

CERTIFICATE

S-H OpCo Carlsbad, LLC DBA Brookdale Carlsbad

State of _____)
County of _____) SS:

The enclosed Annual Report for S-H OpCo Carlsbad, LLC DBA Brookdale Carlsbad and any amendments thereto are correct to the best of my knowledge and belief.

The continuing care contract form in use or offered to new residents at Brookdale Carlsbad has been approved by the Department.

As of the date of this certification, S-H OpCo Carlsbad, LLC is maintaining the required liquid reserve.



Carrey Beers
Secretary

Sworn and subscribed to before me,
a Notary Public, this ____ day
of April, 2018

Notary

(Notarial Seal)

My commission expires: _____

FORM 1-1
RESIDENT POPULATION

Line	Continuing Care Residents	TOTAL
[1]	Number at beginning of fiscal year	145
[2]	Number at end of fiscal year	106
[3]	Total Lines 1 and 2	251
[4]	Multiply Line 3 by ".50" and enter result on Line 5.	x.50
[5]	Mean number of continuing care residents	125.5
All Residents		
[6]	Number at beginning of fiscal year	145
[7]	Number at end of fiscal year	139
[8]	Total Lines 6 and 7	284
[9]	Multiply Line 8 by ".50" and enter result on Line 10.	x.50
[10]	Mean number of all residents	142
[11]	Divide the mean number of continuing care residents (Line 5) by the mean number of all residents (Line 10) and enter the result (round to two decimal places).	88.38%

FORM 1-2
ANNUAL PROVIDER FEE

Line		TOTAL
[1]	Total Operating Expenses (including depreciation and debt service- interest only)	\$ 13,484,000
[a]	Depreciation	\$ 304,000
[b]	Debt Service (Interest Only)	\$ -
[2]	Subtotal (add Line 1a and 1b)	\$ 304,000
[3]	Subtract Line 2 from Line 1 and enter result.	\$ 13,180,000
[4]	Percentage allocated to continuing care residents (Form 1-1, Line 11)	88.38%
[5]	Total Operating Expense for Continuing Care Residents (multiply Line 3 by Line 4)	\$ 11,649,000
[6]	Total Amount Due (multiply Line 5 by .001)	x .001
		\$ 11,649

PROVIDER: S-H OpCo Carlsbad, LLC
COMMUNITY: Brookdale Carlsbad

Vendor Number: 0000103714
Name DEPARTMENT OF SOCIAL SERVICES

Check Date: 04/24/2018
Check No. 00069605

Invoice Number	Invoice Date	Payment Message	Voucher ID	Bus. Unit	Pay on Behalf of:
		<u>Gross Amount</u>	<u>Discount Taken</u>	<u>Paid Amount</u>	
04201811649.00	04/20/2018	2017 ANNUAL REPORT		00012620	24431 Brookdale Carlsbad
		11,649.00	0.00	11,649.00	
TO ENSURE PAYMENTS, REMIT TO ADDRESS AND THE COMMUNITY NAME AND ADDRESS ARE REQUIRED ON YOUR INVOICES .					
Gross Amount Total	\$11,649.00	Discount Taken Total	\$0.00	Paid Amount Total	\$11,649.00

Tear Here

THE BACK OF THIS DOCUMENT CONTAINS AN ARTIFICIAL WATERMARK - HOLD AT AN ANGLE TO VIEW

Brookdale Senior Living Inc.
C/O 6737 West Washington Street,
Suite# 2300, Milwaukee, WI 53214
1-866-434-8312

Check Date: 04/24/2018
Vendor Number: 0000103714

Check No. 00069605
WELLS FARGO BANK NA
WELLS FARGO BANK NA
Van Wert, OH 45891
56-382/412

Pay ****ELEVEN THOUSAND SIX HUNDRED AND FORTY-NINE AND XX / 100 DOLLAR*****

Pay Amount
\$11,649.00***

Pay To The
Order Of

DEPARTMENT OF SOCIAL SERVICES
744 P ST
MS 3-67
SACRAMENTO, CA 95814



Void After 90 Days

⑈00069605⑈

⑈041203824⑈

9620000514⑈



CERTIFICATE OF LIABILITY INSURANCE

Page 1 of 2

DATE (MM/DD/YYYY)
12/28/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Willis of Illinois, Inc. c/o 26 Century Blvd P.O. Box 305191 Nashville, TN 372305191 USA	CONTACT NAME: Willis Towers Watson Certificate Center PHONE (A/C, No, Ext): 1-877-945-7378 FAX (A/C, No): 1-888-467-2378 E-MAIL ADDRESS: certificates@willis.com														
INSURED Brookdale Senior Living, Inc. 111 Westwood Place Suite 400 Brentwood, TN 37027	<table border="1"><tr><th>INSURER(S) AFFORDING COVERAGE</th><th>NAIC #</th></tr><tr><td>INSURER A: Underwriters at Lloyd's London</td><td>15792</td></tr><tr><td>INSURER B: Continental Insurance Company</td><td>35289</td></tr><tr><td>INSURER C: American Casualty Company of Reading, PA</td><td>20427</td></tr><tr><td>INSURER D: National Union Fire Insurance Company of P</td><td>19445</td></tr><tr><td>INSURER E: Columbia Casualty Company</td><td>31127</td></tr><tr><td>INSURER F:</td><td></td></tr></table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Underwriters at Lloyd's London	15792	INSURER B: Continental Insurance Company	35289	INSURER C: American Casualty Company of Reading, PA	20427	INSURER D: National Union Fire Insurance Company of P	19445	INSURER E: Columbia Casualty Company	31127	INSURER F:	
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INSURER E: Columbia Casualty Company	31127														
INSURER F:															

COVERAGES

CERTIFICATE NUMBER: W4886494

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS																						
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Professional Liability GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:			SB-LTCA-01635-17	12/31/2017	12/31/2018	<table border="1"><tr><td>EACH OCCURRENCE</td><td>\$ 1,000,000</td></tr><tr><td>DAMAGE TO RENTED PREMISES (Ea occurrence)</td><td>\$ 100,000</td></tr><tr><td>MED EXP (Any one person)</td><td>\$</td></tr><tr><td>PERSONAL & ADV INJURY</td><td>\$ 1,000,000</td></tr><tr><td>GENERAL AGGREGATE</td><td>\$ 3,000,000</td></tr><tr><td>PRODUCTS - COMP/OP AGG</td><td>\$ 1,000,000</td></tr><tr><td>Deductible</td><td>\$ 100,000</td></tr><tr><td>COMBINED SINGLE LIMIT (Ea accident)</td><td>\$ 1,000,000</td></tr><tr><td>BODILY INJURY (Per person)</td><td>\$</td></tr><tr><td>BODILY INJURY (Per accident)</td><td>\$</td></tr><tr><td>PROPERTY DAMAGE (Per accident)</td><td>\$</td></tr></table>	EACH OCCURRENCE	\$ 1,000,000	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000	MED EXP (Any one person)	\$	PERSONAL & ADV INJURY	\$ 1,000,000	GENERAL AGGREGATE	\$ 3,000,000	PRODUCTS - COMP/OP AGG	\$ 1,000,000	Deductible	\$ 100,000	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000	BODILY INJURY (Per person)	\$	BODILY INJURY (Per accident)	\$	PROPERTY DAMAGE (Per accident)	\$
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PROPERTY DAMAGE (Per accident)	\$																												
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> Comp & Coll <input checked="" type="checkbox"/> Ded. \$1,000			4031698072	04/01/2017	04/01/2018	<table border="1"><tr><td>BODILY INJURY (Per person)</td><td>\$</td></tr><tr><td>BODILY INJURY (Per accident)</td><td>\$</td></tr><tr><td>PROPERTY DAMAGE (Per accident)</td><td>\$</td></tr></table>	BODILY INJURY (Per person)	\$	BODILY INJURY (Per accident)	\$	PROPERTY DAMAGE (Per accident)	\$																
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A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB DED RETENTION \$			SB-LTCAX-01460-17	12/31/2017	12/31/2018	<table border="1"><tr><td>EACH OCCURRENCE</td><td>\$ 25,000,000</td></tr><tr><td>AGGREGATE</td><td>\$ 25,000,000</td></tr></table>	EACH OCCURRENCE	\$ 25,000,000	AGGREGATE	\$ 25,000,000																		
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C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> No	N/A	5082521444	01/01/2018	01/01/2019	<table border="1"><tr><td><input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER</td><td></td></tr><tr><td>E.L. EACH ACCIDENT</td><td>\$ 1,000,000</td></tr><tr><td>E.L. DISEASE - EA EMPLOYEE</td><td>\$ 1,000,000</td></tr><tr><td>E.L. DISEASE - POLICY LIMIT</td><td>\$ 1,000,000</td></tr></table>	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER		E.L. EACH ACCIDENT	\$ 1,000,000	E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000	E.L. DISEASE - POLICY LIMIT	\$ 1,000,000														
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E.L. DISEASE - POLICY LIMIT	\$ 1,000,000																												
D	Crime			04-173-14-60	12/31/2017	12/31/2018	<table border="1"><tr><td>Limit</td><td>\$5,000,000</td></tr><tr><td>Deductible</td><td>\$50,000</td></tr></table>	Limit	\$5,000,000	Deductible	\$50,000																		
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DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)


Crime Coverage Includes: Inside/Outside Premises; Money Orders and Counterfeit Paper Currency; Depositors Forgery Coverage and Computer Coverage; Loss of Client Assets.

SEE ATTACHED

CERTIFICATE HOLDER

Brookdale Carlsbad 3140 El Camino Real Carlsbad, CA 92008

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
AUTHORIZED REPRESENTATIVE 

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AGENCY CUSTOMER ID: _____

LOC #: _____



ADDITIONAL REMARKS SCHEDULE

Page 2 of 2

AGENCY Willis of Illinois, Inc.		NAMED INSURED Brookdale Senior Living, Inc. 111 Westwood Place Suite 400 Brentwood, TN 37027	
POLICY NUMBER See Page 1		EFFECTIVE DATE: See Page 1	
CARRIER See Page 1	NAIC CODE See Page 1		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: 25 FORM TITLE: Certificate of Liability Insurance

Insured: Brookdale Carlsbad, 3140 El Camino Real, Carlsbad, CA 92008

Other Named Insured: BKD Twenty-One Management, Inc.

INSURER AFFORDING COVERAGE: National Union Fire Insurance Company of Pittsburgh
 POLICY NUMBER: 04-146-62-82 EFF DATE: 12/31/2017 EXP DATE: 12/31/2018

NAIC#: 19445

TYPE OF INSURANCE:	LIMIT DESCRIPTION:	LIMIT AMOUNT:
Employment Practices Liability	Aggregate	\$10,000,000
	Limit Incl	Defense Costs
	Retention	\$250,000

INSURER AFFORDING COVERAGE: Columbia Casualty Company
 POLICY NUMBER: 4031698069 EFF DATE: 04/01/2017 EXP DATE: 04/01/2018

NAIC#: 31127

TYPE OF INSURANCE:	LIMIT DESCRIPTION:	LIMIT AMOUNT:
Excess AL(15M x Primary)	Each Incident	\$15,000,000
	Aggregate	\$15,000,000

S-H OpCo Carlsbad, LLC

Financial Statements

December 31, 2017 and 2016

(With Independent Auditors' Report Thereon)

LBMC

MAKE A GOOD
BUSINESS BETTER

S-H OpCo Carlsbad, LLC

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Independent Auditors' Report.....	1
Financial Statements:	
Balance Sheets as of December 31, 2017 and 2016	2
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Statements of Cash Flows for the years ended December 31, 2017 and 2016	5
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INDEPENDENT AUDITORS' REPORT

To the Member of
S-H OpCo Carlsbad, LLC

We have audited the accompanying financial statements of S-H OpCo Carlsbad, LLC (the "Company"), which comprise the balance sheets as of December 31, 2017 and 2016, and the related statements of operations, changes in member's equity, and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of S-H OpCo Carlsbad, LLC as of December 31, 2017 and 2016, and the results of its operations and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

LBMC, PC

Brentwood, Tennessee
March 28, 2018

S-H OpCo Carlsbad, LLC
Balance Sheets
December 31, 2017 and 2016
(in thousands)

Assets	2017	2016
Current assets:		
Accounts receivable, net	\$ 967	\$ 979
Other current assets	84	119
Total current assets	<u>1,051</u>	<u>1,098</u>
Restricted cash	4,531	3,624
Property and equipment, net	1,285	1,448
Other assets	258	262
Total assets	<u><u>\$ 7,125</u></u>	<u><u>\$ 6,432</u></u>
Liabilities and Member's Equity		
Current liabilities:		
Accounts payable	\$ 230	\$ 105
Accrued expenses	654	529
Deferred revenue	161	226
Total current liabilities	<u>1,045</u>	<u>860</u>
Deferred lease costs	732	810
Other long term liabilities	327	268
Total liabilities	<u>2,104</u>	<u>1,938</u>
Member's equity	<u>5,021</u>	<u>4,494</u>
Total liabilities and member's equity	<u><u>\$ 7,125</u></u>	<u><u>\$ 6,432</u></u>

See accompanying notes to financial statements.

S-H OpCo Carlsbad, LLC
Statements of Operations
For the years ended December 31, 2017 and 2016
(in thousands)

	<u>2017</u>	<u>2016</u>
Revenue:		
Resident services	<u>\$ 12,862</u>	<u>\$ 11,868</u>
Expenses:		
Community operating expense	8,450	7,856
General and administrative expense	1,378	1,278
Facility lease expense	2,488	2,487
Depreciation	304	234
Real estate tax	227	222
Management fees to related party	<u>637</u>	<u>590</u>
Total expenses	<u>13,484</u>	<u>12,667</u>
Net loss	<u><u>\$ (622)</u></u>	<u><u>\$ (799)</u></u>

See accompanying notes to financial statements.

S-H OpCo Carlsbad, LLC
Statements of Changes in Member's Equity
For the years ended December 31, 2017 and 2016
(in thousands)

Balance as of December 31, 2015	\$	3,973
Member contributions, net		1,320
Net loss		<u>(799)</u>
Balance as of December 31, 2016		4,494
Member contributions, net		1,149
Net loss		<u>(622)</u>
Balance as of December 31, 2017	\$	<u><u>5,021</u></u>

See accompanying notes to financial statements.

S-H OpCo Carlsbad, LLC
Statements of Cash Flows
For the years ended December 31, 2017 and 2016
(in thousands)

	<u>2017</u>	<u>2016</u>
Cash flows from operating activities:		
Cash received from residents	\$ 12,805	\$ 11,715
Cash paid to suppliers and employees	(10,340)	(9,930)
Cash paid for facility lease	(2,566)	(2,474)
Net cash used in operating activities	<u>(101)</u>	<u>(689)</u>
Cash flows from investing activities:		
Purchases of property and equipment	(141)	(548)
Increase in restricted cash	(907)	(83)
Net cash used in investing activities	<u>(1,048)</u>	<u>(631)</u>
Cash flows from financing activities - member contributions	<u>1,149</u>	<u>1,320</u>
Net change in cash	-	-
Cash at beginning of year	-	-
Cash at end of year	\$ <u>-</u>	\$ <u>-</u>
Reconciliation of net loss to net cash used in operating activities:		
Net loss	\$ (622)	\$ (799)
Adjustments to reconcile net loss to net cash used in operating activities:		
Depreciation	304	234
Straight-line lease expense (income)	(78)	13
Provision for doubtful accounts	117	68
(Increase) decrease in:		
Accounts receivable	(105)	(242)
Other current assets	35	15
Other assets	4	(73)
Increase (decrease) in:		
Accounts payable and accrued expenses	250	(25)
Deferred revenue	(65)	23
Other long term liabilities	59	97
Net cash used in operating activities	\$ <u>(101)</u>	\$ <u>(689)</u>

See accompanying notes to financial statements.

S-H OpCo Carlsbad, LLC
Notes to Financial Statements
December 31, 2017 and 2016
(dollars in thousands except as where otherwise stated)

(1) Organization

S-H OpCo Carlsbad, LLC (the "Company") is an operator of a senior living community (the "Community") in Carlsbad, California. The Company is committed to providing senior living solutions through a property that is designed, purpose-built and operated to provide the highest quality service, care and living accommodations for residents. The Community offers a variety of living arrangements and services to accommodate all levels of physical ability and health. The Community has 24 memory care units, 90 assisted living units, and 45 skilled nursing beds on one campus.

(2) Summary of Significant Accounting Policies

Basis of Presentation

The accompanying financial statements have been prepared in accordance with accounting principles generally accepted in the United States of America ("GAAP"). The significant accounting policies have been summarized below.

The State of California (the "State"), under Health and Safety Code Chapter 10, requires the Company to provide financial statements, which include cash flows presented using the direct method. In accordance with this requirement, the Company has presented cash flows and related reconciliations of net loss to cash flows used in operating activities using the direct method for the years ended December 31, 2017 and 2016.

Use of Estimates and Assumptions

The preparation of the financial statements in accordance with GAAP requires management to make estimates and assumptions that affect amounts reported and disclosures of contingent assets and liabilities in the financial statements and accompanying notes. Although these estimates are based on management's best knowledge of current events and actions that the Company may undertake in the future, actual results may be different from the estimates.

Revenue Recognition

(1) Resident Fees

Resident fee revenue is recorded when services are rendered and consists of fees for basic housing, support services and fees associated with additional services such as personalized health and assisted living care. Residency agreements are generally for a term of 30 days to one year, with resident fees billed monthly in advance. Revenue for certain skilled nursing services and ancillary charges is recognized as services are provided and is billed monthly in arrears.

S-H OpCo Carlsbad, LLC
Notes to Financial Statements
December 31, 2017 and 2016
(dollars in thousands except as where otherwise stated)

(2) Community Fees

Community fees are upfront fees paid by a resident in order to move into the Community. The fees are non-refundable and are recorded initially as deferred revenue. The deferred revenue amounts are amortized as resident fee revenue using the straight-line method over the estimated length of a resident's stay, which approximates 3 years. The deferred revenue related to community fees amounted to \$83 and \$82 as of December 31, 2017 and 2016, respectively, and is included in other long term liabilities on the accompanying balance sheets.

Restricted Cash

Restricted cash consists principally of deposits required by the California Department of Social Services ("CDSS").

Accounts Receivable

The Company reports accounts receivable net of an allowance for doubtful accounts, to represent its estimate of the amount that ultimately will be realized in cash. The allowance for doubtful accounts was \$116 and \$64 as of December 31, 2017 and 2016, respectively. The adequacy of the Company's allowance for doubtful accounts is reviewed on an ongoing basis, using historical payment trends, write-off experience, and analyses of receivable portfolios by payor source, receivables aging, and specific accounts. Adjustments are made to the allowance estimate as necessary. Late or interest charges on delinquent accounts are not recorded until collected.

Billings for services under third-party payor programs are recorded net of estimated retroactive adjustments, if any, under reimbursement programs. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods or as final settlements are determined. Contractual or cost related adjustments from Medicare or Medicaid are accrued when assessed (without regard to when the assessment is paid or withheld). Subsequent positive or negative adjustments to these accrued amounts are recorded in net revenues when known. At December 31, 2017 and 2016, approximately 58% and 64%, respectively, of the Company's accounts receivable was covered by various third-party payor programs, including Medicare and Medicaid. Approximately 45% and 47% of the Company's resident services revenue for the years ended December 31, 2017 and 2016, respectively, was attributable to various third-party payor programs, including Medicare and Medicaid programs.

Property and Equipment

Property and equipment are recorded at cost. Renovations and improvements, which improve and/or extend the useful life of the asset, are capitalized and depreciated over their estimated useful life or the remaining lease term. Maintenance and repair expenditures that do not improve or extend the life of assets are expensed as incurred. Depreciation is computed using the straight-line method using the following estimated useful lives:

S-H OpCo Carlsbad, LLC
Notes to Financial Statements
December 31, 2017 and 2016
(dollars in thousands except as where otherwise stated)

Leasehold improvements	Shorter of the lease term or asset useful life
Furniture and equipment	3 – 7 years

Long-lived assets are reviewed for impairment whenever events or changes in circumstances indicate that the carrying amount of an asset may not be recoverable. Recoverability of long-lived assets held for use are assessed by a comparison of the carrying amount of the asset to the estimated future undiscounted net cash flows expected to be generated by the asset. If estimated future undiscounted net cash flows are less than the carrying amount of the asset then the fair value of the asset is estimated. The impairment expense is determined by comparing the estimated fair value of the asset to its carrying value, with any amount in excess of fair value recognized as an expense in the current period. Undiscounted cash flow projections and estimates of fair value amounts are based on a number of assumptions such as revenue and expense growth rates, estimated holding periods and estimated capitalization rates.

Deferred Move-in Costs

Direct resident lease origination costs are initially deferred and amortized as community operating expenses over the estimated length of the resident's stay, which approximates 3 years. The deferred direct lease origination costs included in other assets amounted to \$258 and \$263 as of December 31, 2017 and 2016, respectively.

Deferred Lease Costs

Rent expense is recorded on a straight-line basis over the term of the lease. One or more option periods may be included in the lease term if the Company would incur a significant economic penalty by not renewing the lease. Lease escalations during the term of the lease create a deferred lease liability which represents the excess of rent expense to date over the actual rent paid to date. The Company's lease allows for reimbursements for normal tenant improvements paid by the Company up to a specified threshold. These reimbursements are accounted for as lease incentives as defined by Accounting Standards Codification 840, *Leases*, and are initially recorded as deferred liabilities upon receipt. The incentives are recorded on a straight-line basis as a reduction to lease expense over the term of the lease. The net amount of straight-line lease expense (income) recognized as a result of the amortization of these liabilities totaled (\$78) and \$13 for the years ended December 31, 2017 and 2016, respectively, and is included in facility lease expense on the accompanying statements of operations. As of December 31, 2017 and 2016, the Company had a deferred lease liability of \$732 and \$810, respectively.

Income Taxes

The Company is treated as a limited liability company for tax purposes. Generally, no provision for federal and state income taxes has been recorded as payment for income taxes is the responsibility of the individual member.

S-H OpCo Carlsbad, LLC
Notes to Financial Statements
December 31, 2017 and 2016
(dollars in thousands except as where otherwise stated)

Community Operating Expenses

Community operating expenses are incurred to maintain the operating activities of the Community and include salary and benefits for community employees, repairs and maintenance expenses, food, marketing and advertising, and insurance.

General and Administrative Expenses

General and administrative expenses are incurred to manage the Community's operations and generally include salary and benefits for employees and other general expenses such as communications and telephone and professional fees.

Subsequent Events

The Company has evaluated events subsequent to December 31, 2017 through the date the financial statements were available to be issued, March 28, 2018, and determined that no events have occurred which would require additional disclosure.

(3) Property and Equipment

Net property and equipment as of December 31, 2017 and 2016 consisted of the following:

	2017	2016
Leasehold improvements	\$ 814	\$ 636
Furniture and equipment	1,086	1,044
Construction in progress	31	110
	<u>1,931</u>	<u>1,790</u>
Accumulated depreciation	(646)	(342)
Property and equipment, net	<u>\$ 1,285</u>	<u>\$ 1,448</u>

For the years ended December 31, 2017 and 2016, the Company evaluated property and equipment for impairment and no charge was recorded.

(4) Accrued Expenses

Accrued expenses as of December 31, 2017 and 2016 consist of the following components:

	2017	2016
Accrued salaries and wages	\$ 278	\$ 194
Accrued vacation	177	184
Accrued insurance reserves	60	45
Other accrued expenses	139	106
	<u>\$ 654</u>	<u>\$ 529</u>

S-H OpCo Carlsbad, LLC
Notes to Financial Statements
December 31, 2017 and 2016

(dollars in thousands except as where otherwise stated)

(5) Related-Party Transactions

Management Agreement

On August 29, 2014, the Company entered into a long-term management agreement with BKD Twenty-one Management Company, Inc. ("BKD"), a related party. Subject to the terms of the agreement, BKD will receive a management fee equal to 5% of gross revenues plus incentives fees as defined in the agreement. Furthermore, out-of-pocket costs and expenses incurred on behalf of the Company by BKD are subject to reimbursement to BKD. The management contract extends through 2029, and has three five-year renewal options. The amount incurred for management fees was \$ 637 and \$590 for the years ended December 31, 2017 and 2016, respectively.

Community Lease

On August 29, 2014, the Company entered into a lease agreement (the "Lease") for the use of the Community from S-H Forty-Nine PropCo – California Pack, LP (the "PropCo" or "Lessor"), a related party. The term of the Lease is 15 years and is subject to three extension terms of five years each. The Lease contains a \$609 capital refurbishment project allowance for the Community. Under the terms of the Lease, approved capital refurbishment projects will be reimbursed by the Lessor up to the allowance amount. The monthly minimum rent will be increased from time to time for funding provided to the Company by the Lessor for any portion of the capital funding allowances. The Lease requires the payment of base rent which escalates annually through August 2019. Beginning September 1, 2019, the base rents will be reset to the fair market value rental and will escalate under the terms of the Lease through August 2024. Beginning September 1, 2024, the base rents will be reset to the fair market value rental and will escalate under the terms of the Lease through the remainder of the term ending in August 2029. Under the terms of the Lease, the fair market value rental is subject to agreement of the Company and the Lessor or will be determined by an appraiser if the parties do not reach an agreement. Additionally, the Lessor may issue notice to the Company requiring it to establish and maintain a repairs and maintenance reserve. No such notice has been issued through the date the financial statements were available to be issued. The Company incurred rent expense of \$2,488 and \$2,487 for the years ended December 31, 2017 and 2016, respectively.

A summary of the lease expense and impact of straight-line adjustment for the years ended December 31, 2017 and 2016 are as follows:

	2017	2016
Cash basis payment	\$ 2,566	\$ 2,474
Straight-line change for deferred lease	(36)	55
Straight-line change for lessor reimbursements	(42)	(42)
Facility lease expense	\$ <u>2,488</u>	\$ <u>2,487</u>

S-H OpCo Carlsbad, LLC
Notes to Financial Statements
December 31, 2017 and 2016
(dollars in thousands except as where otherwise stated)

The aggregate amounts of future lease payments, estimated for fair market value reassessment, under the agreement as of December 31, 2017, are as follows:

2018	\$	2,605
2019		2,683
2020		2,764
2021		2,847
2022		2,932
Thereafter		21,616
Total (through August 2029)	\$	<u>35,447</u>

As described above, the future lease payments under the Lease are subject to an adjustment to the fair market value rental beginning in September 2019 and September 2024. The future lease payments presented in the table above include an estimate of additional rent payments subsequent to the rent adjustment in 2019.

Cash Management

The company does not maintain operating cash accounts as all operating cash activities are transacted by the member and settled to the Company through net member contributions on the Statements of Changes in Member's Equity.

Given the Company's cash management and the member's organizational structure including the PropCo, which is operated under common control, the member intends to continue to fund member contributions to the Company as needed.

(6) Credit Risk

The Company generally maintains cash on deposit at banks in excess of federally insured amounts. The Company has not experienced any losses in such accounts and management believes the Company is not exposed to any significant credit risk related to cash.

(7) Commitments and Contingencies

Minimum Liquid Reserve

The CDSS, under Health and Safety code section 1789, requires the Company to maintain minimum debt service and operating reserves for continuing care service providers based on certain financial calculations. The Company holds a reserve balance of \$4,531 and \$3,624 as of December 31, 2017 and 2016, respectively. No additional funding is expected to be required in 2018.

Litigation

The Company is subject to legal proceedings and claims that arise in the ordinary course of business. However, management believes the amount of potential liability with respect to these actions will not materially affect the financial position or results of operations of the Company.

S-H OpCo Carlsbad, LLC
Notes to Financial Statements
December 31, 2017 and 2016

(dollars in thousands except as where otherwise stated)

Insurance

The delivery of personal and health care services entails an inherent risk of liability. Participants in the senior living and health care services industry have become subject to an increasing number of lawsuits alleging negligence or related legal theories, many of which involve large claims and result in the incurrence of significant exposure and defense costs. Through Brookdale Senior Living Inc. ("Brookdale"), a related party, the Company currently maintains general and professional medical malpractice insurance policies under a master insurance program. In response to these conditions, Brookdale and the Company have increased the staff and resources involved in the quality assurance, compliance, and risk management.

Through Brookdale, the Company currently maintains \$1,000 for single incident and \$3,000 in aggregate for general liability and professional liability protection, with self-insured retentions of \$100 for single incident and \$650 in annual aggregate. Through Brookdale, the Company participates in a self-insured workers' compensation program, with excess of loss coverage provided by third party carriers. The Company's coverage for workers' compensation and related programs included a shared loss worker compensation program through Brookdale. Brookdale maintains workers compensation coverage through a large deductible policy with a current deductible of \$1,000. Through the shared worker compensation program claims costs are allocated between all participants based on community type. Each participant is assigned a loss factor that is applied to budgeted payroll to accrue claims expense under the program to each participant. Through Brookdale, the Company participates in a self-insurance program for employee medical coverage. Loss reserves for employee medical coverage are recorded as liabilities by Brookdale with no allocation made to the Company. The resulting loss expenses incurred by Brookdale are allocated to the Company during the year.

Estimated claims reserves related to this self-insurance program are accrued for the ultimate cost of unpaid reported and unreported claims incurred. The reserves are adjusted regularly based on experience. The Company performs a continuing review of its claims and claim adjustment expense reserves, including its reserving techniques, through the engagement of an external actuarial firm. Since the reserves are based on estimates, the ultimate liability may be more or less than such reserves. The effects of changes in such estimated reserves are included in the results of operations in the period in which the estimates are changed. Such changes in estimates could occur in a future period and may be material to the Company's results of operations and financial position in such period. Accrued insurance reserves were \$304 (\$60 in accrued expenses and \$ 244 in other long term liabilities) and \$231 (\$45 in accrued expenses and \$186 in other long term liabilities) as of December 31, 2017 and 2016, respectively.

Healthcare Regulations

The health care industry is subject to numerous laws and regulations of Federal, state, and local governments. These laws and regulations include, but are not necessarily limited to, matters such as licensure, accreditation, government health care program participation requirements, reimbursement for patient services, and Medicare and Medicaid, or other state programs, fraud and abuse. Recently, government activity has increased with respect to investigations and allegations concerning possible violations of fraud and abuse statutes and regulations by health care providers.

S-H OpCo Carlsbad, LLC
Notes to Financial Statements
December 31, 2017 and 2016

(dollars in thousands except as where otherwise stated)

Violations of these laws and regulations could result in expulsion from government health care programs together with the imposition of significant fines and penalties, as well as significant repayments for patient services previously billed. Management believes that the Company is in compliance with fraud and abuse statutes as well as other applicable government laws and regulations. Compliance with such laws and regulations can be subject to future government review and interpretation as well as regulatory actions unknown or unasserted at this time.

As a result of the Company's participation in the Medicare and Medicaid programs, the Company is subject to various government reviews, audits and investigations to verify the Company's compliance with these programs and applicable laws and regulations. CMS has engaged a number of third party firms, including Recovery Audit Contractors ("RAC"), Zone Program Integrity Contractors ("ZPIC"), and Unified Program Integrity Contractors ("UPIC") to conduct extensive reviews of claims data to evaluate the appropriateness of billings submitted for payment. Audit contractors may identify overpayments based on coverage requirements, billing and coding rules or other risk areas. In addition to identifying overpayments, audit contractors can refer suspected violations of law to government enforcement authorities. An adverse determination of government reviews, audits and investigations may result in citations, sanctions and other criminal or civil fines and penalties, the refund of overpayments, payment suspensions, or termination of participation in Medicare and Medicaid programs. The Company's costs to respond to and defend any such audits, reviews and investigations may be significant and are likely to increase in the current enforcement environment, and any resulting sanctions or criminal, civil or regulatory penalties could have a material adverse effect on the Company's business, financial condition, results of operations and cash flow. While management believes all billings are proper and support is maintained, certain aspects of billing, coding and support are subject to interpretation and may be viewed differently by audit contractors. As amount of any recovery is unknown, management has not recorded any reserves related to audits and investigations at this time.

Healthcare Reform

The health care industry in the United States is subject to fundamental changes due to ongoing health care reform efforts and related political, economic and regulatory influences. Notably, the Patient Protection and Affordable Care Act and the Health Care and Education Reconciliation Act of 2010 (collectively, the "Affordable Care Act") resulted in expanded health care coverage to millions of previously uninsured people beginning in 2014 and has resulted in significant changes to the U.S. health care system. To help fund this expansion, the Affordable Care Act outlines certain reductions in Medicare reimbursements for various health care providers, including skilled nursing facilities, as well as certain other changes to Medicare payment methodologies. This comprehensive health care legislation has resulted and will continue to result in extensive rulemaking by regulatory authorities, and also may be altered, amended, repealed, or replaced. It is difficult to predict the full impact of the Affordable Care Act due to the complexity of the law and implementing regulations, as well the Company's inability to foresee how CMS and other participants in the health care industry will respond to the choices available to them under the law. The Company also cannot accurately predict whether any new or pending legislative proposals will be adopted or, if adopted, what effect, if any, these proposals would have on the Company's business. Similarly, while the Company can anticipate that some of the rulemaking that will be promulgated by regulatory authorities will affect the

S-H OpCo Carlsbad, LLC
Notes to Financial Statements
December 31, 2017 and 2016

(dollars in thousands except as where otherwise stated)

Company's business and the manner in which the Company is reimbursed by the federal health care programs, the Company cannot accurately predict today the impact of those regulations on the Company's business. The provisions of the legislation and other regulations implementing the provisions of the Affordable Care Act or any amended or replacement legislation may increase costs, decrease revenues, expose the Company to expanded liability or require the Company to revise the ways in which it conducts business.

In addition to its impact on the delivery and payment for health care, the Affordable Care Act and the implementing regulations have resulted and may continue to result in increases to the Company's costs to provide health care benefits to its employees. The Company also may be required to make additional employee-related changes to its business as a result of provisions in the Affordable Care Act or any amended or replacement legislation impacting the provision of health insurance by employers, which could result in additional expense and adversely affect the Company's results of operations and cash flows.

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BLC Glenwood-Gardens AL-LH, LLC

S-H OpCo Camarillo, LLC

S-H OpCo Carlsbad, LLC

S-H OpCo Carmel Valley, LLC

S-H OpCo Rancho Mirage, LLC

S-H OpCo San Juan Capistrano, LLC

Emeritus Corporation d/b/a Brookdale

Northridge, Brookdale Fountaingrove,

Brookdale Yorba Linda and Brookdale

San Dimas

2017 Client Service Communication

LBMC

MAKE A GOOD
BUSINESS BETTER

The Members and Board of Directors

BLC Glenwood-Gardens AL-LH, LLC; S-H OpCo Camarillo, LLC; S-H OpCo Carlsbad, LLC; S-H OpCo Carmel Valley, LLC; S-H OpCo Rancho Mirage, LLC; S-H OpCo San Juan Capistrano, LLC; and Emeritus Corporation d/b/a Brookdale Northridge, Brookdale Fountain Grove, Brookdale Yorba Linda and Brookdale San Dimas (collectively the "Companies")

Dear Members and Board of Directors:

We have audited the continuing care reports Forms 5-1 through 5-5 ("the Reports"), prepared pursuant to the requirements of the report preparation provisions of California Health and Safety Code Section 1792, of the Companies for the year ended December 31, 2017, and have issued our report thereon dated April 25, 2018. Professional standards require that we provide you certain information related to the planned scope and timing of our audits. We have communicated such information in our engagement letter dated September 12, 2017. Professional standards also require that we communicate to you certain other matters related to our audits.

This information is intended solely for the use of the Members and Board of Directors, management and others within the aforementioned companies and is not intended to be, and should not be used by anyone other than these specified parties.

We appreciate the confidence you place in LBMC as your business advisor. We strive to help you stay compliant, manage risk, and improve performance in every way as you grow your business.

LBMC, PC

Brentwood, Tennessee
April 25, 2018

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Client service is a priority.....	7

Qualitative Assessments

Area	Detail
Qualitative Aspects of Accounting Practices – Accounting Policies	<p>Management is responsible for the selection and use of appropriate accounting policies. In accordance with the terms of our engagement letter, we will advise management about the appropriateness of accounting policies and their application. No new accounting policies were adopted and the application of existing policies was not changed during 2017. We are not aware of any transactions entered into by the Companies during the year for which there is a lack of authoritative guidance or consensus. All significant transactions have been recognized in the Reports in the proper period.</p>
Qualitative Aspects of Accounting Practices - Estimates	<p>Accounting estimates are an integral part of the Reports prepared by management and are based on management's knowledge and experience about past and current events and assumptions about future events. Certain accounting estimates are particularly sensitive due to: (i) their significance to the Reports; and (ii) possibility that future events affecting them may differ significantly from those expected. The most sensitive estimates affecting the Reports relate to:</p> <ul style="list-style-type: none"> • <i>Calculation of revenue applicable to residents without a continuing care contract</i> • <i>Depreciable lives of property and equipment</i> • <i>Amortization period of resident leasehold intangibles</i> <p>We have reviewed and evaluated all areas where management's estimates significantly impact the Reports and have concluded that they are reasonable in the context of the Reports taken as a whole.</p>

Interaction with Management, Independence, and Other Matters

Area	Detail
Difficulties Encountered in Performing the Audit	<p>For purposes of this report, "difficulties" may include matters such as:</p> <ul style="list-style-type: none"> • the unavailability of, or significant delays in management's providing information, • an unreasonable time frame within which to complete the audit, • extensive unexpected effort required to obtain audit evidence, or • restrictions imposed on the auditor by management. <p>We encountered no significant difficulties in performing and completing our audits.</p>
Disagreements with Management	<p>For purposes of this report, professional standards define "disagreements with management" as a financial accounting, reporting, or auditing matter, whether or not resolved to our satisfaction, that could be significant to the reports or the auditors' reports. We are pleased to report that no such disagreements arose during the course of our audits.</p>
Management Consultations with Other Independent Accountants	<p>In some cases, management may decide to consult with other accountants about auditing and accounting matters, similar to obtaining a "second opinion" on certain situations. If consultation involves application of an accounting principle to the Companies' Reports or a determination of the type of auditors' opinion that may be expressed on those Reports, our professional standards require the consulting accountant to check with us to determine that the consultant has all the relevant facts. To our knowledge, there were no such consultations with other accountants.</p>
Management Representations	<p>We have requested certain representations from management that are included in the management representation letter dated April 25, 2018.</p>
Independence	<p>We are not aware of any relationships between our firm and the Companies that, in our professional judgment, may reasonably be thought to bear on our independence that have occurred during the period from January 1, 2017 through the date of this report.</p>
Corrected and Uncorrected Misstatements	<p>Professional standards require us to accumulate all misstatements identified during the audit, other than those that are trivial, and communicate them to the appropriate level of management. No misstatements were detected as a result of our audit procedures.</p>

Internal Control Related Matters

In planning and performing our audit of the Reports, we considered the Companies' internal control over accounting and financial reporting ("internal control") as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the Reports, but not for the purpose of expressing an opinion on the effectiveness of the Companies' internal control. Accordingly, we do not express an opinion on the effectiveness of the Companies' internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies in internal control, such that there is a reasonable possibility that a material misstatement of the Companies' Reports will not be prevented, or detected and corrected, on a timely basis.

Our consideration of internal control was for the limited purpose described in the first paragraph and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies and, therefore, material weaknesses or significant deficiencies may exist that were not identified. Given these limitations, during our audit, we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

Client Service is a Priority

For additional information or if you have questions please contact the Audit Service Team Leaders.

Andrew S. Bissonnette
615-309-2209 Direct
abissonnette@lbmc.com

Laura L. McGregor
615-309-2289 Direct
lmcgregor@lbmc.com

**CONTINUING CARE
RESERVE REPORT
PART 5**

LBMC

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INDEPENDENT AUDITORS' REPORT

The Member
S-H OpCo Carlsbad, LLC:

We have audited the accompanying continuing care reserve report Forms 5-1 through 5-5 (the "Reports") of S-H OpCo Carlsbad, LLC (the "Company"), as of December 31, 2017. The Reports have been prepared by management using the report preparation provisions of California Health and Safety Code Section 1792.

Management's Responsibility

Management is responsible for the preparation and fair presentation of the Reports in accordance with the requirements of California Health and Safety Code Section 1792; this includes the design, implementation and maintenance of internal control relevant to the preparation and fair presentation of Reports that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on the Reports based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the Reports are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the Reports. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the Reports, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Company's preparation and fair presentation of the Reports in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion of the effectiveness of the Company's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the Reports.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the Reports present fairly, in all material respects, the liquid reserve requirements of the Company as of December 31, 2017, in conformity with the report preparation provisions of California Health and Safety Code Section 1792.

Basis of Accounting

The accompanying Reports were prepared in accordance with the report preparation provisions of California Health and Safety Code Section 1792, which is a basis of accounting other than accounting principles generally accepted in the United States of America. The Reports are not intended to be a complete presentation of the Company's assets, liabilities, revenues and expenses. Our opinion is not modified with respect to this matter.

Restriction on Use

Our report is intended solely for the information and use of the Company and for filing with the California Department of Social Services and should not be used by anyone other than these specified parties. However, this report is a matter of public record and its distribution is not limited.

LBMC, PC

Brentwood, Tennessee
April 25, 2018

FORM 5-1
LONG-TERM DEBT INCURRED IN A PRIOR FISCAL YEAR
(Including Balloon Debt)

Long-Term Debt Obligation	(a) Date Incurred	(b) Principal Paid During Fiscal Year	(c) Interest Paid During Fiscal Year	(d) Credit Enhancement Premiums Paid in Fiscal Year	(e) Total Paid (columns (b)+ (c)+ (d))
1					
2					
3					
4					
5					
6					
7					
8					
			\$0.00	\$0.00	\$0.00

*(Transfer this amount to
Form 5-3, Line 1)*

NOTE: For column (b), do not include voluntary payments made to pay down principal.

PROVIDER: S-H OpCo Carlsbad, LLC

FORM 5-2
LONG-TERM DEBT INCURRED DURING FISCAL YEAR
(Including Balloon Debt)

Long-Term Debt Obligation	(a) Date Incurred	(b) Total Interest Paid During Fiscal Year	(c) Amount of Most Recent Payment on the Debt	(d) Number of Payments over next 12 months	(e) Reserve Requirement (see instruction 5) (columns (c) x (d))
1					
2					
3					
4					
5					
6					
7					
8					
TOTAL:		\$0.00	\$0.00	\$0.00	\$0.00

*(Transfer this amount to
Form 5-3, Line 2)*

NOTE: For column (b), do not include voluntary payments made to pay down principal.

PROVIDER: S-H OpCo Carlsbad, LLC

FORM 5-3
CALCULATION OF LONG-TERM DEBT RESERVE AMOUNT

Line		TOTAL
1	Total from Form 5-1 bottom of Column (e)	\$ -
2	Total from Form 5-2 bottom of Column (e)	\$ -
3	Facility leasehold or rental payment paid by provider during fiscal year. (including related payments such as lease insurance)	\$ 2,488,000
4	TOTAL AMOUNT REQUIRED FOR LONG-TERM DEBT RESERVE:	<u><u>\$ 2,488,000</u></u>

PROVIDER: S-H OpCo Carlsbad, LLC

FORM 5-4
CALCULATION OF NET OPERATING EXPENSES

Line		Amounts	TOTAL
1	Total operating expenses from financial statements		\$ 13,484,000
2	Deductions		
a	Interest paid on long-term debt (see instructions)	\$ 2,488,000	
b	Credit enhancement premiums paid for long-term debt (see instructions)	\$ -	
c	Depreciation	\$ 304,000	
d	Amortization	\$ -	
e	Revenues received during the fiscal year for services to persons who did not have a continuing care contract	\$ 1,496,000	
f	Extraordinary expenses approved by the Department	\$ -	\$ 4,288,000
3	Total Deductions		\$ 9,196,000
4	Net Operating Expenses		\$ 25,195
5	Divide Line 4 by 365 and enter the result.		\$ 1,890,000
6	Multiply Line 5 by 75 and enter the result. This is the provider's operating expense reserve amount.		

PROVIDER: S-H OpCo Carlsbad, LLC

COMMUNITY: Brookdale Carlsbad

FORM 5-4 CALCULATION OF NET OPERATING EXPENSES RECONCILIATION OF LINE 2E

	<u>Carlsbad</u>
	<u>88.38%</u>
Revenues received during the fiscal year for services to persons who did not have a continuing care contract (Line 2E)	\$ 1,496,000
Revenues received from continuing care residents	<u>11,378,000</u>
Cash received for "Resident Revenue"*	<u><u>\$ 12,874,000</u></u>

Cash received for Resident Revenue is allocated between revenues received from residents and revenues received from persons who did not have a continuing care contract based on the weighted average determined on line 11 of Form 1-1.

* Conversion of GAAP Resident Revenue to Cash Basis Resident Revenue

Revenue from Resident Services and Ancillary Services, per Statement of Operations	\$ 12,862,000
Less: Accounts Receivable at 12/31/17	967,000
Plus: Accounts Receivable at 12/31/16	<u>979,000</u>
Revenue from Resident Services, cash basis	<u><u>\$ 12,874,000</u></u>

FORM 5-5
ANNUAL RESERVE CERTIFICATION

Provider Name: S-H OpCo Carlsbad, LLC

Fiscal Year Ended: December 31, 2017

We have reviewed our debt service reserve and operating expense reserve requirements as of, and for the period ended 12/31/17 and are in compliance with those requirements.

Our liquid reserve requirements, computed using the audited financial statements for the fiscal year are as follows:

	Amount
[1] Debt Service Reserve Amount	\$ 2,488,000
[2] Operating Expense Reserve Amount	\$ 1,890,000
[3] Total Liquid Reserve Amount:	\$ 4,378,000

Qualifying assets sufficient to fulfill the above requirements are held as follows:

Qualifying Asset Description	Amount (market value at end of quarter)	
	Debt Service Reserve	Operating Reserve
[4] Cash and Cash Equivalents	\$ 2,488,000	\$ 2,043,000
[5] Investment Securities		
[6] Equity Securities		
[7] Unused/Available Lines of Credit		
[8] Unused/Available Letters of Credit		
[9] Debt Service Reserve		(not applicable)
[10] Other:		

(describe qualifying asset)

Cash reserve account held at bank. See attached year end statement.

Total Amount of Qualifying Assets

Listed for Liquid Reserve:

Total Amount Required:

Surplus/(Deficiency):

[11]	\$ 2,488,000	[12]	\$ 2,043,000
[13]	\$ 2,488,000	[14]	\$ 1,890,000
[15]	\$ -	[16]	\$ 153,000

Signature:



(Authorized Representative)

Date: 4/24/18

Carrey Beers, Secretary

(Title)

S-H OpCo Carlsbad, LLC
Additional Disclosure to Form 5-5
December 31, 2017

Disclosures per H&SC section 1790(a)

i The per capita costs of operation:

Form 1-2 1. Total Operating Expense	<u>\$13,484,000</u>
Form 1-1 7. Number at end of year	121
Total costs per resident	\$111,438

ii The construction in progress was funded through the communities own funds, no new financing was made in FY 2017 for construction. In addition, there were no contingency amounts nor any funds set aside for future projects.

Form 5-5 Qualifying Assets as of December 31, 2017:

- Restricted cash account held at The Private Bank. Balance @ 12/31/17 = \$4,531,000.46 – see attached

FORM 7-1
REPORT ON CCRC MONTHLY SERVICE FEES

	<u>RESIDENTIAL LIVING</u>	<u>ASSISTED LIVING</u>	<u>SKILLED NURSING</u>
[1] Monthly Service Fees at beginning of reporting period: (indicate range, if applicable) _____	N/A	\$3,723	\$9,098
[2] Indicate percentage of increase in fees imposed during reporting period: (indicate range, if applicable) _____	N/A	2.3%	5.8%
<input type="checkbox"/> Check here if monthly service fees at this community were <u>not</u> increased during the reporting period. (If you checked this box, please skip down to the bottom of this form and specify the names of the provider and community.)			
[3] Indicate the date the fee increase was implemented: <u>1/1/17</u> (If more than 1 increase was implemented, indicate the dates for each increase.)			
[4] Check each of the appropriate boxes:			
<input checked="" type="checkbox"/> Each fee increase is based on the provider's projected costs, prior year per capita costs, and economic indicators.			
<input checked="" type="checkbox"/> All affected residents were given written notice of this fee increase at least 30 days prior to its implementation.			
<input checked="" type="checkbox"/> At least 30 days prior to the increase in monthly service fees, the designated representative of the provider convened a meeting that all residents were invited to attend.			
<input checked="" type="checkbox"/> At the meeting with residents, the provider discussed and explained the reasons for the increase, the basis for determining the amount of the increase, and the data used for calculating the increase.			
<input checked="" type="checkbox"/> The provider provided residents with at least 14 days advance notice of each meeting held to discuss the fee increases.			
<input checked="" type="checkbox"/> The governing body of the provider, or the designated representative of the provider posted the notice of, and the agenda for, the meeting in a conspicuous place in the community at least 14 days prior to the meeting.			
[5] On an attached page, provide a concise explanation for the increase in monthly service fees including the amount of the increase.			
PROVIDER: <u>S-H OpCo Carlsbad, LLC</u>			
COMMUNITY: <u>Brookdale Carlsbad</u>			

Form 7-1 Note

[5] Monthly service fees increased overall due to rate changes from annual increases from both billing and market rate adjustments of 2.3-5.8%. Additional factors affecting average for the year include new or burning off incentives, resident turnover, and market evaluations.

**Continuing Care Retirement Community
Disclosure Statement
General Information**

Date Prepared: 4/27/18

FACILITY NAME: Brookdale Carlsbad
ADDRESS: 3140 El Camino Real, Carlsbad, CA ZIP CODE: 92008 PHONE: 760-720-9898
PROVIDER NAME: S-H OpCo Carlsbad, LLC FACILITY OPERATOR: S-H OpCo Carlsbad, LLC
RELATED FACILITIES: Please see below for other CCRCs RELIGIOUS AFFILIATION: None
YEAR OPENED: 1999 # OF ACRES: 4.83 ☐ SINGLE ☒ MULTI- MILES TO SHOPPING CTR: 1
STORY STORY ☐ OTHER: _____ MILES TO HOSPITAL: 3

NUMBER OF UNITS:

RESIDENTIAL LIVING

APARTMENTS — STUDIO: 0
APARTMENTS — 1 BDRM: 0
APARTMENTS — 2 BDRM: 0
COTTAGES/HOUSES: 0
RLU OCCUPANCY (%) AT YEAR END: 0

HEALTH CARE

ASSISTED LIVING: 90 beds
SKILLED NURSING: 45 beds
SPECIAL CARE: 24 beds
DESCRIPTION: > Dementia Care

TYPE OF OWNERSHIP: ☐ NOT-FOR-PROFIT ☒ FOR-PROFIT ACCREDITED?: ☐ YES ☐ NO BY: _____

FORM OF CONTRACT: ☒ CONTINUING CARE ☐ LIFE CARE ☐ ENTRANCE FEE ☐ FEE FOR SERVICE
(Check all that apply) ☐ ASSIGNMENT OF ASSETS ☐ EQUITY ☐ MEMBERSHIP ☐ RENTAL

REFUND PROVISIONS: (Check all that apply) ☐ 90% ☐ 75% ☐ 50% ☐ FULLY AMORTIZED ☐ OTHER: _____

RANGE OF ENTRANCE FEES: \$ 0 - \$ 0 LONG-TERM CARE INSURANCE REQUIRED? ☐ YES ☒ NO

HEALTH CARE BENEFITS INCLUDED IN CONTRACT: None

ENTRY REQUIREMENTS: MIN. AGE: 60 PRIOR PROFESSION: N/A OTHER: N/A

RESIDENT REPRESENTATIVE(S) TO, AND RESIDENT MEMBER(S) ON, THE BOARD (briefly describe provider's compliance and residents' role): >

> A resident representative meets with a representative of the governing body periodically to discuss budgeting and other resident matters.

FACILITY SERVICES AND AMENITIES

<u>COMMON AREA AMENITIES</u>	<u>AVAILABLE</u>	<u>FEE FOR SERVICE</u>	<u>SERVICES AVAILABLE</u>	<u>INCLUDED IN FEE</u>	<u>FOR EXTRA CHARGE</u>
BEAUTY/BARBER SHOP	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HOUSEKEEPING (____ TIMES/MONTH)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
BILLIARD ROOM	<input checked="" type="checkbox"/>	<input type="checkbox"/>	MEALS (____/DAY)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
BOWLING GREEN	<input type="checkbox"/>	<input type="checkbox"/>	SPECIAL DIETS AVAILABLE	<input checked="" type="checkbox"/>	<input type="checkbox"/>
CARD ROOMS	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
CHAPEL	<input type="checkbox"/>	<input type="checkbox"/>	24-HOUR EMERGENCY RESPONSE	<input checked="" type="checkbox"/>	<input type="checkbox"/>
COFFEE SHOP	<input type="checkbox"/>	<input type="checkbox"/>	ACTIVITIES PROGRAM	<input checked="" type="checkbox"/>	<input type="checkbox"/>
CRAFT ROOMS	<input type="checkbox"/>	<input type="checkbox"/>	ALL UTILITIES EXCEPT PHONE	<input checked="" type="checkbox"/>	<input type="checkbox"/>
EXERCISE ROOM	<input type="checkbox"/>	<input type="checkbox"/>	APARTMENT MAINTENANCE	<input checked="" type="checkbox"/>	<input type="checkbox"/>
GOLF COURSE ACCESS	<input type="checkbox"/>	<input type="checkbox"/>	CABLE TV	<input checked="" type="checkbox"/>	<input type="checkbox"/>
LIBRARY	<input checked="" type="checkbox"/>	<input type="checkbox"/>	LINENS FURNISHED	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PUTTING GREEN	<input type="checkbox"/>	<input type="checkbox"/>	LINENS LAUNDERED	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SHUFFLEBOARD	<input type="checkbox"/>	<input type="checkbox"/>	MEDICATION MANAGEMENT	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SPA	<input type="checkbox"/>	<input type="checkbox"/>	NURSING/WELLNESS CLINIC	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SWIMMING POOL-INDOOR	<input type="checkbox"/>	<input type="checkbox"/>	PERSONAL HOME CARE	<input type="checkbox"/>	<input type="checkbox"/>
SWIMMING POOL-OUTDOOR	<input type="checkbox"/>	<input type="checkbox"/>	TRANSPORTATION-PERSONAL	<input checked="" type="checkbox"/>	<input type="checkbox"/>
TENNIS COURT	<input type="checkbox"/>	<input type="checkbox"/>	TRANSPORTATION-PREARRANGED	<input type="checkbox"/>	<input type="checkbox"/>
WORKSHOP	<input type="checkbox"/>	<input type="checkbox"/>	OTHER _____	<input type="checkbox"/>	<input type="checkbox"/>
OTHER _____	<input type="checkbox"/>	<input type="checkbox"/>			

All providers are required by Health and Safety Code section 1789.1 to provide this report to prospective residents before executing a deposit agreement or continuing care contract, or receiving any payment. Many communities are part of multi-facility operations which may influence financial reporting. Consumers are encouraged to ask questions of the continuing care retirement community that they are considering and to seek advice from professional advisors.

PROVIDER NAME: S-H OpCo Carlsbad, LLC

OTHER CCRCs

<u>OTHER CCRCs</u>	<u>LOCATION (City, State)</u>	<u>PHONE (with area code)</u>
Brookdale Carlsbad	Carlsbad, CA	(760) 720-9898
Brookdale Carmel Valley	San Diego, CA	(858) 259-2222
Brookdale Rancho Mirage	Rancho Mirage, CA	(760) 340-5999
Brookdale San Juan Capistrano	San Juan Capistrano, CA	(949) 248-8855
Brookdale Camarillo	Camarillo, CA	(805) 388-8086
Brookdale Riverwalk	Bakersfield, CA	(661) 587-0182
Brookdale Northridge	Northridge, CA	(818) 886-1616
Brookdale San Dimas	San Dimas, CA	(909) 394-0304
Brookdale Fountaingrove	Santa Rosa, CA	(707) 566-8600
Brookdale Yorba Linda	Yorba Linda, CA	(714) -777-9666

MULTI-LEVEL RETIREMENT COMMUNITIES

N/A

LOCATION (City, State)

PHONE (with area code)

FREE-STANDING SKILLED NURSING

N/A

LOCATION (City, State)

PHONE (with area code)

SUBSIDIZED SENIOR HOUSING

N/A

LOCATION (City, State)

PHONE (with area code)

NOTE: PLEASE INDICATE IF THE FACILITY IS A LIFE CARE FACILITY.

PROVIDER NAME: S-H OpCo Carlsbad, LLC

	2014	2015	2016	2017
INCOME FROM ONGOING OPERATIONS				
OPERATING INCOME				
(Excluding amortization of entrance fee income)	4,024,791	10,349,529	11,868,000	12,862,000
LESS OPERATING EXPENSES				
(Excluding depreciation, amortization, and interest)	4,311,907	11,763,652	12,433,000	13,180,000
NET INCOME FROM OPERATIONS	(287,116)	(1,414,123)	(565,000)	(318,000)
LESS INTEREST EXPENSE	-	-	2,487,000	2,488,000
PLUS CONTRIBUTIONS	955,639	1,935,330	1,320,000	1,149,000
PLUS NON-OPERATING INCOME (EXPENSES)				
(excluding extraordinary items)	1	-	-	-
NET INCOME (LOSS) BEFORE ENTRANCE FEES, DEPRECIATION AND AMORTIZATION	668,524	412,913	(1,732,000)	(1,657,000)
NET CASH FLOW FROM ENTRANCE FEES				
(Total Deposits Less Refunds)	-	-	-	-

DESCRIPTION OF SECURED DEBT *(as of most recent fiscal year end)*

LENDER	OUTSTANDING BALANCE	INTEREST RATE	DATE OF ORIGINATION	DATE OF MATURITY	AMORTIZATION PERIOD

FINANCIAL RATIOS (see next page for ratio formulas)

	2015 CCAC Medians 50 th Percentile <i>(optional)</i>	2015	2016	2017
DEBT TO ASSET RATIO			.13	.10
OPERATING RATIO		1.14	1.06	1.02
DEBT SERVICE COVERAGE RATIO			(.28)	(.13)
DAYS CASH ON HAND RATIO				

HISTORICAL MONTHLY SERVICE FEES (Average Fee and Change Percentage)

	2014	%	2015	%	2016	%	2017
STUDIO	3,750	1.4%	3,801				
ONE BEDROOM	3,633	30.1%	4,725				
TWO BEDROOM	4,142	43.1%	5,929				
COTTAGE/HOUSE	-	-	-				
ASSISTED LIVING	3,494	11.7%	3,903	(6.8%)	3,639	2.3%	3,723
SKILLED NURSING	5,037	67.7%	8,446	1.8%	8,601	5.8%	9,098
SPECIAL CARE	4,415	7.9%	4,792	3.5%	4,961	11.6%	5,534

COMMENTS FROM PROVIDER: >

>
>

PROVIDER NAME: S-H OpCo Carlsbad, LLC

FINANCIAL RATIO FORMULAS

LONG-TERM DEBT TO TOTAL ASSETS RATIO

$$\frac{\text{Long-Term Debt, less Current Portion}}{\text{Total Assets}}$$

OPERATING RATIO

$$\frac{\begin{array}{l} \text{Total Operating Expenses} \\ - \text{Depreciation Expense} \\ - \text{Amortization Expense} \end{array}}{\text{Total Operating Revenues} - \text{Amortization of Deferred Revenue}}$$

DEBT SERVICE COVERAGE RATIO

$$\frac{\begin{array}{l} \text{Total Excess of Revenues over Expenses} \\ + \text{Interest, Depreciation, and Amortization Expenses} \\ \text{Amortization of Deferred Revenue} + \text{Net Proceeds from Entrance Fees} \end{array}}{\text{Annual Debt Service}}$$

DAYS CASH ON HAND RATIO

$$\frac{\begin{array}{l} \text{Unrestricted Current Cash \& Investments} \\ + \text{Unrestricted Non-Current Cash \& Investments} \end{array}}{(\text{Operating Expenses} - \text{Depreciation} - \text{Amortization})/365}$$

NOTE: These formulas are also used by the Continuing Care Accreditation Commission. For each formula, that organization also publishes annual median figures for certain continuing care retirement communities.