.56	667.56
FF&E	060-17-002	1/18/2017	2,522.62	2,522.62	5	Sherwin Williams/TC Room Turn	TC	481.03	481.03
FF&E	060-17-003	1/19/2017	22,000.00	22,000.00	10	Stanton Mechanical/Heat Pumps	TC	2,091.51	2,091.51
FF&E	060-17-002	1/26/2017	1,698.38	1,698.38	5	Sherwin Williams/TC Room Turn	TC	316.41	316.41
FF&E	060-17-006	1/26/2017	5,330.00	2,673.01	5	Cutting Edge Painting/1st Floor Painting	All	497.99	497.99
FF&E	050-17-002	1/27/2017	225.00	112.84	3	Edward Don/China	All	34.93	34.93
FF&E	060-17-006	1/31/2017	5,330.00	2,673.01	5	Cutting Edge Painting/1st Floor Painting	All	490.66	490.66
FF&E	100-17-001	1/31/2017	2,100.00	2,100.00	5	Room & Board/Model Furniture	TC	385.48	385.48
FF&E	110-17-001	1/31/2017	787.50	623.52	3	Parasol Alliance/Wander Management	TT/TC	190.76	190.76
FF&E	050-17-003	2/1/2017	5,024.68	2,519.89	5	Edward Don/Shelving	All	461.17	461.17
FF&E	050-17-002	2/3/2017	122.40	61.38	3	Edward Don/China	All	18.61	18.61
FF&E	060-17-002	2/7/2017	1,912.64	1,912.64	5	Sherwin Williams/TC Room Turn	TC	343.75	343.75
FF&E	060-17-002	2/7/2017	865.84	865.84	5	Sherwin Williams/TC Room Turn	TC	155.61	155.61
FF&E	060-17-006	2/7/2017	6,000.00	3,009.02	5	Cutting Edge Painting/1st Floor Painting	All	540.80	540.80
FF&E	050-17-002	2/8/2017	243.00	121.87	3	Edward Don/China	All	36.39	36.39
FF&E	050-17-004	2/10/2017	62.82	31.50	3	Edward Don/Heated Cabinet	All	9.35	9.35
FF&E	120-17-001	2/13/2017	590.00	590.00	5	Perkins Eastman/TC Lounge Update	TC	104.10	104.10
FF&E	060-17-002	2/14/2017	1,690.33	1,690.33	5	Sherwin Williams/TC Room Turn	TC	297.31	297.31
FF&E	050-17-002	2/15/2017	834.26	418.38	3	Edward Don/China	All	122.27	122.27
FF&E	060-17-006	2/24/2017	6,100.00	3,059.17	5	Cutting Edge Painting/1st Floor Painting	All	521.32	521.32
FF&E	060-17-001	3/1/2017	22,026.92	11,046.57	5	Sherwin Williams/Carpet 1st Floor	All	1,852.19	1,852.19
FF&E	060-17-001	3/1/2017	20,319.71	10,190.40	5	Sherwin Williams/Carpet 1st Floor	All	1,708.64	1,708.64
FF&E	060-17-008	3/1/2017	11,285.61	5,659.77	3	North American/Carpet Extractor	All	1,581.63	1,581.63
FF&E	060-17-001	3/8/2017	46,973.33	23,557.28	5	Sherwin Williams/Carpet 1st Floor	All	3,859.52	3,859.52
FF&E	060-17-031	3/9/2017	1,435.27	719.79	3	Anderson Lock/Gate Keypad	All	195.89	195.89
FF&E	120-17-001	3/13/2017	501.95	501.95	5	Perkins Eastman/TC Lounge Upgrade	TC	80.86	80.86
FF&E	060-17-001	3/14/2017	45,026.64	22,581.01	5	Sherwin Williams/Carpet 1st Floor	All	3,625.33	3,625.33
FF&E	060-17-001	3/15/2017	1,501.16	752.84	5	Sherwin Williams/Carpet 1st Floor	All	120.45	120.45
FF&E	060-17-001	3/21/2017	656.72	329.35	5	Sherwin Williams/Carpet 1st Floor	All	51.61	51.61
FF&E	060-17-002	3/21/2017	274.12	274.12	5	Sherwin Williams/TC Room Turn	TC	42.96	42.96
FF&E	110-17-008	3/21/2017	2,143.89	1,075.17	3	Virtek/Expand Network Switch	All	280.82	280.82
FF&E	060-17-001	3/22/2017	605.80	303.81	5	Sherwin Williams/Carpet 1st Floor	All	47.44	47.44
FF&E	120-17-011	3/24/2017	1,395.52	699.86	5	Home Depot/Admin Bathroom Remodel	All	108.53	108.53
FF&E	060-17-011	3/27/2017	9,229.78	4,628.76	3	North American/Carpet Sweeper	All	1,183.61	1,183.61
FF&E	100-17-001	3/28/2017	1,083.00	543.13	5	Julie Stevens/Model Furniture	All	83.03	83.03
FF&E	050-17-002	3/29/2017	115.08	57.71	3	Edward Don/China	All	14.65	14.65
FF&E	060-17-001	3/30/2017	3,040.28	1,524.71	5	North American/1st Floor Mats	All	231.42	231.42
FF&E	100-17-001	3/31/2017	635.38	635.38	5	Amazon/Model Furniture	TC	96.09	96.09
FF&E	100-17-001	3/31/2017	4,000.00	4,000.00	5	Room & Board/Model Furniture	TC	604.93	604.93
FF&E	120-17-011	3/31/2017	442.80	222.07	5	Amazon/Admin Bathroom Remodel	All	33.58	33.58
FF&E	120-17-011	3/31/2017	465.14	233.27	5	Amazon/Admin Bathroom Remodel	All	35.28	35.28
FF&E	120-17-011	3/31/2017	199.98	100.29	5	Amazon/Admin Bathroom Remodel	All	15.17	15.17
FF&E	120-17-011	3/31/2017	60.40	30.29	5	Amazon/Admin Bathroom Remodel	All	4.58	4.58
FF&E	060-17-002	4/1/2017	501.72	501.72	5	Sherwin Williams/TC Room Turn	TC	75.60	75.60
Bldg Improve	060-17-005	4/6/2017	8,094.00	4,059.17	30	RG Asphalt & Concrete/Concrete Patio	All	100.09	100.09
FF&E	060-17-002	4/8/2017	900.84	900.84	5	Sherwin Williams/TC Room Turn	TC	132.29	132.29
FF&E	060-17-002	4/8/2017	125.00	125.00	5	Sherwin Williams/TC Room Turn	TC	18.36	18.36
FF&E	060-17-002	4/11/2017	1,690.33	1,690.33	5	Sherwin Williams/TC Room Turn	TC	245.45	245.45
FF&E	120-17-001	4/13/2017	1,763.02	1,763.02	5	Perkins Eastman/Lounge Upgrade	TC	254.07	254.07
FF&E	060-17-025	4/14/2017	3,405.94	1,708.09	5	North American Corp/Power Scrubber	All	245.22	245.22
FF&E	060-17-002	4/19/2017	1,004.28	1,004.28	5	Sherwin Williams/TC Room Turns	TC	141.42	141.42
FF&E	050-17-002	4/21/2017	792.26	397.32	3	Edward Don/China	All	92.53	92.53
FF&E	060-17-002	4/21/2017	319.12	319.12	5	Sherwin Williams/TC Room Turn	TC	44.59	44.59
FF&E	120-17-011	4/23/2017	290.00	145.44	5	Home Depot/Admin Bathroom Remodel	All	20.16	20.16
FF&E	060-17-024	4/25/2017	500.00	250.75	3	Cutting Edge/Tree Work	All	57.48	57.48
FF&E	100-17-001	4/30/2017	84.89	84.89	5	Home Goods/Model Furniture	TC	11.44	11.44
FF&E	100-17-001	4/30/2017	192.00	192.00	5	Big Lots/Model Furniture	TC	25.88	25.88
FF&E	100-17-001	4/30/2017	89.98	89.98	5	Home Goods/Model Furniture	TC	12.13	12.13
FF&E	100-17-001	4/30/2017	39.99	39.99	5	TJ Maxx/Model Furniture	TC	5.39	5.39
FF&E	100-17-001	4/30/2017	109.97	109.97	5	Bed Bath Beyond/Model Furniture	TC	14.82	14.82
FF&E	100-17-001	4/30/2017	86.97	86.97	5	Home Goods/Model Furniture	TC	11.72	11.72
FF&E	110-17-012	4/30/2017	35.00	17.55	3	Amazon/Badge Printer	All	3.94	3.94
FF&E	110-17-012	4/30/2017	92.41	46.34	3	Amazon/Badge Printer	All	10.41	10.41
FF&E	060-17-001	5/1/2017	34,561.96	17,332.94	5	Sherwin Williams/Carpet 1st Floor	All	2,326.89	2,326.89
FF&E	050-17-002	5/3/2017	726.80	364.49	3	Edward Don/China	All	80.89	80.89
FF&E	060-17-001	5/3/2017	1,182.94	593.25	5	Sherwin Williams/Carpet 1st Floor	All	78.99	78.99
FF&E	050-17-002	5/10/2017	118.58	59.47	3	Edward Don/China	All	12.82	12.82
FF&E	060-17-001	5/11/2017	150.00	75.23	5	Sherwin Williams/Carpet 1st Floor	All	9.69	9.69
FF&E	120-17-001	5/11/2017	2,156.98	2,156.98	5	Perkins Eastman/TC Lounge	TC	277.75	277.75
FF&E	050-17-006	5/12/2017	30.78	15.44	3	Edward Don/Kitchen Supplies	All	3.30	3.30
FF&E	050-17-007	5/12/2017	157.50	78.99	3	Edward Don/Catering Equipment	All	16.88	16.88
FF&E	060-17-032	5/16/2017	2,875.00	2,875.00	10	Bath Filter/Shower Replacement	TC	181.16	181.16
FF&E	120-17-001	5/16/2017	61,611.02	61,611.02	5	Corporate Concepts/TC Lounge	TC	7,764.68	7,764.68
FF&E	060-17-002	5/17/2017	1,779.20	1,779.20	5	Sherwin Williams/Carpet Replace	TC	223.25	223.25
FF&E	100-17-001	5/17/2017	22.98	22.98	5	Home Goods/Model Furniture	TC	2.88	2.88
FF&E	050-17-002	5/19/2017	250.09	125.42	3	Edward Don/China	All	26.00	26.00
FF&E	050-17-006	5/19/2017	484.97	243.21	3	Edward Don/Kitchen Supplies	All	50.42	50.42
FF&E	110-17-006	5/19/2017	11,967.85	6,001.92	3	Paylocity/Payroll Implementation	All	1,244.23	1,244.23
Bldg Improve	060-17-005	5/22/2017	12,164.00	6,100.29	30	RG Asphalt/New Chapel Patio	All	124.79	124.79
FF&E	050-17-006	5/24/2017	242.64	121.68	3	Edward Don/Kitchen Supplies	All	24.67	24.67
FF&E	050-17-007	5/24/2017	77.30	38.77	3	Edward Don/Catering Equipment	All	7.86	7.86
FF&E	060-17-027	5/24/2017	2,392.00	2,392.00	3	Direct Supply/Mattress Covers	TC	484.95	484.95

Central Baptist Village  
12/31/17 Depreciable Non-Care Assets  
2017 Additions

Asset Class	Project #	Date	TOTAL COST	IL PORTION	Life	Vendor/Description	Location	2017 IL DEPR	2017 Accum
FF&E	060-17-004	6/1/2017	12,231.61	6,134.19	5	Thornapple/Landscaping Improvements	All	719.30	719.30
FF&E	060-17-004	6/1/2017	1,897.50	951.60	5	Thornapple/Landscaping (Flowers)	All	111.58	111.58
FF&E	050-17-006	6/2/2017	63.76	31.98	3	Edward Don/Kitchen Supplies	All	6.22	6.22
FF&E	060-17-002	6/7/2017	1,464.91	1,464.91	5	Sherwin Williams/Carpet Turns	TC	166.96	166.96
FF&E	050-17-006	6/16/2017	43.86	22.00	3	Edward Don/Kitchen Supplies	All	4.00	4.00
FF&E	050-17-002	6/30/2017	23.81	11.94	3	Edward Don/China	All	2.02	2.02
FF&E	120-17-013	7/3/2017	1,305.24	654.58	5	Runco/LE Office Furniture	All	65.28	65.28
FF&E	050-17-002	7/4/2017	526.20	263.89	3	Edward Don/China	All	43.62	43.62
FF&E	050-17-006	7/4/2017	363.49	182.29	3	Edward Don/Kitchen Supplies	All	30.13	30.13
FF&E	050-17-007	7/15/2017	344.57	172.80	3	Huburt/Catering Equipment	All	28.41	28.41
FF&E	060-17-002	7/5/2017	1,510.40	1,510.40	5	Sherwin Williams/TC Room Turns	TC	148.97	148.97
FF&E	060-17-002	7/5/2017	517.26	517.26	5	Sherwin Williams/TC Room Turns	TC	51.02	51.02
FF&E	050-17-006	7/6/2017	339.84	170.43	3	Edward Don/Kitchen Supplies	All	27.86	27.86
FF&E	100-17-004	7/11/2017	467.05	234.23	5	Eby Graphics/Bus Logo	All	22.33	22.33
FF&E	050-17-006	7/12/2017	107.80	54.06	3	Edward Don/Kitchen Supplies	All	8.54	8.54
FF&E	050-17-006	7/14/2017	301.50	151.20	3	Edward Don/Kitchen Supplies	All	23.61	23.61
FF&E	120-17-001	7/17/2017	11.77	11.77	5	Perkins Eastman/TC Lounges	TC	1.08	1.08
FF&E	060-17-004	8/1/2017	2,500.00	1,253.76	3	Cutting Edge/Gazebo	All	175.18	175.18
FF&E	060-17-004	8/3/2017	6,000.00	3,009.02	5	Cutting Edge/Landscape Improvements	All	248.97	248.97
FF&E	060-17-012	8/4/2017	8,950.00	4,488.45	5	Krause/Landscape Lights	All	368.91	368.91
FF&E	060-17-015	8/4/2017	650.00	325.98	10	Safeguard Waterproofing/Foundation Repair	All	13.40	13.40
Bldg Improve	060-17-009	8/9/2017	4,427.00	2,220.16	3	RG Asphalt/Parking Lot Reseal	All	293.99	293.99
FF&E	050-17-002	8/11/2017	242.56	121.64	3	Edward Don/China	All	15.89	15.89
FF&E	060-17-002	8/16/2017	1,571.72	1,571.72	5	Sherwin Williams/TC Room Turns	TC	118.85	118.85
FF&E	060-17-002	8/16/2017	546.12	546.12	5	Sherwin Williams/TC Room Turns	TC	41.30	41.30
FF&E	050-17-002	8/18/2017	301.78	151.34	3	Edward Don/China	All	18.80	18.80
FF&E	050-17-002	9/1/2017	376.80	188.97	3	Edward Don/China	All	21.05	21.05
FF&E	060-17-015	9/6/2017	2,670.00	1,339.01	10	Safeguard Waterproof/Foundation Repair	All	42.92	42.92
FF&E	050-17-002	9/8/2017	53.58	26.87	3	Edward Don/China	All	2.82	2.82
FF&E	050-17-002	9/22/2017	563.25	282.47	3	Edward Don/China	All	26.05	26.05
FF&E	050-17-005	9/22/2017	3,495.85	1,753.18	3	Edward Don/RoboCoupe	All	161.71	161.71
FF&E	110-17-007	9/25/2017	2,245.00	1,125.87	3	Virtek/Firewall	All	100.76	100.76
FF&E	050-17-006	9/26/2017	294.58	147.73	3	Edward Don/Kitchen Supplies	All	13.09	13.09
FF&E	060-17-023	9/30/2017	1,656.30	830.64	3	Amazon/Maintenance Carts	All	70.55	70.55
FF&E	110-17-011	9/30/2017	1,576.88	790.81	3	Provantage/ProBook 450	All	67.16	67.16
FF&E	060-17-009	10/3/2017	6,877.00	3,448.84	3	RG Asphalt/Parking Lot Sealcoat	All	283.47	283.47
FF&E	050-17-001	10/4/2017	28,394.16	14,239.76	3	Burlodge/Burlodge Carts	All	1,157.39	1,157.39
FF&E	050-17-002	10/6/2017	600.69	301.25	3	Edward Don/China	All	23.93	23.93
FF&E	050-17-010	10/6/2017	590.56	296.17	3	Edward Don/Vitamix	All	23.53	23.53
FF&E	060-17-002	10/7/2017	1,482.25	1,482.25	5	Sherwin Williams/Unit Carpet TC	TC	69.85	69.85
FF&E	120-17-001	10/10/2017	61,559.72	61,559.72	5	Corporate Concepts/TC Lounge Upgrade	TC	2,799.70	2,799.70
FF&E	120-17-004	10/12/2017	1,031.50	517.30	5	Perkins Eastman/Beauty Salon	All	22.96	22.96
FF&E	050-17-002	10/20/2017	234.48	117.59	3	Edward Don/China	All	7.84	7.84
FF&E	050-17-006	10/25/2017	219.98	110.32	3	Edward Don/Kitchen Supplies	All	6.85	6.85
FF&E	060-17-034	10/25/2017	2,510.20	1,258.87	3	NA Corp/Orbital Floor Machine	All	78.18	78.18
FF&E	050-17-002	10/27/2017	479.52	240.48	3	Edward Don/China	All	14.49	14.49
FF&E	110-17-014	10/31/2017	464.00	232.70	3	CCB/Email Server	All	13.18	13.18
FF&E	110-17-014	10/31/2017	479.00	240.22	3	CCB/Email Server	All	13.60	13.60
FF&E	060-17-037	11/9/2017	3,000.00	1,504.51	5	Fox Valley/Fire Alarm Panel	All	43.69	43.69
FF&E	050-17-002	11/10/2017	160.74	80.61	3	Edward Don/China	All	3.83	3.83
FF&E	050-17-006	11/10/2017	367.29	184.20	3	Edward Don/Kitchen Supplies	All	8.75	8.75
FF&E	120-17-001	11/13/2017	1,074.00	1,074.00	5	Perkins Eastman/TC Lounge Upgrade	TC	28.84	28.84
FF&E	120-17-004	11/13/2017	364.76	182.93	5	Perkins Eastman/Beauty Salon	All	4.91	4.91
FF&E	050-17-006	11/14/2017	108.75	54.54	3	Edward Don/Kitchen Supplies	All	2.39	2.39
FF&E	050-17-002	11/17/2017	52.80	26.48	3	Edward Don/China	All	1.09	1.09
FF&E	050-17-002	11/21/2017	(26.15)	(13.11)	3	Edward Don/China	All	(0.49)	(0.49)
FF&E	050-17-007	11/21/2017	64.08	32.14	3	Edward Don/Catering Equipment	All	1.20	1.20
FF&E	050-17-002	11/22/2017	653.39	327.68	3	Edward Don/China	All	11.97	11.97
FF&E	050-17-007	11/22/2017	35.50	17.80	3	Edward Don/Catering Equipment	All	0.65	0.65
FF&E	060-17-002	11/22/2017	1,009.88	1,009.88	5	Sherwin Williams/TC Room Turns	TC	22.13	22.13
FF&E	050-17-002	11/29/2017	50.88	25.52	3	Edward Don/China	All	0.77	0.77
FF&E	050-17-006	11/29/2017	116.52	58.44	3	Edward Don/Kitchen Supplies	All	1.76	1.76
FF&E	060-17-002	11/29/2017	1,248.14	1,248.14	5	Sherwin Williams/TC Room Turns	TC	22.57	22.57
FF&E	060-17-030	11/29/2017	3,650.00	3,650.00	5	Stanton Mechanical/Duct Heaters RTU Carrier Mktg	TC	66.00	66.00
FF&E	060-17-032	11/29/2017	2,700.00	2,700.00	10	Bath Fitter/TC Shower	TC	24.41	24.41
FF&E	120-17-001	11/30/2017	3,637.43	3,637.43	5	Crate & Barrel/TC Lounge Upgrade	TC	63.78	63.78
FF&E	120-17-001	11/30/2017	4,678.00	4,678.00	5	Wendover Art Group/TC Lounge Upgrade	TC	82.03	82.03
FF&E	050-17-002	12/1/2017	560.01	280.85	3	Edward Don/China	All	7.95	7.95
FF&E	050-17-002	12/1/2017	118.44	59.40	3	Edward Don/China	All	1.68	1.68
FF&E	060-17-026	12/1/2017	625.00	313.44	5	Thornapple/Flowers	All	5.32	5.32
FF&E	120-17-004	12/1/2017	11,453.93	5,744.18	5	PS Salon/Beauty Salon	All	97.57	97.57
FF&E	110-17-002	12/4/2017	22,950.00	11,509.50	3	NationSat/TV Distribution System	All	294.31	294.31
FF&E	110-17-003	12/4/2017	2,400.00	1,203.61	3	CCB Technology/Staff PC's	All	30.78	30.78
FF&E	110-17-003	12/4/2017	10,454.28	5,242.86	3	CCB Technology/Staff PC's	All	134.06	134.06
FF&E	050-17-005	12/6/2017	449.68	225.52	3	Edward Don/RoboCoupe	All	5.35	5.35
FF&E	110-17-004	12/6/2017	14,493.18	7,268.38	3	Virtek/File Storage	All	172.58	172.58
FF&E	140-17-001	12/7/2017	4,180.00	4,180.00	3	Kidzpace/Game Console	TC	95.43	95.43
FF&E	050-17-002	12/8/2017	110.16	55.25	3	Edward Don/China	All	1.21	1.21
FF&E	050-17-013	12/8/2017	475.06	238.24	3	Edward Don/Carts	All	5.22	5.22
FF&E	060-17-002	12/11/2017	546.12	546.12	5	Sherwin Williams/TC Unit Turns	TC	6.28	6.28
FF&E	050-17-002	12/12/2017	(9.45)	(4.74)	3	Edward Don/China	All	(0.09)	(0.09)
FF&E	050-17-007	12/12/2017	514.38	257.96	3	Edward Don/Catering	All	4.71	4.71
FF&E	050-17-002	12/13/2017	1,003.59	503.30	3	Edward Don/China	All	8.73	8.73
FF&E	050-17-007	12/13/2017	85.82	43.04	3	Edward Don/Catering	All	0.75	0.75
FF&E	050-17-007	12/13/2017	64.37	32.28	3	Edward Don/Catering	All	0.56	0.56
FF&E	050-17-007	12/13/2017	120.99	60.68	3	Edward Don/Catering	All	1.05	1.05
FF&E	120-17-001	12/13/2017	740.14	740.14	5	Perkins Eastman/TC Lounge	TC	7.71	7.71
FF&E	040-17-001	12/14/2017	585.38	293.57	5	Krause/Socs Serv Office	All	2.90	2.90
FF&E	110-17-003	12/18/2017	228.48	114.58	3	ccb Tech/Staff PC's	All	1.46	1.46
FF&E	050-17-015	12/20/2017	399.77	200.49	3	Edward Don/Placemats	All	2.20	2.20

Central Baptist Village  
12/31/17 Depreciable Non-Care Assets  
2017 Additions

Asset Class	Project #	Date	TOTAL COST	IL PORTION	Life	Vendor/Description	Location	2017 IL DEPR	2017 Accum
FF&E	110-17-003	12/21/2017	11,829.90	5,932.73	3	ccb Tech/Staff PC's	All	59.60	59.60
FF&E	110-17-019	12/21/2017	3,064.16	1,536.69	3	Virtek/Wireless Access	All	15.44	15.44
FF&E	110-17-020	12/21/2017	2,700.00	2,137.79	3	Virtek/Network Switch	TT/TC	21.48	21.48
FF&E	110-17-021	12/21/2017	1,730.00	867.60	3	Virtek/Cisco Smartnet	All	8.72	8.72
FF&E	050-17-012	12/22/2017	1,788.42	1,788.42	3	Edward Don/Café Cooler	TC	16.33	16.33
FF&E	050-17-015	12/24/2017	565.75	283.73	3	Edward Don/Placemats	All	2.07	2.07
FF&E	050-17-013	12/28/2017	1,505.95	755.24	3	Edward Don/Culinary Carts	All	2.76	2.76
FF&E	050-17-002	12/29/2017	373.34	187.23	3	Edward Don/China	All	0.51	0.51
FF&E	050-17-002	12/29/2017	331.48	166.24	3	Edward Don/China	All	0.46	0.46
FF&E	050-17-007	12/29/2017	672.45	337.24	3	Edward Don/Catering	All	0.92	0.92
FF&E	120-17-001	12/29/2017	2,710.85	2,710.85	5	Chicago Art Source/TC Lounge	TC	4.46	4.46
FF&E	030-17-001	12/31/2017	608.12	304.97	5	Global/Dry Erase Whiteboard	All	0.17	0.17
FF&E	040-17-001	12/31/2017	440.04	220.68	5	Corporate Concepts/SocServ Office	All	0.12	0.12
FF&E	050-17-011	12/31/2017	893.59	448.14	3	Boxer Brand/Menu Jackets	All	0.41	0.41
FF&E	050-17-014	12/31/2017	1,012.09	507.57	3	Shoes for Crews/Culinary Mats	All	0.46	0.46
FF&E	060-17-032	12/31/2017	2,875.00	2,875.00	10	Bath Fitter/TC Showers	TC	0.79	0.79
FF&E	060-17-035	12/31/2017	9,357.00	4,692.57	3	North American/Autoscrubber	All	4.29	4.29
FF&E	060-17-036	12/31/2017	3,847.20	1,929.38	5	Recycle Away/Recycle Containers	All	1.06	1.06
FF&E	060-17-038	12/31/2017	2,000.00	1,003.01	5	Morrison/Patio Furniture	All	0.55	0.55
FF&E	110-17-002	12/31/2017	22,950.00	11,509.50	3	NationSat/TV System	All	10.51	10.51
FF&E	110-17-011	12/31/2017	4,124.20	2,068.30	3	Provantage/Laptops	All	1.89	1.89
FF&E	110-17-016	12/31/2017	609.56	305.70	3	IT Watchdogs/IT Temp Monitor	All	0.28	0.28
FF&E	120-17-001	12/31/2017	325.83	325.83	5	Wendover Art/Lounge Artwork	TC	0.18	0.18
FF&E	120-17-001	12/31/2017	398.15	398.15	5	Crate & Barrel/TC Lounge	TC	0.22	0.22
FF&E	120-17-001	12/31/2017	2,710.85	2,710.85	5	Chicago Art Source/TC Lounges	TC	1.49	1.49
FF&E	120-17-001	12/31/2017	1,715.10	1,715.10	5	Perkins Eastman/TC Lounge	TC	0.94	0.94
FF&E	120-17-004	12/31/2017	95.98	48.13	5	Wayfair/Beauty Salon	All	0.03	0.03
FF&E	120-17-004	12/31/2017	3,845.00	1,928.28	5	Ascher Brothers/Beauty Salon	All	1.06	1.06
FF&E	120-17-004	12/31/2017	203.93	102.27	5	Pottery Barn/Beauty Salon	All	0.06	0.06
FF&E	120-17-004	12/31/2017	2,690.83	1,349.46	5	Sherwin Williams/Salon Flooring	All	0.74	0.74
FF&E	120-17-004	12/31/2017	426.00	213.64	5	Insular/Salon Cornice	All	0.12	0.12
FF&E	120-17-007	12/31/2017	1,826.24	915.87	5	Walker Display/Art Gallery	All	0.50	0.50
			766,399.70	496,367.87				50,246.86	50,246.86

Facility Name & ID Number Central Baptist Village

# 0007435

Report Period Beginning: 01/01/2017

Ending: 12/31/2017

**XII. RENTAL COSTS**

**A. Building and Fixed Equipment (See instructions.)**

1. Name of Party Holding Lease: N/A

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

If NO, see instructions.

YES  NO

		1 Year Constructed	2 Number of Beds	3 Original Lease Date	4 Rental Amount	5 Total Years of Lease	6 Total Years Renewal Option*	
3	Original Building:				\$			3
4	Additions							4
5								5
6								6
7	<b>TOTAL</b>				\$			7

10. Effective dates of current rental agreement:

Beginning \_\_\_\_\_

Ending \_\_\_\_\_

11. Rent to be paid in future years under the current rental agreement:

	Fiscal Year Ending	Annual Rent
--	--------------------	-------------

12.	_____ /2018	\$ _____
13.	_____ /2019	\$ _____
14.	_____ /2020	\$ _____

8. List separately any amortization of lease expense included on page 4, line 34.

This amount was calculated by dividing the total amount to be amortized by the length of the lease \_\_\_\_\_.

9. Option to Buy:  YES  NO Terms: \_\_\_\_\_\*

**B. Equipment-Excluding Transportation and Fixed Equipment. (See instructions.)**

15. Is Movable equipment rental included in building rental?

YES  NO

16. Rental Amount for movable equipment: \$ 3,226

Description: Vending Rental (Removed)

(Attach a schedule detailing the breakdown of movable equipment)

**C. Vehicle Rental (See instructions.)**

	1 Use	2 Model Year and Make	3 Monthly Lease Payment	4 Rental Expense for this Period	
17			\$	\$	17
18					18
19					19
20					20
21	<b>TOTAL</b>		\$	\$	21

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

\*\* This amount plus any amortization of lease expense must agree with page 4, line 34.

**XIII. EXPENSES RELATING TO CERTIFIED NURSE AIDE (CNA) TRAINING PROGRAMS (See instructions.)**

**A. TYPE OF TRAINING PROGRAM (If CNAs are trained in another facility program, attach a schedule listing the facility name, address and cost per CNA trained in that facility.)**

<p>1. HAVE YOU TRAINED CNAs DURING THIS REPORT PERIOD? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If "yes", please complete the remainder of this schedule. If "no", provide an explanation as to why this training was not necessary.</p>	<p>2. <u>CLASSROOM PORTION:</u></p> <p>IN-HOUSE PROGRAM <input type="checkbox"/></p> <p>IN OTHER FACILITY <input type="checkbox"/></p> <p>COMMUNITY COLLEGE <input type="checkbox"/></p> <p>HOURS PER CNA _____</p>	<p>3. <u>CLINICAL PORTION:</u></p> <p>IN-HOUSE PROGRAM <input type="checkbox"/></p> <p>IN OTHER FACILITY <input type="checkbox"/></p> <p>HOURS PER CNA _____</p>
--	---	--

**B. EXPENSES**

**ALLOCATION OF COSTS (d)**

		Facility			
		1	2	3	4
		Drop-outs	Completed	Contract	Total
1	Community College Tuition	\$	\$	\$	\$
2	Books and Supplies				
3	Classroom Wages (a)				
4	Clinical Wages (b)				
5	In-House Trainer Wages (c)				
6	Transportation				
7	Contractual Payments				
8	CNA Competency Tests				
9	<b>TOTALS</b>	\$	\$	\$	\$
10	<b>SUM OF line 9, col. 1 and 2 (e)</b>	\$			

**C. CONTRACTUAL INCOME**

In the box below record the amount of income your facility received training CNAs from other facilities.

\$

**D. NUMBER OF CNAs TRAINED**

COMPLETED	
1. From this facility	
2. From other facilities (f)	
DROP-OUTS	
1. From this facility	
2. From other facilities (f)	
<b>TOTAL TRAINED</b>	

- (a) Include wages paid during the classroom portion of training. Do not include fringe benefits.
- (b) Include wages paid during the clinical portion of training. Do not include fringe benefits.
- (c) For in-house training programs only. Do not include fringe benefits.
- (d) Allocate based on if the CNA is from your facility or is being contracted to be trained in your facility. Drop-out costs can only be for costs incurred by your own CNAs.

- (e) The total amount of Drop-out and Completed Costs for your own CNAs must agree with Sch. V, line 13, col. 8.
- (f) Attach a schedule of the facility names and addresses of those facilities for which you trained CNAs.

XIV. SPECIAL SERVICES (Direct Cost) (See instructions.)

	Service	Schedule V Line & Column Reference	Staff		Outside Practitioner (other than consultant)		Supplies (Actual or Allocated)	Total Units (Column 2 + 4)	Total Cost (Col. 3 + 5 + 6)	
			Units of Service	Cost	Units	Cost				
1	Licensed Occupational Therapist	V10A	0.00 hrs	\$ 0	2,457	\$ 177,086	\$ 0	2,457	\$ 177,086	1
2	Licensed Speech and Language Development Therapist	V10A	0.00 hrs	0	480	23,751	0	480	23,751	2
3	Licensed Recreational Therapist	V10A	0.00 hrs	0	0	0	0			3
4	Licensed Physical Therapist	V10A	0.00 hrs	0	3,088	234,368	0	3,088	234,368	4
5	Physician Care		visits							5
6	Dental Care		visits							6
7	Work Related Program		hrs							7
8	Habilitation	V39	0.00 hrs	0	0	0	0			8
9	Pharmacy	V39	0.00 # of prescrpts	0	0	0	162,706		162,706	9
10	Psychological Services (Evaluation and Diagnosis/ Behavior Modification)		hrs							10
11	Academic Education		hrs							11
12	Other (specify): <u>LAB/RADIOLOGY</u>	V39	0.00	0	0	0	11,863		11,863	12
13	Other (specify): <u>BILLABLE SUPPLIES</u>	V39	0.00	0	0	0	11,681		11,681	13
14	<b>TOTAL</b>			\$	6,025	\$ 435,205	\$ 186,250	6,025	\$ 621,455	14

NOTE: This schedule should include fees (other than consultant fees) paid to licensed practitioners. Consultant fees should be detailed on Schedule XVIII-B. Salaries of unlicensed practitioners, such as CNAs, who help with the above activities should not be listed on this schedule.

**XV. BALANCE SHEET - Unrestricted Operating Fund.**

As of **12/31/2017**

(last day of reporting year)

This report must be completed even if financial statements are attached.

		1	2	
		Operating	After	
			Consolidation*	
	<b>A. Current Assets</b>			
1	Cash on Hand and in Banks	\$ 945,287	\$	1
2	Cash-Patient Deposits	46,166		2
3	Accounts & Short-Term Notes Receivable-Patients (less allowance <u>170,080</u> )	1,867,569		3
4	Supply Inventory (priced at )			4
5	Short-Term Investments			5
6	Prepaid Insurance	145,022		6
7	Other Prepaid Expenses	24,126		7
8	Accounts Receivable (owners or related parties)			8
9	Other(specify): <u>Symbria Note Receivable</u>	2,880,133		9
10	<b>TOTAL Current Assets (sum of lines 1 thru 9)</b>	\$ 5,908,303	\$	10
	<b>B. Long-Term Assets</b>			
11	Long-Term Notes Receivable			11
12	Long-Term Investments	34,631,289		12
13	Land	285,820		13
14	Buildings, at Historical Cost	28,723,508		14
15	Leasehold Improvements, at Historical Cost			15
16	Equipment, at Historical Cost	10,144,052		16
17	Accumulated Depreciation (book methods)	(18,053,143)		17
18	Deferred Charges			18
19	Organization & Pre-Operating Costs			19
20	Accumulated Amortization - Organization & Pre-Operating Costs			20
21	Restricted Funds	2,255,728		21
22	Other Long-Term Assets (specify: <u>CIP</u> )	35,050		22
23	Other(specify):			23
24	<b>TOTAL Long-Term Assets (sum of lines 11 thru 23)</b>	\$ 58,022,304	\$	24
25	<b>TOTAL ASSETS (sum of lines 10 and 24)</b>	\$ 63,930,607	\$	25

		1	2	
		Operating	After	
			Consolidation*	
	<b>C. Current Liabilities</b>			
26	Accounts Payable	\$ 770,242	\$	26
27	Officer's Accounts Payable			27
28	Accounts Payable-Patient Deposits			28
29	Short-Term Notes Payable			29
30	Accrued Salaries Payable	698,892		30
31	Accrued Taxes Payable (excluding real estate taxes)	(11)		31
32	Accrued Real Estate Taxes(Sch.IX-B)			32
33	Accrued Interest Payable			33
34	Deferred Compensation	20,312		34
35	Federal and State Income Taxes			35
	<b>Other Current Liabilities(specify):</b>			
36				36
37	<u>Security Deposits</u>	448,251		37
38	<b>TOTAL Current Liabilities (sum of lines 26 thru 37)</b>	\$ 1,937,686	\$	38
	<b>D. Long-Term Liabilities</b>			
39	Long-Term Notes Payable			39
40	Mortgage Payable			40
41	Bonds Payable	19,605,000		41
42	Deferred Compensation			42
	<b>Other Long-Term Liabilities(specify):</b>			
43	<u>Unamortized bond premium</u>	(189,597)		43
44				44
45	<b>TOTAL Long-Term Liabilities (sum of lines 39 thru 44)</b>	\$ 19,415,403	\$	45
46	<b>TOTAL LIABILITIES (sum of lines 38 and 45)</b>	\$ 21,353,089	\$	46
47	<b>TOTAL EQUITY(page 18, line 24)</b>	\$ 42,577,518	\$	47
48	<b>TOTAL LIABILITIES AND EQUITY (sum of lines 46 and 47)</b>	\$ 63,930,607	\$	48

\*(See instructions.)

**XVI. STATEMENT OF CHANGES IN EQUITY**

		<b>1</b>	
		<b>Total</b>	
<b>1</b>	<b>Balance at Beginning of Year, as Previously Reported</b>	\$ <b>40,219,588</b>	<b>1</b>
<b>2</b>	Restatements (describe):		<b>2</b>
<b>3</b>			<b>3</b>
<b>4</b>			<b>4</b>
<b>5</b>			<b>5</b>
<b>6</b>	<b>Balance at Beginning of Year, as Restated (sum of lines 1-5)</b>	\$ <b>40,219,588</b>	<b>6</b>
	<b>A. Additions (deductions):</b>		
<b>7</b>	NET Income (Loss) (from page 19, line 43)	<b>1,317,850</b>	<b>7</b>
<b>8</b>	Aquisitions of Pooled Companies		<b>8</b>
<b>9</b>	Proceeds from Sale of Stock		<b>9</b>
<b>10</b>	Stock Options Exercised		<b>10</b>
<b>11</b>	Contributions and Grants	<b>44,568</b>	<b>11</b>
<b>12</b>	Expenditures for Specific Purposes		<b>12</b>
<b>13</b>	Dividends Paid or Other Distributions to Owners	( )	<b>13</b>
<b>14</b>	Donated Property, Plant, and Equipment		<b>14</b>
<b>15</b>	Other (describe) <b>CHANGE IN PERPETUAL TRUST</b>	<b>1,394,669</b>	<b>15</b>
<b>16</b>	Other (describe) <b>NET ASSETS RELEASED FROM RESTRICT</b>	<b>(336,184)</b>	<b>16</b>
<b>17</b>	<b>TOTAL Additions (deductions) (sum of lines 7-16)</b>	\$ <b>2,420,903</b>	<b>17</b>
	<b>B. Transfers (Itemize):</b>		
<b>18</b>	<b>ILU net asset activity for the year</b>	<b>(62,973)</b>	<b>18</b>
<b>19</b>			<b>19</b>
<b>20</b>			<b>20</b>
<b>21</b>			<b>21</b>
<b>22</b>			<b>22</b>
<b>23</b>	<b>TOTAL Transfers (sum of lines 18-22)</b>	\$ <b>(62,973)</b>	<b>23</b>
<b>24</b>	<b>BALANCE AT END OF YEAR (sum of lines 6 + 17 + 23)</b>	\$ <b>42,577,518</b>	<b>24</b> *

\* This must agree with page 17, line 47.



Facility Name &amp; ID Number Central Baptist Village

# 0007435

Report Period Beginning: 01/01/2017

Ending:

12/31/2017

**XVII. INCOME STATEMENT (attach any explanatory footnotes necessary to reconcile this schedule to Schedules V and VI.) All required classifications of revenue and expense must be provided on this form, even if financial statements are attached.**

**Note: This schedule should show gross revenue and expenses. Do not net revenue against expense**

1		2	
I. Revenue		Amount	
<b>A. Inpatient Care</b>			
1	Gross Revenue -- All Levels of Care	\$ 12,758,255	1
2	Discounts and Allowances for all Levels	(1,693,215)	2
3	<b>SUBTOTAL Inpatient Care (line 1 minus line 2)</b>	\$ 11,065,040	3
<b>B. Ancillary Revenue</b>			
4	Day Care		4
5	Other Care for Outpatients		5
6	Therapy	1,654,437	6
7	Oxygen		7
8	<b>SUBTOTAL Ancillary Revenue (lines 4 thru 7)</b>	\$ 1,654,437	8
<b>C. Other Operating Revenue</b>			
9	Payments for Education		9
10	Other Government Grants		10
11	CNA Training Reimbursements		11
12	Gift and Coffee Shop	465	12
13	Barber and Beauty Care	30,749	13
14	Non-Patient Meals		14
15	Telephone, Television and Radio		15
16	Rental of Facility Space		16
17	Sale of Drugs	217,416	17
18	Sale of Supplies to Non-Patients		18
19	Laboratory	6,602	19
20	Radiology and X-Ray	22,223	20
21	Other Medical Services	94,535	21
22	Laundry		22
23	<b>SUBTOTAL Other Operating Revenue (lines 9 thru 22)</b>	\$ 371,990	23
<b>D. Non-Operating Revenue</b>			
24	Contributions	344,802	24
25	Interest and Other Investment Income***	1,256,582	25
26	<b>SUBTOTAL Non-Operating Revenue (lines 24 and 25)</b>	\$ 1,601,384	26
<b>E. Other Revenue (specify):****</b>			
27	<b>Settlement Income (Insurance, Legal, Etc.)</b>		27
28	<u>AL/IL</u>		28
28a	<u>Misc Revenue</u>	(507,015)	28a
29	<b>SUBTOTAL Other Revenue (lines 27, 28 and 28a)</b>	\$ (507,015)	29
30	<b>TOTAL REVENUE (sum of lines 3, 8, 23, 26 and 29)</b>	\$ 14,185,836	30

1		2	
II. Expenses		Amount	
<b>A. Operating Expenses</b>			
31	General Services	2,520,009	31
32	Health Care	5,020,349	32
33	General Administration	3,455,316	33
<b>B. Capital Expense</b>			
34	Ownership	1,190,543	34
<b>C. Ancillary Expense</b>			
35	Special Cost Centers	394,387	35
36	Provider Participation Fee	287,382	36
<b>D. Other Expenses (specify):</b>			
37			37
38			38
39			39
40	<b>TOTAL EXPENSES (sum of lines 31 thru 39)*</b>	\$ 12,867,986	40
41	<b>Income before Income Taxes (line 30 minus line 40)**</b>	1,317,850	41
42	<b>Income Taxes</b>		42
43	<b>NET INCOME OR LOSS FOR THE YEAR (line 41 minus line 42)</b>	\$ 1,317,850	43

III. Net Inpatient Revenue detailed by Payer Source		Amount	
44	Medicaid - Net Inpatient Revenue	\$ 1,408,994	44
45	Private Pay - Net Inpatient Revenue	7,405,563	45
46	Medicare - Net Inpatient Revenue	1,460,477	46
47	Other-(specify) <u>ALL OTHER SNE/SCF IP REVENUE</u>	2,510,175	47
48	Other-(specify) <u>C/A ANCILLARY ACCOUNTS</u>	(1,720,169)	48
49	<b>TOTAL Inpatient Care Revenue (This total must agree to Line 3)</b>	\$ 11,065,040	49

\* This must agree with page 4, line 45, column 4.

\*\* Does this agree with taxable income (loss) per Federal Income Tax Return? \_\_\_\_\_ If not, please attach a reconciliation.

\*\*\* See the instructions. If this total amount has not been offset against interest expense on Schedule V, line 32, please include a detailed explanation.

\*\*\*\*Provide a detailed breakdown of "Other Revenue" on an attached sheet.

Facility Name & ID Number Central Baptist Village

# 0007435

Report Period Beginning: 01/01/2017

Ending: 12/31/2017

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

(This schedule must cover the entire reporting period.)

	1	2**	3	4		
	# of Hrs. Actually Worked	# of Hrs. Paid and Accrued	Reporting Period Total Salaries, Wages	Average Hourly Wage		
1	Director of Nursing	2,000	2,080	\$ 129,022	\$ 62.03	1
2	Assistant Director of Nursing	2,070	2,230	82,292	36.90	2
3	Registered Nurses	30,313	32,091	1,162,961	36.24	3
4	Licensed Practical Nurses	13,674	14,767	458,465	31.05	4
5	CNAs & Orderlies	96,040	102,412	1,536,817	15.01	5
6	CNA Trainees	0	0	0		6
7	Licensed Therapist	0	0	0		7
8	Rehab/Therapy Aides	0	0	0		8
9	Activity Director	1,062	1,073	28,301	26.38	9
10	Activity Assistants	12,865	13,703	190,534	13.90	10
11	Social Service Workers	5,042	5,353	126,270	23.59	11
12	Dietician	0	0	0		12
13	Food Service Supervisor	9,704	10,186	138,730	13.62	13
14	Head Cook	2,124	2,287	45,515	19.90	14
15	Cook Helpers/Assistants	42,226	44,522	534,147	12.00	15
16	Dishwashers	0	0	0		16
17	Maintenance Workers	5,493	5,833	84,501	14.49	17
18	Housekeepers	12,730	13,416	149,656	11.16	18
19	Laundry	3,655	3,806	42,805	11.25	19
20	Administrator	3,886	4,066	312,995	76.98	20
21	Assistant Administrator	0	0	0		21
22	Other Administrative	10,286	11,048	391,148	35.40	22
23	Office Manager	1,585	1,642	52,533	31.99	23
24	Clerical	3,547	3,761	52,790	14.04	24
25	Vocational Instruction	0	0	0		25
26	Academic Instruction	0	0	0		26
27	Medical Director	0	0	0		27
28	Qualified MR Prof. (QMRP)	0	0	0		28
29	Resident Services Coordinator	0	0	0		29
30	Habilitation Aides (DD Homes)	0	0	0		30
31	Medical Records	1,866	1,985	31,825	16.03	31
32	Other Health C: SCF staff, Security	27,852	29,700	600,589	20.22	32
33	Other(specify) <u>Marketing</u>	5,887	6,216	265,036	42.64	33
34	TOTAL (lines 1 - 33)	293,907	312,177	\$ 6,416,932 *	\$ 20.56	34

\* This total must agree with page 4, column 1, line 45.

\*\* See instructions.

B. CONSULTANT SERVICES

	1	2	3		
	Number of Hrs. Paid & Accrued	Total Consultant Cost for Reporting Period	Schedule V Line & Column Reference		
35	Dietary Consultant	2,080	\$ 53,000	01-03	35
36	Medical Director	208	34,956	09-03	36
37	Medical Records Consultant				37
38	Nurse Consultant				38
39	Pharmacist Consultant	Monthly	4,320	39-03	39
40	Physical Therapy Consultant				40
41	Occupational Therapy Consultant				41
42	Respiratory Therapy Consultant				42
43	Speech Therapy Consultant	1	60	10-03	43
44	Activity Consultant	20	1,177	11-03	44
45	Social Service Consultant	41	2,665	12-03	45
46	Other(specify) <u>Morrison Mgmt Fees</u>	446	33,420	01-03	46
47	<u>Morrison Mgmt Fees</u>	459	34,428	06-03	47
48	<u>Morrison Mgmt Fees</u>	335	25,140	03-03	48
49	TOTAL (lines 35 - 48)	3,590	\$ 189,166		49

C. CONTRACT NURSES

	1	2	3		
	Number of Hrs. Paid & Accrued	Total Contract Wages	Schedule V Line & Column Reference		
50	Registered Nurses		\$		50
51	Licensed Practical Nurses				51
52	Certified Nurse Assistants/Aides				52
53	TOTAL (lines 50 - 52)		\$		53

**XIX. SUPPORT SCHEDULES**

A. Administrative Salaries			Ownership	D. Employee Benefits and Payroll Taxes			F. Dues, Fees, Subscriptions and Promotions	
Name	Function	%	Amount	Description	Amount	Description	Amount	
<u>Dawn Mondschein</u>	<u>Chief Executive Officer</u>	<u>N/A</u>	\$ <u>181,380</u>	<u>Workers' Compensation Insurance</u>	\$ <u>193,671</u>	<u>IDPH License Fee</u>	\$ _____	
<u>Anna-Liisa LaCroix</u>	<u>Administrator</u>	<u>N/A</u>	<u>131,615</u>	<u>Unemployment Compensation Insurance</u>	<u>13,020</u>	<u>Advertising: Employee Recruitment</u>	_____	
_____	_____	_____	_____	<u>FICA Taxes</u>	<u>459,170</u>	<u>Health Care Worker Background Check</u>	_____	
_____	_____	_____	_____	<u>Employee Health Insurance</u>	<u>1,053,130</u>	(Indicate # of checks performed _____)	_____	
_____	_____	_____	_____	<u>Employee Meals</u>	_____	<u>Patient Background Checks</u>	<u>11,196</u>	
_____	_____	_____	_____	<u>Illinois Municipal Retirement Fund (IMRF)*</u>	_____	<u>Help Wanted</u>	<u>4,741</u>	
_____	_____	_____	_____	<u>Retirement Plan</u>	<u>85,333</u>	<u>Nursing subscriptions</u>	<u>347</u>	
<b>TOTAL (agree to Schedule V, line 17, col. 1)</b>			<b>\$ 312,995</b>	<u>Other</u>	<u>25,492</u>	<u>Financial services subscriptions</u>	<u>697</u>	
<b>(List each licensed administrator separately.)</b>			<b>\$ 312,995</b>	<u>Non-Allowable benefits</u>	<u>(75,576)</u>	<u>Admin &amp; Board dues, fees, licenses</u>	<u>33,713</u>	
						<u>Less ILU portion</u>	<u>(13,718)</u>	
<b>B. Administrative - Other</b>						<u>Less: Public Relations Expense</u>	( _____ )	
Description			Amount			<u>Non-allowable advertising</u>	( _____ )	
_____			\$ _____			<u>Yellow page advertising</u>	( _____ )	
_____			_____					
_____			_____					
<b>TOTAL (agree to Schedule V, line 17, col. 3)</b>			<b>\$ _____</b>	<b>TOTAL (agree to Schedule V, line 22, col.8)</b>	<b>\$ 1,754,240</b>	<b>TOTAL (agree to Sch. V, line 20, col. 8)</b>	<b>\$ 36,976</b>	
<b>(Attach a copy of any management service agreement)</b>								
<b>C. Professional Services</b>				<b>E. Schedule of Non-Cash Compensation Paid to Owners or Employees</b>			<b>G. Schedule of Travel and Seminar**</b>	
Vendor/Payee	Type		Amount	Description	Line #	Amount	Description	Amount
<u>Plante Moran</u>	<u>Accounting</u>		\$ <u>53,415</u>	_____	_____	\$ _____	<u>Out-of-State Travel</u>	\$ _____
<u>Berens-Tate Consulting Group</u>	<u>Accounting</u>		<u>650</u>	_____	_____	_____	_____	_____
<u>ADP</u>	<u>Payroll Processing</u>		<u>18,810</u>	_____	_____	_____	<u>In-State Travel</u>	_____
<u>VirTeck</u>	<u>IT Support</u>		<u>8,080</u>	_____	_____	_____	_____	_____
<u>Heartland Business Systems</u>	<u>IT Support</u>		<u>5,990</u>	_____	_____	_____	_____	_____
<u>Advantage Consulting</u>	<u>Billing Services</u>		<u>28,162</u>	_____	_____	_____	_____	_____
<u>Adjusted on Page 5A</u>	<u>Legal</u>		<u>20,374</u>	_____	_____	_____	_____	_____
<u>Unemployment Tax Control</u>	<u>Unemployment Consulting</u>		<u>4,800</u>	_____	_____	_____	<u>Seminar Expense</u>	<u>34,150</u>
<u>LBL Strategies</u>	<u>Strategic Planning Consulting</u>		<u>4,440</u>	_____	_____	_____	<u>See separate workbook and PDF</u>	_____
<u>Paylocity</u>	<u>Payroll Processing</u>		<u>22,177</u>	_____	_____	_____	_____	_____
<u>Marcum</u>	<u>Accounting</u>		<u>1,236</u>	_____	_____	_____	<u>Entertainment Expense</u>	( _____ )
<b>TOTAL (agree to Schedule V, line 19, column 3)</b>			<b>\$ 168,134</b>	<b>TOTAL</b>		<b>\$ _____</b>	(agree to Sch. V, line 24, col. 8)	
<b>(For legal fee disclosure, see page 39 of instructions)</b>			<b>\$ 168,134</b>				<b>TOTAL</b>	<b>\$ 34,150</b>

\* Attach copy of IMRF notifications

\*\*See instructions.

Facility Name & ID Number Central Baptist Village# 0007435Report Period Beginning: 01/01/2017Ending: 12/31/2017**XX. GENERAL INFORMATION:**

- (1) Are nursing employees (RN,LPN,NA) represented by a union? No
- (2) Are there any dues to nursing home associations included on the cost report? Yes  
If YES, give association name and amount. Leading Age \$14,734
- (3) Did the nursing home make political contributions or payments to a political organization? No If YES, have these costs been properly adjusted out of the cost report? N/A
- (4) Does the bed capacity of the building differ from the number of beds licensed at the end of the fiscal year? No If YES, what is the capacity? N/A
- (5) Have you properly capitalized all major repairs and equipment purchases? Yes  
What was the average life used for new equipment added during this period? 10 Years
- (6) Indicate the total amount of both disposable and non-disposable diaper expense and the location of this expense on Sch. V. \$ 69,665 Line 10-2
- (7) Have all costs reported on this form been determined using accounting procedures consistent with prior reports? Yes If NO, attach a complete explanation.
- (8) Are you presently operating under a sale and leaseback arrangement? No  
If YES, give effective date of lease. N/A
- (9) Are you presently operating under a sublease agreement? YES X NO
- (10) Was this home previously operated by a related party (as is defined in the instructions for Schedule VII)? YES NO X If YES, please indicate name of the facility, IDPH license number of this related party and the date the present owners took over. N/A
- (11) Indicate the amount of the Provider Participation Fees paid and accrued to the Department during this cost report period. \$ 287,382  
This amount is to be recorded on line 42 of Schedule V.
- (12) Are there any salary costs which have been allocated to more than one line on Schedule V for an individual employee? No If YES, attach an explanation of the allocation.
- (13) Have costs for all supplies and services which are of the type that can be billed to the Department, in addition to the daily rate, been properly classified in the Ancillary Section of Schedule V? Yes
- (14) Is a portion of the building used for any function other than long term care services for the patient census listed on page 2, Section B? Yes For example, is a portion of the building used for rental, a pharmacy, day care, etc.) If YES, attach a schedule which explains how all related costs were allocated to these functions.
- (15) Indicate the cost of employee meals that has been reclassified to employee benefits on Schedule V. \$ 25,492 Has any meal income been offset against related costs? Yes Indicate the amount. \$ 5,011
- (16) Travel and Transportation  
a. Are there costs included for out-of-state travel? Yes  
If YES, attach a complete explanation.  
b. Do you have a separate contract with the Department to provide medical transportation for residents? No If YES, please indicate the amount of income earned from such a program during this reporting period. \$ N/A  
c. What percent of all travel expense relates to transportation of nurses and patients? N/A  
d. Have vehicle usage logs been maintained? N/A  
e. Are all vehicles stored at the nursing home during the night and all other times when not in use? N/A  
f. Has the cost for commuting or other personal use of autos been adjusted out of the cost report? N/A  
g. **Does the facility transport residents to and from day training? N/A**  
**Indicate the amount of income earned from providing such transportation during this reporting period. \$ N/A**
- (17) Has an audit been performed by an independent certified public accounting firm? Yes  
Firm Name: Plante Moran, PLLC
- (18) Have all costs which do not relate to the provision of long term care been adjusted out of Schedule V? Yes
- (19) Has a schedule for the legal fees reported on the cost report been provided by the facility? See page 39 of the instructions for details. N/A  
Attach invoices and a summary of services for all architect and appraisal fees

**CENTRAL BAPTIST VILLAGE**

**PROVIDER #0007435**

**Supporting Documentation for Medicaid Cost Report**

**DECEMBER 31, 2017**

- EXHIBIT 1 - Trial Balance**
- EXHIBIT 2 - Allocation Basis Schedule**
- EXHIBIT 3 - Seminar Schedule**

Central Baptist Village  
 12/31/2017 MEDICAID COST REPORT TRIAL BALANCE  
 MEDICAID PROVIDER NUMBER 0007435

Exhibit 1

Acct	Description	Unadjusted Trial Balance 12/31/17	JR Re	AJEs DR (CR)	Adj. Balance Before Alloc. 12/31/17	Alloc. Ratios	Adjusted Trial Balance 12/31/17	MCD REF
<b>ASSETS</b>								
1001.00	Petty Cash	1,250.00		0.00	\$1,250.00	100.00%	\$1,250.00	BS01
1010.10	Cash in Bank	944,037.00		0.00	944,037.00	100.00%	944,037.00	BS01
1010.70	Cash in Bank - Resident Funds	46,166.00		0.00	46,166.00	100.00%	46,166.00	BS02
1030.10	Accounts Receivable - Private	2,036,152.00		0.00	2,036,152.00	100.00%	2,036,152.00	BS03
1030.20	Accounts Receivable - Medicare	1,497.00		0.00	1,497.00	100.00%	1,497.00	BS03
1030.30	Accounts Receivable - Medicaid	0.00		0.00	0.00	100.00%	0.00	BS03
1030.40	Accounts Receivable - Other Payers	0.00		0.00	0.00	100.00%	0.00	BS03
1030.50	Accounts Receivable - Managed Care	0.00		0.00	0.00	100.00%	0.00	BS03
1040.00	Allowance For Uncollectible Accounts	(170,080.00)		0.00	(170,080.00)	100.00%	(170,080.00)	BS03
1050.00	Notes Receivable	0.00		0.00	0.00	100.00%	0.00	BS11
1060.00	Allowance For Uncollectible Notes Receivable	0.00		0.00	0.00	100.00%	0.00	BS11
1070.10	Other Receivables	2,880,133.00		0.00	2,880,133.00	100.00%	2,880,133.00	BS09
1080.10	Cost Settlements - Medicare	0.00		0.00	0.00	100.00%	0.00	BS23
1080.20	Cost Settlements - Medicaid	0.00		0.00	0.00	100.00%	0.00	BS23
1090.10	Inventories - Medical and Program Supplies	0.00		0.00	0.00	100.00%	0.00	BS04
1090.20	Inventories - Dietary	0.00		0.00	0.00	100.00%	0.00	BS09
1090.30	Inventories - Gift Shop	0.00		0.00	0.00	100.00%	0.00	BS09
1090.40	Inventories - Housekeeping	0.00		0.00	0.00	100.00%	0.00	BS09
1090.50	Inventories - Laundry and Linen	0.00		0.00	0.00	100.00%	0.00	BS09
1090.60	Inventories - Maintenance	0.00		0.00	0.00	100.00%	0.00	BS09
1100.10	Prepaid - Insurance	145,022.00		0.00	145,022.00	100.00%	145,022.00	BS06
1100.70	Prepaid - Other	24,126.00		0.00	24,126.00	100.00%	24,126.00	BS07
1110.10	Short-Term Investments	0.00		0.00	0.00	100.00%	0.00	BS05
1200.10	Land	285,820.00		0.00	285,820.00	100.00%	285,820.00	BS13
1200.20	Land Improvements	0.00		0.00	0.00	100.00%	0.00	BS14
1200.30	Building and Building Improvements	28,723,508.00		0.00	28,723,508.00	100.00%	28,723,508.00	BS14
1200.40	Moveable Equipment	9,963,474.00		0.00	9,963,474.00	100.00%	9,963,474.00	BS16
1200.50	Transportation Equipment	180,578.00		0.00	180,578.00	100.00%	180,578.00	BS16
1200.60	Leasehold Improvements	0.00		0.00	0.00	100.00%	0.00	BS15
1200.70	Financing Cost	0.00		0.00	0.00	100.00%	0.00	BS18
1200.99	Construction in Progress	35,050.00		0.00	35,050.00	100.00%	35,050.00	BS22
1250.10	A/D - Land Improvements	0.00		0.00	0.00	100.00%	0.00	BS17
1250.20	A/D - Building and Building Improvements	(13,889,297.00)		0.00	(13,889,297.00)	100.00%	(13,889,297.00)	BS17
1250.30	A/D - Equipment	(3,983,268.00)		0.00	(3,983,268.00)	100.00%	(3,983,268.00)	BS17
1250.40	A/D - Transportation Equipment	(180,578.00)		0.00	(180,578.00)	100.00%	(180,578.00)	BS17
1250.50	A/D - Leasehold Improvements	0.00		0.00	0.00	100.00%	0.00	BS17
1250.60	A/D - Financing Cost	0.00		0.00	0.00	100.00%	0.00	BS18
1300.10	Fixed Equipment - Building Improv.	0.00		0.00	0.00	100.00%	0.00	BS14
1350.10	A/D - Fixed Equip - Building Improv.	0.00		0.00	0.00	100.00%	0.00	BS17
1400.10	Long Term Investments	34,631,289.00		0.00	34,631,289.00	100.00%	34,631,289.00	BS12
1400.60	Restricted Funds - Replace. Reserve	0.00		0.00	0.00	100.00%	0.00	BS21
1400.70	Restricted Funds - Funded Depreciation	0.00		0.00	0.00	100.00%	0.00	BS21
1410.10	Deposits - Workers Compensation	0.00		0.00	0.00	100.00%	0.00	BS23
1410.20	Deposits - Leases	0.00		0.00	0.00	100.00%	0.00	BS23
1410.30	Deposits - Other	0.00		0.00	0.00	100.00%	0.00	BS23
1420.00	Due From Officers/Owners	0.00		0.00	0.00	100.00%	0.00	BS08
1430.10	Escrow Accounts	2,255,728.00		0.00	2,255,728.00	100.00%	2,255,728.00	BS21
1430.20	Deferred Loan Costs and Finance Charges	0.00		0.00	0.00	100.00%	0.00	BS18
1430.30	Organization Expenses	0.00		0.00	0.00	100.00%	0.00	BS19
1430.40	Goodwill	0.00		0.00	0.00	100.00%	0.00	BS18
1430.50	Start-Up Costs	0.00		0.00	0.00	100.00%	0.00	BS19
1430.60	InterCompany Loan	0.00		0.00	0.00	100.00%	0.00	BS08
1430.70	Other Fixed Assets	0.00		0.00	0.00	100.00%	0.00	BS23
1440.00	Notes Receivable - Long Term	0.00		0.00	0.00	100.00%	0.00	BS11
	<b>TOTAL ASSETS</b>	<b>63,930,607.00</b>		<b>0.00</b>	<b>63,930,607.00</b>		<b>63,930,607.00</b>	
<b>LIABILITIES</b>								
2010.10	Accounts Payable - Trade	(770,242.00)		0.00	(770,242.00)	100.00%	(770,242.00)	BS26
2010.20	Accounts Payable - Resident Deposits	0.00		0.00	0.00	100.00%	0.00	BS28
2010.30	Accounts Payable - Resident Funds	0.00		0.00	0.00	100.00%	0.00	BS28
2020.10	Cost Settlements Medicare	0.00		0.00	0.00	100.00%	0.00	BS36
2020.20	Cost Settlements - Medicaid	0.00		0.00	0.00	100.00%	0.00	BS36
2030.10	Short Term Notes Payable	0.00		0.00	0.00	100.00%	0.00	BS29
2040.00	Current Portion of Long Term Debt	0.00		0.00	0.00	100.00%	0.00	BS29
2050.10	Accrued Compensation - Salaries and Wages	(184,959.00)		0.00	(184,959.00)	100.00%	(184,959.00)	BS30

Central Baptist Village  
 12/31/2017 MEDICAID COST REPORT TRIAL BALANCE  
 MEDICAID PROVIDER NUMBER 0007435

Exhibit 1

Acct	Description	Unadjusted Trial Balance 12/31/17	JR Re	AJEs DR (CR)	Adj. Balance Before Alloc. 12/31/17	Alloc. Ratios	Adjusted Trial Balance 12/31/17	MCD REF
2050.20	Accrued Compensation - Vacations	(513,933.00)		0.00	(513,933.00)	100.00%	(513,933.00)	BS30
2050.30	Accrued Compensation - Other	0.00		0.00	0.00	100.00%	0.00	BS30
2050.40	Accrued Compensation - Bonuses	0.00		0.00	0.00	100.00%	0.00	BS30
2050.50	Pensions - Retirement Plans	(20,312.00)		0.00	(20,312.00)	100.00%	(20,312.00)	BS34
2050.60	Profit Sharing Plans	0.00		0.00	0.00	100.00%	0.00	BS34
2060.10	P/R Withholding - Federal	0.00		0.00	0.00	100.00%	0.00	BS31
2060.20	P/R Withholding - FICA	0.00		0.00	0.00	100.00%	0.00	BS31
2060.30	P/R Withholding - State	0.00		0.00	0.00	100.00%	0.00	BS31
2060.40	P/R Withholding - Other/Union Dues	11.00		0.00	11.00	100.00%	11.00	BS31
2060.50	Employers Portion of FICA/MCR or PERS	0.00		0.00	0.00	100.00%	0.00	BS31
2060.60	P/R Withholding - Group Insurance Premium	0.00		0.00	0.00	100.00%	0.00	BS37
2060.70	P/R Withholding - SUIT	0.00		0.00	0.00	100.00%	0.00	BS37
2060.80	P/R Withholding - FUIT	0.00		0.00	0.00	100.00%	0.00	BS37
2060.90	P/R Withholding - W/C	0.00		0.00	0.00	100.00%	0.00	BS37
2080.10	Taxes Payable - Real Estate	0.00		0.00	0.00	100.00%	0.00	BS32
2080.20	Taxes Payable - Personal Property	0.00		0.00	0.00	100.00%	0.00	BS31
2080.30	Taxes Payable - Federal Income Tax	0.00		0.00	0.00	100.00%	0.00	BS35
2080.40	Taxes Payable - State Inc./Franchise Tax	0.00		0.00	0.00	100.00%	0.00	BS35
2080.50	Taxes Payable - Local Income Tax	0.00		0.00	0.00	100.00%	0.00	BS35
2080.60	Taxes Payable - Sales Taxes	0.00		0.00	0.00	100.00%	0.00	BS35
2080.70	Taxes Payable - Other Taxes	0.00		0.00	0.00	100.00%	0.00	BS35
2090.10	Other Liabilities - Accrued Interest	0.00		0.00	0.00	100.00%	0.00	BS33
2090.20	Other Liabilities - Dividends Payable	0.00		0.00	0.00	100.00%	0.00	BS37
2090.30	Other Liabilities - Other	(448,251.00)		0.00	(448,251.00)	100.00%	(448,251.00)	BS37
2090.40	Other Liabilities - Franchise Permit Fee	0.00		0.00	0.00	100.00%	0.00	BS37
2410.10	Long-Term Debt - Mortgages	0.00		0.00	0.00	100.00%	0.00	BS40
2410.20	Long-Term Debt - Bonds	(19,605,000.00)		0.00	(19,605,000.00)	100.00%	(19,605,000.00)	BS41
2410.30	Long-Term Debt - Notes Payable	0.00		0.00	0.00	100.00%	0.00	BS39
2410.40	Long-Term Debt - Construct. Loans	0.00		0.00	0.00	100.00%	0.00	BS39
2410.50	Long-Term Debt - Capital Lease	0.00		0.00	0.00	100.00%	0.00	BS39
2410.60	Long-Term Debt - Life Insurance	0.00		0.00	0.00	100.00%	0.00	BS39
2420.00	Related Party Loans - Interest Allowable	0.00		0.00	0.00	100.00%	0.00	BS26
2430.00	Related Party Loans - Int. Non-Allowable	0.00		0.00	0.00	100.00%	0.00	BS44
2440.00	Non-Interest Bearing Loans From Owners	0.00		0.00	0.00	100.00%	0.00	BS44
2450.10	Deferred Liabilities - Revenue	0.00		0.00	0.00	100.00%	0.00	BS43
2450.20	Deferred Liabilities - Fed Inc Tax	0.00		0.00	0.00	100.00%	0.00	BS43
2450.30	Deferred Liabilities - State Inc Tax	0.00		0.00	0.00	100.00%	0.00	BS43
2450.40	Deferred Liabilities - Other	189,597.00		0.00	189,597.00	100.00%	189,597.00	BS43
	<b>TOTAL LIABILITIES</b>	<b>(21,353,089.00)</b>		<b>0.00</b>	<b>(21,353,089.00)</b>		<b>(21,353,089.00)</b>	
<b>EQUITY</b>								
3000.20	Paid In Capital	0.00		0.00	0.00	100.00%	0.00	BS47
3000.40	Retained Earnings	(41,322,641.00)		0.00	(41,322,641.00)	100.00%	(41,322,641.00)	BS47
3000.50	Profit/Loss	(1,254,877.00)		0.00	(1,254,877.00)	100.00%	(1,254,877.00)	BS47
3000.60	Dividends Paid	0.00		0.00	0.00	100.00%	0.00	BS47
	<b>TOTAL LIABILITIES &amp; EQUITY</b>	<b>(63,930,607.00)</b>		<b>0.00</b>	<b>(63,930,607.00)</b>	<b>100.00%</b>	<b>(63,930,607.00)</b>	
<b>REVENUES</b>								
5010.00	CDP Room & Board - Private	(7,503,313.00)		97,750.40	(7,405,562.60)	100.00%	(7,405,562.60)	IS01
5010.90	Non CDP-Room & Board - Private	0.00		0.00	0.00	100.00%	0.00	IS01
5011.00	CDP Room & Board - Medicare	(1,662,579.00)		134,087.31	(1,528,491.69)	100.00%	(1,528,491.69)	IS01
5012.00	CDP Room & Board - Medicaid	(1,516,943.00)		111,896.52	(1,405,046.48)	100.00%	(1,405,046.48)	IS01
5012.90	Non CDP-Room & Board - Medicaid	0.00		0.00	0.00	100.00%	0.00	IS01
5013.00	CDP Room & Board - Veterans	0.00		0.00	0.00	100.00%	0.00	IS01
5013.90	Non CDP-Room & Board - Veterans	0.00		0.00	0.00	100.00%	0.00	IS01
5014.00	CDP Room & Board -Other	0.00		(209,646.92)	(209,646.92)	100.00%	(209,646.92)	IS01
5014.90	Non CDP-Room & Board - Other	0.00		0.00	0.00	100.00%	0.00	IS01
5015.00	CDP Room & Board -MCD Mng Care	0.00		0.00	0.00	100.00%	0.00	IS01
5015.90	Non CDP R & B -MCD Mng Care	0.00		0.00	0.00	100.00%	0.00	IS01
5016.00	CDP Room & Board -MCR Mng Care	0.00		(134,087.31)	(134,087.31)	100.00%	(134,087.31)	IS01
5016.90	Non CDP R & B -MCR Mng Care	0.00		0.00	0.00	100.00%	0.00	IS01
5017.00	Room & Board - Assisted Living	0.00		0.00	0.00	0.00%	0.00	IS28
5018.00	Room & Board - Independent Living	(2,960,983.00)		0.00	(2,960,983.00)	0.00%	0.00	IS28
5019.00	Room & Board - Sheltered Care Facility	(2,075,420.00)		0.00	(2,075,420.00)	100.00%	(2,075,420.00)	IS01
5020.20	Physical Therapy - Medicare B	(100,132.00)		(155,943.00)	(256,075.00)	100.00%	(256,075.00)	IS06

Central Baptist Village  
 12/31/2017 MEDICAID COST REPORT TRIAL BALANCE  
 MEDICAID PROVIDER NUMBER 0007435

Exhibit 1

Acct	Description	Unadjusted Trial Balance 12/31/17	JR Re	AJEs DR (CR)	Adj. Balance Before Alloc. 12/31/17	Alloc. Ratios	Adjusted Trial Balance 12/31/17	MCD REF
5020.30	Physical Therapy - Private	0.00		0.00	0.00	100.00%	0.00	IS06
5020.40	Physical Therapy - Medicare A	(560,050.00)		(700.00)	(560,750.00)	100.00%	(560,750.00)	IS06
5020.50	Physical Therapy - Veterans	0.00		0.00	0.00	100.00%	0.00	IS06
5020.60	Physical Therapy - Other	0.00		0.00	0.00	100.00%	0.00	IS06
5020.70	Physical Therapy - Medicaid	0.00		0.00	0.00	100.00%	0.00	IS06
5020.80	Physical Therapy - MCD Mng Care	0.00		0.00	0.00	100.00%	0.00	IS06
5020.90	Physical Therapy - MCR Mng Care	(193,219.00)		101,161.11	(92,057.89)	100.00%	(92,057.89)	IS06
5030.20	Occupational Therapy - Medicare B	(70,632.00)		(111,518.00)	(182,150.00)	100.00%	(182,150.00)	IS06
5030.30	Occupational Therapy - Private	0.00		0.00	0.00	100.00%	0.00	IS06
5030.40	Occupational Therapy - Medicare A	(434,350.00)		(100.04)	(434,450.04)	100.00%	(434,450.04)	IS06
5030.50	Occupational Therapy - Veterans	0.00		0.00	0.00	100.00%	0.00	IS06
5030.60	Occupational Therapy - Other	0.00		0.00	0.00	100.00%	0.00	IS06
5030.70	Occupational Therapy - Medicaid	0.00		0.00	0.00	100.00%	0.00	IS06
5030.80	Occupational Therapy - MCD Mng Care	0.00		0.00	0.00	100.00%	0.00	IS06
5030.90	Occupational Therapy - MCR Mng Care	0.00		(68,169.84)	(68,169.84)	100.00%	(68,169.84)	IS06
5040.20	Speech Therapy - Medicare B	(2,559.00)		(3,966.00)	(6,525.00)	100.00%	(6,525.00)	IS06
5040.30	Speech Therapy - Private	0.00		(102.17)	(102.17)	100.00%	(102.17)	IS06
5040.40	Speech Therapy - Medicare A	(45,875.00)		(762.00)	(46,637.00)	100.00%	(46,637.00)	IS06
5040.50	Speech Therapy - Veterans	0.00		0.00	0.00	100.00%	0.00	IS06
5040.60	Speech Therapy - Other	0.00		0.00	0.00	100.00%	0.00	IS06
5040.70	Speech Therapy - Medicaid	0.00		0.00	0.00	100.00%	0.00	IS06
5040.80	Speech Therapy - MCD Managed Care	0.00		0.00	0.00	100.00%	0.00	IS06
5040.90	Speech Therapy - MCR Managed Care	0.00		(7,519.93)	(7,519.93)	100.00%	(7,519.93)	IS06
5050.00	Audiology Therapy - Other	0.00		0.00	0.00	100.00%	0.00	IS06
5060.30	Respiratory Therapy - Private	0.00		0.00	0.00	100.00%	0.00	IS06
5060.40	Respiratory Therapy - Medicare A	0.00		0.00	0.00	100.00%	0.00	IS06
5060.50	Respiratory Therapy - Veterans	0.00		0.00	0.00	100.00%	0.00	IS06
5060.60	Respiratory Therapy - Other	0.00		0.00	0.00	100.00%	0.00	IS06
5060.70	Respiratory Therapy - Medicaid	0.00		0.00	0.00	100.00%	0.00	IS06
5060.80	Respiratory Therapy - MCD Mng Care	0.00		0.00	0.00	100.00%	0.00	IS06
5060.90	Respiratory Therapy - MCR Mng Care	0.00		0.00	0.00	100.00%	0.00	IS06
5070.10	Medical Supplies - Medicare B - Medicaid	0.00		0.00	0.00	100.00%	0.00	IS21
5070.20	Medical Supplies - Medicare B - Other	(4,264.00)		4,264.00	0.00	100.00%	0.00	IS21
5070.30	Medical Supplies - Private	0.00		(89,712.41)	(89,712.41)	100.00%	(89,712.41)	IS21
5070.40	Medical Supplies - Medicare A	(4,388.00)		(100.21)	(4,488.21)	100.00%	(4,488.21)	IS21
5070.50	Medical Supplies - Veterans	0.00		0.00	0.00	100.00%	0.00	IS21
5070.60	Medical Supplies - Other	0.00		0.00	0.00	100.00%	0.00	IS21
5070.70	Medical Supplies - Medicaid	0.00		0.00	0.00	100.00%	0.00	IS21
5070.80	Medical Supplies - MCD Managed Care	0.00		0.00	0.00	100.00%	0.00	IS21
5070.90	Medical Supplies - MCR Managed Care	0.00		(334.31)	(334.31)	100.00%	(334.31)	IS21
5080.00	Medical Supplies - Routine	0.00		0.00	0.00	100.00%	0.00	IS21
5090.10	Medical Minor Equip.- MCR B - Medicaid	0.00		0.00	0.00	100.00%	0.00	IS21
5090.20	Medical Minor Equip.- Medicare B - Other	0.00		0.00	0.00	100.00%	0.00	IS21
5090.30	Medical Minor Equip. - Private	0.00		0.00	0.00	100.00%	0.00	IS21
5090.40	Medical Minor Equip. - Medicare A	0.00		0.00	0.00	100.00%	0.00	IS21
5090.50	Medical Minor Equip. - Veterans	0.00		0.00	0.00	100.00%	0.00	IS21
5090.60	Medical Minor Equip. - Other	0.00		0.00	0.00	100.00%	0.00	IS21
5090.70	Medical Minor Equip. - Medicaid	0.00		0.00	0.00	100.00%	0.00	IS21
5090.80	Medical Minor Equip. - MCD Mng Care	0.00		0.00	0.00	100.00%	0.00	IS21
5090.90	Medical Minor Equip. - MCR Mng Care	0.00		0.00	0.00	100.00%	0.00	IS21
5100.00	Medical Minor Equip.-Routine	0.00		0.00	0.00	100.00%	0.00	IS21
5110.10	Enteral Nutrition Therapy - MCR B- MCD	0.00		0.00	0.00	100.00%	0.00	IS21
5110.20	Enteral Nutrition Therapy - MCR B-Other	0.00		0.00	0.00	100.00%	0.00	IS21
5110.30	Enteral Nutrition Therapy - Private	0.00		0.00	0.00	100.00%	0.00	IS21
5110.40	Enteral Nutrition Therapy - Medicare A	0.00		0.00	0.00	100.00%	0.00	IS21
5110.50	Enteral Nutrition Therapy - Veterans	0.00		0.00	0.00	100.00%	0.00	IS21
5110.60	Enteral Nutrition Therapy - Other	0.00		0.00	0.00	100.00%	0.00	IS21
5110.70	Enteral Nutrition Therapy - Medicaid	0.00		0.00	0.00	100.00%	0.00	IS21
5110.80	Enteral Nutrition Therapy - MCD Mng Care	0.00		0.00	0.00	100.00%	0.00	IS21
5110.90	Enteral Nutrition Therapy - MCR Mng Care	0.00		0.00	0.00	100.00%	0.00	IS21
5120.00	Enteral Nutrition Therapy - Routine	0.00		0.00	0.00	100.00%	0.00	IS21
5125.20	Prosthetics Revenue - Medicare Part B	0.00		0.00	0.00	100.00%	0.00	IS21
5125.30	Prosthetics Revenue - Private	0.00		0.00	0.00	100.00%	0.00	IS21
5125.40	Prosthetics Revenue - Medicare Part A	0.00		0.00	0.00	100.00%	0.00	IS21
5125.70	Prosthetics Revenue - Medicaid	0.00		0.00	0.00	100.00%	0.00	IS21
5130.30	Habilitation Supplies - Private	0.00		0.00	0.00	100.00%	0.00	IS21
5130.40	Habilitation Supplies - Medicare A	0.00		0.00	0.00	100.00%	0.00	IS21
5130.60	Habilitation Supplies - Other	0.00		0.00	0.00	100.00%	0.00	IS21



Central Baptist Village  
12/31/2017 MEDICAID COST REPORT TRIAL BALANCE  
MEDICAID PROVIDER NUMBER 0007435

Exhibit 1

Acct	Description	Unadjusted Trial Balance 12/31/17	JR Re	AJEs DR (CR)	Adj. Balance Before Alloc. 12/31/17	Alloc. Ratios	Adjusted Trial Balance 12/31/17	MCD REF
5130.70	Habilitation Supplies - Medicaid	0.00		0.00	0.00	100.00%	0.00	IS21
5130.80	Habilitation Supplies - MCD Mng Care	0.00		0.00	0.00	100.00%	0.00	IS21
5130.90	Habilitation Supplies - MCR Mng Care	0.00		0.00	0.00	100.00%	0.00	IS21
5140.30	Incontinence Supplies - Private	0.00		0.00	0.00	100.00%	0.00	IS21
5140.40	Incontinence Supplies - Medicare A	0.00		0.00	0.00	100.00%	0.00	IS21
5140.60	Incontinence Supplies - Other	0.00		0.00	0.00	100.00%	0.00	IS21
5140.70	Incontinence Supplies - Medicaid	0.00		0.00	0.00	100.00%	0.00	IS21
5140.80	Incontinence Supplies - MCD Mng Care	0.00		0.00	0.00	100.00%	0.00	IS21
5140.90	Incontinence Supplies - MCR Mng Care	0.00		0.00	0.00	100.00%	0.00	IS21
5150.30	Personal Care - Private	0.00		0.00	0.00	100.00%	0.00	IS21
5150.40	Personal Care - Medicare A	0.00		0.00	0.00	100.00%	0.00	IS21
5150.60	Personal Care - Other	0.00		0.00	0.00	100.00%	0.00	IS21
5150.70	Personal Care - Medicaid	0.00		0.00	0.00	100.00%	0.00	IS21
5150.80	Personal Care - MCD Managed Care	0.00		0.00	0.00	100.00%	0.00	IS21
5150.90	Personal Care - MCR Managed Care	0.00		0.00	0.00	100.00%	0.00	IS21
5160.00	Laundry Service - Routine	0.00		0.00	0.00	100.00%	0.00	IS22
5180.60	Non Emerg Resident Transp (Other)	0.00		0.00	0.00	100.00%	0.00	IS21
5180.70	Non Emerg Resident Transp (MCD)	0.00		0.00	0.00	100.00%	0.00	IS21
5190.00	Wheelchairs	0.00		0.00	0.00	100.00%	0.00	IS21
5310.00	Dry Cleaning Service	0.00		0.00	0.00	100.00%	0.00	IS22
5320.00	Communications	(28,541.00)		28,541.00	0.00	100.00%	0.00	IS15
5330.00	Meals	(5,011.00)		5,011.00	0.00	100.00%	0.00	IS14
5340.00	Barber & Beauty	(48,949.00)		18,200.00	(30,749.00)	100.00%	(30,749.00)	IS13
5350.00	Personal Purchases - Residents	0.00		0.00	0.00	100.00%	0.00	IS28A
5360.20	Radiology/Xray-Part B	0.00		0.00	0.00	100.00%	0.00	IS20
5360.30	Radiology/Xray-Private	0.00		0.00	0.00	100.00%	0.00	IS20
5360.40	Radiology/Xray-Part A	(24,193.00)		13,048.34	(11,144.66)	100.00%	(11,144.66)	IS20
5360.60	Radiology/Xray-Other	0.00		0.00	0.00	100.00%	0.00	IS20
5360.90	Radiology/Xray - MCR Managed Care	0.00		(1,828.19)	(1,828.19)	100.00%	(1,828.19)	IS20
5365.20	EEG/EKG-Part B	0.00		0.00	0.00	100.00%	0.00	IS20
5365.30	EEG/EKG-Private	0.00		0.00	0.00	100.00%	0.00	IS20
5365.40	EEG/EKG-Part A	0.00		(9,250.22)	(9,250.22)	100.00%	(9,250.22)	IS20
5365.60	EEG/EKG-Other	0.00		0.00	0.00	100.00%	0.00	IS20
5365.90	EEG/EKG- MCR Managed Care	0.00		0.00	0.00	100.00%	0.00	IS20
5370.20	Laboratory-Part B	0.00		0.00	0.00	100.00%	0.00	IS19
5370.30	Laboratory-Private	0.00		(81.74)	(81.74)	100.00%	(81.74)	IS19
5370.40	Laboratory-Part A	(7,155.00)		1,079.56	(6,075.44)	100.00%	(6,075.44)	IS19
5370.60	Laboratory-Other	0.00		0.00	0.00	100.00%	0.00	IS19
5370.90	Laboratory- MCR Managed Care	0.00		(444.85)	(444.85)	100.00%	(444.85)	IS19
5380.20	Oxygen -Part B	0.00		0.00	0.00	100.00%	0.00	IS07
5380.30	Oxygen - Private	0.00		0.00	0.00	100.00%	0.00	IS07
5380.40	Oxygen - Medicare A	0.00		0.00	0.00	100.00%	0.00	IS07
5380.60	Oxygen - Other	0.00		0.00	0.00	100.00%	0.00	IS07
5380.70	Oxygen - Medicaid	0.00		0.00	0.00	100.00%	0.00	IS07
5380.80	Oxygen - MCD Managed Care	0.00		0.00	0.00	100.00%	0.00	IS07
5380.90	Oxygen - MCR Managed Care	0.00		0.00	0.00	100.00%	0.00	IS07
5390.20	Legend Drugs - Flu Vaccination (Part B)	0.00		(1,360.00)	(1,360.00)	100.00%	(1,360.00)	IS17
5390.30	Legend Drugs - Private	0.00		0.00	0.00	100.00%	0.00	IS17
5390.40	Legend Drugs - Medicare A	(192,282.00)		(7,148.98)	(199,430.98)	100.00%	(199,430.98)	IS17
5390.60	Legend Drugs - Other	0.00		0.00	0.00	100.00%	0.00	IS17
5390.70	Legend Drugs - Medicaid	0.00		0.00	0.00	100.00%	0.00	IS17
5390.80	Legend Drugs - MCD Managed Care	0.00		0.00	0.00	100.00%	0.00	IS17
5390.90	Legend Drugs - MCR Managed Care	0.00		(16,624.69)	(16,624.69)	100.00%	(16,624.69)	IS17
5395.20	IV Therapy - Part B	0.00		0.00	0.00	100.00%	0.00	IS21
5395.30	IV Therapy - Private	0.00		0.00	0.00	100.00%	0.00	IS21
5395.40	IV Therapy - Part A	(2,983.00)		2,983.00	0.00	100.00%	0.00	IS21
5395.60	IV Therapy - Other	0.00		0.00	0.00	100.00%	0.00	IS21
5395.70	IV Therapy - Medicaid	0.00		0.00	0.00	100.00%	0.00	IS21
5395.80	IV Therapy - MCD Managed Care	0.00		0.00	0.00	100.00%	0.00	IS21
5395.90	IV Therapy - MCR Managed Care	0.00		0.00	0.00	100.00%	0.00	IS21
5396.40	Complex Medical Equipment-Part A	0.00		0.00	0.00	100.00%	0.00	IS21
5396.60	Complex Medical Equipment-Other	0.00		0.00	0.00	100.00%	0.00	IS21
5396.90	Complex Medical Equipment-MCR Mngd Care	0.00		0.00	0.00	100.00%	0.00	IS21
5397.20	Ambulance-Part B	0.00		0.00	0.00	100.00%	0.00	IS21
5397.30	Ambulance-Private	0.00		0.00	0.00	100.00%	0.00	IS21
5397.40	Ambulance-Part A	0.00		0.00	0.00	100.00%	0.00	IS21
5397.60	Ambulance-Other	0.00		0.00	0.00	100.00%	0.00	IS21
5397.70	Ambulance - Medicaid	0.00		0.00	0.00	100.00%	0.00	IS21

Central Baptist Village  
 12/31/2017 MEDICAID COST REPORT TRIAL BALANCE  
 MEDICAID PROVIDER NUMBER 0007435

Exhibit 1

Acct	Description	Unadjusted Trial Balance 12/31/17	AJE DR (CR)	Adj. Balance Before Alloc. 12/31/17	Alloc. Ratios	Adjusted Trial Balance 12/31/17	MCD REF
5397.80	Ambulance - MCD Managed Care	0.00	0.00	0.00	100.00%	0.00	IS21
5397.90	Ambulance - MCR Managed Care	0.00	0.00	0.00	100.00%	0.00	IS21
5400.00	Other Specify:	(67,779.00)	62,148.29	(5,630.71)	100.00%	(5,630.71)	IS28A
5401.00	Other Resident Ancillaries- Assisted Living	0.00	0.00	0.00	0.00%	0.00	IS28
5402.00	Other Resident Ancillaries- I L	(489,301.00)	0.00	(489,301.00)	0.00%	0.00	IS28
5403.00	Amortization of Entrance Fees	(153,000.00)	0.00	(153,000.00)	0.00%	0.00	IS28
5404.00	Guest Rooms	0.00	0.00	0.00	78.68%	0.00	IS28
5510.00	Management Services	0.00	0.00	0.00	78.68%	0.00	IS28A
5520.00	Cash Discounts	0.00	0.00	0.00	78.68%	0.00	IS28A
5525.00	Garnishments	0.00	0.00	0.00	78.68%	0.00	IS28A
5530.00	Rebates and Refunds	0.00	0.00	0.00	78.68%	0.00	IS28A
5540.00	Gift Shop	(591.00)	0.00	(591.00)	78.68%	(464.98)	IS12
5550.00	Vending Machine Revenues	0.00	0.00	0.00	78.68%	0.00	IS28A
5555.00	Vending Machine Commissions	0.00	0.00	0.00	78.68%	0.00	IS28A
5560.00	Rental - Space	0.00	0.00	0.00	78.68%	0.00	IS16
5570.00	Rental - Equipment	0.00	0.00	0.00	78.68%	0.00	IS28A
5580.00	Rental - Other	0.00	0.00	0.00	78.68%	0.00	IS28A
5581.00	Rental- Cable T.V.	0.00	0.00	0.00	78.68%	0.00	IS15
5590.00	Interest Income - Working Capital	(2,322,476.00)	1,079,643.00	(1,242,833.00)	100.00%	(1,242,833.00)	IS25
5600.00	Interest Income - Restricted Funds	0.00	0.00	0.00	78.68%	0.00	IS25
5610.00	Interest Income - Funded Depreciation	0.00	0.00	0.00	78.68%	0.00	IS25
5620.00	Interest Income - Related Party Revenue	0.00	0.00	0.00	78.68%	0.00	IS25
5625.00	Interest Income - Contributions	0.00	0.00	0.00	78.68%	0.00	IS25
5630.00	Endowments	(13,749.00)	0.00	(13,749.00)	100.00%	(13,749.00)	IS25
5640.00	Gain/Loss on Disposal of Assets	0.00	0.00	0.00	100.00%	0.00	IS28A
5650.00	Gain/Loss on Sale of Investments	651,581.00	0.00	651,581.00	78.68%	512,645.68	IS28A
5660.00	Nurse Aide Training Program Revenue	0.00	0.00	0.00	100.00%	0.00	IS11
5670.00	Unrestricted Contributions	(344,802.00)	0.00	(344,802.00)	100.00%	(344,802.00)	IS24
5700.00	R&B Contractual Allowance - Private	0.00	0.00	0.00	100.00%	0.00	IS02
5700.10	Ancillary Contractual Allowance - Private	0.00	0.00	0.00	100.00%	0.00	IS02
5701.00	R&B Contr Allowance - MCD Mng Care	0.00	0.00	0.00	100.00%	0.00	IS02
5701.10	Ancillary Contr Allow - MCD Mng Care	0.00	0.00	0.00	100.00%	0.00	IS02
5705.00	R&B Contr Allowance - MCR Mng Care	0.00	(91,117.79)	(91,117.79)	100.00%	(91,117.79)	IS02
5705.10	Ancillary Contr Allow - MCR Mng Care	0.00	174,774.81	174,774.81	100.00%	174,774.81	IS02
5710.00	R&B Contr Allowance - Medicare A	67,064.00	950.55	68,014.55	100.00%	68,014.55	IS02
5710.10	Ancillary Contr Allow - Medicare A	1,271,276.00	0.00	1,271,276.00	100.00%	1,271,276.00	IS02
5720.00	R&B Contractual Allowance - Medicaid	(3,948.00)	0.00	(3,948.00)	100.00%	(3,948.00)	IS02
5720.10	Ancillary Contr Allowance - Medicaid	0.00	0.00	0.00	100.00%	0.00	IS02
5730.00	Contractual Allowance - Medicare B	5,595.00	268,523.00	274,118.00	100.00%	274,118.00	IS02
5740.00	R&B Contr Allow-Hospice/Veterans/Otr	97.00	0.00	97.00	100.00%	97.00	IS02
5740.10	Anc Contr Allow - Hospice/Veterans/Otr	0.00	0.00	0.00	100.00%	0.00	IS02
5741.00	Charity Allowance- Assisted Living	0.00	0.00	0.00	0.00%	0.00	IS28
5742.00	Charity Allowance- Independent Living	0.00	0.00	0.00	0.00%	0.00	IS28
5743.00	Charity Allow- Sheltered Care Facility	0.00	0.00	0.00	100.00%	0.00	IS02
5750.00	Other Specify:	0.00	0.00	0.00	100.00%	0.00	IS28A
5750.10	Other Income- Administrative	(102,097.00)	102,097.00	0.00	100.00%	0.00	IS28A
5750.20	Other Income-Dietary	0.00	0.00	0.00	100.00%	0.00	IS28A
5750.30	Other Income-Housekeeping	0.00	0.00	0.00	100.00%	0.00	IS28A
5750.40	Other Income-Laundry	0.00	0.00	0.00	100.00%	0.00	IS22
5750.50	Other Income-Maintenance	0.00	0.00	0.00	100.00%	0.00	IS28A
5750.60	Other Income-Nursing Administration	0.00	0.00	0.00	100.00%	0.00	IS28A
5750.70	Other Income-Medical Supplies	0.00	0.00	0.00	100.00%	0.00	IS18
5750.80	Other Income-Medical Records	0.00	0.00	0.00	100.00%	0.00	IS28A
5750.90	Other Income-Activities	0.00	0.00	0.00	100.00%	0.00	IS28A
5751.00	Other Income-Transportation	0.00	0.00	0.00	100.00%	0.00	IS28A
5751.10	Adult Day Care	0.00	0.00	0.00	100.00%	0.00	IS04
5751.20	Child Day Care	0.00	0.00	0.00	100.00%	0.00	IS04
5755.10	Home Health-Non certified	0.00	0.00	0.00	100.00%	0.00	IS28A
5755.20	Home Health Part A Revenue	0.00	0.00	0.00	100.00%	0.00	IS28A
5755.30	Home Health Part B Revenue	0.00	0.00	0.00	100.00%	0.00	IS28A
5755.40	Home Health Other Revenue	0.00	0.00	0.00	100.00%	0.00	IS28A
	<b>TOTAL REVENUES</b>	<b>(18,945,951.00)</b>	<b>1,295,640.29</b>	<b>(17,650,310.71)</b>		<b>(14,185,836.01)</b>	

**EXPENSES**

6060.00	Real Estate Taxes	0.00	0.00	0.00	100.00%	0.00	V33-3
6070.00	Personal Property Taxes	0.00	0.00	0.00	49.85%	0.00	V36-3
6080.00	Franchise Tax (Attach FT 1120)	0.00	0.00	0.00	49.85%	0.00	V42-3

Central Baptist Village  
12/31/2017 MEDICAID COST REPORT TRIAL BALANCE  
MEDICAID PROVIDER NUMBER 0007435

Exhibit 1

Acct	Description	Unadjusted Trial Balance 12/31/17	JF Re	AJEs DR (CR)	Adj. Balance Before Alloc. 12/31/17	Alloc. Ratios	Adjusted Trial Balance 12/31/17	MCD REF
6090.00	Commercial Activity Tax (CAT)	0.00		0.00	0.00	100.00%	0.00	V36-3
6100.10	Medical Director Salary	0.00		0.00	0.00	100.00%	0.00	V09-1
6100.20	Medical Director Contract	34,956.00		0.00	34,956.00	100.00%	34,956.00	V09-3
6100.30	Medical Director Supplies	0.00		0.00	0.00	100.00%	0.00	V09-2
6105.10	Director of Nursing Salary	0.00		129,021.74	129,021.74	100.00%	129,021.74	V10-1
6105.20	Director of Nursing Contract	0.00		0.00	0.00	100.00%	0.00	V10-3
6106.10	Assistant Director of Nursing Salary	0.00		82,292.22	82,292.22	100.00%	82,292.22	V10-1
6106.20	Assistant Director of Nursing Contract	0.00		0.00	0.00	100.00%	0.00	V10-3
6120.10	CDP Registered Nurse Salary	0.00		666,679.27	666,679.27	100.00%	666,679.27	V10-1
6120.20	CDP Registered Nurse Contract	0.00		0.00	0.00	100.00%	0.00	V10-3
6120.80	Non CDP-Registered Nurse Salary	0.00		496,281.91	496,281.91	100.00%	496,281.91	V10-1
6120.90	Non CDP-Registered Nurse Contract	0.00		0.00	0.00	100.00%	0.00	V10-3
6125.10	CDP Licensed Practical Nurse Salary	0.00		262,819.71	262,819.71	100.00%	262,819.71	V10-1
6125.20	CDP Licensed Practical Nurse Contract	0.00		0.00	0.00	100.00%	0.00	V10-3
6125.80	Non CDP-Licensed Practical Nurse Salary	0.00		195,645.30	195,645.30	100.00%	195,645.30	V10-1
6125.90	Non CDP-Licensed Practical Nurse Contract	0.00		0.00	0.00	100.00%	0.00	V10-3
6130.00	CDP Nurses Aides	3,997,017.00		(3,116,020.93)	880,996.07	100.00%	880,996.07	V10-1
6130.80	Non CDP-Nurses Aides	0.00		655,821.23	655,821.23	100.00%	655,821.23	V10-1
6170.10	CDP Rehab/Therapy Aides Salary	0.00		0.00	0.00	100.00%	0.00	V39-1
6170.20	CDP Rehab/Therapy Aides Contract	0.00		0.00	0.00	100.00%	0.00	V39-3
6170.80	Non CDP Rehab/Therapy Aides Salary	0.00		0.00	0.00	100.00%	0.00	V39-1
6170.90	Non CDP Rehab/Therapy Aides Contract	0.00		0.00	0.00	100.00%	0.00	V39-3
6185.10	CDP Respiratory Therapist Salary	0.00		0.00	0.00	100.00%	0.00	V39-1
6185.20	Respiratory Therapist Contract	0.00		0.00	0.00	100.00%	0.00	V39-3
6206.10	Utilization Review - Salaries	0.00		0.00	0.00	100.00%	0.00	V10-1
6206.20	Utilization Review - Other	0.00		0.00	0.00	100.00%	0.00	V10-3
6210.00	Consulting and Management Fees - Direct	0.00		0.00	0.00	100.00%	0.00	V10-3
6220.10	CDP Other Direct Care Salary	0.00		21,873.38	21,873.38	100.00%	21,873.38	V10-1
6220.20	CDP Other Direct Care Contract	60.00		0.00	60.00	100.00%	60.00	V10-3
6220.30	CDP Other Direct Care Supplies	0.00		0.00	0.00	100.00%	0.00	V10-2
6220.80	Non CDP Other Direct Care Salary	0.00		16,282.74	16,282.74	100.00%	16,282.74	V10-1
6220.90	Non CDP Other Direct Care Contract	0.00		0.00	0.00	100.00%	0.00	V10-3
6230.10	Home Office/Direct Care Salary	0.00		0.00	0.00	100.00%	0.00	V10-1
6230.20	Home Office/Direct Care Contract	0.00		0.00	0.00	100.00%	0.00	V10-3
6300.00	Medical Supplies - Medicare Billable	11,681.00		0.00	11,681.00	100.00%	11,681.00	V39-2
6310.00	CDP Medical Supplies - Medicare Non-Billable	0.00		(508.00)	(508.00)	100.00%	(508.00)	V10-2
6310.90	Non CDP-Medical Supplies - MCR Non-Billable	0.00		0.00	0.00	100.00%	0.00	V10-2
6320.00	CDP Oxygen - Emergency stand-by	0.00		0.00	0.00	100.00%	0.00	V10-2
6320.90	Non CDP-Oxygen - Emergency stand-by	0.00		0.00	0.00	100.00%	0.00	V10-2
6322.00	Oxygen Billed to DHFS	0.00		0.00	0.00	100.00%	0.00	V10-2
6330.00	Habilitation Supplies	0.00		0.00	0.00	100.00%	0.00	V39-2
6340.00	Universal Precaution Supplies	79,157.00		0.00	79,157.00	100.00%	79,157.00	V10-2
6341.00	Billable Medical Universal Precaution Supplies	0.00		0.00	0.00	100.00%	0.00	V10-2
6400.00	CDP Registered Nurse Purchased Nurse	0.00		0.00	0.00	100.00%	0.00	V10-3
6401.00	Non CDP-Registered Nurse Purchased Nurse	0.00		0.00	0.00	100.00%	0.00	V10-3
6410.00	CDP Licensed Practical Nurse Purchased Nurse	0.00		0.00	0.00	100.00%	0.00	V10-3
6411.00	Non CDP-LPN Purchased Nurse	0.00		0.00	0.00	100.00%	0.00	V10-3
6420.00	CDP Nurse Aides Purchased Nursing	0.00		0.00	0.00	100.00%	0.00	V10-3
6421.00	Non CDP-Nurse Aides Purchased Nursing	0.00		0.00	0.00	100.00%	0.00	V10-3
6500.10	Vocational Instruction - Salary	0.00		0.00	0.00	100.00%	0.00	V13-1
6500.20	Vocational Instruction - Contract	0.00		0.00	0.00	100.00%	0.00	V13-3
6510.00	Academic Instruction - Salary	0.00		0.00	0.00	100.00%	0.00	V13-1
6520.00	CNA Trainees	0.00		0.00	0.00	100.00%	0.00	V13-1
6530.00	Books and Supplies CNA training	0.00		0.00	0.00	100.00%	0.00	V13-2
6540.00	Transportation CNA training	0.00		0.00	0.00	100.00%	0.00	V13-3
6550.00	Tuition Payments CNA training	0.00		0.00	0.00	100.00%	0.00	V13-3
6560.00	Tuition Reimbursement CNA training	0.00		0.00	0.00	100.00%	0.00	V13-3
6570.00	Contractual Payments to Oth NF's CNA training	0.00		0.00	0.00	100.00%	0.00	V13-3
6580.00	Registration Fees/Application Fees CNA training	0.00		0.00	0.00	100.00%	0.00	V13-3
6590.00	Employee Fringe Benefits CNA training	0.00		0.00	0.00	100.00%	0.00	V22-3
6595.00	Nursing Education Costs	5,500.00		0.00	5,500.00	100.00%	5,500.00	V24-3
6600.10	Physical Therapist - NF Salary	0.00		0.00	0.00	100.00%	0.00	V10A-1
6600.20	Physical Therapist - NF Contract	234,368.00		0.00	234,368.00	100.00%	234,368.00	V10A-3
6600.30	Physical Therapy Supplies	0.00		0.00	0.00	100.00%	0.00	V10A-2
6610.10	Occupational Therapist NF Salary	0.00		0.00	0.00	100.00%	0.00	V10A-1
6610.20	Occupational Therapist NF Contract	177,086.00		0.00	177,086.00	100.00%	177,086.00	V10A-3
6610.30	Occupational Therapy Supplies	0.00		0.00	0.00	100.00%	0.00	V10A-2

Central Baptist Village  
12/31/2017 MEDICAID COST REPORT TRIAL BALANCE  
MEDICAID PROVIDER NUMBER 0007435

Exhibit 1

Acct	Description	Unadjusted Trial Balance 12/31/17	JR Re	AJEs DR (CR)	Adj. Balance Before Alloc. 12/31/17	Alloc. Ratios	Adjusted Trial Balance 12/31/17	MCD REF
6620.10	Speech Therapist NF Salary	0.00		0.00	0.00	100.00%	0.00	V10A-1
6620.20	Speech Therapist NF Contract	23,751.00		0.00	23,751.00	100.00%	23,751.00	V10A-3
6620.30	Speech Therapy Supplies	0.00		0.00	0.00	100.00%	0.00	V10A-2
6630.00	Therapy Consultant	0.00		0.00	0.00	100.00%	0.00	V10A-3
6640.00	Payroll Taxes Therapy - NF Only	0.00		0.00	0.00	100.00%	0.00	V22-3
6650.00	Workers' Compensation Therapy - NF	0.00		0.00	0.00	100.00%	0.00	V22-3
6660.00	Employee Fringe Benefits Therapy - NF	0.00		0.00	0.00	100.00%	0.00	V22-3
6700.00	Payroll Taxes - Direct Care	287,295.00		(6,875.33)	280,419.67	100.00%	280,419.67	V22-3
6710.00	Workers' Compensation - Direct Care	0.00		118,276.42	118,276.42	100.00%	118,276.42	V22-3
6720.00	Employee Fringe Benefits - Direct Care	765,659.00		(46,869.04)	718,789.96	100.00%	718,789.96	V22-3
7000.10	Dietitian Salary	0.00		0.00	0.00	100.00%	0.00	V01-1
7000.20	Dietitian Contract	0.00		0.00	0.00	100.00%	0.00	V01-3
7005.10	Food Service Supervisor Salary	0.00		210,650.16	210,650.16	65.86%	138,729.90	V01-1
7005.20	Food Service Supervisor Contract	0.00		0.00	0.00	65.86%	0.00	V01-3
7015.10	Dietary Personnel Salary	1,090,820.00		(210,650.16)	880,169.84	65.86%	579,661.91	V01-1
7015.20	Dietary Personnel Contract	345,849.00		(27,056.00)	318,793.00	65.86%	209,950.57	V01-3
7025.00	Dietary Supplies and Expenses	129,035.00		(92.87)	128,942.13	65.86%	84,918.66	V01-2
7030.00	Dietary Minor Equipment	6,600.00		0.00	6,600.00	65.86%	4,346.63	V01-2
7035.00	Dietary Maintenance and Repair	2,343.00		0.00	2,343.00	65.86%	1,543.05	V01-2
7040.00	Food In-Facility	863,654.00		(32,067.00)	831,587.00	65.86%	547,666.25	V02-2
7041.00	Food Out-Of-Facility	45,000.00		0.00	45,000.00	100.00%	45,000.00	V02-2
7042.00	Vending Expense	3,432.00		(206.45)	3,225.55	100.00%	3,225.55	V35-3
7045.00	Employee Meals	0.00		0.00	0.00	65.86%	0.00	V22-3
7050.00	Contract Meals/Contract Meals Personnel	0.00		0.00	0.00	65.86%	0.00	V02-2
7055.00	CDP Enterals: Medicare Billable	0.00		0.00	0.00	100.00%	0.00	V39-2
7056.00	CDP Enterals: Medicare Non-Billable	0.00		0.00	0.00	100.00%	0.00	V02-2
7057.00	Non CDP-Enterals: Medicare Non-Billable	0.00		0.00	0.00	100.00%	0.00	V02-2
7060.00	Payroll Taxes - Dietary	80,030.00		(1,975.22)	78,054.78	65.86%	51,405.29	V22-3
7065.00	Workers' Compensation - Dietary	0.00		32,922.23	32,922.23	65.86%	21,681.91	V22-3
7070.00	Employee Fringe Benefits - Dietary	182,612.00		17,463.09	200,075.09	65.86%	131,765.38	V22-3
7105.10	Medical/Habilitation Records Salary	0.00		31,824.98	31,824.98	100.00%	31,824.98	V10-1
7105.20	Medical/Habilitation Records Contract	0.00		0.00	0.00	100.00%	0.00	V10-3
7115.00	CDP- Incontinence Supplies	69,665.00		0.00	69,665.00	100.00%	69,665.00	V10-2
7116.00	Non CDP-Incontinence Supplies	0.00		0.00	0.00	100.00%	0.00	V10-2
7120.00	CDP-Personal Care	0.00		0.00	0.00	100.00%	0.00	V10-2
7121.00	Non CDP-Personal Care	0.00		0.00	0.00	100.00%	0.00	V10-2
7125.00	Program Supplies	62,663.00		0.00	62,663.00	59.06%	37,009.97	V11-2
7126.00	Cable Service	0.00		0.00	0.00	59.06%	0.00	V05-3
7200.10	Activity Director Salary	0.00		47,918.35	47,918.35	59.06%	28,301.49	V11-1
7200.20	Activity Director Contract	0.00		0.00	0.00	59.06%	0.00	V11-3
7210.10	Activity Personnel Salary	392,959.00		(70,359.33)	322,599.67	59.06%	190,533.53	V11-1
7210.20	Activity Personnel Contract	1,177.00		0.00	1,177.00	59.06%	695.16	V11-3
7220.10	Recreational Therapist Salary	0.00		0.00	0.00	100.00%	0.00	V10A-1
7220.20	Recreational Therapist Contract	0.00		0.00	0.00	100.00%	0.00	V10A-3
7250.10	Social Service Workers Salary	213,792.00		0.00	213,792.00	59.06%	126,269.64	V12-1
7250.20	Social Service Workers Contract	2,665.00		0.00	2,665.00	59.06%	1,574.00	V12-3
7250.30	Social Service Workers Supplies	32,861.00		0.00	32,861.00	59.06%	19,408.33	V12-2
7271.10	Habilitation Aides (DD HOMES) Salary	0.00		0.00	0.00	100.00%	0.00	V39-1
7271.20	Habilitation Aides (DD HOMES) Contract	0.00		0.00	0.00	100.00%	0.00	V39-3
7281.10	Resident Services Coordr (DD Homes) Salary	0.00		0.00	0.00	100.00%	0.00	V10-1
7281.20	Resident Services Coordr (DD Homes) Contract	0.00		0.00	0.00	100.00%	0.00	V10-3
7291.10	QMRP (DD HOMES) Salary	0.00		0.00	0.00	100.00%	0.00	V39-1
7291.20	QMRP (DD HOMES) Contract	0.00		0.00	0.00	100.00%	0.00	V39-3
7300.00	Medical Minor Equip. - Medicare Billable	0.00		0.00	0.00	100.00%	0.00	V10-2
7301.00	CDP Medical Minor Equip. - MCR Non-Billable	16,867.00		0.00	16,867.00	100.00%	16,867.00	V10-2
7301.90	Non CDP-Medical Minor Eq-MCR Non-Billable	0.00		0.00	0.00	100.00%	0.00	V10-2
7400.00	Prior Authorized Medical Equipment	0.00		0.00	0.00	100.00%	0.00	V10-2
7500.00	Heat, Light, Power	297,788.00		0.00	297,788.00	49.85%	148,446.34	V05-3
7510.20	Water and Sewage	75,459.00		0.00	75,459.00	49.85%	37,616.06	V05-3
7520.00	Trash and Refuse Removal	69,410.00		0.00	69,410.00	49.85%	34,600.66	V07-3
7530.00	Hazardous Medical Waste Collection	0.00		0.00	0.00	100.00%	0.00	V10-3
7600.10	Administrator Salary	312,995.00		0.00	312,995.00	100.00%	312,995.00	V17-1
7600.20	Administrator Contract	0.00		0.00	0.00	100.00%	0.00	V27-3
7605.10	Other Administrative Personnel Salary	631,024.00		0.00	631,024.00	78.68%	496,472.01	V21-1
7605.20	Other Administrative Personnel Contract	0.00		0.00	0.00	78.68%	0.00	V27-3
7606.10	Central Supply Salary	0.00		0.00	0.00	78.68%	0.00	V10-1
7606.20	Central Supply Contract	0.00		0.00	0.00	78.68%	0.00	V10-3

Central Baptist Village  
12/31/2017 MEDICAID COST REPORT TRIAL BALANCE  
MEDICAID PROVIDER NUMBER 0007435

Exhibit 1

Acct	Description	Unadjusted Trial Balance 12/31/17	AJE DR (CR)	Adj. Balance Before Alloc. 12/31/17	Alloc. Ratios	Adjusted Trial Balance 12/31/17	MCD REF
7610.00	Consulting and Management Fees-Indirect	15,787.00	185.00	15,972.00	78.68%	12,566.32	V19-3
7615.00	Office and Administrative Supplies	120,072.00	(16,260.06)	103,811.94	78.68%	81,676.33	V21-2
7615.10	Office and Administrative Other	0.00	0.00	0.00	78.68%	0.00	V21-3
7620.00	Communications	73,480.00	(28,541.00)	44,939.00	78.68%	35,356.75	V21-3
7625.10	Security Services Salary	0.00	57,822.57	57,822.57	49.85%	28,824.36	V07-1
7625.20	Security Services Contract	13,188.00	0.00	13,188.00	49.85%	6,574.17	V07-3
7630.00	Travel and Entertainment	0.00	0.00	0.00	78.68%	0.00	V24-3
7630.10	Indirect Education Costs	36,415.00	0.00	36,415.00	78.68%	28,650.30	V24-3
7630.20	Indirect Education Travel Costs	5,915.00	0.00	5,915.00	78.68%	4,653.76	V25-3
7631.10	Resident Transportation Salary	0.00	22,440.98	22,440.98	100.00%	22,440.98	V14-1
7631.20	Resident Transportation Other	8,008.00	0.00	8,008.00	100.00%	8,008.00	V14-3
7640.10	Housekeeping Salary	387,457.00	(87,243.34)	300,213.66	49.85%	149,655.52	V03-1
7640.20	Housekeeping Other	83,966.00	0.00	83,966.00	49.85%	41,856.78	V03-3
7640.30	Housekeeping Supplies	63,881.00	0.00	63,881.00	49.85%	31,844.47	V03-2
7645.10	Laundry and Linen Salary	0.00	72,475.20	72,475.20	59.06%	42,805.24	V04-1
7645.20	Laundry and Linen Other	0.00	0.00	0.00	59.06%	0.00	V04-3
7645.30	Laundry and Linen Supplies	48,063.00	0.00	48,063.00	59.06%	28,386.93	V04-2
7650.00	Legal Services	20,374.00	0.00	20,374.00	78.68%	16,029.69	V19-3
7655.20	Accounting Contract	128,168.00	0.00	128,168.00	78.68%	100,838.99	V19-3
7660.00	Dues, Subscriptions, and Licenses	45,953.00	0.00	45,953.00	78.68%	36,154.53	V20-3
7665.00	Interest - Other	0.00	0.00	0.00	78.68%	0.00	V32-3
7670.00	Insurance	275,498.00	(91,491.00)	184,007.00	49.85%	91,726.89	V26-3
7675.20	Data Services Contract	49,187.00	0.00	49,187.00	78.68%	38,698.95	V19-3
7675.30	Software Expense	5,165.00	0.00	5,165.00	78.68%	4,063.68	V21-2
7680.00	Help Wanted/Informational Advertising	6,026.00	0.00	6,026.00	78.68%	4,741.09	V20-3
7685.00	Amortization of Start-Up Costs	0.00	0.00	0.00	78.68%	0.00	V31-3
7686.00	Amortization of Organizational Costs	0.00	0.00	0.00	78.68%	0.00	V31-3
7695.10	Home Office Costs/Ancillary/Support Salary	0.00	0.00	0.00	78.68%	0.00	V17-1
7695.20	Home Office Costs/Ancillary/Support Contract	0.00	0.00	0.00	78.68%	0.00	V17-3
7710.00	Plant Operations and Maintenance Salary	212,567.00	(43,054.43)	169,512.57	49.85%	84,501.46	V06-1
7710.10	Plant Operations and Maintenance Contract	311,465.00	0.00	311,465.00	49.85%	155,264.28	V06-3
7720.00	Repair and Maintenance	120,858.00	(395.00)	120,463.00	49.85%	60,050.41	V06-2
7730.00	Minor Equipment	115,881.00	0.00	115,881.00	49.85%	57,766.30	V06-2
7735.00	Custom Wheelchairs	0.00	0.00	0.00	100.00%	0.00	V06-2
7740.00	Leased Equipment	0.00	0.00	0.00	78.68%	0.00	V35-3
7800.00	Payroll Taxes - Ancillary/Support	149,228.00	6,951.61	156,179.61	69.39%	108,380.54	V22-3
7810.00	Workers' Compensation - Ancillary/Support	241,256.00	(175,382.00)	65,874.00	69.39%	45,713.13	V22-3
7820.00	Employee Fringe Benefits - Ancillary/Support	374,018.00	26,311.74	400,329.74	69.39%	277,808.05	V22-3
9705.00	Legend Drugs	162,708.00	(1.91)	162,706.09	100.00%	162,706.09	V39-3
9710.00	Radiology/Xray	6,990.00	(1,650.56)	5,339.44	100.00%	5,339.44	V39-3
9711.00	EEG/EKG	0.00	3,807.26	3,807.26	100.00%	3,807.26	V39-3
9715.00	Laboratory	4,874.00	(2,156.70)	2,717.30	100.00%	2,717.30	V39-3
9723.10	Barber and Beauty Salary	0.00	0.00	0.00	100.00%	0.00	V40-1
9723.20	Barber and Beauty Other	0.00	0.00	0.00	100.00%	0.00	V40-3
9723.30	Barber and Beauty Supplies	18,200.00	(18,200.00)	0.00	100.00%	0.00	V40-2
9724.10	OLTC - Salary (Sheltered Care Fac - Lic AL)	0.00	511,167.40	511,167.40	100.00%	511,167.40	V10-1
9724.20	OLTC - Other (Sheltered Care Fac - Lic AL)	0.00	0.00	0.00	100.00%	0.00	V10-3
9724.30	OLTC - Supplies (Sheltered Care Fac - Lic AL)	0.00	0.00	0.00	100.00%	0.00	V10-2
9725.10	Other Long Term Care - Salary(AL - Non-Lic)	0.00	0.00	0.00	100.00%	0.00	V43-1
9725.20	Other Long Term Care - Other (AL - Non-Lic)	0.00	0.00	0.00	100.00%	0.00	V43-3
9725.30	Other Long Term Care-Supplies(AL - Non-Lic)	0.00	0.00	0.00	100.00%	0.00	V43-2
9726.10	Independent Living- Salary	418,098.00	46,311.05	464,409.05	0.00%	0.00	V43-1
9726.20	Independent Living- Other	0.00	0.00	0.00	0.00%	0.00	V43-3
9726.30	Independent Living- Supplies	10,773.00	0.00	10,773.00	0.00%	0.00	V43-2
9729.10	Other Non Reimbursable- Salary	0.00	0.00	0.00	100.00%	0.00	V43-1
9729.20	Other Non Reimbursable- Other	207,539.00	0.00	207,539.00	100.00%	207,539.00	V43-3
9729.30	Other Non Reimbursable Supplies	0.00	0.00	0.00	100.00%	0.00	V43-2
9730.00	Late Fees, Fines or Penalties	0.00	0.00	0.00	78.68%	0.00	V21-3
9735.00	Federal Income Tax	0.00	0.00	0.00	78.68%	0.00	V36-3
9740.00	State Income Tax	1,435.00	0.00	1,435.00	78.68%	1,129.02	V36-3
9745.00	Local Income Tax	0.00	0.00	0.00	78.68%	0.00	V36-3
9750.00	Insurance - Officer's Life	0.00	0.00	0.00	78.68%	0.00	V22-3
9754.10	Gift Shop- Salary	0.00	0.00	0.00	78.68%	0.00	V41-1
9754.20	Gift Shop -Other	300.00	0.00	300.00	78.68%	236.03	V41-3
9754.30	Gift Shop Supplies	459.00	0.00	459.00	78.68%	361.13	V41-2
9755.10	Promotional Advert and Market- Salary	336,864.00	0.00	336,864.00	78.68%	265,035.16	V27-1
9755.20	Promotional Advertising and Marketing	14,830.00	0.00	14,830.00	78.68%	11,667.83	V27-3

Central Baptist Village  
12/31/2017 MEDICAID COST REPORT TRIAL BALANCE  
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Exhibit 1

Acct	Description	Unadjusted Trial Balance 12/31/17	JR Re	AJEs DR (CR)	Adj. Balance Before Alloc. 12/31/17	Alloc. Ratios	Adjusted Trial Balance 12/31/17	MCD REF
9755.30	Promotional Advertising and Marketing Supplies	63,100.00		0.00	63,100.00	78.68%	49,645.31	V27-2
9756.10	Development-Salaries	0.00		0.00	0.00	78.68%	0.00	V27-1
9756.20	Development-Other	0.00		0.00	0.00	78.68%	0.00	V27-3
9760.00	Contributions and Donations	9,027.00		0.00	9,027.00	100.00%	9,027.00	V27-3
9765.00	Bad Debt	20,000.00		0.00	20,000.00	100.00%	20,000.00	V21-3
9766.00	Prosthetics	0.00		0.00	0.00	100.00%	0.00	V43-3
9767.00	Suspense Account	0.00		(0.01)	(0.01)	78.68%	(0.01)	V21-3
9770.00	Parenteral Nutrition Therapy	0.00		0.00	0.00	100.00%	0.00	V43-3
9775.00	Franchise Permit Fees - NF	287,382.00		0.00	287,382.00	100.00%	287,382.00	V42-3
9790.20	IV Therapy Other	0.00		0.00	0.00	100.00%	0.00	V39-3
9799.10	Payroll Taxes - Non-Allowable	55,437.00		1,898.94	57,335.94	33.08%	18,964.87	V22-3
9799.20	Workers' Compensation - Non-Allowable	0.00		24,183.36	24,183.36	33.08%	7,999.07	V22-3
9799.30	Employee Fringe Benefits - Non-Allowable	145,236.00		1,731.21	146,967.21	33.08%	48,611.99	V22-3
9800.00	Complex Medical Equipment	0.00		0.00	0.00	100.00%	0.00	V35-3
9805.00	Ambulance	0.00		0.00	0.00	100.00%	0.00	V10-3
9810.10	HHA- A&G-Admin Salary	0.00		0.00	0.00	100.00%	0.00	V43-1
9810.11	HHA- A&G-Other Salary	0.00		0.00	0.00	100.00%	0.00	V43-1
9810.20	HHA- A&G-Other	0.00		0.00	0.00	100.00%	0.00	V43-3
9811.10	HHA-Skilled Nursing-Salary	0.00		0.00	0.00	100.00%	0.00	V43-1
9811.20	HHA-Skilled Nursing Contract	0.00		0.00	0.00	100.00%	0.00	V43-3
9812.10	HHA- Physical Therapy-Salary	0.00		0.00	0.00	100.00%	0.00	V43-1
9812.20	HHA- Physical Therapy-Contract	0.00		0.00	0.00	100.00%	0.00	V43-3
9813.10	HHA-Occupational Therapy Salary	0.00		0.00	0.00	100.00%	0.00	V43-1
9813.20	HHA-Occupational Therapy Contract	0.00		0.00	0.00	100.00%	0.00	V43-3
9814.10	HHA-Speech Therapy Salary	0.00		0.00	0.00	100.00%	0.00	V43-1
9814.20	HHA-Speech Therapy Contract	0.00		0.00	0.00	100.00%	0.00	V43-3
9815.10	HHA-Medical Social Services Salary	0.00		0.00	0.00	100.00%	0.00	V43-1
9815.20	HHA-Medical Social Services Contract	0.00		0.00	0.00	100.00%	0.00	V43-3
9816.10	HHA- Home Health Aide -Salary	0.00		0.00	0.00	100.00%	0.00	V43-1
9816.20	HHA-Home Health Aide- Contract	0.00		0.00	0.00	100.00%	0.00	V43-3
9817.00	HHA-Durable Medical Equipment Rented	0.00		0.00	0.00	100.00%	0.00	V43-2
9818.00	HHA-Durable Medical Equipment Sold	0.00		0.00	0.00	100.00%	0.00	V43-2
9819.10	HHA-Home Delivered Meals Salary	0.00		0.00	0.00	100.00%	0.00	V43-1
9819.20	HHA-Home Delivered Meals Other	0.00		0.00	0.00	100.00%	0.00	V43-3
9820.10	HHA-Other Home Services- Salaries	0.00		0.00	0.00	100.00%	0.00	V43-1
9820.20	HHA-Other Home Services- Other	0.00		0.00	0.00	100.00%	0.00	V43-3
8010.00	Depreciation - Building and Building Improv.	1,162,522.00		(192,060.84)	970,461.16	100.00%	970,461.16	V30-3
8020.00	Amortization - Land Improvements	0.00		0.00	0.00	100.00%	0.00	V30-3
8030.00	Amortization - Leasehold Improvements	0.00		0.00	0.00	100.00%	0.00	V30-3
8040.00	Depreciation - Equipment	228,551.00		(12,824.44)	215,726.56	100.00%	215,726.56	V30-3
8050.00	Depreciation - Transportation Equipment	0.00		0.00	0.00	100.00%	0.00	V30-3
8055.00	Interest Expense - Non-Allowable	0.00		0.00	0.00	100.00%	0.00	V32-3
8060.00	Lease and Rent - Building	0.00		0.00	0.00	100.00%	0.00	V34-3
8065.00	Lease and Rent - Equipment	0.00		0.00	0.00	100.00%	0.00	V35-3
8070.00	Interest Expense	1,079,643.00		(1,079,643.00)	0.00	100.00%	0.00	V32-3
8080.00	Amortization of Financing Cost	0.00		0.00	0.00	100.00%	0.00	V36-3
8090.00	Home Office Costs/Capital	0.00		0.00	0.00	100.00%	0.00	V36-3
8099.00	Depreciation - Non-Allowable	0.00		204,885.28	204,885.28	0.00%	0.00	V30-3
8110.00	Depreciation - Build CHOP	0.00		0.00	0.00	100.00%	0.00	V30-3
8140.00	Depreciation - Equipment CHOP	0.00		0.00	0.00	100.00%	0.00	V30-3
8170.00	Interest Expense CHOP	0.00		0.00	0.00	100.00%	0.00	V32-3
8180.00	Amortization of Financing Cost CHOP	0.00		0.00	0.00	100.00%	0.00	V32-3
8195.00	Lease and Rent - Building CHOP	0.00		0.00	0.00	100.00%	0.00	V34-3
8500.00	Depreciation/Amortization Renovations	0.00		0.00	0.00	100.00%	0.00	V30-3
8570.00	Interest - Renovations	0.00		0.00	0.00	100.00%	0.00	V32-3
8580.00	Amortization of Financing Cost - Renovations	0.00		0.00	0.00	100.00%	0.00	V32-3
	<b>TOTAL EXPENSES</b>	<b>17,691,074.00</b>		<b>(1,295,640.29)</b>	<b>16,395,433.71</b>		<b>12,867,986.40</b>	
	<b>TOTAL (PROFIT) LOSS</b>	<b>(1,254,877.00)</b>		<b>0.00</b>	<b>(1,254,877.00)</b>		<b>(1,317,849.61)</b>	

Central Baptist Village  
**MEDICAID ALLOCATIONS SUMMARY**  
 12/31/17

EXHIBIT # 2

COST CENTER

13-Apr-18

Allocation Code Supporting Work Paper

COST CENTER	Allocation Code	Supporting Work Paper							
<b>NURSING ADMIN</b> (Based Upon Nursing Wages Served)	O	W/P # _____				<b>Nursing Wages</b>	<b>%</b>		
			SNF/SC			100.00	100.00%		
			IL			0.00	0.00%		
			Other			0.00	0.00%		
					<u>100.00</u>	<u>100.00%</u>			
							<b>T0 T/B</b>		
<b>ACTIVITY PERSONNEL</b> (Based Upon Resident Days Served)	N	W/P # _____				<b>Resident Days</b>	<b>%</b>		
			SNF/SC			49,902.00	59.06%		
			IL			34,589.00	40.94%		
			Other			0.00	0.00%		
					<u>84,491.00</u>	<u>100.00%</u>			
							<b>T0 T/B</b>		
<b>SOCIAL SERVICES</b> (Based Upon Resident Days Served)	T	W/P # _____				<b>Resident Days</b>	<b>%</b>		
			SNF/SC			49,902.00	59.06%		
			IL			34,589.00	40.94%		
			Other			0.00	0.00%		
					<u>84,491.00</u>	<u>100.00%</u>			
							<b>T0 T/B</b>		
<b>DIETARY</b> (Based Upon Meals Served)	S	W/P # <b>info pack</b>	# of meals	Days		<b>Meals</b>	<b>%</b>		
					SNF/SC	3	39,146.0	148,947.00	65.86%
					IL		-	77,217.00	34.14%
					Other		34,589	0.00	0.00%
					<u>226,164.00</u>	<u>100.00%</u>			
							<b>T0 T/B</b>		
<b>LAUNDRY</b> (Based Upon Resident Days)	Q	W/P # _____				<b>Resident Days</b>	<b>%</b>		
			SNF/SC			49,902.00	59.06%		
			IL			34,589.00	40.94%		
			Other			0.00	0.00%		
					<u>84,491.00</u>	<u>100.00%</u>			
							<b>T0 T/B</b>		
<b>HOUSEKEEPING</b> (Based Upon Sq Feet)	K	W/P # _____				<b>Sq Feet</b>	<b>%</b>		
			SNF/SC			87,378.00	49.85%		
			IL			87,905.00	50.15%		
			Other			0.00	0.00%		
					<u>175,283.00</u>	<u>100.00%</u>			
							<b>T0 T/B</b>		
<b>MAINTENANCE</b> (Based Upon Sq Feet)	J	W/P # _____				<b>Sq Feet</b>	<b>%</b>		
			SNF/SC			87,378.00	49.85%		
			IL			87,905.00	50.15%		
			Other			0.00	0.00%		
					<u>175,283.00</u>	<u>100.00%</u>			
							<b>T0 T/B</b>		
<b>DEPRECIATION COSTS</b> (Based Upon Square Footage of Shared Assets & Direct Allocation of identifiable Assets)	M	<b>N/A DIRECTLY CALCULATED AND RECLASSED</b>				<b>Sq Feet</b>	<b>%</b>		
			SNF/SC			100.00	100.00%		
			IL			0.00	0.00%		
			Other			0.00	0.00%		
					<u>100.00</u>	<u>100.00%</u>			
							<b>T0 T/B</b>		
<b>UTILITIES COSTS</b> (Based Upon Sq Feet)	C	W/P # _____				<b>Sq Feet</b>	<b>%</b>		
			SNF/SC			87,378.00	49.85%		
			IL			87,905.00	50.15%		
			Other			0.00	0.00%		
					<u>175,283.00</u>	<u>100.00%</u>			
							<b>T0 T/B</b>		

Central Baptist Village  
**MEDICAID ALLOCATIONS SUMMARY**  
 12/31/17

EXHIBIT # 5

13-Apr-18

COST CENTER				Sq Feet	%	
<b>TRASH or OTHER</b> (Based Upon Combined Prior Years Usage & 100% for Medical Waste. Calculation on separate sheet.)	P	W/P # _____	SNF/SC	87,378.00	49.85%	T0 T/B
			IL	87,905.00	50.15%	
			Other	0.00	0.00%	
				175,283.00	100.00%	
<b>NON-ALLOWABLE P/R TAXES</b> (Based Upon NonAllowable Salaries) This allocation works automatically to allocate the nonallowable benefits based upon nonallowable salary allocations	R	W/P # _____	Other Salaries	265,035.16	33.08%	T0 T/B
			SNF/SC	536,237.89	66.92%	
			Other			
				801,273.05	100.00%	
<b>Other ADMIN &amp; GENERAL EXPENSE</b> (Based Upon Accumulated Cost Between Allowable & Nonallowable Costs) (Excluding General A/G Costs) This allocation pulls automatically from the accumulated cost tab.	I	W/P # _____	ALLOWABLE Nursing Facility Costs	9,931,056.26	79.89%	T0 T/B
			NONALLOWABLE Nursing Facility Costs	2,499,763.38	20.11%	
			TOTAL COSTS	12,430,819.64	100.00%	
			Accumulated Cost			
<b>CENSUS</b> (Based Upon Census)	U	W/P # _____	Census	100.00	100.00%	T0 T/B
			SNF/SC	0.00	0.00%	
			IL	0.00	0.00%	
			Other	100.00	100.00%	
<b>Administrator</b> (Based Upon Stat)	V	W/P # _____	Stat	100.00	100.00%	T0 T/B
			SNF/SC	0.00	0.00%	
			IL	0.00	0.00%	
			Other	100.00	100.00%	
<b>DIRECT CARE STAFF</b> (Based Upon Hours Served)	D	W/P # _____	RN Hours	100.00	100.00%	T0 T/B
			SNF/SC	0.00	0.00%	
			IL	0.00	0.00%	
			Other	100.00	100.00%	
	E	W/P # _____	LPN Hours	100.00	100.00%	T0 T/B
			SNF/SC	0.00	0.00%	
			IL	0.00	0.00%	
			Other	100.00	100.00%	
	F	W/P # _____	Aide Hours	100.00	100.00%	T0 T/B
			SNF/SC	0.00	0.00%	
			IL	0.00	0.00%	
			Other	100.00	100.00%	



**Central Baptist Village  
2017 Seminar Detail**

				Allowable SNF Portion	
020-59040-00	Education/Seminars Nursing	\$ 5,500.00	See worksheet	100.00%	5,500.00
030-51030-04	Education/Seminars Activities	\$ 3,011.00	See worksheet	78.68%	2,368.97
040-52040-04	Education/Seminars Social Services	\$ 1,251.00	See worksheet	78.68%	984.25
050-59040-00	Education Seminars Dietary	\$ 2,042.00	See worksheet	78.68%	1,606.59
060-59040-00	Education/Seminars Maintenance	\$ 773.00	See worksheet	78.68%	608.17
070-53010-07	Training	\$ 324.00	See worksheet	78.68%	254.91
090-59040-01	Education/Seminar Spiritual Life	\$ 523.99	See worksheet	78.68%	412.26
100-59040-00	Education/Seminar Marketing	\$ 249.00	See worksheet	0.00%	-
110-56010-05	Web Based Training	\$ 7,234.89	see PDF	78.68%	5,692.21
110-59040-01	Education/Seminars Financial Services	\$ 2,472.62	See worksheet	78.68%	1,945.39
110-59040-07	Education/Training IT	\$ -	See worksheet	78.68%	-
120-59040-01	Education/Seminars Administration	\$ 18,781.83	See worksheet	78.68%	14,777.02
140-52040-04	Education/Seminars Ind Living	\$ 1,936.50	See worksheet	0.00%	-
<b>Total</b>		<b>\$ 44,099.83</b>			<b>34,149.78</b> <i>PG 3, Line 24, column 8</i>

**Medicaid Cost Report - 2017**  
**Education Expense**

**Nursing**  
**020-59040-00**

GL Account	Account	DATE	VENDOR	DESCRIPTION	Amount	Attendee(s)	Job Title	Topic	Location
020-59040-00	Education/Seminars Nursing	3/3/2017	EMT Instructors LLC	4 CPR Classes for the Nursing staff	\$2,910.00	The Nursing Department 98 Attendees Total	RN's and CNA's	CPR Class	Norridge IL
020-59040-00	Education/Seminars Nursing	3/2/2017	Bank of America	Leading Age Conference	\$1,743.00	K. Haedo, L. Wei, H. Asufrin, N. Justiniani, A. Ryba, L. Ramos, M. Ryba	DON, ADON Dir. Rehab, MDS Coor, Nusre, MDS, Nurse	Various topics and keynote speakers	Chicago IL CBV
020-59040-00	Education/Seminars Nursing	8/23/2017	Bank of America	NCCDP	\$112.00	Jeanette Castro	C.N.A	CDP Certification	Norridge IL Botanical Gardens
020-59040-00	Education/Seminars Nursing	8/31/2017	Bank of America	NorthShore Event Cal	\$25.00	Karen Haedo	DON	End of Life Care Providers	Glenview IL CBV
020-59040-00	Education/Seminars Nursing	9/12/2017	Bank of America	NCCDP	\$112.00	Hazel Asufrin	Director of Rehab	CDP Certification	Norridge IL
020-59040-00	Education/Seminars Nursing	10/27/2017	Bank of America	AANAC	\$399.00	Karen Haedo & Lerma Wei	DON & ADON	Antibiotic Stewardship Program in LTC	Webinar
020-59040-00	Education/Seminars Nursing	12/19/2017	Bank of America	AANAC	<u>\$199.00</u>	Karen Haedo	DON	New Survey Process	Webinar
<b>TOTAL</b>					<b><u>\$5,500.00</u></b>				

Medicaid Cost Report - 2017  
Education Expense

Activities  
030-51030-04

GL Account	Account	DATE	VENDOR	DESCRIPTION	Amount	Attendee(s)	Job Title	Topic	Location
030-51030-04	Education/Seminars Activities	3/2/2017	Bank of America	Leading Age Conference	\$ 747.00	Karen Batson, Krystal Haedo Michele Zyburt	Director, Asst. Director Associate	Various topics and keynote speakers	Chicago IL
030-51030-04	Education/Seminars Activities	3/22/2017	Bank of America	Beauty Show McCormick Place	\$ 75.00	Barbara Zukowski	Beautician	Various exhibits	Chicago IL
030-51030-04	Education/Seminars Activities	3/22/2017	Bank of America	Beauty Show McCormick Place	\$ 75.00	Jill Zornow	Beautician	Various exhibits	Chicago IL
030-51030-04	Education/Seminars Activities	6/9/2017	Bank of America	C U Hours	\$ 90.00	Barbara Zukowski	Beautician	Continuing Education	Chicago IL
030-51030-04	Education/Seminars Activities	6/9/2017	Bank of America	C U Hours	\$ 90.00	Jill Zornow	Beautician	Continuing Education	Chicago IL
030-51030-04	Education/Seminars Activities	8/22/2017	Bank of America	PP Chair Chi	\$ 100.00	Leslie Everhart	Life Enrichment Associate	Chair Chi Training	Chicago IL
030-51030-04	Education/Seminars Activities	11/6/2017	Leading Age Illinois Oakton Community College	Tuition Activity Director Certification Course	\$ 1,375.00	Becca Galuska	Life Enrichment Director	Leadership Academy Activity Director	Schaumburg IL
030-51030-04	Education/Seminars Activities	12/31/2017	College		\$ 459.00	Becca Galuska	Life Enrichment Director	Certification	Des Plaines IL
<b>TOTAL</b>					<b>\$ 3,011.00</b>				

Medicaid Cost Report - 2017  
Education Expense

Social Services  
040-52040-04

GL Account	Account	DATE	VENDOR	DESCRIPTION	Amount	Attendee(s)	Job Title	Topic	Location
040-52040-04	Education/Seminar Social Services	3/2/2017	Bank of America Central Baptist	Leading Age Conference	\$ 996.00	Melissa Cosentino, Vicki Villalobos, Gloria Ramos, Erica Hori	Director of Social Services Social Workers	Various topics and keynote speakers	Chicago IL
040-52040-04	Education/Seminar Social Services	5/17/2017	Village	Hording Seminar	\$ 5.00	Melissa Cosentino	Social Services Director	Hording	Chicago IL
040-52040-04	Education/Seminar Social Services	8/31/2017	Bank of America	NorthShore Event Cal	\$ 25.00	Melissa Cosentino	Social Services Director	End of Life Care Providers	Botanical Gardens Glenview IL
040-52040-04	Education/Seminar Social Services	10/12/2017	Bank of America	NASW IL	\$ 225.00	Melissa Cosentino	Social Services Director	LCSW Prep Course	Chicago IL
<b>TOTAL</b>					<b>\$ 1,251.00</b>				

Medicaid Cost Report - 2017  
Seminar Expense

Culinary  
050-59040-00

GL Account	Account	DATE	VENDOR	DESCRIPTION	Amount	Attendee(s)	Job Title	Topic	Location
050-59040-00	Education Seminars Culinary	1/31/2017	CDR Academy	Book for Stacy	\$71.00	Stacy Kosmen	NCM	Nutrition	Book
050-59040-00	Education Seminars Culinary	1/31/2017	CDR Academy	Book for Stacy	\$71.00	Stacy Kosmen	NCM	Nutrition	Book
050-59040-00	Education Seminars Culinary	1/31/2017	NRA	Food Handler	\$29.00	New Hires	Culinary	Sanitation	Online
050-59040-00	Education Seminars Culinary	1/31/2017	Morrison	Workplace Harrassment	\$25.00	Nicole Randa	DDS	Harrassment	Webinar
050-59040-00	Education Seminars Culinary	1/31/2017	Morrison	Chat Session	\$23.00	All Staff	Culinary	Food Safety	CBV
050-59040-00	Education Seminars Culinary	1/31/2017	Morrison	Chat Session	\$23.00	All Staff	Culinary	Fire Safety	CBV
050-59040-00	Education Seminars Culinary	2/28/2017	Morrison	On Stage Training	\$75.00	All Staff	Culinary	Hospitality	CBV
050-59040-00	Education Seminars Culinary	2/28/2017	Morrison	Chat Session	\$23.00	All Staff	Culinary	Slips, Trips and Falls	CBV
050-59040-00	Education Seminars Culinary	2/28/2017	Morrison	Workplace Hospitality	\$50.00	Phu Lu Stacy Kosmen	Chef, NCM	Hospitality	Webinar
050-59040-00	Education Seminars Culinary	2/28/2017	CDR Academy	Book for Stacy	-\$71.00	Stacy Kosmen	NCM	Nutrition	Book
050-59040-00	Education Seminars Culinary	3/2/2017	Bank of America	Leading Age Conference	\$498.00	Nicole Randa, Stacy Kosmen	DDS, NCM	Various courses on Nutrition	Chicago IL
050-59040-00	Education Seminars Culinary	3/31/2017	Morrison	Chat Session	\$23.00	All Staff	Culinary	Strain Prevention	CBV
050-59040-00	Education Seminars Culinary	3/31/2017	Morrison	Appricating Differences	\$75.00	Phu Lu	Chef	HR	Webinar
050-59040-00	Education Seminars Culinary	4/30/2017	CDR Academy	Academy of Dietetic Nutrition	\$173.00	Stacy Kosmen	NCM	License Renewal	Online
050-59040-00	Education Seminars Culinary	4/30/2017	Navy Pier	Leading Age Conference	\$28.00	Nicole Randa	DDS	Parking	Chicago IL
050-59040-00	Education Seminars Culinary	4/30/2017	Morrison	Chat Session	\$23.00	All Staff	Culinary	Stock by and Against Injury	CBV
050-59040-00	Education Seminars Culinary	5/31/2017	Morrison	Chat Sesion	\$23.00	All Staff	Culinary	Bloodborne Pathogens	CBV
050-59040-00	Education Seminars Culinary	6/30/2017	NRA	ServSafe Course	\$153.00	Michelle Skarzynki	Culinary Supervisor	Sanitation	Online
050-59040-00	Education Seminars Culinary	6/30/2017	Morrison	Chat Session	\$23.00	All Staff	Culinary	What you need to know	CBV
050-59040-00	Education Seminars Culinary	7/31/2017	Morrison	Chat Session	\$23.00	All Staff	Culinary	Hazard Communication	CBV
050-59040-00	Education Seminars Culinary	8/31/2017	Morrison	Chat Session	\$23.00	All Staff	Culinary	Disaster Preparedness	CBV
050-59040-00	Education Seminars Culinary	8/31/2017	ANFP	CDM Renewal	\$157.00	Nicole Randa	DDS	License Renewal	Online
050-59040-00	Education Seminars Culinary	8/31/2017	Morrison	Calorie Labeling	\$20.00	Nicole Randa	DDS	Nutrition	Webinar
050-59040-00	Education Seminars Culinary	9/30/2017	Morrison	Work Place Safety	\$35.00	Stacy Kosmen	NCM	Safety	Webinar
Education Semina Education Seminars Culinary	Education Seminars Culinary	9/30/2017	Morrison	Chat Session	\$23.00	All Staff	Culinary	Food Safety	CBV
Education Semina Education Seminars Culinary	Education Seminars Culinary	9/30/2017	Morrison	On Stage Training	\$25.00	All Staff	Culinary	Hospitality	Online
050-59040-00	Education Seminars Culinary	9/30/2017	SERVSAFE	Sanitation Exam	\$55.00	Cody Faulhaber	Culinary Supervisor	Sanitation	Lake Forest IL
Education Semina Education Seminars Culinary	Education Seminars Culinary	10/31/2017	Morrison	Chat Session	\$23.00	All Staff	Culinary	Reporting Injuries	CBV
Education Semina Education Seminars Culinary	Education Seminars Culinary	10/31/2017	IDPH	License Renewal	\$36.00	Nicole Randa	DDS	Sanitatioin License	Online
050-59040-00	Education Seminars Culinary	10/31/2017	SERVSAFE	Food Handler	\$102.00	New Hires	Culinary	Food Handler Training	Online
050-59040-00	Education Seminars Culinary	11/30/2017	IDPH	License Renewal	\$36.00	Cody Faulhaber	Culinary Supervisor	Sanitation	Online
050-59040-00	Education Seminars Culinary	11/30/2017	Morrison	Chat Session	\$23.00	All Staff	Culinary	Cut Prevention	CBV
050-59040-00	Education Seminars Culinary	11/30/2017	Morrison	Developing Great People	\$75.00	Nicole Randa	DDS	Leadership	Webinar
050-59040-00	Education Seminars Culinary	12/31/2017	Morrison	Chat Session	\$23.00	All Staff	Culinaqry	Cyber Security	CBV
050-59040-00	Education Seminars Culinary	12/31/2017	Morrison	RD Webinar	\$25.00	Stacy Kosmen	NCM	Nutrition	Online

TOTAL

2,042.00

Vendor Key

ADA- American Dietetic Associatio  
IDPH- Illinois Dept. of Public Health  
Manager, EC= Exec.

Job Title Key

Culinary Services  
Culinary Services  
Culinary Services

Medicaid Cost Report - 2017  
Seminar Expense

Community Services  
060-59040-00

GL Account	Account	DATE	VENDOR	DESCRIPTION	Amount	Attendee(s)	Job Title	Topic	Location
060-59040-00	Education Seminars- Community Services	1/2/2017	Bank of America	NRA SERVSAFE	\$125.00	Marlene Wolter	Community Operations Director	ServeSafe Course	Online
060-59040-00	Education Seminars- Community Services	02/28/2017	Morrison Community Living	ServSafe Exam	\$105.00	Marlene Wolter, George Piegat & Scott Leise	Director of Community Operations, Engineer Supervisor, Office Mgr.	Exam	CBV
060-59040-00	Education Seminars- Community Services	03/31/2017	Morrison Community Living	Inservice	\$25.00	Marlene Wolter	Community Operations Director	Preventing Harassment	CBV
060-59040-00	Education Seminars- Community Services	03/02/2017	Bank of America	Leading Age Conference	\$249.00	Marlene Wolter	Community Operations Director	Various Topics and Keynote Speakers	Chicago II
060-59040-00	Education Seminars- Community Services	04/10/2017	Bank of America	Fee	\$1.00	Marlene Wolter	Community Operations Director	Convenience Fee for License	Online
060-59040-00	Education Seminars- Community Services	04/10/2017	Bank of America	4TE IDPH FOOD and DRUG	\$35.00	Marlene Wolter	Community Operations Director	Fee for Sanitation License	Online
060-59040-00	Education Seminars- Community Services	04/26/2017	Bank of America	Parking for Leading Age	\$28.00	Marlene Wolter	Community Operations Director	Parking Fee	Chicago II
060-59040-00	Education Seminars- Community Services	04/27/2017	Bank of America	Parking for Leading Age	\$28.00	Marlene Wolter	Community Operations Director	Parking Fee	Chicago II
060-59040-00	Education Seminars- Community Services	04/28/2017	Bank of America	Parking for Leading Age	\$28.00	Marlene Wolter	Community Operations Director	Parking Fee	Chicago II
060-59040-00	Education Seminars- Community Services	08/22/2017	Bank of America	LeadingAge Illinois	\$149.00	Marlene Wolter	Community Operations Director	Life Safety	Webinar
				<b>TOTAL</b>	<b><u>\$773.00</u></b>				

**Medicaid Cost Report - 2017  
Seminar Expense**

**HKL  
070-53010-07**

<b>GL Account</b>	<b>Account</b>	<b>DATE</b>	<b>VENDOR</b>	<b>DESCRIPTION</b>	<b>Amount</b>	<b>Attendee(s)</b>	<b>Job Title</b>	<b>Topic</b>	<b>Location</b>
070-53010-07	Training Education	1/31/2017	Morrison Community Living	Inservice/ Chat	\$71.00	Joanna Mocarcka Staff	Housekeeping HSK Mgr All Staff	Lifting/ Harassment	CBV
070-53010-07	Training Education	02/28/2017	Morrison Community Living	Inservice/ Chat	\$23.00	Housekeeping Staff	All Housekeeping Staff	Resident Rights	CBV
070-53010-07	Training Education	03/31/2017	Morrison Community Living	Inservice/ Chat	\$23.00	Housekeeping Staff	All Housekeeping Staff	Chemical Labeling	CBV
070-53010-07	Training Education	04/30/2017	Morrison Community Living	Inservice/ Chat	\$23.00	Housekeeping Staff	All Housekeeping Staff	Slips and Falls	CBV
070-53010-07	Training Education	05/31/2017	Morrison Community Living	Inservice/ Chat	\$23.00	Housekeeping Staff	All Housekeeping Staff	HIPPA Compliance	CBV
070-53010-07	Training Education	06/30/2017	Morrison Community Living	Inservice/ Chat	\$23.00	Housekeeping Staff	All Housekeeping Staff	Social Media Communication	CBV
070-53010-07	Training Education	07/31/2017	Morrison Community Living	Inservice/ Chat	\$23.00	Housekeeping Staff	All Housekeeping Staff	Etiquette	CBV
070-53010-07	Training Education	08/31/2017	Morrison Community Living	Inservice/ Chat	\$23.00	Housekeeping Staff	All Housekeeping Staff	HAZCOM	CBV
070-53010-07	Training Education	09/30/2017	Morrison Community Living	Inservice/ Chat	\$23.00	Housekeeping Staff	All Housekeeping Staff	Handwashing	CBV
070-53010-07	Training Education	10/31/2017	Morrison Community Living	Inservice/ Chat	\$23.00	Housekeeping Staff	All Housekeeping Staff	Safe Storage	CBV
070-53010-07	Training Education	11/30/2017	Morrison Community Living	Inservice/ Chat	\$23.00	Housekeeping Staff	All Housekeeping Staff	Cleaning Process	CBV
070-53010-07	Training Education	12/31/2017	Morrison Community Living	Inservice/ Chat	\$23.00	Housekeeping Staff	All Housekeeping Staff	Isolation Protocal	CBV
<b>TOTAL</b>					<b><u>\$324.00</u></b>				

Medicaid Cost Report - 2017

Spiritual Life

Education Expense

090-59040-01

GL Account	Account	DATE	VENDOR	DESCRIPTION	Amount	Attendee(s)	Job Title	Topic	Location
090-59040-01	Education/Seminar Spiritual Life	3/2/2017	Bank of America	Leading Age Conference	\$ 249.00	Mike Weber	Spiritual Life Director	Various Topics- Senior Living	Chicago IL
090-59040-01	Education/Seminar Spiritual Life	12/14/2017	Bank of America	Christianbook.com	\$ 5.99	Mike Weber	Spiritual Life Director	Advent Book	Book Edmonton Alberta Canada
090-59040-01	Education/Seminar Spiritual Life	12/06/2017	Bank of America	North American Baptist	\$ 269.00	Mike Weber	Spiritual Life Director	NAB Triennial Registration	Canada
<b>TOTAL</b>					<b>\$ 523.99</b>				



Medicaid Cost Report - 2017

Marketing

Education Expense

100-59040-00

GL Account	Account	DATE	VENDOR	DESCRIPTION	Amount	Attendee(s)	Job Title	Topic	Location
100-59040-00	Education/Seminar Marketing	03/02/2017	Bank of America	Leading Age Conference	\$ 249.00	Julie Stevens	Director of Marketing	Various Topica and Keynote speakers	Chicago IL
				<b>TOTAL</b>	<u><u>\$249.00</u></u>				

Medicaid Cost Report - 2017

Web

Education Expense

110-56010-05

GL Account	Account	DATE	VENDOR	DESCRIPTION	Amount	Attendee(s)	Job Title	Topic	Location
110-56010-05	Web Based Training	1/1/2017	Relias	Monthly Fee	\$576.95	See Attached File for Training Details			On-Line
110-56010-05	Web Based Training	2/1/2017	Relias	Monthly Fee	\$576.95	See Attached File for Training Details			On-Line
110-56010-05	Web Based Training	3/1/2017	Relias	Monthly Fee	\$576.95	See Attached File for Training Details			On-Line
110-56010-05	Web Based Training	4/1/2017	Relias	Monthly Fee	\$611.56	See Attached File for Training Details			On-Line
110-56010-05	Web Based Training	5/1/2017	Relias	Monthly Fee	\$611.56	See Attached File for Training Details			On-Line
110-56010-05	Web Based Training	6/1/2017	Relias	Monthly Fee	\$611.56	See Attached File for Training Details			On-Line
110-56010-05	Web Based Training	7/1/2017	Relias	Monthly Fee	\$611.56	See Attached File for Training Details			On-Line
110-56010-05	Web Based Training	8/1/2017	Relias	Monthly Fee	\$611.56	See Attached File for Training Details			On-Line
110-56010-05	Web Based Training	9/1/2017	Relias	Monthly Fee	\$611.56	See Attached File for Training Details			On-Line
110-56010-05	Web Based Training	10/1/2017	Relias	Monthly Fee	\$611.56	See Attached File for Training Details			On-Line
110-56010-05	Web Based Training	11/1/2017	Relias	Monthly Fee	\$611.56	See Attached File for Training Details			On-Line
110-56010-05	Web Based Training	12/1/2017	Relias	Monthly Fee	\$611.56	See Attached File for Training Details			On-Line
<b>TOTAL</b>					<u><u>\$7,234.89</u></u>				

Medicaid Cost Report - 2017

Financial Services

Education Expense

110-59040-01

GL Account	Account	DATE	VENDOR	DESCRIPTION	Amount	Attendee(s)	Job Title	Topic	Location
	Education/Seminars							Book on Performance	
110-59040-01	Financial Services	01/06/2017	Bank of America	Amazon.com	\$ 26.56	Lori Altman	Chief Financial Officer	Reviews	Book
	Education/Seminars							Managed Care Audit	
110-59040-01	Financial Services	02/03/2017	Bank of America	LeadingAge Illinois	\$ 99.00	Lori Altman	Chief Financial Officer	Defense	Webinar
	Education/Seminars							3-9-17 Full Day Conference	
110-59040-01	Financial Services	2/3/2017	Bank of America	SHRM Conferecne	\$ 199.00	Savitre Tubrung	HR Manager	& Networking	Chicago IL
	Education/Seminars							Various topics and	
110-59040-01	Financial Services	3/2/2017	Bank of America	Leading Age Conference	\$ 747.00	Lori Altman, Savitre Tubrung, Kimberly Wood	CFO, HR Mgr, Medicaid Coordinator	Keynote speakers	Chicago IL
	Education/Seminars							Annual Payroll 3 Day	
110-59040-01	Financial Services	9/8/2017	Paylocity	Paylocity Conference	\$ 1,150.00	Lori Altman & Savitre Tubrung	CFO, HR Mgr	Conference	Chicago IL
	Education/Seminars							10-19-17 Full Day	
110-59040-01	Financial Services	9/22/2017	Bank of America	SHRM Conferecne	\$ 199.00	Savitre Tubrung	HR Manager	Conferences	Chicago IL
	Education/Seminars								
110-59040-01	Financial Services	10/16/2017	Bank of America	Amazon.com	\$ 52.06	Lori Altman	Chief Financial Officer	Medicaid Rules Book	Book
				<b>TOTAL</b>	<b>\$ 2,472.62</b>				

Medicaid Cost Report - 2017  
Education Expense

IT  
110-59040-07

GL Account	Account	DATE	VENDOR	DESCRIPTION	Amount	Attendee(s)	Job Title	Topic	Location
110-59040-07	Education/Training	IT							
110-59040-07	Education/Training	IT							
110-59040-07	Education/Training	IT							
				<b>TOTAL</b>	<u><u>\$0.00</u></u>				

Medicaid Cost Report - 2017

Admin

Education Expense

120-59040-01

GL Account	Account	DATE	VENDOR	DESCRIPTION	Amount	Attendee(s)	Job Title	Topic	Location
120-59040-01	Education/Seminar Admin	01/26/2017	Bank of America	LeadingAge	\$ 59.00	Anna-Liisa LaCroix	Administrator	Revised Requirements of participation for Nursing Homes	Webinar
120-59040-01	Education/Seminar Admin	01/23/2017	Bank of America	Vistage Worldwide	\$ 1,380.00	Dawn Mondschein	Executive Director	Leadership Training	Schaumburg IL
120-59040-01	Education/Seminar Admin	02/22/2017	Bank of America	Vistage Worldwide	\$ 1,380.00	Dawn Mondschein	Executive Director	Leadership Training	Schaumburg IL
120-59040-01	Education/Seminar Admin	03/02/2017	Bank of America	Leading Age Conference	\$ 747.00	Dawn Mondschein, Anna-Liisa LaCroix Pamela Hartz Yoelin	Executive Director Administrator Ad. Services Director	Various Topics/ Workshops and Keynote Speakers	Chicago Il
120-59040-01	Education/Seminar Admin	03/21/2017	Bank of America	Vistage Worldwide	\$ 1,380.00	Dawn Mondschein	Executive Director	Leadership Training	Schaumburg IL
120-59040-01	Education/Seminar Admin	4/19/2017	Bank of America	Elderwerks	\$ 5.00	Anna-Liisa LaCroix	Administrator	Registration Fee	Chicago Il
120-59040-01	Education/Seminar Admin	4/26/2017	Bank of America	Leading Age Conference	\$ 28.00	Anna-Liisa LaCroix	Administrator	Parking Fee	Chicago Il
120-59040-01	Education/Seminar Admin	4/21/2017	Bank of America	Vistage Worldwide	\$ 1,380.00	Dawn Mondschein	Executive Director	Leadership Training	Schaumburg IL
120-59040-01	Education/Seminar Admin	5/2/2017	Central Baptist Village	Leading Age Conference	\$ 12.09	Pamela Hartz Yoelin	Ad. Serv. Director	Parking Fee	Chicago Il
120-59040-01	Education/Seminar Admin	5/15/2017	Bank of America	LeadingAge	\$ 59.00	Anna-Liisa LaCroix	Administrator	Compliance and Legal Considerations	Webinar
120-59040-01	Education/Seminar Admin	5/1/2017	Bank of America	CHUG CE AMP Network	\$ 54.74	Anna-Liisa LaCroix	Administrator	CHUG Tornadoes	Chicago Il
120-59040-01	Education/Seminar Admin	5/23/2017	Bank of America	Vistage Worldwide	\$ 1,380.00	Dawn Mondschein	Executive Director	Leadership Training	Schaumburg IL
120-59040-01	Education/Seminar Admin	6/21/2017	Bank of America	Vistage Worldwide	\$ 1,380.00	Dawn Mondschein	Executive Director	Leadership Training	Schaumburg IL
120-59040-01	Education/Seminar Admin	7/21/2017	Bank of America	Vistage Worldwide	\$ 1,380.00	Dawn Mondschein	Executive Director	Leadership Training	Schaumburg IL
120-59040-01	Education/Seminar Admin	8/22/2017	Bank of America	Vistage Worldwide	\$ 1,380.00	Dawn Mondschein	Executive Director	Leadership Training	Schaumburg IL
120-59040-01	Education/Seminar Admin	7/31/2017	Bank of America	LeadingAge	\$ 825.00	Dawn Mondschein	Executive Director	Industry Update & Trends	New Orleans LA
120-59040-01	Education/Seminar Admin	9/21/2017	Bank of America	Vistage Worldwide	\$ 1,416.00	Dawn Mondschein	Executive Director	Leadership Training	Schaumburg IL
120-59040-01	Education/Seminar Admin	9/8/2017	Bank of America	NorthShore Event Cal	\$ 40.00	Anna-Liisa LaCroix	Administrator	Annual Hospice & Pavilion Care	Glencoe IL
120-59040-01	Education/Seminar Admin	9/1/2017	Bank of America	LeadingAge Illinois	\$ 149.00	Anna-Liisa LaCroix	Administrator	New Long Term Care Survey	Naperville IL
120-59040-01	Education/Seminar Admin	10/21/2017	Bank of America	Vistage Worldwide	\$ 1,416.00	Dawn Mondschein	Executive Director	Leadership Training	Schaumburg IL
120-59040-01	Education/Seminar Admin	11/09/2017	Bank of America	LeadingAge Illinois	\$ 99.00	Anna-Liisa LaCroix	Administrator	Compliance with Quality of Life	Webinar
120-59040-01	Education/Seminar Admin	11/20/2017	Bank of America	Vistage Worldwide	\$ 1,416.00	Dawn Mondschein	Executive Director	Leadership Training	Schaumburg IL
120-59040-01	Education/Seminar Admin	12/20/2017	Bank of America	Vistage Worldwide	\$ 1,416.00	Dawn Mondschein	Executive Director	Leadership Training	Schaumburg IL
<b>Total</b>					<b>\$ 18,781.83</b>				

Medicaid Cost Report - 2016

Resident Services

Education Expense

140-52040-04

GL Account	Account	DATE	VENDOR	DESCRIPTION	Amount	Attendee(s)	Job Title	Topic	Location
140-52040-04	Education/Seminars Ind Living	03/02/2017	Bank of America	Leading Age Conference	\$ 747.00	Linda Conlin, Lynn Riley, Edna Pagan	Resident Services Director, Asst Director, Resident Services Coordinator	Various workshops/topics	Chicago IL
140-52040-04	Education/Seminars Ind Living	8/23/2017	Bank of America	NCCDP	\$ 112.00	Edna Pagan	Resident Serv. Coordinator	CDP Certification	CBV Norridge IL
140-52040-04	Education/Seminars Ind Living	10/12/2017	Village of Niles	CPR Training	\$ 25.00	Linda Conlin Cariou Dulay, Bern Giannopoulos, Zen Desta, Annabelle Chua, Lucia Dulay, Joan Bonk, Chris Jedynak, Edna Pagan, Bernice Lewis	Resident Services Director	CPR Training	Niles
140-52040-04	Education/Seminars Ind Living	10/26/2017	Bank of America	Chicagoland CPR LLC	\$ 432.50	Linda Conlin, Vicki Villalobos	Resident Associates, Resident Services Coordinator, C.N.A.	CPR Training	CBV Norridge IL
140-52040-04	Education/Seminars Ind Living	11/20/2017	Bank of America	LeadingAge Illinois	\$ 620.00	Linda Conlin, Vicki Villalobos	Resident Services Director Resident Services Coordinator	Assisted Living Bootcamp	Lisle, IL
<b>TOTAL</b>					<b>\$ 1,936.50</b>				