CERTIFICATE

S-H OpCo San Juan Capistrano, LLC DBA Brookdale San Juan Capistrano

State of
County of)
The enclosed Annual Report for S-H OpCo San Juan Capistrano, LLC DBA Brookdale San Juan Capistrano 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 San Juan Capistrano has been approved by the Department.
As of the date of this certification, S-H OpCo San Juan Capistrano, 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	154
[2]	Number at end of fiscal year	111
[3]	Total Lines 1 and 2	265
[4]	Multiply Line 3 by ".50" and enter result on Line 5.	x.50
[5]	Mean number of continuing care residents	132.5
	All Residents	
[6]	Number at beginning of fiscal year	154
[7]	Number at end of fiscal year	140
[8]	Total Lines 6 and 7	294
[9]	Multiply Line 8 by ".50" and enter result on Line 10.	x.50
[10]	Mean number of all residents	147
	Divide the mean number of continuing care residents (Line 5) by the	
[11]	mean number of all residents (Line 10) and enter the result (round to two decimal places).	90.14%

FORM 1-2 ANNUAL PROVIDER FEE

Line					TOTAL
[1]	Total Operating Expenses (including depreciation and debt service- interes	t only)		\$	14,485,000
[a]	Depreciation	\$	287,000		
[b]	Debt Service (Interest Only)	\$	(000)	5.5 FO	
[2]	Subtotal (add Line 1a and 1b)			\$	287,000
[3]	Subtract Line 2 from Line 1 and enter result.			\$	14,198,000
[4]	Percentage allocated to continuing care residents (Form 1-1, Line 11)				90.14%
[5]	Total Operating Expense for Continuing Care Residents				
	(multiply Line 3 by Line 4)			\$	12,798,000
[6]	Total Amount Due (multiply Line 5 by .001)				
					x .001
				\$	12,798

PROVIDER: S-H OpCo San Juan Capistrano, LLC
COMMUNITY: Brookdale San Juan Capistrano

Vendor Number:

0000103714

Name

DEPARTMENT OF SOCIAL SERVICES

12,798.00

Check Date:

04/24/2018

Check No.

00069607

Invoice Number	Invoice Date	Payment Message		Voucher ID	Bus. Unit	Pay on Behalf of:
		Gross Amount	Discount Taken	Paid Amount		
04201812798.00	04/20/2018	2017 ANNUAL REPORT		00011646	24434	Brookdale San Juan Capistrano

12,798.00

0.00

 $TO\ ENSURE\ PAYMENTS,\ REMIT\ TO\ ADDRESS\ AND\ THE\ COMMUNITY\ NAME\ AND\ ADDRESS\ ARE\ REQUIRED\ ON\ YOUR\ INVOICES\ .$

Gross Amount Total

\$12,798.00

Discount Taken Total

\$0.00

Paid Amount Total

\$12,798.00

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

00069607 Check No. WELLS FARGO BANK NA WELLS FARGO BANK NA

Van Wert, OH 45891 56-382/412

Pay Amount

****TWELVE THOUSAND SEVEN HUNDRED AND NINETY-EIGHT AND XX / 100 DOLLAR******** Pay

\$12,798.00***

Pay To The Order Of

DEPARTMENT OF SOCIAL SERVICES

744 P ST MS 3-67

SACRAMENTO, CA 95814

Void After 90 Days



CERTIFICATE OF LIABILITY INSURANCE

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).

CONTACT Willis Towers Watson Certificate Center NAME: NAME:						
Willis of Illinois, Inc.		PHONE (A/C, No, Ext): 1-877-945-7378 FAX (A/C, No): 1-888-467-23				
c/o 26 Century Blvd P.O. Box 305191		E-MAIL ADDRESS: certificates@willis.com				
Nashville, TN 372305191 USA		INSURER(S) AFFORDING COVERAGE	NAIC#			
	9	INSURER A: Underwriters at Lloyd's London				
INSURED	INSURER B: Continental Insurance Company					
Brookdale Senior Living, Inc. 111 Westwood Place		INSURER C: American Casualty Company of Reading, PA				
Suite 400		INSURER D: National Union Fire Insurance Company of P	19445			
Brentwood, TN 37027		INSURER E: Columbia Casualty Company	31127			
		INSURER F:				
COVERAGES	CERTIFICATE NUMBER: W4887947	RAGES CERTIFICATE NUMBER: W4887947 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. ADDL SUBR POLICY EFF POLICY EXP LIMITS TYPE OF INSURANCE POLICY NUMBER INSD WVD 1,000,000 COMMERCIAL GENERAL LIABILITY EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) × 100,000 \$ X | CLAIMS-MADE OCCUR S Professional Liability MED EXP (Any one person) × A 12/31/2017 12/31/2018 SB-LTCA-01635-17 1,000,000 PERSONAL & ADV INJURY \$ 3,000,000 GENERAL AGGREGATE \$ GEN'L AGGREGATE LIMIT APPLIES PER: 1,000,000 PRODUCTS - COMP/OP AGG \$ PRO-JECT X LOC POLICY Deductible 100,000 OTHER: COMBINED SINGLE LIMIT (Ea accident) S 1,000,000 **AUTOMOBILE LIABILITY** BODILY INJURY (Per person) \$ ANY AUTO OWNED AUTOS ONLY SCHEDULED AUTOS 04/01/2017 04/01/2018 BODILY INJURY (Per accident) \$ В 4031698072 PROPERTY DAMAGE HIRED AUTOS ONLY Comp & Coll NON-OWNED \$ (Per accident) AUTOS ONLY Ded. \$1,000 \$ × 25,000,000 EACH OCCURRENCE \$ UMBRELLA LIAB OCCUR 12/31/2017 12/31/2018 25,000,000 SB-LTCAX-01460-17 AGGREGATE \$ **EXCESS LIAB** × × CLAIMS-MADE \$ RETENTION \$ DED WORKERS COMPENSATION × PER STATUTE AND EMPLOYERS' LIABILITY 1,000,000 E.L. EACH ACCIDENT ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? No N/A 5082521444 01/01/2018 01/01/2019 1,000,000 E.L. DISEASE - EA EMPLOYEE (Mandatory in NH) 1,000,000 f yes, describe under DESCRIPTION OF OPERATIONS below F.I. DISEASE - POLICY LIMIT \$5,000,000 12/31/2017 12/31/2018 Limit 04-173-14-60 D Crime \$50,000 Deductible

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	CANCELLATION
OLIVIII IOATE NOLDEIX	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
To the state of the country of the c	AUTHORIZED REPRESENTATIVE
Brookdale San Juan Capistrano	
31741 Rancho Viejo Road	On Day Paris
San Juan Capistrano, CA 92675	Contractions
	AAAA AAAA AAAAA AAAAA AAAAAAAAAAAAAAAA

© 1988-2015 ACORD CORPORATION. All rights reserved.

AGENCY CUSTOMER ID:	
LOC #:	



ADDITIONAL REMARKS SCHEDULE

Willis of Illinois Inc		NAMED INSURED Brookdale Senior Living, Inc. 111 Westwood Place	
POLICY NUMBER See Page 1		Suite 400 Brentwood, TN 37027	Î
CARRIER	NAIC CODE		
See Page 1	See Page 1	EFFECTIVE DATE: 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 San Juan Capistrano, 31741 Rancho Viejo Road, San Juan Capistrano, CA 92675

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

INSURER AFFORDING COVERAGE: National Union Fire Insurance Company of Pittsburgh

TYPE OF INSURANCE:

LIMIT DESCRIPTION:

LIMIT AMOUNT:

Employment Practices Liability Aggregate

\$10,000,000 Defense Costs

Limit Incl Retention

\$250,000

INSURER AFFORDING COVERAGE: Columbia Casualty Company

NAIC#: 31127

NAIC#: 19445

TYPE OF INSURANCE:

LIMIT DESCRIPTION:

LIMIT AMOUNT:

Excess AL (15M x Primary)

Each Incident

\$15,000,000

Aggregate

\$15,000,000

S-H OpCo San Juan Capistrano, LLC

Financial Statements

December 31, 2017 and 2016

(With Independent Auditors' Report Thereon)



S-H OpCo San Juan Capistrano, LLC

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INDEPENDENT AUDITORS' REPORT

To the Member of S-H OpCo San Juan Capistrano, LLC

We have audited the accompanying financial statements of S-H OpCo San Juan Capistrano, 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 San Juan Capistrano, 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 San Juan Capistrano, LLC Balance Sheets December 31, 2017 and 2016 (in thousands)

Assets

		2017		2016
Current assets:				
Accounts receivable, net	\$	820	\$	1,049
Other current assets		108		204
Total current assets		928		1,253
Restricted cash		5,171		4,228
Property and equipment, net		1,695		1,565
Other assets		250	()	324
Total assets	\$	8,044	\$	7,370
Liabilities and Member's E	quity			
Current liabilities:				
Accounts payable	\$	184	\$	111
Accrued expenses		622		516
Deferred revenue		160		163
Total current liabilities		966		790
Deferred lease costs		780		865
Other long term liabilities		305		254
Total liabilities		2,051		1,909
Member's equity		5,993		5,461
Total liabilities and member's equity	\$	8,044	\$	7,370

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

	2017	2016
Revenue:		
Resident services	\$ 13,565	\$ 12,484
Expenses:		
Community operating expense	8,698	7,909
General and administrative expense	1,443	1,404
Facility lease expense	3,106	3,105
Depreciation	287	229
Real estate tax	279	123
Management fees to related party	672	618
Total expenses	14,485	13,388
Net loss	\$ (920)	\$ (904)

S-H OpCo San Juan Capistrano, 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	\$	4,344
Member contributions, net		2,021
Net loss		(904)
Balance as of December 31, 2016		5,461
Member contributions, net		1,452
Net loss	-	(920)
Balance as of December 31, 2017	\$	5,993

S-H OpCo San Juan Capistrano, LLC Statements of Cash Flows For the year ended December 31, 2017 and 2016 (in thousands)

		2017	15	2016
Cash flows from operating activities:				
Cash received from residents	\$	13,813	\$	12,279
Cash paid to suppliers and employees		(10,714)		(10,015)
Cash paid for facility lease		(3,192)		(3,077)
Net cash used in operating activities	<u>ia — — — — — — — — — — — — — — — — — — —</u>	(93)		(813)
Cash flows from investing activities:				
Purchases of property and equipment		(416)		(634)
Increase in restricted cash	<u></u>	(943)		(574)
Net cash used in investing activities		(1,359)		(1,208)
Cash flows from financing activities - member contributions		1,452		2,021
Net change in cash		-		-
Cash at beginning of year		-		==
Cash at end of year	\$	_	\$	-
Reconciliation of net loss to net cash used in operating activities:				
Net loss	\$	(920)	\$	(904)
Adjustments to reconcile net loss to net cash used in operating activitie	es:			
Depreciation		287		229
Straight line lease expense		(86)		28
Provision for doubtful accounts		124		133
(Increase) decrease in:				
Accounts receivable		105		(371)
Other current assets		97		27
Other assets		74		(26)
Increase (decrease) in:				
Accounts payable and accrued expenses		179		(21)
Deferred revenue		(4)		21
Other long term liabilities		51		73
Tenant deposits				(2)
Net cash used in operating activities	\$	(93)	\$	(813)

(dollars in thousands except as where otherwise stated)

(1) Organization

S-H OpCo San Juan Capistrano, LLC (the "Company") is an operator of a senior living community (the "Community") in San Juan Capistrano, 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 25 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.

(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 \$54 and \$65 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 consist 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 \$74 and \$85, respectively, as of December 31, 2017 and 2016. 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 64% and 63%, respectively, of the Company's accounts receivable was covered by various third-party payor programs, including Medicare and Medicaid. Approximately 43% and 42% 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 the shorter of the estimated useful life or 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:

(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 \$250 and \$324 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 recognized as a result of the amortization of this liability totaled (\$86) and \$28 during 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 \$780 and \$865, 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.

(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	\$	1,338	\$	991
Furniture and equipment		950		891
Construction in progress		18		7
, 0	-	2,306	S	1,889
Accumulated depreciation		(611)		(324)
Property and equipment, net	\$	1,695	\$	1,565

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		\$ 257	\$ 183
Accrued vacation		165	153
Accrued insurance reserves		60	45
Other accrued expenses		140	135
etartisticus utompos sociales (5) •	Total	\$ 622	\$ 516

(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 \$672 and \$618, respectively, for the years ended December 31, 2017 and 2016.

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 \$600 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 allowance. The Lease requires the payment of base rent which escalates annually through August 2019. Effective 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 agreement 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 repair 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 \$3,106 and \$3,105 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	\$ 3,192	\$ 3,077
Straight-line change for deferred lease	(45)	69
Straight-line change for lessor reimbursements	(41)	 (41)
Facility lease expense	\$ 3,106	\$ 3,105

(dollars in thousands except as where otherwise stated)

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

2018	\$ 3,253
2019	3,350
2020	3,451
2021	3,555
2022	3,661
Thereafter	26,991
Total (through August 2029)	\$ 44,261

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 \$5,171 and \$4,228 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.

(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 \$305 (\$60 in accrued expenses and \$245 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.

Health Care 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.

(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

(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 flow.



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



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 Fountaingrove, 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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	Internal control related matters	(
	Client service is a priority	•

Qualitative Assessments

Area	Detail
Qualitative Aspects of Accounting Practices – Accounting Policies	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.
Qualitative Aspects of Accounting Practices - Estimates	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:
	 Calculation of revenue applicable to residents without a continuing care contract Depreciable lives of property and equipment Amortization period of resident leasehold intangibles

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.

Interaction with Management, Independence, and Other Matters

Area	Detail
Difficulties Encountered in Performing the Audit	For purposes of this report, "difficulties" may include matters such as: • 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. We encountered no significant difficulties in performing and completing our audits.
Disagreements with Management	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.
Management Consultations with Other Independent Accountants	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.
Management Representations	We have requested certain representations from management that are included in the management representation letter dated April 25, 2018.
Independence	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.
Corrected and Uncorrected Misstatements	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.

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 Imcgregor@Ibmc.com

CONTINUING CARE RESERVE REPORT PART 5





INDEPENDENT AUDITORS' REPORT

The Member S-H OpCo Rancho Mirage, LLC:

We have audited the accompanying continuing care reserve report Forms 5-1 through 5-5 (the "Reports") of S-H OpCo Rancho Mirage, 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 Rancho Mirage, 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 Rancho Mirage, LLC

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

I	Line TOTAL			
1	Total from Form 5-1 bottom of Column (e)	_\$	ì	-
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)			1,776,000
4	TOTAL AMOUNT REQUIRED FOR LONG-TERM DEBT RESERVE:	\$	ĺ	1,776,000

PROVIDER: S-H OpCo Rancho Mirage, LLC

FORM 5-4
CALCULATION OF NET OPERATING EXPENSES

Line		Amounts	TOTAL
1 Total operating expenses from financial statements			\$ 11,031,000
2 Deductions			
a Interest paid on long-term debt (see instructions)	\$	1,776,000	
b Credit enhancement premiums paid for long-term debt (see instructions)	\$		
c Depreciation	\$	289,000	
d Amortization	\$	12	
e Revenues received during the fiscal year for services to persons who did not have a			
continuing care contract	\$	778,000	
f Extraordinary expenses approved by the Department	\$		
3 Total Deductions			\$ 2,843,000
4 Net Operating Expenses			\$ 8,188,000
5 Divide Line 4 by 365 and enter the result.			\$ 22,433
6 Multiply Line 5 by 75 and enter the result. This is the provider's operating expense reserve amount	ount.		\$ 1,682,000
o manipy and o of 10 and once on 100 and once			
PROVIDER: S-H OpCo Rancho Mirage, LLC			
COMMUNITY: Brookdale Rancho Mirage			

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

	Rar	ncho Mirage
		92.23%
Revenues received during the fiscal year for services to persons who did not have a continuing care contract (Line 2E)	\$	778,000
Revenues received from continuing care residents		9,234,000
Cash received for "Resident Revenue"*	\$	10,012,000

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	\$	9,969,000
Less: Accounts Receivable at 12/31/17		691,000
Plus: Accounts Receivable at 12/31/16	-	734,000
Revenue from Resident Services, cash basis	\$	10,012,000

FORM 5-5 ANNUAL RESERVE CERTIFICATION

Provi	der Name: <u>S-H OpCo San Juan Capistrano, LLC</u>						
Fiscal	Year Ended: December 31, 2017						
We ha	ave reviewed our debt service reserve and operating expense reserve requirements as of, and for the period 12/31/17 and are in compliance with those requirements.						
Our li	iquid reserve requirements, computed using the audited financial statements for the fiscal year are lows:						
				Amount			
	Debt Service Reserve Amount		\$	3,106,000			
[2]	Operating Expense Reserve Amount	-	S	2,000,000			
[3]	Fotal Liquid Reserve Amount:		\$	5,106,000			
Quali	fying assets sufficient to fulfill the above requirements are held as follows:			A	mount	í.	
				(market value			rter)
Quali	fying Asset Description		Debt S	Service Reserve		Oper	nting Reserve
[4]	Cash and Cash Equivalents		\$	3,106,000		\$	2,065,000
[5]	Investment Securities						
[6]	Equity Securities						
[7]	Unused/Available Lines of Credit						
[8]	Umused/Available Letters of Credit						
[9]	Debt Service Reserve					(not ap	plicable)
[10]	Other:						
(desc	cribe qualifying asset)						
Cash	reserve account held at bank. See attached year end statement.	•					
Total	Amount of Qualifying Assets						
Liste	d for Liquid Reserve:	[11]	,	3,106,000			2,065,000
	Amount Required:	[13]		3,106,000	[14]		2,000,000
Surp	lus/(Deficiency):	[15]	_\$		[10]	•	03,000
Sign	ature:			1-21	,	CI.	
(Aut	horized Representative)	3.	Date:	4-24	_(7	
_	ey Beers, Secretary	-					
(Titl	e)						

S-H OpCo San Juan Capistrano, 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

\$14,485,000

Form 1-1 7. Number at end of year

140

Total costs per resident

\$103,464

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 = \$5,170,999.51 – see attached

FORM 7-1 REPORT ON CCRC MONTHLY SERVICE FEES

		RESIDENTIAL <u>LIVING</u>	ASSISTED LIVING	SKILLED NURSING
[1]	Monthly Service Fees at			
• •	beginning of reporting period:			
	(indicate range, if applicable)	N/A	\$4,178	\$9,509
[2]	Indicate percentage of increase			
1	in fees imposed during reporting period:			
	(indicate range, if applicable)	N/A	5.5%	3.5%
	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:			
	(If more than 1 increase was implemented, indicate the dates for each increase.)			
[4]	Check each of the appropriate boxes:			
	X Each fee increase is based on the provider's projected costs, prior year per capita costs,			
	and economic indicators.			
	X All affected residents were given written notice of this fee increase at least 30 days			
	prior to its implementation.			
	X 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.			
	X 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	he increase.		
	X The provider provided residents with at least 14 days advance notice of each meeting held to discuss the fee increases.			
	X 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.			
PR	OVIDER: S-H OpCo San Juan Capistrano, LLC			
CO	DMMUNITY: Brookdale San Juan Capistrano			

[5] Monthly service fees increased due to rate changes from annual increases from both billing and market rate adjustments of 5.5-8.3%. Additional factors affecting average for the year include new or burning off incentives, resident turnover, and market evaluations.

Date Prepared: 4/27/18

Continuing Care Retirement Community Disclosure Statement General Information

FACILITY NAME: Brookdale S	San Juan Capistran	О				
ADDRESS: 31741 Rancho Vie			Ą	ZIP CODE: 92675	PHONE: 949-24	
PROVIDER NAME: S-H OpCo	San Juan Capistra	no, LLC		FACILITY OPERAT	OR: S-H OpCo San	Juan Capistrano, LLC
RELATED FACILITIES: Please s	see below for other C	CCRCs		RELIGIOUS AFFILIATI	ON: None	
YEAR # OF	☐ SING	LE 🛮 MULTI-			MILES TO SHOP	PPING CTR: 0.1
OPENED: 1999 ACRES	: <u>4.63</u> STOR	Y STORY	OTHER:	* * * * * * * * * *	MILES TO	HOSPITAL: 5
			* * * * * * *			* * * * * * * * * * * *
NUMBER OF UNITS:	RESIDENTIA			HEALTH CA		
	RTMENTS — STUDIO:			ASSISTED LIVING: 90		
	RTMENTS — 1 BDRM:	-	 :	SKILLED NURSING: 45		
APA	RTMENTS — 2 BDRM:			SPECIAL CARE: 25		
NIII OCCUPANI	COTTAGES/HOUSES:		> DE2C	RIPTION: > Dementia	Sare	
RLU OCCUPANO	CY (%) AT YEAR END:	* * * * * * *	* * * * * *	* * * * * * * * * * *	* * * * * * * * * *	* * * * * * * * * *
TYPE OF OWNERSHIP:	□ NOT-FOR-PROFIT	☑ FOR- PRO	FIT ACCRE	DITED?: 🗆 YES 🗅 NO	D BY:	
. •	☑ CONTINUING CARI ☑ ASSIGNMENT OF A		LIFE CARE EQUITY	□ ENTRANCE FEE □ MEMBERSHIP		
REFUND PROVISIONS: (Che						
RANGE OF ENTRANCE FEES	: \$ <u></u> 0	- \$ <u>0</u>		LONG-TERM CARE	INSURANCE REQUI	RED? □ YES ■ NO
HEALTH CARE BENEFITS IN	CLUDED IN CONT	RACT: None				
ENTRY REQUIREMENTS: M				(1)	OTHER: N/A	
RESIDENT REPRESENTATIV						
> A resident representative			governing bo	dy periodically to discu	uss budgeting and ot	ther resident matters.
* * * * * * * * * * * * * *	* * * * * * * * * *			* * * * * * * * * *	* * * * * * * * *	* * * * * * * * * * *
occini ti kinin (Ungertifeccioco) - vici reale (Un 1911 - Unider III)			ERVICES AND		INCLUDED IN SEC	FOR EXTRA CHARGE
COMMON AREA AMENITI		FEE FOR SERVICE		CES AVAILABLE G (TIMES/MONTH)	INCLUDED IN FEE	
BEAUTY/BARBER SHOP			MEALS (/		▽	H
BILLIARD ROOM			SPECIAL DIETS			ä
BOWLING GREEN			SPECIAL DILI	AVAILABLE		ш
CARD ROOMS			24-HOUR FMF	RGENCY RESPONSE	V	
CHAPEL			ACTIVITIES PR			ä
COFFEE SHOP CRAFT ROOMS				EXCEPT PHONE		
EXERCISE ROOM		H	APARTMENT A		V	
GOLF COURSE ACCESS		旨	CABLE TV		V	
LIBRARY		Ħ	LINENS FURNI	SHED		
PUTTING GREEN		$\overline{}$	LINENS LAUN		V	
SHUFFLEBOARD	旨			MANAGEMENT		V
SPA		占		LINESS CLINIC		
SWIMMING POOL-INDOOR	=	=	PERSONAL HO			V
SWIMMING POOL-OUTDOOR		\exists		TION-PERSONAL	V	
TENNIS COURT			TRANSPORTA	TION-PREARRANGED		
WORKSHOP	_		OTHER			
OTHER	_	$\overline{}$	a name of the same			

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.

OTHER CCRCs	LOCATION (City, State)	PHONE (with area code)
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 MULTI-LEVEL RETIREMENT COMMUNITIES N/A FREE-STANDING SKILLED NURSING N/A	Yorba Linda, CA LOCATION (City, State) LOCATION (City, State)	(714) - 777 - 9666 PHONE (with area code) PHONE (with area code)
SUBSIDIZED SENIOR HOUSING N/A	LOCATION (City, State)	PHONE (with area code)

ICOME EDOM ONGOIN			2014	2015		201	6	2017
PERATING INCOME	IG OPERATIONS							
xcluding amortization of	entrance fee income)	3,787,97	'4	11,160,042		12,484,000		13,565,000
	-			20 14 14 14 15 4 10 24 10 1			<u></u>	
ESS OPERATING EXPE		4 000 40	00	10 400 412		12 150 000		14 109 000
xcluding depreciation, an	nornzanon, ana imeresi)	4,233,18	-	12,480,113		13,159,000		14,198,000
ET INCOME FROM OP	ERATIONS	(445,215	5)	(1,320,071)		(675,000)		(633,000)
ESS INTEREST EXPENS	E	-	-	1		3,105,000		3,106,000
LUS CONTRIBUTIONS		620,809		2,574,000		2,021,000	-	1,452,000
LUS NON-OPERATING								
excluding extraordinary it	tems)	(6,743)				_		N <u>w</u> 1
ET INCOME (LOSS) RE	FORE ENTRANCE							
		168,851		1,158,548		(1,759,000)		(2,287,000)
IET CACU ELOW EDGE	ENTRANCE EFF					a-		
하다 요. 이렇게되면 보게 되어 그렇게 되어 없었다. 친구와		_		-		-		_
וחומו הפלחפוופ בפפפ עפוחוו	u 3 j	***	s =					√
* * * * * * * * * *	* * * * * * * * * *	* * * * *	* * * * * * * * *	* * * * * * *	* * * *	* * * * * *	* * * * *	* * * * * * * * *
ESCRIPTION OF SECU			(year end) INTEREST	DATE	05	DATE	OF	AMORTIZATIO
			INTEREST	DAIL	Ur	DAIL	UF	AMURITZATIO
ET INCOME (LOSS) BEFOR EES, DEPRECIATION AND ET CASH FLOW FROM ENT otal Deposits Less Refunds) * * * * * * * * * * * * * * * ESCRIPTION OF SECURED	OUTSTA			ORIGINA	MOITA	MATIII	RITY	PERIOD
LENDER	OUTSTAL BALA		RATE	ORIGINA	ATION	MATU	RITY	PERIOD
				ORIGINA	ATION	MATUI	RITY	PERIOD
				ORIGINA	ATION	MATU	RITY	PERIOD
				ORIGINA	ATION ***	* * * * * * *	* * * * *	PERIOD * * * * * * * * * * * * * * * * * * *
LENDER	**********	NCE		ORIGIN/	* * * *	* * * * * * *	* * * * *	* * * * * * * * * *
LENDER	* * * * * * * * * * * * * * * * * * *	nce ***** nulas) CCAC		ORIGINA	* * * *	* * * * * *	* * * * *	* * * * * * * * *
LENDER	* * * * * * * * * * * * * * * * e next page for ratio for 2015	nulas) CCAC ns 50th	*******	******	* * * *	* * * * * *	* * * * *	* * * * * * * *
LENDER	BALA * * * * * * * * * * * * * * * * * * *	nulas) CCAC ns 50 th entile	*******	ORIGIN/	* * * *	* * * * * * * * * * * * * * * * * * *	****	* * * * * * * * * * * * * * * * * * * *
LENDER ********** ************ **********	BALA * * * * * * * * * * * * * * * * * * *	nulas) CCAC ns 50th	**************************************	******	* * * *	* * * * * *	****	* * * * * * * * * * * * * * * * * * *
LENDER ********** FINANCIAL RATIOS (se	* * * * * * * * * * * * * * * * * * *	nulas) CCAC ns 50 th entile	*******	******	.12	* * * * * *	* * * *	* * * * * * * * * * * * * * * * * * *
LENDER ********** ********** ********** ****	BALA * * * * * * * * * * * * * * * * * * *	nulas) CCAC ns 50 th entile	**************************************	******	* * * *	* * * * * *	* * * *	* * * * * * * * * * * * * * * * * * *
LENDER ********** ********** ********** ****	BALA * * * * * * * * * * * * * * * * * * *	nulas) CCAC ns 50 th entile	**************************************	******	.12	* * * * * *	* * * *	* * * * * * * * * * * * * * * * * * *
LENDER FINANCIAL RATIOS (SE DEBT TO ASSET RATIO DEPERATING RATIO DEBT SERVICE COVERA	BALA * * * * * * * * * * * * * * * * * * *	nulas) CCAC ns 50 th entile	**************************************	******	.12	* * * * * *	* * * *	* * * * * * * * * * * * * * * * * * *
LENDER FINANCIAL RATIOS (SE DEBT TO ASSET RATIO DEBT SERVICE COVERA DAYS CASH ON HAND	BALA * * * * * * * * * * * * * * * * * * *	nulas) CCAC ns 50 th entile	* * * * * * * * * * * * * * * * * * *	2015	.12	2016	* * * * * 	2017 10 97 20) ********
LENDER ***********************************	BALA * * * * * * * * * * * * * * * * * * *	nulas) CCAC ns 50 th entile	* * * * * * * * * * * * * * * * * * *	2015	* * * * * .12 1.07	* * * * * *	* * * *	* * * * * * * * * * * * * * * * * * *
LENDER * * * * * * * * * * * * * *INANCIAL RATIOS (se DEBT TO ASSET RATIO DEBT SERVICE COVERA DAYS CASH ON HAND	BALA * * * * * * * * * * * * * * * * * * *	nulas) CCAC ns 50 th entile ional)	1.12 ** * * * * * * * * * * * * * * * * *	2015 * * * * * * * * * * * * ge)	* * * * * .12 1.07	2016	* * * * * 	2017 10 97 20) ********
LENDER * * * * * * * * * * * * INANCIAL RATIOS (se DEBT TO ASSET RATIO DEBT SERVICE COVERA DAYS CASH ON HAND * * * * * * * * * * * HISTORICAL MONTHL	# * * * * * * * * * * * * * * * * * * *	nulas) CCAC ns 50 th entile ional)	1.12 * * * * * * * * * * * * * * * * * * *	2015 * * * * * * * * * * * * ge)	* * * * * .12 1.07	2016	* * * * * 	2017 10 97 20) ********
LENDER * * * * * * * * * * * * ***********	# * * * * * * * * * * * * * * * * * * *	nulas) CCAC ns 50 th entile ional) * * * * *	# * * * * * * * * * * * * * * * * * * *	2015 * * * * * * * * * * * * ge)	* * * * * .12 1.07	2016	* * * * * 	2017 10 97 20) ********
LENDER ********** ********* ********* CINANCIAL RATIOS (sello) DEBT TO ASSET RATIO DEBT SERVICE COVERA DAYS CASH ON HAND ********* HISTORICAL MONTHL STUDIO ONE BEDROOM	# * * * * * * * * * * * * * * * * * * *	nulas) CCAC ns 50 th entile ional) * * * * * age Fee and % 5.8% 5.4%	# * * * * * * * * * * * * * * * * * * *	2015 * * * * * * * * * * * ge) %	* * * * * 12 1.07 (.27) * * * *	2016	* * * * * * * * * * * * * * * * * * * *	2017 10 97 20) ******** 2017
LENDER ********** ********* ********* ****	# * * * * * * * * * * * * * * * * * * *	nulas) CCAC ns 50 th entile ional) * * * * * age Fee and % 5.8% 5.4% 5.3%	* * * * * * * * * * * * * * * * * * *	2015 * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * *	2016	* * * * * * * * * * * * * * * * * * * *	2017 10 97 20) ******* 2017
LENDER SINANCIAL RATIOS (sellose to asset ratio depending ratio dependence cover a days cash on hand one bedroom two bedroom cottage/house assisted living skilled nursing	# * * * * * * * * * * * * * * * * * * *	nulas) CCAC ns 50 th entile ional) * * * * * age Fee and % 5.8% 5.4% 5.3%	# * * * * * * * * * * * * * * * * * * *	2015 * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * *	2016	* * * * * * * * * * * * * * * * * * *	2017 10 97 20) * * * * * * * * * * * * * * * * * * *
LENDER FINANCIAL RATIOS (se DEBT TO ASSET RATIO OPERATING RATIO DEBT SERVICE COVERA DAYS CASH ON HAND *********** HISTORICAL MONTHL	# * * * * * * * * * * * * * * * * * * *	nulas) CCAC ns 50 th entile ional) * * * * * age Fee and % 5.8%	1.12 * * * * * * * * * * * * * * * * * * *	2015 * * * * * * * * * * * * ge)	* * * * * .12 1.07	2016	* * * * * 	2017 10 97 20) ********
LENDER FINANCIAL RATIOS (SE DEBT TO ASSET RATIO OPERATING RATIO DEBT SERVICE COVERA DAYS CASH ON HAND ********* HISTORICAL MONTHL STUDIO ONE BEDROOM TWO BEDROOM COTTAGE/HOUSE	# * * * * * * * * * * * * * * * * * * *	nulas) CCAC ns 50 th entile ional) * * * * * age Fee and % 5.8% 5.4%	# * * * * * * * * * * * * * * * * * * *	2015 * * * * * * * * * * * ge) %	* * * * * * * * * * * * * * * * * * *	2016	* * * * * * * * * * * * * * * * * * * *	2017 10 97 20) ******* 2017
LENDER * * * * * * * * * * * * INANCIAL RATIOS (se DEBT TO ASSET RATIO DEBT SERVICE COVERA DAYS CASH ON HAND * * * * * * * * * * HISTORICAL MONTHL' STUDIO ONE BEDROOM TWO BEDROOM TWO BEDROOM COTTAGE/HOUSE ASSISTED LIVING	# * * * * * * * * * * * * * * * * * * *	nulas) CCAC ns 50 th entile ional) * * * * * age Fee and % 5.8% 5.4% 5.3%	* * * * * * * * * * * * * * * * * * *	2015 * * * * * * * * * * * * * * * * * * *	* * * * * * * * * * * * * * * * * * *	2016	* * * * * * * * * * * * * * * * * * * *	2017 10 97 20) ******* 2017

FINANCIAL RATIO FORMULAS

LONG-TERM DEBT TO TOTAL ASSETS RATIO

Long-Term Debt, less Current Portion
Total Assets

OPERATING RATIO

Total Operating Expenses

- Depreciation Expense
- Amortization Expense

Total Operating Revenues — Amortization of Deferred Revenue

DEBT SERVICE COVERAGE RATIO

Total Excess of Revenues over Expenses
+ Interest, Depreciation, and Amortization Expenses
Amortization of Deferred Revenue + Net Proceeds from Entrance Fees
Annual Debt Service

DAYS CASH ON HAND RATIO

Unrestricted Current Cash & Investments
+ Unrestricted Non-Current Cash & Investments

(Operating Expenses - Depreciation - 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.