

REPORT OF INDEPENDENT AUDITORS AND CONSOLIDATED FINANCIAL STATEMENTS WITH SUPPLEMENTARY INFORMATION

SKY LAKES MEDICAL CENTER AND AFFILIATES

September 30, 2017 and 2016



Table of Contents

	PAGE
Report of Independent Auditors	1–2
Consolidated Financial Statements	
Balance sheets	3–4
Statements of operations	5
Statements of changes in net assets	6
Statements of cash flows	7–8
Notes to financial statements	9–34
Supplementary Information	
Consolidating balance sheet	35–36
Consolidating statement of operations	37
Consolidating statement of changes in net assets	38
Combining balance sheet – obligated group	39–40
Combining statement of operations – obligated group	41
Combining statement of changes in net assets – obligated group	42



Report of Independent Auditors

To the Board of Directors
Sky Lakes Medical Center and Affiliates

Report on the Consolidated Financial Statements

We have audited the accompanying consolidated financial statements of Sky Lakes Medical Center and Affiliates (the Medical Center), which comprise the consolidated balance sheets as of September 30, 2017 and 2016, and the related consolidated statements of operations, changes in net assets, 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 consolidated 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 consolidated financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these consolidated 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 audits to obtain reasonable assurance about whether the consolidated financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the consolidated financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the consolidated 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 consolidated 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 consolidated financial statements referred to above present fairly, in all material respects, the financial position of the Medical Center as of September 30, 2017 and 2016, and the results of their operations and their cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

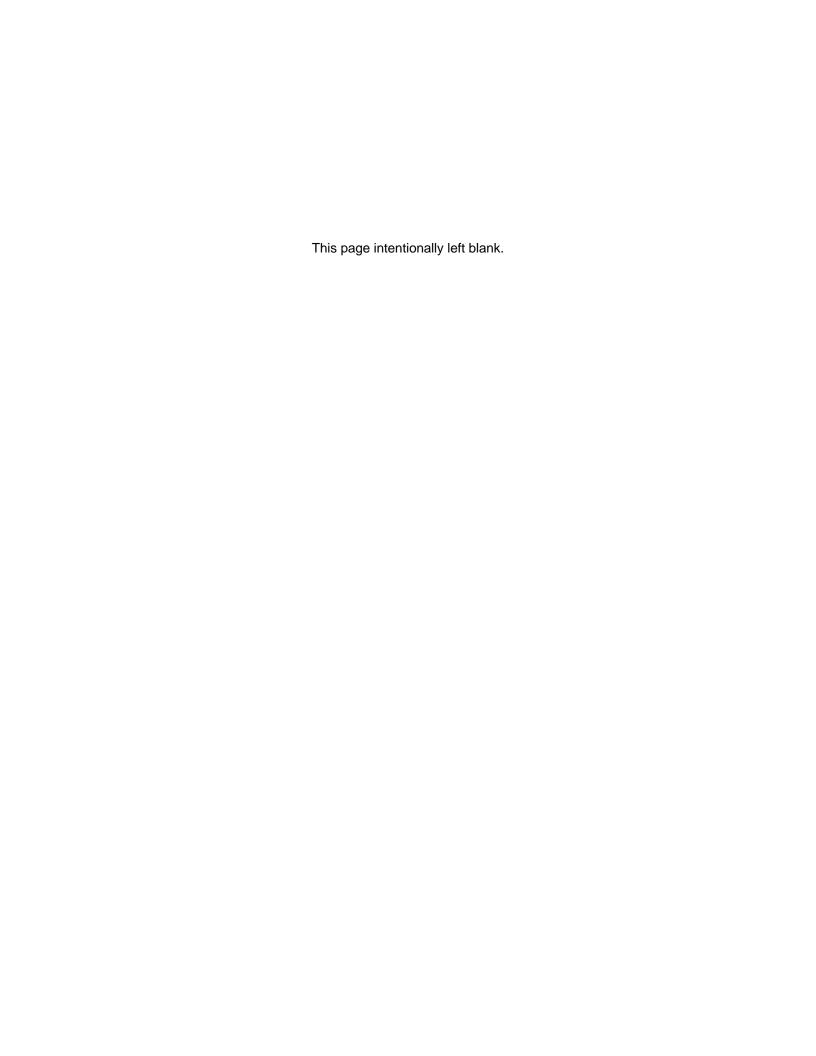
Other Matter

Our audits were conducted for the purpose of forming an opinion on the consolidated financial statements as a whole. The supplementary consolidating balance sheet, consolidating statement of operations, consolidating changes in net assets, combining balance sheet – obligated group, combining statement of operations - obligated group, and combining statement of changes in net assets – obligated group included on pages 35 – 42 are presented for purposes of additional analysis and are not a required part of the consolidated financial statements. Such information is the responsibility of management and has not been subjected to the auditing procedures applied in the audit of the consolidated financial statements, and, accordingly, we express no opinion on it.

Portland, Oregon

Moss Adams UP

January 25, 2018



Sky Lakes Medical Center and Affiliates Consolidated Balance Sheets

ASSETS

	Septem	ber 30,
	2017	2016
CURRENT ASSETS Cash and cash equivalents	\$ 16,215,000	\$ 33,410,000
Certificates of deposit Patient accounts receivable, net Other receivables	15,419,000 34,624,000 9,370,000	5,577,000 36,322,000 5,209,000
Risk pool withhold receivable Supplies inventories Prepaid expenses	4,369,000 4,998,000 2,675,000	1,662,000 3,940,000 2,541,000
Promises to give, current portion	775,000	785,000
Total current assets	88,445,000	89,446,000
ASSETS LIMITED AS TO USE	17,723,000	26,805,000
PROPERTY AND EQUIPMENT, net	105,968,000	95,775,000
INVESTMENTS	131,039,000	113,578,000
OTHER ASSETS	1,292,000	1,348,000
Total assets	\$ 344,467,000	\$ 326,952,000

LIABILITIES AND NET ASSETS

	Septem	September 30,	
	2017	2016	
CURRENT LIABILITIES			
Accounts payable	\$ 5,553,000	\$ 3,991,000	
Construction cost payable	2,689,000	1,318,000	
Accrued payroll	7,243,000	6,816,000	
Accrued compensated absences	4,689,000	4,550,000	
Accrued interest payable	257,000	265,000	
Other accrued expenses	11,977,000	9,971,000	
Estimated third-party payor settlements	2,014,000	1,775,000	
Capital lease obligations, current portion	638,000	1,165,000	
Long-term debt, current portion	2,100,000	2,030,000	
Total current liabilities	37,160,000	31,881,000	
LONG-TERM LIABILITIES			
Capital lease obligations, net of current portion Long-term debt, net of current portion & deferred	5,488,000	6,142,000	
financing costs	68,050,000	70,363,000	
Other long-term liabilities	6,696,000	6,352,000	
Total long-term liabilities	80,234,000	82,857,000	
Total liabilities	117,394,000	114,738,000	
NET ASSETS			
Unrestricted net assets			
Sky Lakes Medical Center	219,790,000	205,860,000	
Non-Controlling Interest	609,000	756,000	
Total unrestricted net assets	220,399,000	206,616,000	
Temporarily restricted	6,674,000	5,598,000	
Total net assets	227,073,000	212,214,000	
Total liabilities and net assets	\$ 344,467,000	\$ 326,952,000	

Sky Lakes Medical Center and Affiliates Consolidated Statements of Operations

	Years Ended September 30,	
	2017	2016
REVENUES		
Patient service revenue, net of contractual adjustments	\$ 226,004,000	\$ 227,206,000
Provision for bad debts	(5,735,000)	(5,422,000)
Net patient service revenue	220,269,000	221,784,000
Contributions	216,000	23,000
Other revenue	22,043,000	24,306,000
Net assets released from restrictions	326,000	373,000
Total revenues	242,854,000	246,486,000
EXPENSES		
Salaries and benefits	110,634,000	103,083,000
Purchased services	28,974,000	27,122,000
Drugs	17,616,000	17,193,000
Supplies	17,561,000	17,563,000
Depreciation and amortization	14,084,000	13,759,000
Building and maintenance	11,225,000	12,268,000
Provider tax	12,775,000	11,165,000
Physician fees	7,766,000	7,827,000
Interest expense	3,019,000	3,113,000
Professional fees	1,625,000	3,257,000
Insurance	2,355,000	2,008,000
Rentals and lease expense	1,379,000	1,431,000
Minor equipment	1,088,000	803,000
Other	5,989,000	4,825,000
Total expenses	236,090,000	225,417,000
OPERATING INCOME	6,764,000	21,069,000
OTHER INCOME (EXPENSE)		
Investment income	5,434,000	5,188,000
Other non-operating expense	(333,000)	(1,351,000)
Total other income, net	5,101,000	3,837,000
EXCESS OF REVENUES OVER EXPENSES	\$ 11,865,000	\$ 24,906,000

Sky Lakes Medical Center and Affiliates Consolidated Statements of Changes in Net Assets

	Years Ended September 30,	
	2017	2016
UNRESTRICTED NET ASSETS		
Excess of revenues over expenses	\$ 11,865,000	\$ 24,906,000
Distributions to non-controlling interest Net change in unrealized gains and losses	(205,000)	-
on other-than-trading securities	2,123,000	1,412,000
Increase in unrestricted net assets	13,783,000	26,318,000
TEMPORARILY RESTRICTED NET ASSETS		
Contributions	752,000	1,054,000
Net change in unrealized gains and losses	400.000	000 000
on other-than-trading securities Investment income	432,000 218,000	223,000 6,000
Net assets released from restrictions	(326,000)	(373,000)
Increase in temporarily restricted net assets	1,076,000	910,000
CHANGE IN NET ASSETS	14,859,000	27,228,000
NET ASSETS, beginning of year	212,214,000	184,986,000
NET ASSETS, end of year	\$ 227,073,000	\$ 212,214,000

Sky Lakes Medical Center and Affiliates Consolidated Statements of Cash Flows

	Years Ended September 30,	
	2017	2016
CASH FLOWS FROM OPERATING ACTIVITIES		
Change in net assets	\$ 14,859,000	\$ 27,228,000
Adjustments to reconcile change in net assets to net	Ψ 1-1,000,000	Ψ 27,220,000
cash from operating activities:		
Depreciation and amortization	14,084,000	13,759,000
Net amortization of premiums and accretion of discounts	1 1,00 1,000	10,100,000
on investments held-to-maturity	837,000	352,000
Net amortization of premiums and accretion of discounts	001,000	002,000
on bonds	(266,000)	(381,000)
Net amortization of deferred financing costs	53,000	391,000
Net change in unrealized gains and losses	00,000	001,000
on other-than-trading securities	(2,555,000)	(1,635,000)
Other than temporary impairment on investments	1,320,000	(1,000,000)
Gain on sale of investments	(2,520,000)	(71,000)
Loss on sale of fixed assets	62,000	186,000
Increase in the cash surrender value of corporate	3=,000	. 55,555
owned life insurance	(809,000)	(992,000)
Distributions to non-controlling interest	205,000	-
(Increase) decrease in:	•	
Patient accounts receivable, net	1,698,000	(3,542,000)
Other receivables	(441,000)	630,000
Risk pool withhold receivable	(2,707,000)	2,135,000
Supplies inventories	(1,058,000)	(1,711,000)
Prepaid expenses	(134,000)	234,000
Promises to give	10,000	-
Other assets	56,000	66,000
Receivable related to collaborative healthcare building	(15,981,000)	-
Increase (decrease) in:	,	
Accounts payable	1,562,000	(6,768,000)
Construction costs payable	1,371,000	1,318,000
Accrued payroll	427,000	1,243,000
Accrued compensated absences	139,000	256,000
Accrued interest payable	(8,000)	35,000
Other accrued expenses	2,006,000	(1,216,000)
Estimated third-party payor settlements	239,000	(239,000)
Other long-term liabilities	344,000	559,000
Net cash from operations	12,793,000	31,837,000

Sky Lakes Medical Center and Affiliates Consolidated Statements of Cash Flows

	Years Ended September 30,	
	2017	2016
CASH FLOWS FROM INVESTING ACTIVITIES		
Proceeds from sale/redemption of investments	\$ 48,508,000	\$ 13,305,000
Purchase of investments	(20,345,000)	(36,718,000)
Purchase of corporate owned life insurance	(20,554,000)	(7,920,000)
Purchase of certificates of deposit	(15,000,000)	-
Redemption of certificates of deposit	5,158,000	7,141,000
Purchase of property and equipment	(24,291,000)	(7,895,000)
Net cash flows used in investing activities	(26,524,000)	(32,087,000)
CASH FLOWS FROM FINANCING ACTIVITIES		
Issued bonds	-	59,146,000
Payments on long-term debt	(2,030,000)	(38,050,000)
Payment on capital lease obligations	(1,229,000)	(1,083,000)
Distributions to non-controlling interest	(205,000)	-
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Net cash flows (used in) from financing activities	(3,464,000)	20,013,000
· ,		
NET CHANGE IN CASH AND CASH EQUIVALENTS	(17,195,000)	19,763,000
CASH AND CASH EQUIVALENTS, beginning of year	33,410,000	13,647,000
CASH AND CASH EQUIVALENTS, end of year	\$ 16,215,000	\$ 33,410,000

The Medical Center entered into capital lease obligations in the amount \$48,000 and \$2,350,000 for new property and equipment for the years ended September 30, 2017 and 2016, respectively.

Cash paid for interest, as of September 30, 2017 and 2016, was approximately \$1,633,000 and \$1,973,000, respectively.

During the year ended September 30, 2017, the Medical Center sold stock in Cascade Comprehensive Care, Inc. for \$4,960,000. The Medical Center received \$1,240,000 during the year ended September 30, 2017 and recorded a receivable of \$3,720,000 which is included in other receivables as of September 30, 2017.

Note 1 - Description of Organization and Summary of Significant Accounting Policies

Organization

Sky Lakes Medical Center (the Medical Center) is a not-for-profit hospital located in south-central Oregon. The Medical Center provides inpatient, outpatient, and emergency care services to the residents of Southern Oregon and Northern California. The Medical Center was incorporated in Oregon in 1963.

Principles of consolidation

The consolidated financial statements include the accounts of the Medical Center and all of its whollyowned and majority-owned subsidiaries. There are four other entities included in these consolidated financial statements:

West Physician Services, LLC dba Sky Lakes Physician Services (WPS)

West Physician Services, LLC dba Sky Lakes Physician Services was established by the Medical Center in 2003 to provide specialty care to patients. The Medical Center is the sole member of WPS.

Sky Lakes Medical Center Foundation, Inc. (the Foundation)

Sky Lakes Medical Center Foundation is a not-for-profit corporation formed to advance the work of the Medical Center through philanthropy. The Foundation is led by a board of directors who serve voluntarily and are elected by the Medical Center.

Klamath Medical Business Center, LLC (KMBC)

In 2004, the Medical Center, together with Cascade Comprehensive Care, Inc. (CCC), formed Klamath Medical Business Center, LLC. The Medical Center directly owns 50% of KMBC. In addition, they indirectly own approximately 17% through their ownership in CCC (Note 5). In addition, the Medical Center performs management functions for KMBC. KMBC exists for the purpose of leasing building facilities to the Medical Center and CCC.

KW Campus, LLC (KW)

In 2015 the Medical Center, together with an unrelated limited liability entity formed KW Campus, LLC. KW was formed to develop a central campus in Klamath Falls, Oregon that is home to a variety of organizations whose purpose is to deliver health care, wellness and safety services, and provide opportunities for those served to improve their lives through effort and reward as part of their journey to self-sufficiency. The Medical Center directly owns 50% of KW and performs all management functions for KW.

All significant intercompany transactions have been eliminated.

Use of estimates

The preparation of the consolidated financial statements in conformity with accounting principles generally accepted in the United States requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Note 1 – Description of Organization and Summary of Significant Accounting Policies (continued)

Significant estimates are necessary in determining the fair value of investments, the recorded value of the contractual and bad debt allowance, amount due to or from third parties, risk pool withhold receivable and useful lives of fixed assets. Management believes the assumptions used in arriving at these estimates are reasonable.

Fair value measurements

Fair value is the price that would be received to sell an asset, or paid to transfer a liability, in an orderly transaction between market participants at the measurement date. Market participants are buyers and sellers, who are independent, knowledgeable, and willing and able to transact in the principal (or most advantageous) market for the asset or liability being measured.

Fair value is based on quoted market prices, when available, for identical or similar assets or liabilities. In the absence of quoted market prices, management determines the fair value of the Medical Center's assets and liabilities using valuation models or third-party pricing services, both of which rely on market-based parameters when available, such as interest rate yield curves, option volatilities, and credit spreads. The valuation techniques used are based on observable and unobservable inputs.

The following methods and assumptions were used by the Medical Center in estimating fair values of each class of financial instruments for which it is practicable to estimate that value:

Cash and cash equivalents – The carrying amount approximates the fair value because of the short maturity of those instruments.

Long-term debt – Long-term debt is estimated by discounting future cash flows at rates currently available for debt with similar terms and remaining maturities. The carrying amount approximates the fair value.

Cash and cash equivalents

Cash and cash equivalents include certain investments in highly liquid debt instruments with original maturities of three months or less. Financial instruments potentially subjecting the Medical Center to concentrations of credit risk consist primarily of bank demand deposits in excess of FDIC insured limits. The Medical Center has not experienced any losses in such accounts.

Certificates of deposit

Certificates of deposit are held at various financial institutions and range in maturity through September 2019 and have interest rates ranging from .25% to 1.65%. Certificates of deposit are not subject to withdrawal limitations and are classified as current assets. Early withdrawal may result in a forfeiture of interest earned.

Note 1 - Description of Organization and Summary of Significant Accounting Policies (continued)

Patient accounts receivable

In the normal course of business, the Medical Center incurs credit risk related to its patients, including billing to third-party insurance carriers, most of whom are local residents and are insured under third-party payor agreements. In evaluating the collectability of receivables, the Medical Center analyzes its past history and identifies trends for each of its major payor sources of revenue to estimate the appropriate allowance for doubtful accounts and provision for bad debts. Management regularly reviews data about these major payor sources of revenue in evaluating the sufficiency of the allowance for doubtful accounts. Patient accounts receivables are reduced by an allowance for doubtful accounts.

For receivables associated with services provided to patients who have third-party coverage, the Medical Center analyzes contractually due amounts and provides an allowance for doubtful accounts and a provision for bad debts, if necessary (for example, for expected uncollectible deductibles and copayments on accounts for which the third-party payor has not yet paid, or for payors who are known to be having financial difficulties that make the realization of amounts due unlikely). For receivables associated with self-pay patients, the Medical Center records a significant provision for bad debts in the period of service on the basis of its past experience, which indicates that many patients are unable or unwilling to pay the portion of their bill for which they are financially responsible.

The difference between the standard rates (or the discounted rates if negotiated) and the amounts actually collected after all reasonable collection efforts have been exhausted is charged off against the allowance for doubtful accounts. The Medical Center's allowance for contractual adjustments was approximately \$57,901,000 and \$58,481,000 at September 30, 2017 and 2016, respectively. The Medical Center's bad debt provision was \$15,849,000 and \$17,666,000 at September 30, 2017 and 2016, respectively. There was no change in the methodology used by the Medical Center to estimate the allowance for contractual adjustments and bad debt provision in the current year.

The mix of gross receivables from patients and third-party payors was as follows at September 30:

	2017	2016
Medicare	40%	34%
Medicaid	21%	23%
Other third-party payors	34%	32%
Self-pay	5%	11%
Total	100%	100%

Other receivables

Other receivables consist mainly of the receivable from the stock redemption with an affiliate, provider tax receivable, employee loan receivables, physician loan receivables, and other miscellaneous receivables. These receivables are reduced by an allowance for doubtful accounts determined on a specific reserve basis.

Note 1 - Description of Organization and Summary of Significant Accounting Policies (continued)

Risk pool withhold receivable

The risk pool withhold receivable represents funds withheld from claims paid to the providers. Based upon insurance carrier's performance, the funds are either retained by the insurer or paid to the Medical Center.

Supplies inventories

Supplies inventories consist mainly of patient supplies and pharmaceuticals and are carried at the lower of cost (primarily average cost) or market.

Promises to give

Unconditional promises to give are recognized as revenues or gains in the period received and as assets, decreases of liabilities, or expenses depending on the form of the benefits received. Conditional promises to give are recognized only when the conditions on which they depend are substantially met and the promise becomes unconditional.

Assets limited as to use

Assets limited as to use include assets held by trustees under indenture agreements (Note 10) and amounts internally designated by the Medical Center to construct a new collaborative healthcare building (Note 4).

Property and equipment

Property and equipment acquisitions are recorded at cost. Depreciation is provided over the estimated useful life of each depreciable asset and is computed using the straight-line method. Equipment under capital lease obligations is amortized on the straight-line method over the shorter period of the lease term or the estimated useful life of the equipment. Such amortization is included in depreciation and amortization in the financial statements. Interest cost incurred on borrowed funds during the period of construction of capital assets is capitalized as a component of the cost of acquiring those assets.

Gifts of long-lived assets such as land, buildings or equipment are reported as unrestricted support, and are excluded from the excess of revenues over expenses, unless explicit donor stipulations specify how the donated assets must be used. Gifts of long-lived assets with explicit restrictions that specify how the assets are to be used and gifts of cash or other assets that must be used to acquire long-lived assets are reported as restricted support. Absent explicit donor stipulations about how long those long-lived assets must be maintained, expirations of donor restrictions are reported when the donated or acquired long-lived assets are placed in service.

Investments

Investments in equity securities with readily determinable fair values and all investments that are available-for-sale are measured at fair value on the balance sheet. Investment securities that management has the positive intent and ability to hold until maturity are classified as held-to-maturity and are carried at their remaining unpaid principal balance, net of unamortized premiums or unaccreted discounts. Premiums are amortized and discounts are accreted using the effective interest method over the period remaining until maturity. Investment income or loss (including realized gains and losses on investments, interest, and dividends) is included in the excess of revenues over expenses unless the income or loss is restricted by donor or law. Unrealized gains and losses on investments are excluded from the excess of revenues over expenses unless the investments are trading securities.

Note 1 - Description of Organization and Summary of Significant Accounting Policies (continued)

The Medical Center has purchased various cash surrender value life insurance policies on key management. The policies are recorded at the estimated cash-surrender value of the policies. Increases in the cash-surrender value are recorded as investment income.

The Medical Center also has various investments in health-related organizations. Generally, when the ownership interest in health-related activities is more than 50%, the activities are consolidated, and a minority interest is recorded if appropriate. When the ownership interest is at least 20%, but not more than 50%, it is typically accounted for on the equity method, and the income or loss is reflected in net revenue. Activities with less than 20% ownership or lacking significant influence over the operations of the related entity are carried at the lower of cost or estimated net realizable value.

Health insurance

The Medical Center offers health insurance (the Employee Benefit Plan) to its active employees and families. The Medical Center pays approximately 80% of the premium and employees contribute the remaining 20% through bi-weekly payroll deductions. The Employee Benefit Plan provides medical, dental, vision, and prescription coverage. The Employee Benefit Plan is self-funded, but is reinsured through HM Life Insurance Company with a specific attachment point of \$270,000 per covered individual annually plus a \$60,000 aggregating specific with an unlimited lifetime maximum. The Medical Center has established reserve amounts based upon information as to the status of claims plus development factors for incurred but not yet reported claims and anticipated future changes in underlying case reserves. Such reserve amounts are only estimates and there can be no assurance that the Medical Center's future Employee Benefit Plan obligations will not exceed the amount of its reserves. The Medical Center's reserve for health insurance was approximately \$1,884,000 and \$1,959,000 at September 30, 2017 and 2016, respectively, and is included in accrued payroll on the consolidated balance sheet.

Worker's compensation

The Medical Center is self-funded for worker's compensation insurance, but is reinsured through Safety National Casualty Corporation with a specific attachment point of \$500,000 per claim. The Medical Center has contracted with Empire Pacific Risk Management to act as the third party administrator to process and pay claims. The Medical Center has established reserve amounts based upon information as to the status of claims plus development factors for incurred but not yet reported claims and anticipated future changes in underlying case reserves. Such reserve amounts are only estimates and there can be no assurance that the Medical Center's future workers' compensation obligations will not exceed the amount of its reserves. The Medical Center's reserve for workers' compensation was \$779,000 and \$705,000 at September 30, 2017 and 2016, respectively, and is included in accrued payroll on the consolidated balance sheet. Further, the Department of Consumer and Business Services Workers' Compensation Division requires a security deposit be maintained to support expected future claims and processing costs. As of September 30, 2017, the security deposit requirement was \$568,000. To fulfill the security deposit requirement, the Medical Center has a standby letter of credit with US Bank for the full amount with an expiration date of July 31, 2018.

Note 1 - Description of Organization and Summary of Significant Accounting Policies (continued)

Estimated malpractice costs

The provision for estimated medical malpractice claims includes estimates of the ultimate costs for both reported claims and claims incurred but not reported. Estimated malpractice costs are included in other accrued expenses on the consolidated balance sheets and were approximately \$450,000 and \$957,000 as of September 30, 2017 and 2016, respectively. The estimated receivable was approximately \$258,000 and \$588,000 as of September 30, 2017 and 2016, respectively and is included in other receivables on the consolidated balance sheet.

Net patient service revenue

The Medical Center has agreements with third-party payors that provide for payments to the Medical Center at amounts different from its established rates. Payment arrangements include prospectively determined rates per discharge, reimbursed costs, discounted charges, and per diem payments. For uninsured patients that do not qualify for charity care, the Medical Center recognizes revenue on the basis of its standard rates for services provided. On the basis of historical experience, a significant portion of the Medical Center's uninsured patients will be unable or unwilling to pay for the services provided.

Thus, the Medical Center records a significant provision for bad debts related to uninsured patients in the period the services are provided. Net patient service revenue is reported at estimated net realizable amounts from patients, third-party payors, and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payors. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined.

Other operating revenues

During the 2017 and 2016 fiscal year, the Medical Center received approximately \$2,058,000 and \$7,500,000, respectively, from the Oregon Health Authority for the Hospital Transformation Performance Program (HTPP). HTPP established funds from a quality pool which were awarded to hospitals based on their performance on eleven outcome and quality measures.

The Medical Center has contracted with several pharmacies to provide contracted 340b pharmacy services for eligible patients of the Medical Center. Revenue from these pharmacy contracts is included in other operating revenue on the consolidated statement of operations and was approximately \$3,096,000 and \$2,788,000 for the years ending September 30, 2017 and 2016, respectively.

The Medical center operates a retail pharmacy within the hospital. Revenue from the retail pharmacy is included in other operating revenue on the consolidated statement of operations and was approximately \$5,220,000 and \$3,816,000 for the years ending September 30, 2017 and 2016, respectively.

Note 1 - Description of Organization and Summary of Significant Accounting Policies (continued)

Charity care

The Medical Center provides care to patients who meet certain criteria under its charity care policy without charge or at amounts less than its established rates. Because the Medical Center does not pursue collection of amounts determined to qualify as charity care, they are not reported as revenue. The policy of the Medical Center for charity care includes providing non-elective services to patients whose household income falls at or below 200% of the Federal Poverty Level at no cost. For those patients who fall between 200% and 400% of the Federal Poverty Level and who are unable to pay their bills, patients are eligible for either a partial write-off of their account, annual maximum out of pocket, or both. The policy applies to both insured patients as well as uninsured patients provided the patient meets the eligibility criteria. Total cost of charity care provided by the Medical Center was approximately \$3,558,000 and \$3,202,000 for the years ending September 30, 2017 and 2016, respectively.

Donated restricted gifts

Unconditional promises to give cash and other assets to the Medical Center are reported at fair value at the date the promise is received. Conditional promises to give and indications of intentions to give are reported at fair value at the date the gift is received.

The gifts are reported as either temporarily or permanently restricted support if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reclassified as unrestricted net assets and reported in the statement of operations as net assets released from restrictions. Donor-restricted contributions whose restrictions are met within the same year as received are reported as unrestricted contributions in the accompanying financial statements.

Temporarily and permanently restricted net assets

Temporarily restricted net assets are those whose use by the Medical Center has been limited by donors to a specific time period or purpose. Permanently restricted net assets have been restricted by donors to be maintained by the Medical Center in perpetuity. The Medical Center does not have any permanently restricted net assets at September 30, 2017 and 2016.

Excess of revenues over expenses

The consolidated statement of operations includes excess of revenues over expenses. Changes in unrestricted net assets which are excluded from excess of revenues over expenses, consistent with industry practice, include the net change in unrealized gains and losses on investments other-than-trading securities, contributions, and distributions.

Volunteers

A significant portion of the Medical Center's gift shop operations and patient relations functions are conducted by unpaid volunteers. The value of this contributed time is not reflected in the accompanying consolidated financial statements since the volunteers' time does not meet the criteria for recognition.

Note 1 - Description of Organization and Summary of Significant Accounting Policies (continued)

Income taxes

The Medical Center and Foundation are tax-exempt organizations and are not subject to state or federal income taxes, except on unrelated business income, in accordance with Section 501(c)(3) of the Internal Revenue Code.

The Medical Center and Foundation had no unrecognized tax benefits at September 30, 2017 or 2016. The Medical Center and Foundation recognize interest accrued and penalties related to unrecognized tax benefits as an administrative expense. During the years ended September 30, 2017 and 2016, the Medical Center and Foundation recognized no interest and penalties.

The Medical Center files an exempt organization information return and an unrelated business income tax return in the U.S. federal jurisdiction and an unrelated business income tax return with the Oregon Department of Revenue.

The Foundation files an exempt organization information return in the U.S. federal jurisdiction.

WPS, the Medical Center's for-profit corporate subsidiary, accounts for income taxes in accordance with Accounting Standards Codification ("ASC") 740-10, whereby, income taxes are provided for the tax effects of transactions reported in the consolidated financial statements and consist of taxes currently due plus deferred taxes. Deferred taxes are recognized for differences between the basis of assets and liabilities for financial statement and income tax purposes.

KMBC and KW have elected to be taxed under the provisions of the Oregon Limited Liability Company Act. Under those provisions, the LLC's do not pay federal income tax on their taxable income. Instead, the members are liable for income taxes on each LLC's taxable income.

The Klamath Falls Intercommunity Hospital Authority (the Authority) is a municipal corporation under Oregon state law and is not subject to federal income tax.

Accounting standards updates

In April 2015, the Financial Accounting Standards Board ("FASB") issued Accounting Standards Update ("ASU") 2015–03, *Interest – Imputation of Interest (Subtopic 835–30): Simplifying the Presentation of Debt Issuance Costs.* ASU 2015–03 requires debt issuance costs related to a recognized debt liability to be presented in the balance sheet as a direct deduction from the carrying amount of the related debt liability. The Medical Center adopted this amendment as of September 30, 2017. The result of the adoption was a reduction of \$1,219,000 in deferred financing costs and an offsetting reduction of \$1,219,000 in long term debt in the Medical Center's opening consolidated balance sheet (September 30, 2016).

In February 2016, the FASB issued ASU No. 2016-02, *Leases (Topic 842)*, which increases transparency and comparability among organizations by recognizing lease assets and lease liabilities on the balance sheet and disclosing key information about leasing arrangements in the financial statements of lessees. This update is effective for fiscal years beginning after December 15, 2019, with early adoption permitted. Management is currently evaluating the impact of the provisions of ASU No. 2016-02 on the consolidated financial statements.

Note 1 - Description of Organization and Summary of Significant Accounting Policies (continued)

In August 2016, the FASB issued ASU No. 2016-14, *Presentation of Financial Statements of Not-for-Profit Entities (Topic 958)*, which improves the current net asset classification requirements and the information presented in financial statements and notes about an entity's liquidity, financial performance, and cash flows. The update removes the requirement to present three classes of net assets with two classes, net assets with donor restrictions and net assets without donor restrictions. The update also removes the requirement to present or disclose the indirect method (reconciliation) if using the direct method for the statement of cash flows as well as added several additional enhanced disclosures to the notes. The amendments in this update are effective for fiscal years beginning after December 15, 2017. Management is currently evaluating the impact of the provisions of ASU No. 2016-14 on the consolidated financial statements.

In November 2016, the FASB issued ASU No. 2016-18, *Statement of Cash Flows (Topic 230)*, which requires the statement of cash flows to explain the change during the period in the total cash, cash equivalents, and amounts generally described as restricted cash or restricted cash equivalents. The amendments in this update are effective for fiscal years beginning after December 15, 2017. Management is currently evaluating the impact of the provisions of ASU No. 2016-18 on the consolidated financial statements.

Subsequent events

Subsequent events are events or transactions that occur after the balance sheet date but before financial statements are issued. The Medical Center recognizes in the financial statements the effects of all subsequent events that provide additional evidence about conditions that existed at the date of the balance sheet, including the estimates inherent in the process of preparing the financial statements. The Medical Center's financial statements do not recognize subsequent events that provide evidence about conditions that did not exist at the date of the balance sheet but arose after the balance sheet date and before financial statements are issued.

The Medical Center has evaluated subsequent events through January 25, 2018, which is the date the financial statements were issued.

Reclassifications

Certain reclassifications have been made to the 2016 consolidated financial statements to conform to current-year presentations. These reclassifications did not affect previously reported excess of revenues over expenses or net assets.

Note 2 - Net Patient Service Revenue

The Medical Center has agreements with third-party payors that provide for payments to the Medical Center at amounts different from its established rates. A summary of the payment arrangements with major third-party payors are as follows:

- Medicare Inpatient acute care services and outpatient services rendered to Medicare program beneficiaries are paid at prospectively determined rates. These rates vary according to patient classification systems that are based on clinical, diagnostic, and other factors. Medical education costs and uncollected bad debts on patient accounts related to Medicare beneficiaries are paid based on a modified cost reimbursement methodology. Additional payments for the Medicare disproportionate share are made to the Medical Center based on the ratio of Title XIX inpatient recipients to total inpatients. The Medical Center is reimbursed for outpatient cost reimbursable items at a tentative rate with final settlement determined after submission of the annual cost report by the Medical Center and audit thereof by the Medicare fiscal intermediary.
- Atrio Health Plans, Inc. is a for-profit Oregon health care service, of which CCC owns 33% interest (Note 14). Atrio Health Plans, Inc. provides Medicare Advantage Plans to residents primarily of Douglas, Klamath, Marion, Josephine and Polk counties.
- Medicaid Inpatient services rendered to Medicaid program beneficiaries are reimbursed at
 prospectively determined rates and outpatient services rendered to Medicaid program beneficiaries
 are reimbursed under a cost reimbursement methodology. The Medical Center is reimbursed at a
 tentative rate with final settlement determined after submission of the annual cost report by the
 Medical Center and finalization of the cost report by the Oregon Division of Medical Assistance
 Programs (DMAP).
- CCC is a local Medicaid claims administrator of which the Medical Center owns 33% (Note 5 and 14).
 The Medical Center is paid on an interim basis based upon prospectively determined rates. The Medical Center also participates in a risk pool arrangement that encourages cost containment.

Entities doing business with governmental payors, including Medicare and Medicaid, are subject to risks unique to the government-contracting environment that are difficult to anticipate and quantify. Revenues are subject to adjustment as a result of examination by government agencies as well as auditors, contractors, and intermediaries retained by the federal, state, or local governments (collectively "Government Agents"). Resolution of such audits or reviews often extends (and in some cases does not even commence until) several years beyond the year in which services were rendered and/or fees received.

Note 2 - Net Patient Service Revenue (continued)

Moreover, different Government Agents frequently interpret government regulations or other requirements differently. For example, Government Agents might disagree on a patient's principal medical diagnosis, the appropriate code for a clinical procedure, or many other matters. Such disagreements might have a significant effect on the ultimate payout due from the government to fully recoup sums already paid. Governmental agencies may make changes in program interpretations, requirements, or "conditions of participation," some of which may have implications for amounts previously estimated. In addition to varying interpretation and evolving codification of the regulations, standards of supporting documentation and required data are subject to wide variation.

In accordance with generally accepted accounting principles, to account for the uncertainty around Medicare and Medicaid revenues, the client estimates the amount of revenue that will ultimately be received under the Medicare and Medicaid programs. Amounts ultimately received or paid may vary significantly from these estimates.

The Medical Center has also entered into payment arrangements with certain commercial insurance carriers, health maintenance organizations, and preferred provider organizations. The basis for payment to the Medical Center under these agreements includes prospectively determined rates per discharge, discounts and established charges, and prospectively determined daily rates.

Patient service revenue, net of contractual allowances of approximately \$369,871,000 and \$328,478,000 for the years ending September 30, 2017 and 2016, respectively, recognized in the period from major payor sources is as follows:

	2017	2016
Other third-party payors	\$ 98,330,000	\$ 101,901,000
Medicare	78,263,000	77,467,000
Medicaid	48,445,000	46,472,000
Self-pay	966,000	1,366,000
Provision for bad debts	(5,735,000)	(5,422,000)
Total net patient service revenue	\$ 220,269,000	\$ 221,784,000

Note 3 – Promises to Give

Unconditional promises to give were \$775,000 and \$785,000 as of September 30, 2017 and 2016, respectively.

At September 30, 2017 and 2016, substantially all unconditional promises to give were from one donor.

Note 4 - Assets Limited as to Use

Assets held by trustees under indenture agreements for the bonds outstanding include money market accounts of \$1,592,000 and \$26,655,000 as of September 30, 2017 and 2016, respectively.

In 2016, The Authority issued \$53,325,000 in Series 2016 Bonds (Note 10) with an initial \$25,000,000 of the sale proceeds being set aside for various capital expenditures by the Medical Center. As part of its commitment to improving the health of the community, the Medical Center collaborated with Oregon Health & Science University ("OHSU") through the creation of Oregon Rural Health Initiative ("ORHI"), a nonprofit corporation formed November 2016, to construct a new healthcare building in Klamath Falls. As part of the commitment to ORHI, the Medical Center granted \$25 million that will be utilized by ORHI to solicit additional funding towards the project and as construction is completed, ORHI will make distributions to or in support of the Medical Center in connection with the healthcare building. If insufficient progress is being made to advance the rural health initiative, unexpended funds will be returned to the Medical Center. Of the initial \$25 million granted, \$15,981,000 remains to be returned to the Medical Center for costs associated with the healthcare building and is included in assets limited as to use as of September 30, 2017.

Note 5 - Investments

Investments at September 30 include:

	2017	2016
Corporate bonds, held-to-maturity Life insurance Money market Common stocks	\$ 42,123,000 56,216,000 17,723,000 24,597,000	\$ 45,539,000 36,471,000 26,805,000 20,093,000
Certificates of deposit Cascade Comprehensive Care, Inc.	15,419,000 1,512,000	5,577,000 5,435,000
Mutual funds Propel Health Southern Oregon Linen Services, Inc.	5,692,000 519,000 380,000	4,358,000 1,290,000 392,000
	\$ 164,181,000	\$ 145,960,000

Note 5 – Investments (continued)

The reconciliation between investments on the consolidated financial statements and the above table is as follows as of September 30:

	2017	2016
Investments on the consolidated balance sheet Assets limited as to use on the consolidated balance sheet Certificates of deposit on the consolidated balance sheet	\$ 131,039,000 17,723,000 15,419,000	\$ 113,578,000 26,805,000 5,577,000
	\$ 164,181,000	\$ 145,960,000

Southern Oregon Linen Service, Inc.

The Medical Center owns 12.5% of the common stock in Southern Oregon Linen Service (SOLS). SOLS was established in 1996 as a central cooperative laundry to service several regional hospitals. The Medical Center concluded that it could not exert influence over SOLS' operations and financial activities; therefore, the Medical Center is accounting for the investment on the cost method.

Propel Health

The Medical Center has 8% ownership in Propel Health (formerly Population Health Alliance of Oregon, LLC). Propel Health was created with other public benefit non-profit organizations to promote coordinated health care interventions and communication for populations with conditions in which self-care efforts are significant. The Medical Center concluded that it could not exert influence over Propel Health's operations and financial activities; therefore, the Medical Center is accounting for the investment on the cost method. The Hospital periodically tests their investments for impairment and as of September 30, 2017, the hospital determined the investment in Propel Health was impaired and therefore reduced the investment balance and recorded an other than temporary impairment of \$1,320,000 within other non-operating expenses on the consolidated statement of operations.

Cascade Comprehensive Care, Inc.

The Medical Center owns 33% of the common stock in CCC, which is accounted for using the equity method. CCC is a managed health care company that currently manages a Medicaid contract under the Oregon Health Plan. CCC handles quality assurance, utilization management, claims adjudication, pharmacy management, encounter reporting, financial and solvency reporting, physician and provider contracting, reinsurance/stoploss issues, risk model management etc. for the local community.

Note 5 – Investments (continued)

The following represents the unaudited summary financial information for CCC for the years ended September 30:

	2017 (unaudited)	2016 (unaudited)
Current assets Noncurrent assets	\$ 19,048,000 14,606,000	\$ 19,803,000 17,646,000
Total assets	\$ 33,654,000	\$ 37,449,000
Current liabilities Noncurrent liabilities Equity	\$ 24,704,000 4,410,000 4,540,000	\$ 24,504,000 1,716,000 11,229,000
Total liabilities and equity	\$ 33,654,000	\$ 37,449,000
Operating revenue Operating expenses	\$ 81,423,000 79,807,000	\$ 88,330,000 85,626,000
Operating income	\$ 1,616,000	\$ 2,704,000

Note 6 - Fair Value Measurements

Financial Accounting Standards Board ASC 820, Fair Value Measurements and Disclosures, provides the framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurement) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under ASC 820 are described as follows:

Basis of fair value measurement

Level 1 – Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Medical Center has the ability to access.

Level 2 – Inputs to the valuation methodology are quoted prices in markets that are not considered to be active or financial instruments without quoted market prices, but for which all significant inputs are observable, either directly or indirectly.

Level 3 – Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

Note 6 - Fair Value Measurements (continued)

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at September 30, 2017 and 2016.

Corporate bonds, held-to-maturity – Investment securities that management has the positive intent and ability to hold until maturity are classified as held-to-maturity and are carried at their remaining unpaid principal balance, net of unamortized premiums or unaccreted discounts and therefore excluded from the fair value tables.

Life insurance – Valued at the estimated cash-surrender value of the policies. The carrying amount approximates fair value.

Mutual funds and money market funds – Valued at the net asset value of shares held by the Medical Center at year end using prices quoted by the relevant pricing agent.

Common stocks – Valued at the closing price reported on the active market on which the individual securities are traded.

Certificates of deposit – Valued at fair value by discounting the related cash flows based on current yields of similar instruments with comparable durations considering the credit-worthiness of the issuer.

Note 6 - Fair Value Measurements (continued)

The following tables disclose by level, the fair value hierarchy, of the Medical Center's assets at fair value at September 30, 2017:

	Fair Value Measurements			
	Total			
	Fair Value	Level One	Level Two	Level Three
Common stock				
Consumer goods	\$ 7,531,000		\$ 4,082,000	\$ -
Other	33,000	33,000	-	-
Healthcare	2,142,000	2,142,000	-	-
Utilities	762,000	762,000	-	-
Industrial goods	1,466,000	1,466,000	-	-
Services	1,759,000	1,759,000	-	-
Basic materials	1,599,000	1,599,000	-	-
Financial	4,468,000	2,992,000	1,476,000	-
Technology	4,837,000	4,837,000	-	-
Life insurance	56,216,000	-	56,216,000	-
Mutual funds				
Equity funds	2,785,000	-	2,785,000	-
Hybrid funds	1,847,000	-	1,847,000	-
Bond funds	505,000	-	505,000	-
Value funds	364,000	-	364,000	-
Money market funds	175,000	-	175,000	-
Other funds	16,000	-	16,000	-
Certificates of deposit	15,419,000	-	15,419,000	-
·	•			
	\$ 101,924,000	\$ 19,039,000	\$ 82,885,000	\$ -

Total investments held-to-maturity, valued at cost, and investments in other healthcare entities accounted for at cost or equity as of September 30, 2017 were approximately \$44,534,000.

Note 6 - Fair Value Measurements (continued)

The following tables disclose by level, the fair value hierarchy, of the Medical Center's assets at fair value at September 30, 2016:

	Fair Value Measurements						
	' <u>-</u>	Total					
		Fair Value		_evel One	Level Two	Lev	el Three
Common stock							
Consumer goods	\$	7,066,000	\$	3,897,000	\$ 3,169,000	\$	-
Technology		92,000		92,000	-		-
Financial		997,000		997,000	-		-
Services		1,034,000		1,034,000	-		-
Basic materials		1,326,000		1,326,000	-		-
Healthcare		1,447,000		1,447,000	-		-
Industrial goods		1,452,000		1,452,000	-		-
Other		3,270,000		3,270,000	-		-
Utilities		3,409,000		3,409,000	-		-
Life insurance		36,471,000		-	36,471,000		-
Mutual funds							
Equity funds		2,000,000		-	2,000,000		-
Hybrid funds		1,315,000		-	1,315,000		-
Bond funds		456,000		-	456,000		-
Value funds		272,000		-	272,000		-
Money market funds		27,105,000		-	27,105,000		-
Other funds		15,000		-	15,000		-
Certificates of deposit		5,577,000		-	5,577,000		-
·							
	\$	93,304,000	\$	16,924,000	\$ 76,380,000	\$	-

Total investments held-to-maturity, valued at cost, and investments in other healthcare entities accounted for at cost or equity as of September 30, 2016 were \$52,656,000.

Note 7 – Property and Equipment

A summary of property and equipment at September 30 follows:

	2017	2016
Buildings and fixed equipment Moveable equipment Equipment under capital lease obligations Land improvements Land Leasehold improvements	\$ 122,257,000 71,151,000 13,969,000 4,618,000 4,638,000 184,000	\$ 120,066,000 63,907,000 13,921,000 4,231,000 3,310,000 184,000
Less: Accumulated depreciation and amortization	216,817,000 (125,703,000)	205,619,000 (111,619,000)
Construction in progress	91,114,000 14,854,000	94,000,000 1,775,000
Property and equipment, net	\$ 105,968,000	\$ 95,775,000

Depreciation expense from operations for the years ended September 30, 2017 and 2016 was \$12,671,000 and \$12,598,000, respectively. Amortization expense for the years ended September 30, 2017 and 2016 was \$1,413,000 and \$1,161,000, respectively. Accumulated amortization for equipment under capital lease obligations was \$8,157,000 and \$6,745,000 at September 30, 2017 and 2016, respectively.

During 2017, the Medical Center constructed a parking structure which makes up the majority of what is included in construction in progress as of September 30, 2017. The parking lot was placed into service subsequent to year-end in October of 2017.

Note 8 – Plum Ridge Care Center

Lease value of Plum Ridge Care Center – In 2001, Klamath County, Oregon deeded the Plum Ridge Care Center to the Authority. The Medical Center entered into a long-term lease agreement for a period of 89 years for the sum of \$1 per year. In addition, the Medical Center has the option of purchasing the property at any time for the sum of \$1. The Medical Center recognized the fair value of the lease at the time the agreement with the Authority was entered into. The Medical Center is amortizing the lease value over the life of the lease. The lease value of Plum Ridge Care Center at September 30, 2017 and 2016 was approximately \$1,292,000 and \$1,348,000, respectively, and is included in other assets in the consolidated balance sheet.

Note 8 – Plum Ridge Care Center (continued)

Deferred rental revenue – In 2001, the Medical Center subleased the Plum Ridge Care Center to Plum Ridge Care Community, LLC, an unrelated third party, on equivalent lease terms as to the Medical Center's lease with the Authority, except the Medical Center did not grant the right to purchase the property to Plum Ridge Care Community, LLC. The Medical Center recognized a liability to Plum Ridge Care Community, LLC, for the lease value of the remaining term of the lease. The revenue is being amortized over the lease term. The deferred rental revenue of Plum Ridge Care Center was approximately \$2,408,000 and \$2,441,000 at September 30, 2017 and 2016, respectively, and is included in other long-term liabilities in the consolidated balance sheet.

Note 9 - Capital Leases

Capital leases as of September 30 are as follows:

	2017	 2016
Facility lease with a private party with monthly payments of \$36,274 at 8.90% through September 2037.	\$ 4,059,000	\$ 4,131,000
Equipment lease-purchase agreement with CareFusion Solutions, LLC with monthly payments of \$15,500 at 2.64% through May 2021.	762,000	877,000
Equipment lease-purchase agreement with GE Healthcare Financial Services with monthly payments of \$9,632 at 1.50% through May 2021.	412,000	521,000
Equipment lease-purchase agreement with GE Healthcare Financial Services with monthly payments of \$7,778 at 1.50% through May 2021.	333,000	420,000
Equipment lease-purchase agreement with GE Healthcare Financial Services with monthly payments of \$5,574 at 6.73% through March 2021.	293,000	338,000
Equipment lease-purchase agreement with Phillips Medical Capital, LLC with monthly payments of \$17,153 at 2.11% through April 2018.	103,000	305,000
Equipment lease-purchase agreement with GE Healthcare Financial Services with monthly payments of \$2,022 at 1.50% through May 2021.	85,000	107,000

Note 9 - Capital Leases (continued)

		2017		2016
Equipment lease-purchase agreement with GE Healthcare Financial Services with monthly payments of \$1,707 at 1.50% through September 2021.	\$	79,000	\$	102,000
Equipment lease-purchase agreements with various vendors paid in full in 2017.		<u>-</u>		506,000
Total capital lease obligations		6,126,000		7,307,000
Less current portion		(638,000)		(1,165,000)
Capital lease obligations, net of current portion	\$	5,488,000	\$	6,142,000
Scheduled payments on capital lease obligations for the years end	ing S	eptember 30 ar	e as t	follows:
	•			

2018	\$ 1,049,000
2019	942,000
2020	942,000
2021	998,000
2022	435,000
Thereafter	6,526,000
Total minimum lease payments	10,892,000
Less: Amount representing interest	(4,766,000)
Present value of net minimum lease payments	\$ 6,126,000

Note 10 – Long-Term Debt

Long term debt consisted of the following as of September 30:

	2017	2016
Series 2016 Bonds with interest rates from 2% to 5% and mature in varying amounts through 2046, net of premiums of \$5,580,833 and \$5,773,275 at September 30, 2017 and 2016, respectively.	\$ 57,086,000	\$ 58,163,000
Series 2012 Bonds with interest rates from 3.5% to 5% and mature in varying amounts through 2031, net of premiums of \$1,039,841 and \$1,114,115 at at September 30, 2017 and 2016, respectively.	14,230,000	15,449,000
Total long-term debt	71,316,000	73,612,000
Less deferred financing costs	(1,166,000)	(1,219,000)
Less current portion	(2,100,000)	(2,030,000)
Long-term debt, net of current portion and deferred financing costs	\$ 68,050,000	\$ 70,363,000

2016 Bonds

During the year ended September 30, 2016, The Authority issued \$53,325,000 in Series 2016 Bonds to defease the remaining 2006 Bonds, to pay or to reimburse the Medical Center for capital expenditures, to fund a Reserve Fund for the 2016 Bonds, and to pay costs of issuing the 2016 Bonds. The issuance was structured as a legal defeasance. Adequate amounts of the 2016 Bond issuance were used to purchase U.S. Treasury Securities to fully pay the debt service requirements of the 2006 Bonds. The securities have been placed in an escrow account and the Escrow Agent for the account will pay the debt service requirements as they become due. As the debt for the 2006 Series has been legally defeased, the Medical Center is no longer required to report the liability in the consolidated balance sheet.

The 2016 Bonds are secured by a Deed of Trust on a portion of the Medical Center campus, including the main hospital facility.

2012 Bonds

In 2013, The Authority issued \$17,000,000 in Series 2012 Bonds to defease the remaining 2002 Bonds, to pay or to reimburse the Medical Center for the payment of new equipment, to fund a Reserve Fund for the 2012 Bonds, and to pay costs of issuing the 2012 Bonds. The issuance was structured as a legal defeasance. Adequate amounts of the 2012 Bond issuance were used to purchase U.S. Treasury Securities to fully pay the debt service requirements of the 2002 Bonds. The securities have been placed in an escrow account and the Escrow Agent for the account will pay the debt service requirements as they become due. As the debt for the 2002 Series has been legally defeased, the Medical Center is no longer required to report the liability in the consolidated balance sheet.

Note 10 – Long-Term Debt (continued)

The 2012 Bonds are secured by a Deed of Trust on a portion of the Medical Center campus, including the main hospital facility. They are further secured by a Reserve Fund, created by the terms of the Bond Indenture to be held by the Bond Trustee (Note 4) to prevent a payment default on the Bonds. The Reserve Fund is required to maintain a balance equal to the lesser of the maximum annual debt service, 125% of the average annual debt service, or 10% of the bond proceeds. They are also secured by a pledge of the gross revenues.

The Medical Center must satisfy certain covenants as long as the bonds are outstanding. At September 30, 2017, management is not aware of any violation of the covenants.

Scheduled future principal payments and amortization of premiums for all long-term debt for the years ending September 30 are as follows:

2018	\$ 2,100,000
2019	2,452,000
2020	2,552,000
2021	2,657,000
2022	2,767,000
Thereafter	 58,788,000
	\$ 71,316,000

Deferred financing costs incurred and bond premium received in connection with the issuance of the refunding gross revenue bonds are being amortized over the term of the bond issue by the straight line method, which approximates the effective interest rate method.

Note 11 - Temporarily Restricted Net Assets

Temporarily restricted net assets are available for the following purposes at September 30:

	2017	 2016
Cancer Fund	\$ 2,298,000	\$ 1,944,000
Capital Campaign	1,405,000	1,405,000
Cares Fund	850,000	409,500
Other Funds	 2,121,000	 1,839,500
Total temporarily restricted net assets	\$ 6,674,000	\$ 5,598,000

Sky Lakes Medical Center and Affiliates

Notes to Consolidated Financial Statements

Note 12 – Income Taxes

WPS has \$31,600,000 available of unused operating loss carry forwards available at September 30, 2017, that may be applied against future taxable income, which expire in years 2024 through 2037.

Utilization of any deferred tax assets for the operating loss carry forwards disclosed above is dependent on future taxable profits. Because WPS has no history of sustained profitability and the asset will not be realized within one year of the balance sheet date, deferred tax assets of \$12,500,000 and \$10,400,000, including the unused operating loss carry forwards, have been fully reserved for at September 30, 2017 and 2016, respectively.

Note 13 – Commitments and Contingencies

Operating Leases

Lessee Leases

The Medical Center leases equipment and facilities under operating leases which expire through June 2022. Total rental expense for all operating leases in the fiscal years ending September 30, 2017 and 2016 was approximately \$658,000 and \$689,000, respectively.

Minimum future payments on non-cancelable leases as of September 30 are:

2018	\$	572,000
2019		360,000
2020		366,000
2021		375,000
2022		347,000
	·	
	\$	2,020,000

Lessor Leases

The Medical Center is the lessor of the office space to various entities under operating leases expiring in various years through September 2057.

Following is a summary of property on or held for lease at September 30:

	 2017	 2016
Buildings and improvements Less accumulated depreciation	\$ 9,726,000 (5,940,000)	\$ 9,688,000 (5,551,000)
	\$ 3,786,000	\$ 4,137,000

Note 13 - Commitments and Contingencies (continued)

Minimum future rentals to be received on non-cancelable leases as of September 30 are:

2018	\$	682,000
2019		442,000
2020		363,000
2021		288,000
2022		78,000
Thereafter		177,000
	<u>\$</u>	2,030,000

Litigation

The Medical Center is involved in litigation and regulatory investigations arising in the course of business. After consultation with legal counsel, management estimates that these matters will be resolved without material adverse effect on the Medical Center's future financial position or results from operations.

Note 14 - Related-Party Transactions

The following is a summary of transactions between the Medical Center and related parties:

Atrio Health Plans

The Medical Center received \$19,033,000 and \$13,991,000 in Medicare reimbursement from Atrio Health Plans, Inc. in fiscal year 2017 and 2016, respectively.

Southern Oregon Linen Services

The Medical Center purchased laundry services of approximately \$486,000 and \$417,000 from Southern Oregon Linen Services in fiscal years 2017 and 2016, respectively.

Cascade Comprehensive Care, Inc.

The Medical Center received approximately \$31,190,000 and \$34,242,000 in Medicaid reimbursements from CCC in fiscal years 2017 and 2016, respectively.

Sky Lakes Medical Center and Affiliates

Notes to Consolidated Financial Statements

Note 15 – Functional Expenses

The Medical Center provides general health care services to residents within its geographic location. Expenses related to providing these services for the Medical Center as of September 30 are as follows:

	2017	2016
Healthcare services General and administrative	\$ 200,676,500 35,413,500	\$ 191,604,450 33,812,550
Total	\$ 236,090,000	\$ 225,417,000

Note 16 - Retirement Plans

401(a) - Money Purchase Pension Plan

The Medical Center has established a defined contribution retirement plan for all employees who have at least one year of service, are age twenty-one or older, and have completed 1,000 hours of service in the plan year. The Medical Center is required to contribute 5% of an employee's eligible compensation to the plan each plan year. The Medical Center accrued \$3,256,000 and \$3,007,000 to the plan on behalf of employees for fiscal years ended September 30, 2017 and 2016, respectively, which was included in other accrued expenses in the consolidated balance sheets.

403(b) - Elective Deferral Plan

The Medical Center has established a 403(b) retirement plan covering substantially all employees under the guidelines of Internal Revenue Code 403(b) Tax Deferred Annuity Plan. The employees may elect to contribute, according to a salary reduction agreement, a percentage of their annual compensation and are eligible for the plan on the first day of employment with the Medical Center. The Plan is a 'Custodial Account Plan' invested in mutual funds.

401(k) Plan

WPS established the West Physician Services 401(k) Retirement Plan, which is a qualified retirement plan under Section 401(k) of the Internal Revenue Code. All employees over 21 years of age are eligible to participate in the plan. There are no employer contributions made to the plan.

409(a) – Retirement Plan

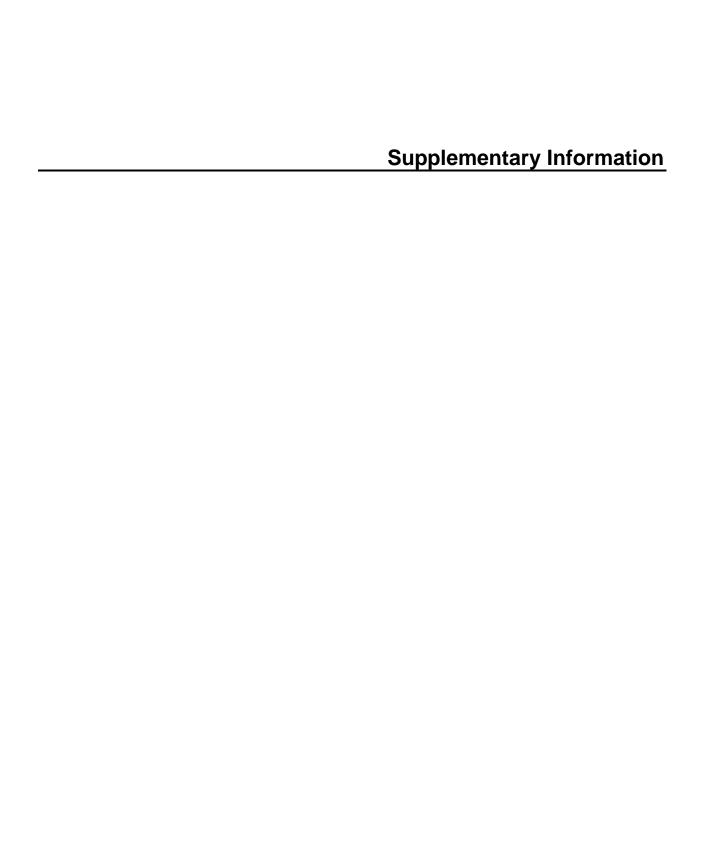
WPS established the West Physician Services Nonqualified Retirement Plan, for the purposes of providing nonqualified retirement benefits to a select group of its employees. Starting in July 2017, the Medical Center is required to contribute 5% of an employee's compensation to the plan each plan year. Prior to July 2017, the Medical Center was required to contribute 15% of an employee's compensation. In addition, the plan permits eligible employees to defer a portion of their compensation. The participant balances are distributable in cash after retirement or termination of employment. The Medical Center contributed \$151,000 and \$341,000 to the plan on behalf of employees for fiscal years ended September 30, 2017 and 2016, respectively.

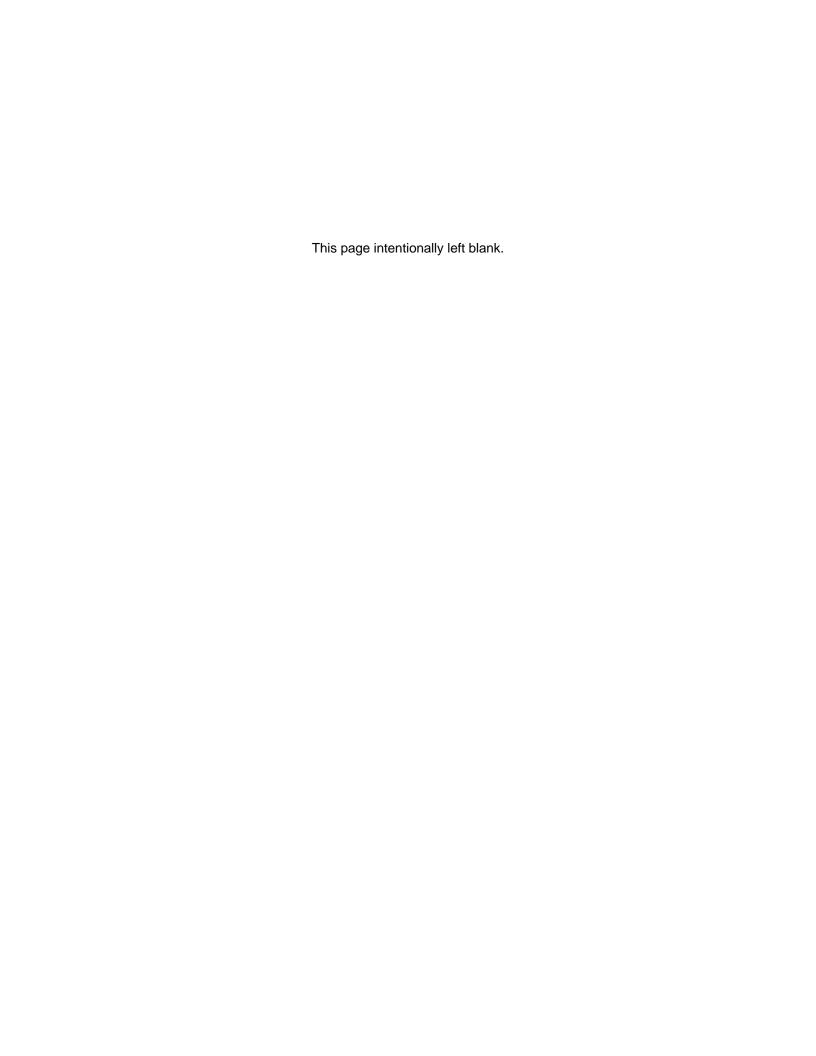
Sky Lakes Medical Center and Affiliates Notes to Consolidated Financial Statements

Note 16 - Retirement Plans (continued)

457(b) - Deferred Compensation Plan

The Medical Center established the Sky Lakes Medical Center 457(b) Plan. The Plan is a 457(b) qualified deferred compensation plan that permits eligible employees to defer a portion of their compensation. The participant balances are distributable in cash after retirement, unforeseeable emergencies, or termination of employment. Employer contributions to the plan approximated \$63,000 and \$60,000 for the years ended September 30, 2017 and 2016, respectively. The Medical Center may hold the participant balances in cash or invest it in assets selected by the Plan Administrator. The Plan Administrator has elected to invest the participant balances in mutual funds.





Sky Lakes Medical Center and Affiliates Consolidating Balance Sheet September 30, 2017

ASSETS

	Sky Lakes edical Center	М	Sky Lakes edical Center Foundation	Klamath Medical Business Center	KW Campus	Total	 Eliminating Entries	 Consolidated
CURRENT ASSETS Cash and cash equivalents Certificates of deposit Patient accounts receivable, net Other receivables Risk pool withhold receivable Supplies inventories Prepaid expenses Promises to give, current portion	\$ 15,003,000 15,419,000 34,624,000 13,749,000 4,369,000 4,998,000 2,675,000	\$	1,039,000 - - - - - - - 775,000	\$ 160,000 - - - - - - -	\$ 13,000 - - - - - - -	\$ 16,215,000 15,419,000 34,624,000 13,749,000 4,369,000 4,998,000 2,675,000 775,000	\$ - - - (4,379,000) - - - -	\$ 16,215,000 15,419,000 34,624,000 9,370,000 4,369,000 4,998,000 2,675,000 775,000
Total current assets	90,837,000		1,814,000	160,000	13,000	92,824,000	(4,379,000)	88,445,000
ASSETS LIMITED AS TO USE	17,723,000		-	-	-	17,723,000	-	17,723,000
PROPERTY AND EQUIPMENT, net	104,511,000		-	782,000	675,000	105,968,000	-	105,968,000
INVESTMENTS	109,709,000		21,999,000	-	-	131,708,000	(669,000)	131,039,000
OTHER ASSETS	 1,302,000		<u>-</u>	 	 <u>-</u> ,	 1,302,000	 (10,000)	 1,292,000
Total assets	\$ 324,082,000	\$	23,813,000	\$ 942,000	\$ 688,000	\$ 349,525,000	\$ (5,058,000)	\$ 344,467,000

Sky Lakes Medical Center and Affiliates Consolidating Balance Sheet September 30, 2017

LIABILITIES AND NET ASSETS

		ky Lakes lical Center	Ме	Sky Lakes dical Center oundation		Klamath Medical Business Center	KW Campus	 Total	Eliminating Entries	<u>C</u>	onsolidated
CURRENT LIABILITIES											
Accounts payable	\$	5,552,000	\$	2,042,000	\$	-	\$ 413,000	\$ 8,007,000	\$ (2,454,000)	\$	5,553,000
Construction costs payable		2,689,000		-		-	-	2,689,000	-		2,689,000
Accrued payroll		7,243,000		-		-	-	7,243,000	-		7,243,000
Accrued compensated absences		4,689,000		-		-	-	4,689,000	-		4,689,000
Accrued interest payable		257,000		-		-	-	257,000	-		257,000
Other accrued expenses		13,912,000		-		-	-	13,912,000	(1,935,000)		11,977,000
Estimated third-party payor settlements		2,014,000		-		-	-	2,014,000	-		2,014,000
Capital lease obligations, current portion		638,000		-		-	-	638,000	-		638,000
Long-term debt, current portion		2,100,000		-			 	 2,100,000			2,100,000
Total current liabilities		39,094,000		2,042,000			413,000	41,549,000	(4,389,000)		37,160,000
LONG-TERM LIABILITIES											
Capital lease obligations, net of current portion		5,488,000		_		_	_	5,488,000	_		5,488,000
Long-term debt, net of current portion & deferred financing costs		68,050,000		_		_	_	68.050.000	_		68,050,000
Other long-term liabilities		6,696,000		-		-		 6,696,000			6,696,000
Total long-term liabilities		80,234,000						80,234,000			80,234,000
rotal total administra		00,20 .,000			_			 00,201,000			00,20.,000
Total liabilities	1	19,328,000		2,042,000	_		413,000	121,783,000	(4,389,000)		117,394,000
NET ASSETS											
Unrestricted – Sky Lakes Medical Center	2	204,754,000		15,097,000		942,000	275,000	221,068,000	(1,278,000)		219,790,000
Unrestricted – Non-Controlling Interest	2	.04,734,000		13,097,000		942,000	273,000	221,000,000	609,000		609,000
Temporarily restricted		_		6,674,000		-	-	6,674,000	009,000		6,674,000
remporanty restricted				0,074,000	_		 	 0,074,000			0,074,000
Total net assets	2	204,754,000		21,771,000		942,000	 275,000	 227,742,000	(669,000)		227,073,000
Total liabilities and net assets	\$ 3	324,082,000	\$	23,813,000	\$	942,000	\$ 688,000	\$ 349,525,000	\$ (5,058,000)	\$	344,467,000

Sky Lakes Medical Center and Affiliates Consolidating Statement of Operations For the Year Ended September 30, 2017

	Sky Lakes Medical Center	Sky Lakes Medical Center Foundation	Klamath Medical Business Center	KW Campus	Total	Eliminating Entries	Consolidated
REVENUES							
Patient service revenue, net contractual							
adjustments	\$ 226,004,000	\$ -	\$ -	\$ -	\$ 226,004,000	\$ -	\$ 226,004,000
Provision for bad debts	(5,735,000)				(5,735,000)		(5,735,000)
Net patient service revenue	220,269,000	-	-	-	220,269,000	-	220,269,000
Contributions	-	216,000	-	-	216,000	-	216,000
Other revenue	23,418,000	-	284,000	-	23,702,000	(1,659,000)	22,043,000
Net assets released from restrictions		326,000			326,000		326,000
Total revenues	243,687,000	542,000	284,000	_	244,513,000	(1,659,000)	242,854,000
EXPENSES							
Salaries and benefits	110,471,000	185,000	_	_	110,656,000	(22,000)	110,634,000
Purchased services	29.256.000	-	8,000	_	29,264,000	(290,000)	28,974,000
Supplies	17,719,000	_	-	_	17,719,000	(158,000)	17,561,000
Drugs	17,616,000	_	_	-	17,616,000	-	17,616,000
Depreciation and amortization	14,045,000	_	39,000	_	14,084,000	_	14,084,000
Building and maintenance	12,673,000	_	114,000	_	12,787,000	(12,000)	12,775,000
Provider tax	11,225,000	_	114,000	_	11,225,000	(12,000)	11,225,000
Physician fees	7,776,000	_	_	_	7,776,000	(10,000)	7,766,000
Interest expense	3,019,000	_	_	_	3,019,000	(10,000)	3,019,000
Professional fees	2,353,000	_	8,000	2,000	2,363,000	(8,000)	2,355,000
Rentals and lease expense	2,325,000		0,000	2,000	2,325,000	(946,000)	1,379,000
Insurance	1,621,000	_	4,000	_	1,625,000	(540,000)	1,625,000
Minor equipment	1,088,000	_	4,000	_	1,088,000	_	1,088,000
Other	4,533,000	1,601,000	19,000	-	6,153,000	(164,000)	5,989,000
Total expenses	235,720,000	1,786,000	192,000	2,000	237,700,000	(1,610,000)	236,090,000
OPERATING INCOME (LOSS)	7,967,000	(1,244,000)	92,000	(2,000)	6,813,000	(49,000)	6,764,000
OTHER INCOME (EXPENSE)							
Investment income	4,374,000	1,060,000	_	_	5,434,000	-	5,434,000
Other non-operating expense	(317,000)				(317,000)	(16,000)	(333,000)
Total other income, net	4,057,000	1,060,000			5,117,000	(16,000)	5,101,000
EXCESS (DEFICIENCY) OF REVENUES							
OVER EXPENSES	\$ 12,024,000	\$ (184,000)	\$ 92,000	\$ (2,000)	\$ 11,930,000	\$ (65,000)	\$ 11,865,000

Sky Lakes Medical Center and Affiliates Consolidating Statement of Changes in Net Assets For the Year Ended September 30, 2017

	Sky Lakes Medical Center	Sky Lakes Medical Center Foundation	Klamath Medical Business Center	KW Campus	Total	Eliminating Entries	Consolidated
UNRESTRICTED NET ASSETS Excess of revenues over expenses Distributions Net change in unrealized gains and losses	\$ 12,024,000 -	\$ (184,000) -	\$ 92,000 (385,000)	\$ (2,000)	\$ 11,930,000 (385,000)	\$ (65,000) 180,000	\$ 11,865,000 (205,000)
on other-than-trading securities		2,123,000			2,123,000		2,123,000
Increase (decrease) in unrestricted net assets	12,024,000	1,939,000	(293,000)	(2,000)	13,668,000	115,000	13,783,000
TEMPORARILY RESTRICTED NET ASSETS Contributions Net change in unrealized gains and losses	-	752,000	-	-	752,000	-	752,000
on other-than-trading securities Investment income Net assets released from restrictions	- -	432,000 218,000 (326,000)	- - -	- - -	432,000 218,000 (326,000)	- - -	432,000 218,000 (326,000)
Increase in temporarily restricted net assets		1,076,000			1,076,000		1,076,000
CHANGE IN NET ASSETS	12,024,000	3,015,000	(293,000)	(2,000)	14,744,000	115,000	14,859,000
NET ASSETS, beginning of year	192,730,000	18,756,000	1,235,000	277,000	212,998,000	(784,000)	212,214,000
NET ASSETS, end of year	\$ 204,754,000	\$ 21,771,000	\$ 942,000	\$ 275,000	\$ 227,742,000	\$ (669,000)	\$ 227,073,000

Sky Lakes Medical Center and Affiliates – Obligated Group Combining Balance Sheet September 30, 2017

ASSETS

	Sky Lakes Medical Center	Sky Lakes Medical Center Foundation	Total	Eliminating Entries	Total Obligated Group
CURRENT ASSETS					
Cash and cash equivalents	\$ 15,003,000	\$ 1,039,000	\$ 16,042,000	\$ -	\$ 16,042,000
Certificates of deposit	15,419,000	-	15,419,000	-	15,419,000
Patient accounts receivable, net	34,624,000	-	34,624,000	-	34,624,000
Other receivables	13,749,000	-	13,749,000	(3,966,000)	9,783,000
Risk pool withhold receivable	4,369,000	-	4,369,000	-	4,369,000
Supplies inventories	4,998,000	-	4,998,000	-	4,998,000
Prepaid expenses	2,675,000	-	2,675,000	-	2,675,000
Promises to give, current portion		775,000	775,000		775,000
Total current assets	90,837,000	1,814,000	92,651,000	(3,966,000)	88,685,000
ASSETS LIMITED AS TO USE	17,723,000	-	17,723,000	-	17,723,000
PROPERTY AND EQUIPMENT, net	104,511,000	-	104,511,000	-	104,511,000
INVESTMENTS	109,709,000	21,999,000	131,708,000	(127,000)	131,581,000
OTHER ASSETS	1,302,000		1,302,000		1,302,000
Total assets	\$ 324,082,000	\$ 23,813,000	\$ 347,895,000	\$ (4,093,000)	\$ 343,802,000

Sky Lakes Medical Center and Affiliates – Obligated Group Combining Balance Sheet September 30, 2017

LIABILITIES AND NET ASSETS

	Sky Lakes Medical Center	Sky Lakes Medical Center Foundation	Total	Eliminating Entries	Total Obligated Group
CURRENT LIABILITIES Accounts payable Construction costs payable Accrued payroll Accrued compensated absences Accrued interest payable Other accrued expenses Estimated third-party payor settlements Capital lease obligations, current portion Long-term debt, current portion	\$ 5,552,000 2,689,000 7,243,000 4,689,000 257,000 13,912,000 2,014,000 638,000 2,100,000	\$ 2,042,000 - - - - - - -	\$ 7,594,000 2,689,000 7,243,000 4,689,000 257,000 13,912,000 2,014,000 638,000 2,100,000	\$ (2,042,000) - - - - (1,924,000) - -	\$ 5,552,000 2,689,000 7,243,000 4,689,000 257,000 11,988,000 2,014,000 638,000 2,100,000
Total current liabilities	39,094,000	2,042,000	41,136,000	(3,966,000)	37,170,000
LONG-TERM LIABILITIES Capital lease obligations, net of current portion Long-term debt, net of current portion & deferred financing costs Other long-term liabilities	5,488,000 68,050,000 6,696,000	- - -	5,488,000 68,050,000 6,696,000	- - -	5,488,000 68,050,000 6,696,000
Total long-term liabilities	80,234,000		80,234,000		80,234,000
Total liabilities	119,328,000	2,042,000	121,370,000	(3,966,000)	117,404,000
NET ASSETS Unrestricted Unrestricted – Non-Controlling Interest Temporarily restricted	204,754,000 - 	15,097,000 - 6,674,000	219,851,000 - 6,674,000	(127,000) - -	219,724,000 - 6,674,000
Total net assets	204,754,000	21,771,000	226,525,000	(127,000)	226,398,000
Total liabilities and net assets	\$ 324,082,000	\$ 23,813,000	\$ 347,895,000	\$ (4,093,000)	\$ 343,802,000

Sky Lakes Medical Center and Affiliates – Obligated Group Combining Statement of Operations September 30, 2017

Patient service revenue, net contractual adjustments		Sky Lakes Medical Center	Sky Lakes Medical Center Foundation	Total	Eliminating Entries	Total Obligated Group
Provision for bad debts (5,735,000) - (5,735,000) - (5,735,000) Net patient service revenue 220,269,000 - 220,269,000 - 220,269,000 Contributions - 216,000 - 216,000 Other revenue 23,418,000 326,000 324,000 (1,441,000) 21,977,000 Net assets released from restrictions 23,48,000 542,000 244,229,000 (1,441,000) 242,788,000 EXPENSES - 326,000 244,229,000 (1,441,000) 242,788,000 Supplies 110,471,000 185,000 10,566,000 - 110,666,000 Supplies 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - </th <th>REVENUES</th> <th></th> <th></th> <th></th> <th></th> <th></th>	REVENUES					
Contributions 2 216,000 210,000 210,000	•	* -,,	\$ - -		\$ - -	
Other revenue 23,418,000 - 23,418,000 11,441,000 21,977,000 Net assets released from restrictions 243,687,000 542,000 244,229,000 (1,441,000) 21,977,000 EXPENSES 326,000 542,000 244,229,000 (1,441,000) 242,788,000 EXPENSES 8 110,471,000 185,000 110,666,000 - 110,666,000 Purchased services 29,256,000 0 29,256,000 (325,000) 28,931,000 Supplies 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,718,000 - 17,718,000 - 12,255,000 - 1,2125	Net patient service revenue	220,269,000	-	220,269,000	-	220,269,000
Net assets released from restrictions 326,000 326,000 326,000 326,000 Total revenues 243,687,000 542,000 244,229,000 (1,441,000) 242,788,000 EXPENSES Salaries and benefits 110,471,000 185,000 110,656,000 - 110,666,000 Purchased services 29,256,000 - 29,256,000 (325,000) 28,311,000 Supplies 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 Drugs 17,616,000 - 11,616,000 - 11,616,000 - 17,616,000 Depreciation and amortization 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 11,225,000 (12,200) 11,23,000 - 12,673,000 - 12,673,000 - 12,673,000 - 12,673,000 - 12,673,000 - 12,673,000 - 12,673,000 - 12,673,000 - 12,673,000 <th< td=""><td>Contributions</td><td>-</td><td>216,000</td><td>216,000</td><td>-</td><td>216,000</td></th<>	Contributions	-	216,000	216,000	-	216,000
Total revenues 243,687,000 542,000 244,229,000 (1,441,000) 242,788,000	Other revenue	23,418,000	-	23,418,000	(1,441,000)	21,977,000
EXPENSES Salaries and benefits 110,471,000 185,000 110,656,000 - 110,656,000 Purchased services 29,256,000 - 29,256,000 (325,000) 28,931,000 Supplies 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,616,000 - 17,616,000 - 17,616,000 - 17,616,000 - 17,616,000 - 17,616,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 12,673,000	Net assets released from restrictions		326,000	326,000		326,000
Salaries and benefits 110,471,000 185,000 110,656,000 - 110,656,000 Purchased services 29,256,000 - 29,256,000 (325,000) 28,931,000 Supplies 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,716,000 - 17,616,000 - 17,616,000 - 17,616,000 - 17,616,000 - 17,616,000 - 17,616,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 12,673,000 - 12,673,000 - 12,673,000 - 12,673,000 - 12,673,000 - 12,673,000 - 12,673,000 - 1,621,000 - 1,621,000 - 1,621,000 - 1,621,000 -	Total revenues	243,687,000	542,000	244,229,000	(1,441,000)	242,788,000
Purchased services 29,256,000 - 29,256,000 (325,000) 28,931,000 Supplies 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,616,000 - 11,616,000 - 11,616,000 - 114,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 11,225,000 - 11,225,000 - 11,225,000 - 12,673,000 - 12,673,000 - 12,673,000 - 12,673,000 - 12,673,000 - 12,673,000 - 3,019,000 - 3,019,000 - 3,019,000 - 3,019,000 - 1,621,000 - 1,621,000 - 1,621,000 - 2,325,000 - <td>EXPENSES</td> <td></td> <td></td> <td></td> <td></td> <td></td>	EXPENSES					
Purchased services 29,256,000 - 29,256,000 (325,000) 28,931,000 Supplies 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,719,000 - 17,616,000 - 11,616,000 - 11,616,000 - 114,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 11,225,000 - 11,225,000 - 11,225,000 - 12,673,000 - 12,673,000 - 12,673,000 - 12,673,000 - 12,673,000 - 12,673,000 - 3,019,000 - 3,019,000 - 3,019,000 - 3,019,000 - 1,621,000 - 1,621,000 - 1,621,000 - 2,325,000 - <td></td> <td>110.471.000</td> <td>185.000</td> <td>110.656.000</td> <td>_</td> <td>110.656.000</td>		110.471.000	185.000	110.656.000	_	110.656.000
Supplies 17,719,000 - 17,719,000 - 17,719,000 Drugs 17,616,000 - 17,616,000 - 17,616,000 - 17,616,000 - 17,616,000 - 11,645,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 14,045,000 - 12,000 - 12,000 - 12,673,000 - 12,673,000 - 12,673,000 - 12,673,000 - 12,673,000 - 3,019,000 - 3,019,000 - 3,019,000 - 3,019,000 - 1,621,000 (98,000) 1,523,000 - 1,621,000 (98,000) 1,523,000 - 2,325,000 (831,000) 1,494,000 -	Purchased services	, ,	-		(325.000)	, ,
Drugs 17,616,000 - 17,616,000 - 17,616,000 Depreciation and amortization 14,045,000 - 14,045,000 - 14,045,000 Building and maintenance 11,225,000 - 11,225,000 (12,000) 11,213,000 Provider tax 12,673,000 - 12,673,000 - 12,673,000 Physician fees 7,776,000 - 7,776,000 (2,000) 7,754,000 Interest expenses 3,019,000 - 3,019,000 - 3,019,000 Professional fees 1,621,000 - 1,621,000 (98,000) 1,523,000 Rentals and lease expense 2,325,000 - 2,325,000 (831,000) 1,494,000 Insurance 2,353,000 - 2,353,000 - 2,353,000 - 2,353,000 Minor equipment 1,088,000 - 1,088,000 (22,000) 1,066,000 Other 4,533,000 1,786,000 237,506,000 (2,064,000) 235,442,000 OPERATING INCOME (LO	Supplies		-	' '	-	, ,
Depreciation and amortization 14,045,000 - 14,045,000 - 14,045,000 Building and maintenance 11,225,000 - 11,225,000 - 12,673,000 - 12,673,000 Provider tax 12,673,000 - 3,019,000 - 3,019,000 - 3,019,000 - 2,325,000 - 2,325,000 - 2,353,000 - - 2,353,000 - - 2,353,000 -	• •	17,616,000	-	17,616,000	-	
Provide tax 12,673,000 - 12,673,000 - 12,673,000 Physician fees 7,776,000 - 7,776,000 (22,000) 7,754,000 Interest expense 3,019,000 - 3,019,000 - 3,019,000 Professional fees 1,621,000 - 1,621,000 (98,000) 1,523,000 Rentals and lease expense 2,325,000 - 2,355,000 - 2,353,000 - 2,353,000 - 2,353,000 - 2,353,000 - 2,353,000 - 2,353,000 - 2,353,000 - 2,353,000 - 2,353,000 - 2,353,000 - 2,353,000 - 2,353,000 - 2,353,000 - 2,353,000 - 2,353,000 - 2,353,000 - 1,066,000 - 2,353,000 - 2,353,000 - 1,660,000 - 2,353,000 - 2,353,000 - - 2,353,000 - - 2,353,000 - - - -			-		-	
Physician fees 7,776,000 - 7,776,000 (22,000) 7,754,000 Interest expense 3,019,000 - 3,019,000 - 3,019,000 Professional fees 1,621,000 - 1,621,000 (98,000) 1,523,000 Rentals and lease expense 2,325,000 - 2,325,000 (831,000) 1,494,000 Insurance 2,353,000 - 2,353,000 - 2,353,000 - 2,353,000 Minor equipment 1,088,000 - 1,088,000 (22,000) 1,066,000 - 2,353,000 (754,000) 5,380,000 - 2,353,000 - 2,353,000 - 2,353,000 - 2,353,000 - 2,353,000 - 2,353,000 - 2,353,000 - 2,353,000 - 2,353,000 - 2,353,000 - 2,353,000 - - 2,353,000 - - 2,353,000 - - 2,353,000 - - 2,353,000 - - 2,353,000 - <td>Building and maintenance</td> <td>11,225,000</td> <td>-</td> <td>11,225,000</td> <td>(12,000)</td> <td>11,213,000</td>	Building and maintenance	11,225,000	-	11,225,000	(12,000)	11,213,000
Interest expense 3,019,000 - 3,019,000 - 3,019,000 Professional fees 1,621,000 - 1,621,000 (98,000) 1,523,000 Rentals and lease expense 2,325,000 - 2,325,000 (831,000) 1,494,000 Risurance 2,353,000 - 2,353,	Provider tax	12,673,000	-	12,673,000	-	12,673,000
Professional fees 1,621,000 - 1,621,000 (98,000) 1,523,000 Rentals and lease expense 2,325,000 - 2,325,000 (831,000) 1,494,000 Insurance 2,353,000 - 2,353,000 - 2,353,000 Minor equipment 1,088,000 - 1,088,000 (22,000) 1,066,000 Other 4,533,000 1,601,000 6,134,000 (754,000) 5,380,000 Total expenses 235,720,000 1,786,000 237,506,000 (2,064,000) 235,442,000 OPERATING INCOME (LOSS) 7,967,000 (1,244,000) 6,723,000 623,000 7,346,000 OTHER INCOME (EXPENSE) Investment income 4,374,000 1,060,000 5,434,000 - 5,434,000 Other non-operating income (317,000) - (317,000) (645,000) 4,472,000	Physician fees	7,776,000	-	7,776,000	(22,000)	7,754,000
Rentals and lease expense 2,325,000 - 2,325,000 (831,000) 1,494,000 Insurance 2,353,000 - 2,353,000 - 2,353,000 Minor equipment 1,088,000 - 1,088,000 (22,000) 1,066,000 Other 4,533,000 1,601,000 6,134,000 (754,000) 5,380,000 Total expenses 235,720,000 1,786,000 237,506,000 (2,064,000) 235,442,000 OPERATING INCOME (LOSS) 7,967,000 (1,244,000) 6,723,000 623,000 7,346,000 OTHER INCOME (EXPENSE) Investment income 4,374,000 1,060,000 5,434,000 - 5,434,000 Other non-operating income (317,000) - (317,000) (645,000) 4,472,000	Interest expense	3,019,000	-	3,019,000	· · · · · ·	3,019,000
Insurance 2,353,000 - 2,353,000 - 2,353,000 Minor equipment Other 1,088,000 - 1,088,000 (22,000) 1,066,000 Other 4,533,000 1,601,000 6,134,000 (754,000) 5,380,000 Total expenses 235,720,000 1,786,000 237,506,000 (2,064,000) 235,442,000 OPERATING INCOME (LOSS) 7,967,000 (1,244,000) 6,723,000 623,000 7,346,000 OTHER INCOME (EXPENSE) Investment income 4,374,000 1,060,000 5,434,000 - 5,434,000 Other non-operating income (317,000) - (317,000) (645,000) 4,472,000 Total other income, net 4,057,000 1,060,000 5,117,000 (645,000) 4,472,000	Professional fees	1,621,000	-	1,621,000	(98,000)	1,523,000
Minor equipment Other 1,088,000 4,533,000 - 1,088,000 6,134,000 (22,000) 1,066,000 (754,000) 1,066,000 5,380,000 Total expenses 235,720,000 1,786,000 237,506,000 (2,064,000) 235,442,000 OPERATING INCOME (LOSS) 7,967,000 (1,244,000) 6,723,000 623,000 7,346,000 OTHER INCOME (EXPENSE) Investment income Other non-operating income 4,374,000 1,060,000 5,434,000 - 5,434,000 - 5,434,000 (962,000) Total other income, net 4,057,000 1,060,000 5,117,000 (645,000) 4,472,000	Rentals and lease expense	2,325,000	-	2,325,000	(831,000)	1,494,000
Other 4,533,000 1,601,000 6,134,000 (754,000) 5,380,000 Total expenses 235,720,000 1,786,000 237,506,000 (2,064,000) 235,442,000 OPERATING INCOME (LOSS) 7,967,000 (1,244,000) 6,723,000 623,000 7,346,000 OTHER INCOME (EXPENSE)	Insurance	2,353,000	-	2,353,000	· · · · · ·	2,353,000
Total expenses 235,720,000 1,786,000 237,506,000 (2,064,000) 235,442,000 OPERATING INCOME (LOSS) 7,967,000 (1,244,000) 6,723,000 623,000 7,346,000 OTHER INCOME (EXPENSE)	Minor equipment	1,088,000	-	1,088,000	(22,000)	1,066,000
OPERATING INCOME (LOSS) 7,967,000 (1,244,000) 6,723,000 623,000 7,346,000 OTHER INCOME (EXPENSE) Investment income Other non-operating income 4,374,000 (317,000) 1,060,000 - (317,000) 5,434,000 (317,000) - 5,434,000 (645,000) 962,000) Total other income, net 4,057,000 1,060,000 5,117,000 (645,000) 4,472,000	Other	4,533,000	1,601,000	6,134,000	(754,000)	5,380,000
OTHER INCOME (EXPENSE) 4,374,000 1,060,000 5,434,000 - 5,434,000 Investment income (317,000) - (317,000) (645,000) (962,000) Total other income, net 4,057,000 1,060,000 5,117,000 (645,000) 4,472,000	Total expenses	235,720,000	1,786,000	237,506,000	(2,064,000)	235,442,000
Investment income 4,374,000 (317,000) 1,060,000 (317,000) 5,434,000 (645,000) - 5,434,000 (962,000) Total other income, net 4,057,000 1,060,000 5,117,000 (645,000) 4,472,000	OPERATING INCOME (LOSS)	7,967,000	(1,244,000)	6,723,000	623,000	7,346,000
Investment income 4,374,000 (317,000) 1,060,000 (317,000) 5,434,000 (645,000) - 5,434,000 (962,000) Total other income, net 4,057,000 1,060,000 5,117,000 (645,000) 4,472,000	OTHER INCOME (EXPENSE)					
Other non-operating income (317,000) - (317,000) (645,000) (962,000) Total other income, net 4,057,000 1,060,000 5,117,000 (645,000) 4,472,000	,	4,374.000	1,060,000	5,434,000	-	5,434,000
	Other non-operating income	, ,		' '	(645,000)	, ,
EXCESS (DEFICIENCY) OF REVENUE OVER EXPENSES \$ 12,024,000 \$ (184,000) \$ 11,840,000 \$ (22,000) \$ 11,818,000	Total other income, net	4,057,000	1,060,000	5,117,000	(645,000)	4,472,000
	EXCESS (DEFICIENCY) OF REVENUE OVER EXPENSES	\$ 12,024,000	\$ (184,000)	\$ 11,840,000	\$ (22,000)	\$ 11,818,000

Sky Lakes Medical Center and Affiliates – Obligated Group Combining Statement of Changes in Net Assets For the Year Ended September 30, 2017

	Sky Lakes Medical Center	Sky Lakes Medical Center Foundation	Total	Eliminating Entries	Total Obligated Group
UNRESTRICTED NET ASSETS Excess of revenues over expenses	\$ 12,024,000	\$ (184,000)	\$ 11,840,000	\$ (22,000)	\$ 11,818,000
Net change in unrealized gains and losses on other-than-trading securities		2,123,000	2,123,000		2,123,000
Increase in unrestricted net assets	12,024,000	1,939,000	13,963,000	(22,000)	13,941,000
TEMPORARILY RESTRICTED NET ASSETS Contributions Net change in unrealized gains and losses	-	752,000	752,000	-	752,000
on other-than-trading securities Investment income Net assets released from restrictions	- - -	432,000 218,000 (326,000)	432,000 218,000 (326,000)		432,000 218,000 (326,000)
Increase in temporarily restricted net assets net assets		1,076,000	1,076,000		1,076,000
CHANGE IN NET ASSETS	12,024,000	3,015,000	15,039,000	(22,000)	15,017,000
NET ASSETS, beginning of year	192,730,000	18,756,000	211,486,000		211,486,000
NET ASSETS, end of year	\$ 204,754,000	\$ 21,771,000	\$ 226,525,000	\$ (22,000)	\$ 226,503,000



MOSS<u>A</u>DAMS