## CONSOLIDATED FINANCIAL STATEMENTS AND SUPPLEMENTARY INFORMATION

CentraState Healthcare System, Inc. Years Ended December 31, 2024 and 2023 With Report of Independent Auditors



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## Consolidated Financial Statements and Supplementary Information

Years Ended December 31, 2024 and 2023

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Ernst & Young LLP 99 Wood Avenue South Metropark Iselin, NJ 08830-0471 Tel: +1 732 516 4200 Fax: +1 732 516 4429 ey.com

## Report of Independent Auditors

The Board of Trustees CentraState Healthcare System, Inc.

## Opinion

We have audited the consolidated financial statements of CentraState Healthcare System, Inc. (the System), which comprise the consolidated balance sheets as of December 31, 2024 and 2023, and the related consolidated statements of operations, changes in net assets and cash flows for the years then ended, and the related notes (collectively referred to as the "financial statements").

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the System at December 31, 2024 and 2023, and the results of its operations, changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

## **Basis for Opinion**

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the System and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

## **Responsibilities of Management for the Financial Statements**

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

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the System's ability to continue as a going concern for one year after the date that the financial statements are available to be issued.



#### Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free of material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit 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 System's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the System's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.



#### **Supplementary Information**

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying consolidating balance sheet as of December 31, 2024, and the consolidating statements of operations and changes in net assets for the year then ended, are presented for purposes of additional analysis and are not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements attements or to the financial statements themselves, and other additional procedures in accordance with GAAS. In our opinion, the information is fairly stated, in all material respects, in relation to the financial statements as a whole.

Ernst + Young LLP

April 10, 2025

## Consolidated Balance Sheets (In Thousands)

		Decen	nber	31
		2024		2023
Assets				
Current assets:				
Cash and cash equivalents (Note 1)	\$	22,798	\$	25,110
Short-term investments (Note 4)		139,164		130,059
Assets limited as to use that are required for current liabilities (Note 4)		860		737
Patient accounts receivable, net		38,580		38,604
Due from affiliates ( <i>Note 11</i> )		1,099		2,689
Other current assets		9,646		10,422
Total current assets		212,147		207,621
Assets limited as to use – noncurrent (Note 4)		18,751		23,980
Property, plant, and equipment, net (Note 6)		243,726		278,483
Operating lease assets (Note 8)		7,958		9,557
Noncurrent assets (Note 5)		8,850		9,071
Total assets	\$	491,432	\$	528,712
Liabilities and net assets				
Current liabilities:				
Current maturities of long-term debt and finance lease				
obligations (Note 7)	\$	308	\$	294
Accounts payable and accrued expenses		49,652		59,160
Estimated third-party payor settlements – current (Note 3)		_		14
Operating lease liability – current ( <i>Note 8</i> )		1,719		1,505
Other current liabilities		75		276
Total current liabilities		51,754		61,249
Long-term debt and finance lease obligations, excluding current				
maturities ( <i>Note 7</i> )		116,254		115,870
Professional liability insurance and other noncurrent liabilities ( <i>Note 9</i> )		6,328		6,249
Estimated third-party payor settlements – noncurrent ( <i>Note 3</i> )		10,975		19,889
Due to affiliates ( <i>Note 11</i> )		16,672		10,805
Operating lease liability – noncurrent ( <i>Note 8</i> )		6,239		8,052
Deferred revenue and refundable advance fees ( <i>Note 1</i> )				48,794
Total liabilities		208,222		270,908
				270,900
Commitments and contingencies (Note 13)				
Net assets:				
Net assets without donor restrictions		261,792		234,542
Net assets with donor restrictions	_	21,418		23,262
Total net assets		283,210		257,804
	\$	491,432	\$	528,712
C				

# Consolidated Statements of Operations (In Thousands)

	Ye	ear Ended 2024	Dec	2023 ember 31
Revenue:				
Net patient service revenue (Note 3)	\$	398,034	\$	360,516
Other revenue (Note 14)		38,806		66,534
Gain on sale of Center for Aging, Inc. (Note 1)		21,287		_
Investment return (Note 4)		2,428		5,834
Total revenue		460,555		432,884
Expenses:				
Salaries and wages		171,083		162,779
Employee benefits		42,731		39,795
Professional fees		14,855		10,203
Supplies and other expenses		199,396		213,090
Depreciation and amortization		21,570		22,953
Interest expense		4,217		3,293
Total expenses		453,852		452,113
Income (loss) from operations		6,703		(19,229)
Net change in unrealized gains and losses on investments (Note 4)		6,521		8,777
Excess (deficiency) of revenue over expenses		13,224		(10,452)
Net assets released from restrictions for capital purposes		3,787		3,699
Grant receipts for purchase of fixed assets		862		2,395
Net assets transfer to AHS Insurance Company, Ltd. (Note 9)		_		(1,903)
Net assets transfer from Atlantic Health System (Note 11)		9,377		15,054
Change in net assets without donor restrictions	\$	27,250	\$	8,793

# Consolidated Statements of Changes in Net Assets (In Thousands)

	Without Donor estrictions	et Assets With Donor estrictions	Total
Net assets at January 1, 2023	\$ 225,749	\$ 19,838 \$	245,587
Change in net assets without donor restrictions	8,793	_	8,793
Contributions, investment return and other	_	9,326	9,326
Net assets released from restrictions for operations Net assets released from restrictions	_	(2,203)	(2,203)
		(3,699)	(3,699)
for capital purposes	 		
Increase in net assets	 8,793	3,424	12,217
Net assets at December 31, 2023	234,542	23,262	257,804
Change in net assets without donor restrictions	27,250	_	27,250
Contributions, investment return and other Net assets released from restrictions	-	3,231	3,231
for operations	_	(1,288)	(1,288)
Net assets released from restrictions for capital purposes	_	(3,787)	(3,787)
Increase (decrease) in net assets	 27,250	(1,844)	25,406
Net assets at December 31, 2024	\$ 261,792	\$ 21,418 \$	283,210

## Consolidated Statements of Cash Flows (In Thousands)

	 Year Ended Dec 2024	ember 31 2023
Operating activities		
Increase in net assets	\$ 25,406 \$	12,217
Adjustments to reconcile increase in net assets to net cash (used in)		
provided by operating activities:		
Depreciation and amortization	21,570	22,953
Loss on disposal of fixed assets	-	120
Cash received under nonrefundable advance fee plans, net of refunds	981	4,113
Amortization of advance fees	(2,429)	(5,032)
Net realized gains and losses on investments, income in equity of joint		
ventures and change in unrealized gains and losses on investments	(3,358)	(10,893)
Net assets released, grant receipts and transfers for capital purposes	(14,026)	(19,245)
Gain on sale of Center for Aging, Inc., net of transaction costs	(20,680)	_
Changes in operating assets and liabilities:		
Patient accounts receivable, net	(874)	(2,174)
Other assets	597	(7,205)
Accounts payable and accrued expenses	(7,571)	3,279
Due to and from affiliates, net	7,457	5,036
Professional liability insurance and other liabilities	18	703
Estimated third-party payor settlements	 (8,928)	485
Net cash (used in) provided by operating activities	(1,837)	4,357
Investing activities		
Acquisitions of property, plant, and equipment, net	(36,002)	(50,018)
Short-term investments redeemed, net	15,178	6,589
Assets limited as to use redeemed, net	947	3,040
Proceeds from sale of Center for Aging, Inc., net of cash and investments		
transferred in sale	2,159	-
Distributions from investment in joint ventures, net	 1,259	1,418
Net cash used in investing activities	(16,459)	(38,971)
Financing activities		
Proceeds from issuance of long-term debt and line of credit advances	20,575	11,597
Payments of long-term debt and finance lease obligations	(19,721)	(48)
Net assets released, grant receipts and transfers for capital purposes	14,026	19,245
Cash received under refundable advance fee plans, net of refunds	 1,104	1,820
Net cash provided by financing activities	 15,984	32,614
Net decrease in cash and cash equivalents	(2,312)	(2,000)
Cash and cash equivalents at beginning of year	 25,110	27,110
Cash and cash equivalents at end of year	\$ 22,798 \$	25,110
Supplemental disclosure of cash flow information		
Assets acquired under finance lease obligations	\$ - \$	124

## Notes to Consolidated Financial Statements (In Thousands)

December 31, 2024

#### 1. Organization and Summary of Significant Accounting Policies

CentraState Healthcare System, Inc. (CSHS), located in Freehold, New Jersey, is a not-for-profit holding corporation. Atlantic Health System (Atlantic Health) and CentraState Holding Company, Inc. (CHC) hold membership interests in CSHS of 51% and 49%, respectively. As an affiliated member of Atlantic Health, CSHS and Atlantic Health share clinical expertise and best practices and coordinate patient care through a common technology platform.

The accompanying consolidated financial statements include the accounts of CSHS and its wholly owned or wholly controlled subsidiary corporations and not-for-profit entities. CSHS is the sole member of the following not-for-profit corporations: CentraState Medical Center, Inc. (the Medical Center); CentraState Healthcare Affiliates, Inc. d/b/a The Manor (The Manor); CentraState Assisted Living, Inc. d/b/a Monmouth Crossing (Monmouth Crossing); CentraState Healthcare Foundation, Inc. (the Foundation); and (through July 2, 2024) Center for Aging, Inc. d/b/a Applewood (Applewood). CSHS is the sole stockholder of CentraState Healthcare Services, Inc. (Healthcare Services), a for-profit corporation. Healthcare Services owns all the membership interests of CentraState Medical Arts Building LLC (MAB), a limited liability company. CentraState Cardiology, P.C., for-profit companies, are controlled subsidiaries of the Medical Center. In 2012, the System formed a captive insurance company domiciled in the Cayman Islands, CentraState Captive Insurance Company Ltd., SPC (the Cayman Captive), a wholly owned subsidiary of the Medical Center.

The reporting entity resulting from the consolidation of CSHS and its wholly owned or wholly controlled subsidiary corporations and not-for-profit entities is referred to herein as the "System." All significant intercompany balances and transactions have been eliminated in consolidation. Although these entities have been consolidated for financial statement presentation, there may be limitations on the use of an entity's funds by another member of the group resulting from the charitable nature of some of the entities or other factors.

Summary information related to the entities follows:

- The Medical Center is an acute care hospital whose mission is to provide the highest quality patient care for the central New Jersey community it serves. The Medical Center has 276 licensed beds.
- The Manor provides skilled nursing services for 123 elderly residential units including sub-acute, rehabilitation and I.V. therapy.

## Notes to Consolidated Financial Statements (continued) (In Thousands)

### **1.** Organization and Summary of Significant Accounting Policies (continued)

- Applewood is a continuing care retirement community consisting of 280 independent apartments, 20 cottages, 40 residential health care units, a 60-bed skilled nursing facility, and an 11 unit memory care. The System sold Applewood to an unrelated entity on July 2, 2024 (refer to further description below).
- Monmouth Crossing is an assisted living facility for the elderly consisting of 76 units with 16 units for memory care.
- The Foundation was established for the purpose of soliciting and investing funds for the benefit of the Medical Center and other not-for-profit entities of the System.
- Healthcare Services was established to provide various health care and related services to the community.
- MAB was organized to construct, develop, equip, and operate a medical arts building which offers state of the art ambulatory clinical programs.
- Medical Associates was established for the purpose of aligning physician practices with the System. Medical Associates became inactive in 2024.
- CentraState Specialists P.C. was formed for the purpose of providing specialized medical services to the community.
- CentraState Cardiology P.C. (Cardiology) was formed for the purpose of providing a medical practice in the specialty of cardiology that includes physician services and diagnostic testing. The System transferred Cardiology to Atlantic Medical Group, an affiliate of Atlantic Health, on January 28, 2025.
- The Cayman Captive was dissolved on January 20, 2025 as described further in this Note.

#### Sale of Center for Aging, Inc.

On July 2, 2024 (the Sale Date), after approval from the New Jersey Department of Community Affairs, the System completed the sale of certain assets, liabilities and operations of Applewood. The sale resulted in a gain of \$21,287 recognized in the accompanying 2024 consolidated statement of operations.

## Notes to Consolidated Financial Statements (continued) (In Thousands)

#### 1. Organization and Summary of Significant Accounting Policies (continued)

The following table summarizes the carrying values of Applewood's assets and liabilities which were included in the transaction as of the Sale Date:

Assets	
Cash and cash equivalents	\$ 2,200
Short-term investments	22,284
Assets limited as to use	4,159
Patient accounts receivable, net	898
Other assets	236
Property, plant, and equipment, net	49,160
Interest in CentraState Healthcare Foundation, Inc.	 1,140
Total assets	\$ 80,077
Liabilities and net assets	
Accounts payable and accrued expenses	\$ 1,937
Due to affiliates	5,434
Long-term debt	20,137
Other liabilities	140
Deferred revenue and refundable advance fees	 48,450
Total liabilities	76,098
Net assets:	
Net assets without donor restrictions	2,869
Net assets with donor restrictions	 1,110
Total net assets	 3,979
	\$ 80,077

Long-term debt and part of the balance due to affiliates were repaid and certain investments were retained by the System, pursuant to the terms of the asset purchase agreement. In August 2024, Applewood transferred \$23,480 of assets to the Medical Center and plans to transfer the remaining assets and liabilities to the Medical Center by January 2026. The System will transfer the net assets with donor restriction of approximately \$1,110 to the acquiring entity upon the approval by the Office of Attorney General of the State of New Jersey.

## Notes to Consolidated Financial Statements (continued) (In Thousands)

## 1. Organization and Summary of Significant Accounting Policies (continued)

## **COVID-19 and FEMA Funding**

The Medical Center has applied for reimbursement for qualifying expenses in relation to the COVID-19 pandemic under the Federal Emergency Management Agency (FEMA) Disaster Relief Fund. During 2024 and 2023, the Medical Center recognized \$1,112 and \$15,899 for FEMA reimbursement within other operating revenue, respectively. Additional costs have been submitted to FEMA and are pending final approval for reimbursement.

## **Significant Accounting Policies**

A summary of significant accounting policies follows:

## **Use of Estimates**

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets, such as the valuation of accounts receivable for services to patients, and liabilities, such as estimated settlements with third-party payors, and disclosures of contingent assets and liabilities at the date of the financial statements. Estimates also affect the amounts of revenue and expenses reported during the period. There is at least a reasonable possibility that certain estimates will change by material amounts in the near term. Actual results could differ from those estimates.

## **Cash and Cash Equivalents**

The System considers all highly liquid investments with a maturity of three months or less at date of purchase to be cash and cash equivalents, except for amounts reported within short-term investments and assets limited as to use as such holdings are within investment portfolios. The System does not hold any money market funds with significant liquidity restrictions that would require the funds to be excluded from cash equivalents. The System does not have any restricted cash and cash equivalents at December 31, 2024 and 2023.

## Notes to Consolidated Financial Statements (continued) (In Thousands)

## 1. Organization and Summary of Significant Accounting Policies (continued)

#### **Investments and Investment Return**

Investments in marketable securities are reported in the consolidated balance sheets at fair value based on quoted market prices. Investments that are readily marketable and which are not reported as assets limited as to use are considered short-term investments and are classified as current assets in the accompanying consolidated balance sheets. All investments in marketable securities are classified as trading securities.

All investment transactions are recorded on the dates such trades take place. The realized gain or loss resulting from these transactions is the difference between the proceeds received and the average historical cost of the assets sold. Interest income is recorded as earned. Dividends are recorded on the ex-dividend date. Investment return and net change in unrealized gains and losses on investments is included in the excess (deficiency) of revenue over expenses unless restricted by donor or law.

Investments in joint ventures, which have been entered into by Healthcare Services and the Medical Center, are accounted for using the equity method.

#### Assets Limited as to Use

Assets limited as to use include investments internally designated by the Board of Trustees and various external designations. Donor restricted assets limited as to use include assets held under split-interest agreements, such as charitable gift annuity agreements, under which the Foundation pays the designated beneficiaries a predetermined annual annuity amount.

## **Supplies**

Supplies are reported in other current assets in the accompanying consolidated balance sheets and are stated at the lower of cost or net realizable value. Supplies are used in the provision of patient care and are not held for sale.

## Notes to Consolidated Financial Statements (continued) (In Thousands)

#### 1. Organization and Summary of Significant Accounting Policies (continued)

#### **Pledges Receivable**

Through the fundraising activities of the Foundation, the System is the recipient of pledges which are recorded at the time the unconditional promise to give is made, at estimated net realizable value. The net realizable value of the outstanding pledges of approximately \$322 and \$551 at December 31, 2024 and 2023, respectively, is reported within other current assets in the accompanying consolidated balance sheets. The amount of the allowance for uncollectible pledges is based on management's assessment of historical and expected collections and other collection indicators. Additions to the allowance for uncollectible pledges result from the provision for uncollectible pledges. Pledges are discounted to net present value based on the scheduled payment terms of each pledge using a discount rate of 2.0% for each of the years ended December 31, 2024 and 2023.

#### **Property, Plant, and Equipment**

Property, plant, and equipment purchased are stated at cost, except for donated equipment which is recorded at fair value at the date of the gift. Property, plant, and equipment existing at the time of the initial affiliation with Atlantic Health were recorded at fair value as of that date based upon an independent valuation. The System provides for depreciation on a straight-line basis over the estimated useful lives of such assets or the lease term, whichever is shorter. Amortization of equipment obtained through finance lease obligations is included in depreciation and amortization expense. The carrying amounts of assets and the related accumulated depreciation are removed from the accounts when such assets are disposed of and any resulting gain or loss is included in operations.

#### **Marketing Costs**

Marketing and advertising costs incurred by the System are expensed as incurred and amounted to approximately \$1,996 and \$2,374 for the years ended December 31, 2024 and 2023, respectively. Such costs are included in supplies and other expenses on the accompanying consolidated statements of operations.

## Notes to Consolidated Financial Statements (continued) (In Thousands)

## 1. Organization and Summary of Significant Accounting Policies (continued)

#### **Professional Liability Insurance**

Prior to December 31, 2023, the System was insured for professional liability insurance through its wholly owned captive insurance company. Premiums paid by the System to the Cayman Captive insurance company were determined annually based on claims-made coverage for health care professional liability and on an occurrence basis for general liability. Premiums were actuarially determined based on the actual and estimated experience of the System, subject to retrospective adjustment in future periods. Insurance premium revenue and expenses are eliminated in consolidation.

Effective December 31, 2023, as part of the affiliation with Atlantic Health, the assets and liabilities of the Cayman Captive were novated to AHS Insurance Company, Ltd. (AHSIC). Subsequent to the novation, claims insured through AHSIC are reported as a liability by the System with a corresponding reinsurance receivable on the accompanying consolidated balance sheets (see Note 9). The Cayman Captive was dissolved in January 2025 upon conclusion of the above novation process.

## **Retirement Community Obligations**

Prior to the Sale Date, residents of Applewood were required to pay a fee to obtain a nontransferable right to lifetime occupancy at Applewood. The residents selected one of four continuing care contract options: Traditional Plan, 90% Refund Plan, 50% Refund Plan, or Fee for Service Plan. The Traditional Plan specified that advance fees were refundable to the resident on a declining balance basis amortized at 2% per month after residency was established. These advance fees were recorded as refundable advance fees upon receipt and amortized to income as performance obligations were satisfied using the straight-line method over the estimated remaining life expectancy of the resident, adjusted annually at the beginning of each year. The Fee for Service Plan required residents to pay for health care related services on a fee for service basis.

Under the 90% and 50% Refund Plans, 10% and 50%, respectively, of the advance fees were nonrefundable. Nonrefundable fees were recorded as deferred revenue upon receipt and amortized to income as performance obligations were satisfied using the straight-line method over the estimated remaining life expectancy of the resident, adjusted annually. The refundable portion of these plans were refundable solely from the resale proceeds upon re-occupancy of the resident's unit, reduced by fees earned through the resident's use of Applewood's health center. The refundable portion of fees received was recorded as deferred revenue upon receipt.

## Notes to Consolidated Financial Statements (continued) (In Thousands)

### **1.** Organization and Summary of Significant Accounting Policies (continued)

Applewood annually calculated the present value (using a discount rate of 5% in 2023) of the estimated net cost of future services and the use of facilities to be provided to current residents and compared that amount with the balance of deferred revenue from advance fees and refundable advance fees. No additional liability to provide future services and use of facilities was required to be recorded at December 31, 2023.

The retirement community obligations were transferred effective as of the Sale Date to the acquiring entity.

#### **Classification of Net Assets**

The System separately accounts for and reports net assets without donor restrictions and net assets with donor restrictions. Net assets without donor restrictions are not externally restricted for identified purposes by donors. Net assets without donor restrictions include resources that the governing board may use for any designated purpose and resources whose use is limited by agreement between the System and an outside party other than a donor. Net assets with donor restrictions are those whose use is limited by the donor. When a temporary donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, restricted net assets are reclassified to net assets without donor restrictions and reported as net assets released from restriction.

On a stand-alone financial reporting basis, the Medical Center, Applewood (prior to the Sale Date), Monmouth Crossing and The Manor recognize the balance and changes in their accumulated interest in the net assets of the Foundation. Amounts reported on a stand-alone basis are eliminated in consolidation.

Net assets with donor restrictions that are perpetual in nature represent assets held in perpetuity by the Foundation on behalf of the Medical Center and Applewood (prior to the Sale Date), the proceeds of which are available to support Medical Center and Applewood programs and services. The System follows the requirements of the New Jersey Uniform Prudent Management of Institutional Funds Act (NJ UPMIFA) as they relate to its permanently restricted contributions and net assets. The System's investment and spending policies for endowment assets attempt to provide a predictable stream of funding to the endowment funds.

The System recognizes governmental grants where commensurate value is not exchanged as contributions when conditions and restrictions are satisfied and reports such amounts within other revenue (see Note 14).

## Notes to Consolidated Financial Statements (continued) (In Thousands)

#### 1. Organization and Summary of Significant Accounting Policies (continued)

#### **Functional Expenses**

The System provides general health care and other services. Expenses related to providing these services are as follows:

	Hospital Patient Care		ost-Acute and ontinuing Care	P	ıbulatory hysician ractices	R	esearch		undation and ndraising		nagement and ninistrative	Total		
Year ended December 31, 2024														
Salaries and wages	\$ 148,262	\$	17,559	\$	_	\$	240	\$	1,065	\$	3,957	\$ 171,083		
Employee benefits	35,721		5,537		_		67		298		1,108	42,731		
Professional fees	14,855		-		-		-		-		_	14,855		
Supplies and other expenses	175,953		12,237		7,357		28		1,338		2,483	199,396		
Depreciation and amortization	18,254		2,687		-		-		43		586	21,570		
Interest expense	3,508		452		-		-		-		257	4,217		
Total	\$ 396,553	\$	38,472	\$	7,357	\$	335	\$	2,744	\$	8,391	\$ 453,852		
		Continuing		and Am Continuing Pl										
	Hospital Patient Care		and ontinuing	P	ıbulatory hysician ractices	R	esearch		undation and ndraising		nagement and inistrative	Total		
Year ended December 31, 2023	 Patient		and ontinuing	P	hysician	R	esearch		and		and	Total		
Year ended December 31, 2023 Salaries and wages	 Patient		and ontinuing	P	hysician	<u>R</u>	esearch 143		and		and	\$ <b>Total</b> 162,779		
,	 Patient Care	Co	and ontinuing Care	P P	hysician			Fu	and ndraising	Adn	and ninistrative	\$ 		
Salaries and wages	 Patient Care 134,040	Co	and ontinuing Care 22,600	P P	hysician		143	Fu	and ndraising 1,086	Adn	and ninistrative 4,910	\$ 162,779		
Salaries and wages Employee benefits	 Patient Care 134,040 31,723	Co	and ontinuing Care 22,600	P P	hysician		143	Fu	and ndraising 1,086	Adn	and ninistrative 4,910	\$ 162,779 39,795		
Salaries and wages Employee benefits Professional fees	 Patient Care 134,040 31,723 10,203	Co	and ontinuing Care 22,600 6,354 –	P P	hysician ractices – – –		143 40	Fu	<b>and</b> ndraising 1,086 304 -	Adn	and <u>hinistrative</u> 4,910 1,374	\$ 162,779 39,795 10,203		
Salaries and wages Employee benefits Professional fees Supplies and other expenses	 Patient Care 134,040 31,723 10,203 181,576	Co	and ontinuing Care 22,600 6,354 - 19,347	P P	hysician ractices		143 40	Fu	and ndraising 1,086 304 - 1,480	Adn	and <u>hinistrative</u> 4,910 1,374 	\$ 162,779 39,795 10,203 213,090		

The accompanying consolidated financial statements report expense categories that are attributable to more than one health care service or support function. Costs not directly attributable to a function are allocated on a functional basis using internal records and estimates.

#### **Performance Indicator**

The accompanying consolidated statements of operations include excess (deficiency) of revenue over expenses as the performance indicator. Changes in net assets without donor restrictions which are excluded from the performance indicator include net assets released from restrictions and grant receipts for capital purposes and permanent transfers of assets from related entities.

## Notes to Consolidated Financial Statements (continued) (In Thousands)

#### **1.** Organization and Summary of Significant Accounting Policies (continued)

Transactions deemed by management to be ongoing, major or central to the provision of health care services are reported within income (loss) from operations. Peripheral or incidental transactions are excluded from income (loss) from operations.

#### **Income Taxes**

The entities comprising the System, with the exception of Healthcare Services, MAB, Medical Associates, CentraState Specialists, P.C., CentraState Cardiology, P.C. and the Cayman Captive, are not-for-profit organizations as described in Section 501(c)(3) of the Internal Revenue Code (the Code) and are exempt from federal income taxes on related income pursuant to Section 501(a) of the Code. The not-for-profit organizations are also exempt from state and local income taxes.

Healthcare Services, Medical Associates, CentraState Specialists, P.C. and CentraState Cardiology, P.C. are for-profit entities; however, income tax expense and income taxes paid in 2024 and 2023 were not significant. MAB is a single member limited liability company that is not recognized as a separate entity for tax purposes. For income tax purposes, the activities of MAB are treated as a division within its parent, Healthcare Services. Prior to dissolution, the Cayman Captive was generally not subject to income taxes under the Cayman Islands tax concessions laws.

The System accounts for deferred tax assets and liabilities based on the differences between the financial reporting and tax basis of assets and liabilities using enacted tax rates and laws that will be in effect when differences are expected to reverse.

As of and for the years ended December 31, 2024 and 2023, the System has made reasonable estimates of the provision for income taxes and deferred tax balances based on accounting guidance included in Accounting Standards Codification 740, *Income Taxes*. The System will continue to refine its calculations in future periods as additional regulations and guidance are issued by the Internal Revenue Service (IRS).

#### Reclassifications

Reclassifications have been made to certain 2023 disclosures in order to conform to the current year presentation.

## Notes to Consolidated Financial Statements (continued) (In Thousands)

## 2. Charity Care

The System provides care to patients who meet certain criteria defined by the New Jersey Department of Health (DOH) without charge or at amounts less than established rates. The Medical Center's records identify and monitor the level of charity care it provides and include the amount of charges foregone for services and supplies furnished. The current DOH charity care guidelines require participation and cooperation of the patient in order to be identified as a charity care account. Management believes that the present charity care guidelines understate the System's reported charity care amounts because of the difficulties involved with obtaining patient cooperation. The cost of charity care includes the direct and indirect cost of providing charity care services. The cost is estimated by utilizing a ratio of cost to standard charges applied to the standard uncompensated charges associated with providing charity care. The cost of charity care provided during the years ended December 31, 2024 and 2023 was approximately \$5,196 and \$4,058, respectively. The System receives partial reimbursement for the charity care it provides (see Note 3).

## 3. Net Patient Service Revenue

Net patient service revenue is reported at the amount that reflects the consideration to which the System expects to be entitled in exchange for providing patient care. These amounts are due from patients, third-party payors (including health insurers and government programs), and others and includes provisions for variable consideration (reductions to revenue) in determining a transaction price.

The System uses a portfolio approach as a practical expedient to account for categories of patient contracts as collective groups rather than recognizing revenue on an individual contract basis. The portfolios consist of major payor classes for inpatient revenue and major payor classes and types of services provided for outpatient revenue. Based on historical collection trends and other analyses, the System believes that revenue recognized by utilizing the portfolio approach approximates the revenue that would have been recognized if an individual contract approach were used.

The System's initial estimate of the transaction price for services provided to patients subject to revenue recognition is determined by reducing the total standard charges related to the patient services provided by various elements of variable consideration, including contractual adjustments, discounts, implicit price concessions, and other reductions to the System's standard charges.

## Notes to Consolidated Financial Statements (continued) (In Thousands)

#### 3. Net Patient Service Revenue (continued)

The System determines the transaction price associated with services provided to patients who have third-party payor coverage on the basis of contractual or formula-driven rates for the services rendered (see description of third-party payor payment programs below). The estimates for contractual allowances and discounts are based on contractual agreements, the System's discount policies and historical experience. For uninsured and under-insured patients who do not qualify for charity care, the System determines the transaction price associated with services rendered on the basis of charges reduced by implicit price concessions. Implicit price concessions included in the estimate of the transaction price are based on the System's historical collection experience for applicable patient portfolios.

Generally, the System bills patients and third-party payors several days after the services are performed and/or the patient is discharged. Net patient service revenue is recognized as performance obligations are satisfied. Performance obligations are determined based on the nature of the services provided by the System. Net patient service revenue for performance obligations satisfied over time is recognized based on actual charges incurred in relation to total charges. The System believes that this method provides a reasonable depiction of the transfer of services over the term of the performance obligations satisfied over time relate to patients receiving inpatient acute care services or patients receiving services in the System's outpatient, ambulatory or long-term care centers. The System measures the performance obligation from admission into the System or the commencement of an outpatient service to the point when it is no longer required to provide services to that patient, which is generally at the time of discharge or the completion of the outpatient visit.

Substantially all of its performance obligations relate to contracts with a duration of less than one year. The unsatisfied or partially unsatisfied performance obligations primarily relate to inpatient acute care services at the end of the reporting period for patients who remain admitted at that time (in-house patients). The performance obligations for in-house patients are generally completed when the patients are discharged, which for the majority of the System's in-house patients occurs within days or weeks after the end of the reporting period.

Subsequent changes to the estimate of the transaction price (determined on a portfolio basis when applicable) are generally recorded as adjustments to patient service revenue in the period of the change.

## Notes to Consolidated Financial Statements (continued) (In Thousands)

#### 3. Net Patient Service Revenue (continued)

Changes in the System's estimates of implicit price concessions, discounts, contractual adjustments or other changes to expected payments for performance obligations satisfied in prior years were not significant. Portfolio collection estimates are updated based on collection trends. Subsequent changes that are determined to be the result of an adverse change in the patient's ability to pay based on current or future estimated credit losses (determined on a portfolio basis when applicable) are recorded as bad debt expense. Bad debt expense for the years ended December 31, 2024 and 2023 was not significant.

The System has determined that the nature, amount, timing and uncertainty of revenue and cash flows are affected by the following factors: payors, lines of business and timing of when revenue is recognized. Tables providing details of these factors are presented below.

Net patient service revenue disaggregated by payor are as follows:

	Ye	ear Ended D 2024	ecember 31 2023
Medicare	\$	160,870 \$	143,847
Medicaid		38,174	30,980
Commercial insurance <sup>(1)</sup>		178,311	165,833
Self-pay patients		8,489	7,526
Other third-party payors		12,190	12,330
	\$	398,034 \$	360,516

<sup>(1)</sup>Amounts are inclusive of Medicare and Medicaid program activity administered by managed care organizations.

Deductibles, copayments and coinsurance under third-party payment programs which are the patient's responsibility are included within the third-party payors amounts or self-pay category above.

## Notes to Consolidated Financial Statements (continued) (In Thousands)

#### 3. Net Patient Service Revenue (continued)

Net patient service revenue, disaggregated by lines of service, is as follows:

	Year Ended December 31						
		2024		2023			
Hospital	\$	381,351	\$	344,794			
Post-acute		12,032		10,968			
Physician practices		4,651		4,754			
	\$	398,034	\$	360,516			

Patient accounts receivable, net is comprised of the following components:

	December 31						
		2024		2023			
Patient receivables	\$	35,884	\$	35,740			
Contract assets		2,696		2,864			
	\$	38,580	\$	38,604			

Contract assets are related to in-house patients who were provided services during the reporting period but were not discharged as of the reporting date and for which the System may not have the right to bill.

## Notes to Consolidated Financial Statements (continued) (In Thousands)

#### 3. Net Patient Service Revenue (continued)

#### **Third-Party Payment Programs**

The System has agreements with third-party payors that provide for payment for services rendered at amounts different from its established rates. A summary of the payment arrangements with major third-party payors follows:

*Medicare:* The System is paid for most Medicare inpatient and outpatient services under the national prospective payment system and other methodologies of the Medicare program for certain other services. Federal regulations provide for certain adjustments to current and prior years' payment rates, based on industry-wide and hospital-specific data. Medicare cost reports of the System have been audited and settled for years through 2020 at December 31, 2024.

*Medicaid:* Inpatient acute care services rendered to Medicaid program beneficiaries are paid at prospectively determined rates per discharge. Outpatient services rendered to Medicaid program beneficiaries are reimbursed under cost-based and fee schedule methodologies. The System is reimbursed for outpatient services at a tentative rate, with final settlement determined after submission of annual cost reports and audits thereof by the Medicaid fiscal intermediary. The Medicaid cost reports of the System for years through 2021 have been audited and settled.

*Other third-party payors:* The System also has entered into payment agreements with certain commercial insurance carriers and health maintenance organizations. The basis for payment to the System under these agreements includes prospectively determined rates per discharge or days of hospitalization and discounts from established charges.

Medicare and Medicaid cost reports, which serve as the basis for final settlement with these programs, have been audited by the applicable fiscal intermediary and settled through the years noted above, although revisions to final settlements or other retroactive changes could be made. Other years and various issues remain open for audit and settlements.

Settlements with third-party payors for cost report filings and retroactive adjustments due to ongoing and future audits, reviews or investigations are considered variable consideration and are included in the determination of the estimated transaction price for providing patient care. These settlements are estimated based on the terms of the payment agreement with the payor, correspondence from the payor and the System's historical settlement activity (for example, cost

## Notes to Consolidated Financial Statements (continued) (In Thousands)

#### 3. Net Patient Service Revenue (continued)

report final settlements or repayments related to recovery audits), including an assessment to ensure that it is probable that a significant reversal in the amount of cumulative revenue recognized will not occur when the uncertainty associated with the retroactive adjustment is subsequently resolved. Such estimates are determined through either a probability-weighted estimate or an estimate of the most likely amount, depending on the circumstances related to a given estimated settlement item. Estimated settlements are adjusted in future periods as adjustments become known (that is, new information becomes available), or as years are settled or are no longer subject to such audits, reviews, and investigations. For the years ended December 31, 2024 and 2023, the net effect of the System's revisions to prior year Medicare and Medicaid settlement estimates resulted in net patient service revenue increasing by approximately \$8,785 and \$3,761, respectively.

The System has appealed certain items in audited cost reports. The outcome of these appeals is uncertain and, therefore, potential revenue associated with these appeals is not included within the accompanying consolidated statements of operations.

There are various proposals at the federal and state levels that could, among other things, significantly reduce payment rates or modify payment methods. The ultimate outcome of these proposals and other market changes, including the potential effects of or changes to health care reform that has been or will be enacted by the federal government, cannot presently be determined. Future changes in the Medicare and Medicaid programs and any reduction of funding could have an adverse impact on the System.

Laws and regulations governing the Medicare and Medicaid programs are extremely complex and subject to interpretation. As a result, there is at least a reasonable possibility that recorded estimates will change by a material amount in the near term. The System believes that it is in compliance with all applicable laws and regulations and is not aware of any pending or threatened investigations involving allegations of potential wrongdoing that could have a material adverse effect on its financial statements. Noncompliance with such laws and regulations could result in fines, penalties and exclusion from such programs.

Commencing July 1, 2023, the System receives additional Medicaid funding under the New Jersey County Option Hospital Fee Program. This program is administered through the New Jersey Department of Human Services-Division of Medical Assistance and Health Services (DMAHS). The program requires that participating hospitals pay quarterly assessed fees based on estimated non-Medicare discharge data within the county, and such payments are then pooled with federal

## Notes to Consolidated Financial Statements (continued) (In Thousands)

#### 3. Net Patient Service Revenue (continued)

Medicaid matching funds and redistributed to the participating hospitals as State Directed Payments. The State Directed Payments are subject to annual settlement based on actual Medicaid utilization data and other factors. The program resulted in fees paid by the System of \$7,040 and \$3,609 in 2024 and 2023, respectively (included in supplies and other expenses). The System recognized \$13,110 and \$6,263 in net patient service revenue for this program in 2024 and 2023, respectively.

The New Jersey Health Care Subsidy Fund and other state programs have been established for various purposes including the distribution of charity care payments to hospitals statewide. Commencing July 1, 2024, DMAHS redirected the Charity Care Subsidy towards a new Medicaid Outpatient Hospital Supplemental State-Directed Payment Program. Under the new program, hospitals receive quarterly payments through Medicaid managed care organizations. The System received and recorded \$473 in net patient service revenue under this program in 2024.

The following subsidy and other amounts have been included in net patient service revenue:

	ar Ended 2024	Dec	cember 31 2023
Charity care Medicaid State-Directed Payment Program Special subsidy Medicaid GME	\$ 363 473 1,853 359	\$	633  1,409 375
	\$ 3,048	\$	2,417

## Notes to Consolidated Financial Statements (continued) (In Thousands)

## 4. Investments and Assets Limited as to Use

#### **Short-Term Investments**

Short-term investments consist of the following:

	December 31			
		2024		2023
United States government obligations	\$	12,315	\$	12,698
Corporate bonds		14,055		12,656
Mutual funds		112,442		104,473
		138,812		129,827
Interest receivable		352		232
	\$	139,164	\$	130,059

### Assets Limited as to Use

Assets limited as to use consist of the following:

	December 31			
		2024	2023	
Cash and cash equivalents	\$	6,980 \$	6,951	
United States government obligations		414	750	
Corporate bonds		772	1,225	
Mutual funds		11,445	15,791	
Total assets limited as to use		19,611	24,717	
Less current portion		860	737	
Assets limited as to use – noncurrent	\$	18,751 \$	23,980	

## Notes to Consolidated Financial Statements (continued) (In Thousands)

#### 4. Investments and Assets Limited as to Use (continued)

Assets limited as to use are maintained for the following purposes:

	December 31		
		2024	2023
As directed by the Board of Trustees	\$	4,856	\$ 4,856
Estimated advance fee refunds		_	3,865
Supplemental executive retirement plan		1,130	924
By donor restrictions		13,625	15,072
	\$	19,611	\$ 24,717

#### **Investment Return**

Investment return included in the excess (deficiency) of revenue over expenses without donor restrictions consists of the following:

	Year Ended December 31			
		2024	2023	
Revenue from operations:				
Interest and dividends	\$	5,591 \$	3,718	
Net realized gains and losses		(4,258)	804	
Net gain in equity of joint venture investments		1,095	1,312	
		2,428	5,834	
Nonoperating income:				
Net change in unrealized gains and losses on				
investments		6,521	8,777	
Total investment return – without donor restrictions	\$	<b>8,949</b> \$	14,611	

## Notes to Consolidated Financial Statements (continued) (In Thousands)

#### 5. Noncurrent Assets

Noncurrent assets consist of the following:

	December 31			· 31
		2024		2023
Investments in joint ventures	\$	2,792	\$	2,956
Professional liabilities insurance recoveries receivable		4,288		4,269
Other noncurrent assets		1,770		1,846
	\$	8,850	\$	9.071

Included in investments in joint ventures under which Healthcare Services holds 50% ownership interests are the following companies: CentraState Fitness & Wellness Center LLC (F&W) and Freehold Venture Associates, LLC. F&W leases space from the Medical Center. The remaining term of the lease with the Medical Center is five years, with the option to renew for three terms of ten years each (annual rental payments of approximately \$500 per year). Distributions received from these joint ventures for 2024 and 2023 totaled approximately \$1,259 and \$1,463, respectively. The System paid \$45 for equity contributions in 2023 (none in 2024).

#### 6. Property, Plant, and Equipment

Property, plant, and equipment consist of the following:

	December 31			31
		2024		2023
Land	\$	24,369	\$	30,277
Land improvements		7,477		7,835
Buildings and fixtures		122,881		159,303
Equipment		86,007		84,451
		240,734		281,866
Less accumulated depreciation and amortization		54,812		42,439
Add construction in progress (estimated cost to complete				
approximately \$24,614)		57,804		39,056
	\$	243,726	\$	278,483

## Notes to Consolidated Financial Statements (continued) (In Thousands)

#### 7. Long-Term Debt and Finance Lease Obligations

Long-term debt and finance lease obligations consist of the following:

		er 31	
		2024	2023
Secured loan with AHS Hospital Corp. <sup>(a)</sup>	\$	83,816 \$	103,497
Engineered Solutions Program Loan <sup>(b)</sup>		2,662	2,543
Line of credit with AHS Hospital Corp. <sup>(c)</sup>		30,000	10,000
Finance lease obligations with rates of 6.5%, collateralized by		-	
leased equipment and facilities maturing through 2026		84	124
		116,562	116,164
Less:		,	
Current maturities		308	294
Long-term debt and finance lease obligations,			
excluding current maturities	\$	116,254 \$	115,870

- (a) On August 17, 2022, the Medical Center, Applewood, and MAB, entered into a secured loan agreement with AHS Hospital Corp. (AHSHC), an affiliate of Atlantic Health, for approximately \$103,497. The loan with AHSHC matures on May 31, 2037, with an annual interest rate of 3.21% due monthly. The Medical Center, Applewood and MAB formed an obligated debtor group for the purpose of the AHSHC loan and related compliance with the loan's requirements. The loan is collateralized by a pledge and security interest in all gross receipts of the Medical Center, Applewood (prior to the Sale Date) and MAB. Applewood's outstanding balance on the loan, \$19,681, was paid in full on the Sale Date using proceeds from the transaction.
- <sup>(b)</sup> In 2022, the Medical Center and then in 2023 Applewood, Manor, and Monmouth Crossing participated in the Engineered Solutions Program through a utility company using grant funding (not subject to repayment) combined with a loan to be repaid over 60 months upon the completion of an energy conservation project. Through December 31, 2024, the System has received approximately \$7,791 under the program, with \$3,118 repayable as long-term debt. Applewood's portion of the long-term debt totaled \$456 and was transferred to the purchaser on the Sale Date.
- (c) On September 1, 2023, the Medical Center entered in a \$30,000 line of credit with AHSHC. Interest on the line is calculated using a 5% annual interest rate. The line of credit matures on August 31, 2028.

## Notes to Consolidated Financial Statements (continued) (In Thousands)

#### 7. Long-Term Debt and Finance Lease Obligations (continued)

Principal payments on long-term debt and finance lease obligations for the next five years and thereafter are as follows:

	Lo	ong-Term	Obligations Ider Finance	è	
		Debt	Leases		Total
2025	\$	266	\$ 42	\$	308
2026		533	32		565
2027		533	10		543
2028		30,532	_		30,532
2029		532	_		532
Thereafter		84,082	_		84,082
	\$	116,478	\$ 84	\$	116,562

At December 31, 2024 and 2023, the entities comprising the System were in compliance with the financial covenants of their respective loan agreements.

Interest paid under all borrowings for years ended December 31, 2024 and 2023 aggregated approximately \$4,249 and \$3,447, respectively, net of capitalized interest.

#### 8. Leases

The System leases certain property and equipment under finance and operating leases. Leases are classified as either finance or operating leases based on the underlying terms of the agreement and certain criteria, such as the term of the lease relative to the useful life of the asset and the total lease payments to be made as compared to the fair value of the asset, amongst other criteria. Finance leases result in an accounting treatment similar to an acquisition of the asset.

For leases with initial terms greater than a year, the System records the related right-of-use assets and liabilities at the present value of the lease payments to be paid over the life of the related lease. The System's leases may include variable lease payments and renewal options. Variable lease payments are excluded from the amounts used to determine the right-of-use assets and liabilities unless the variable lease payments depend on an index or rate or are in substance fixed payments.

## Notes to Consolidated Financial Statements (continued) (In Thousands)

#### 8. Leases (continued)

Lease payments related to periods subject to renewal options are also excluded from the amounts used to determine the right-of-use assets and liabilities unless the System is reasonably certain to exercise the option to extend the lease. The present value of lease payments is calculated by utilizing the discount rate stated in the lease, when readily determinable. For leases for which this rate is not readily available, the System has elected to use a risk-free discount rate determined using a period comparable with that of the lease term. The System does not account for non-lease components together with the related lease components when determining the right-of-use assets and liabilities, except for medical equipment.

The System does not record leases with an initial term of less than a year as right-of-use assets and liabilities.

The following schedules summarize information related to the lease assets and liabilities as of and for the years ended December 31:

	Year Ended December 31 2024 2023			
Lease cost:				
Finance lease cost:				
Amortization of right-of-use asset	\$	39	\$	25
Interest on lease liabilities		1		1
Operating lease cost		2,215		2,127
Total lease cost	\$	2,255	\$	2,153
Right-of-use assets and liabilities:				
Right-of-use assets – finance leases	\$	62	\$	124
Lease liability – finance leases		84		124
Right-of-use assets – operating leases		7,958		9,557
Lease liability – operating leases		7,958		9,557

## Notes to Consolidated Financial Statements (continued) (In Thousands)

## 8. Leases (continued)

	Year Ended D 2024	ecember 31 2023
Other information:		
Cash paid for amounts included in the measurement of		
lease liabilities:		
Operating cash flows from finance leases	\$ 1 5	5 1
Operating cash flows from operating leases	2,225	2,127
Financing cash flows from finance leases	40	48
Right-of-use assets obtained in exchange for new finance lease liabilities Right-of-use assets obtained in exchange for new operating lease liabilities	- 4,638	124
Changes in right-of-use assets and liabilities resulting from lease modifications – operating leases	(4,442)	_
Weighted-average remaining lease term – finance leases Weighted-average remaining lease term – operating leases Weighted-average discount rate – finance leases Weighted-average discount rate – operating leases	24 months 6.6 years 6.5% 4.32%	36 months 8.1 years 6.5% 4.38%

For finance leases, right-of-use assets are recorded in property, plant and equipment and lease liabilities are recorded in long-term debt and finance lease obligations in the accompanying consolidated balance sheets. For operating leases, right-of-use assets are recorded in operating lease assets and lease liabilities are recorded in operating lease liability, current and noncurrent, in the accompanying consolidated balance sheets.

## Notes to Consolidated Financial Statements (continued) (In Thousands)

#### 8. Leases (continued)

The following table reconciles the undiscounted lease payments to the lease liabilities recorded on the accompanying consolidated balance sheet at December 31, 2024:

	Finance Leases		)perating Leases
2025	\$ 46	\$	2,557
2026	34		2,050
2027	11		1,258
2028	-		496
2029	_		505
Thereafter	-		2,391
Total lease payments	 91		9,257
Less imputed interest	7		1,299
Total lease obligation	 84		7,958
Less current portion	42		1,719
Long-term portion	\$ 42	\$	6,239

#### 9. Professional Liability Insurance and Other Noncurrent Liabilities

As described in Note 1, effective December 31, 2023, all of the assets and liabilities of the Cayman Captive were transferred to AHS Insurance Company, Ltd. (AHSIC) through a novation. As part of the change in the structure of the program, the System transferred \$1,903 in 2023 to AHSIC to address future claim development and unlimited tail coverage. Effective December 31, 2023, the System is not obligated for claims incurred but not reported under this program. A liability of \$1,090 due from the System to AHSIC was initially recorded at December 31, 2023 to settle the then-current estimated tail liability. Effective January 1, 2024, the System has similar coverage levels as its prior professional and general liability program through AHSIC and unlimited tail liability coverage. Claims insured through AHSIC totaled approximately \$4,288 and \$4,269 at December 31, 2024 and 2023, respectively. For the year ended 2024, the System paid \$1,394 in insurance premiums to AHSIC.

As of January 1, 2012, the System is self-insured for workers' compensation claims through a large deductible, paid loss retro program with a commercial carrier. Prior to January 1, 2012, workers' compensation claims were commercially insured on a fixed cost basis.

## Notes to Consolidated Financial Statements (continued) (In Thousands)

#### 9. Professional Liability Insurance and Other Noncurrent Liabilities (continued)

Professional liability insurance and other noncurrent liabilities consist of the following:

	December 31		
		2024	2023
Insurance claims liability	\$	4,288 \$	4,269
Workers' compensation		910	1,011
Other		1,130	969
	\$	6,328 \$	6,249

#### **10. Employee Retirement Plans**

The System sponsors a defined contribution retirement plan (the 401(a) Plan) covering all eligible employees. Employees are eligible to participate in the 401(a) Plan following the completion of one year of service, as defined in the 401(a) Plan document, and the attainment of age 21. The System contributes a percentage of eligible salaries on an annual basis (5% for 2024 and 2023), net of forfeitures. Eligible salaries exclude certain items such as overtime. Additionally, the System sponsors another defined contribution plan (the 403(b) Plan) which prior to 2004 included only employee contributions. Beginning in 2004, the System contributes amounts to the 403(b) Plan based on a match of employee contributions. Expense under both retirement plans aggregated approximately \$6,500 and \$6,700 for the years ended December 31, 2024 and 2023, respectively.

The System also sponsors a defined contribution supplemental executive retirement plan (SERP) for certain employees and a 457(b) eligible deferred compensation plan available to all executives. Total expense under the SERP plan was approximately \$251 and \$530 for the years ended December 31, 2024 and 2023, respectively.

## Notes to Consolidated Financial Statements (continued) (In Thousands)

#### **11. Related-Party Transactions**

The entities comprising the System provide various inter-entity services to their affiliated entities and the CSHS parent company. The services consist of certain financial planning, information systems and telecommunications, lab services, and human resource services. Charges for such services are based on the approximate cost to provide the services and are allocated between the entities based on an agreed-upon method which reflects the approximate level of usage by each entity. Such inter-entity charges and all intercompany balances between the entities comprising the System eliminate in consolidation.

Refer to Notes 7 and 9 for disclosures regarding long-term debt with AHSHC and the insurance program with AHSIC. Additionally, Atlantic Health provides certain services to the System for information systems, printing services, legal services, bio-medical services, human resource services, laboratory services, insurance, and risk management services. Charges for such services are based on the approximate cost to provide the services and totaled approximately \$6,418 and \$5,138 for the years ended December 31, 2024 and 2023, respectively. At December 31, 2024 and 2023, the net balance due to Atlantic Health totaled approximately \$15,573 and \$8,116, respectively. During 2024 and 2023, Atlantic Health transferred \$9,377 and \$15,054, respectively, to the System for certain capital costs related to strategic initiatives resulting from the affiliation.

## 12. Concentrations of Credit Risk

At December 31, 2024 and 2023, the System has its cash, including amounts classified within short-term investments, assets limited as to use and other noncurrent assets, deposited in several financial institutions. Investments in money market funds are not guaranteed by the United States government. Cash held in certain interest-bearing accounts is not fully insured. Exposure to any individual financial institution does not exceed 60% of the System's total cash balance. Management considers the credit risk related to these deposits to be minimal.

#### Notes to Consolidated Financial Statements (continued) (In Thousands)

#### 12. Concentrations of Credit Risk (continued)

The System's health care providing entities grant credit without collateral to their patients, most of whom are local residents and are insured under third-party payor agreements. Concentrations of gross accounts receivable from patients and third-party payors were as follows:

	Decem	ber 31
	2024	2023
Medicare	46%	51%
Medicaid	9	7
Managed care – insurance companies	33	31
Other third-party payors	4	4
Patients	8	7
	100%	100%

#### 13. Commitments and Contingencies

Various lawsuits and claims arising in the normal course of operations are pending or are on appeal against the System. Such lawsuits and claims are either specifically covered by insurance, included in estimated liabilities for self-insured retention levels, or are not material. While the outcome of these lawsuits cannot be determined at this time, management believes that any loss which may arise from the System's actions will not have a material adverse effect on the System's consolidated financial position or results of operations.

#### Notes to Consolidated Financial Statements (continued) (In Thousands)

#### 14. Other Revenue

Other revenue consists of the following:

	Year Ended December 31								
		2024		2023					
Residential services revenue, including amortization									
income of approximately \$2,429 and \$5,032 in 2024									
and 2023, respectively	\$	19,224	\$	31,116					
Rental income		4,664		4,894					
FEMA Disaster Relief Fund		1,112		15,899					
Grants and community health programs		791		2,164					
Net assets released from restrictions for operations		1,288		2,203					
Food services		1,815		1,677					
Vendor rebates		5,395		4,546					
Other		4,517		4,035					
	\$	38,806	\$	66,534					

Residential services revenue is reported within other revenue at amounts that reflect the consideration the System expects to receive in exchange for the services provided. These amounts are due from residents or third-party payors and include provisions for variable consideration. Performance obligations are determined based on the nature of the services provided. Resident services revenue including amortization of advance fees (prior to the Sale Date) are recognized as performance obligations are satisfied.

### Notes to Consolidated Financial Statements (continued) (In Thousands)

#### **15. Fair Value Measurements**

For assets and liabilities required to be measured at fair value, the System measures fair value based on 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. Fair value measurements are applied based on the unit of account from the System's perspective. The unit of account determines what is being measured by reference to the level at which the asset or liability is aggregated (or disaggregated) for purposes of applying other accounting pronouncements.

The System follows a valuation hierarchy that prioritizes observable and unobservable inputs used to measure fair value into three broad levels, which are described below:

- Level 1 Quoted prices (unadjusted) in active markets that are accessible at the measurement date for identical assets or liabilities. The fair value hierarchy gives the highest priority to Level 1 inputs.
- Level 2 Observable inputs that are based on inputs not quoted in active markets, but corroborated by market data.
- Level 3 Unobservable inputs are used when little or no market data is available. The fair value hierarchy gives the lowest priority to Level 3 inputs.

A financial instrument's categorization within the valuation hierarchy is based upon the lowest level of input that is significant to the fair value measurement. In determining fair value, the System uses valuation techniques that maximize the use of observable inputs and minimize the use of unobservable inputs to the extent possible and considers nonperformance risk in its assessment of fair value.

## Notes to Consolidated Financial Statements (continued) (In Thousands)

#### **15. Fair Value Measurements (continued)**

Financial assets carried at fair value are classified in the table below in one of the three categories described above:

	Level 1	Level 2	Level 3	Total
December 31, 2024				
Cash and cash equivalents – held				
for investments	\$ 6,980	\$ _	\$ - \$	6,980
United States government				
obligations	12,729		_	12,729
Corporate bonds	14,050	777	-	14,827
Mutual funds:				
Fixed income	30,340	23,547	_	53,887
Equities – small cap	3,243	_	_	3,243
Equities – large cap	26,672	_	_	26,672
International equity	40,085	_	_	40,085
	\$ 134,099	\$ 24,324	\$ - \$	158,423
	Level 1	Level 2	Level 3	Total
December 31, 2023	 Level 1	 Level 2	 Level 3	Total
<b>December 31, 2023</b> Cash and cash equivalents – held	 Level 1	Level 2	Level 3	Total
	\$ Level 1 6,951	\$ Level 2	\$ Level 3	<b>Total</b> 6,951
Cash and cash equivalents – held	\$	\$ Level 2	\$	
Cash and cash equivalents – held for investments	\$	\$ Level 2 	\$	
Cash and cash equivalents – held for investments United States government	\$ 6,951	\$ Level 2 - - 1,269	\$	6,951
Cash and cash equivalents – held for investments United States government obligations	\$ 6,951 13,448	\$ _	\$	6,951 13,448
Cash and cash equivalents – held for investments United States government obligations Corporate bonds	\$ 6,951 13,448	\$ _	\$	6,951 13,448
Cash and cash equivalents – held for investments United States government obligations Corporate bonds Mutual funds:	\$ 6,951 13,448 12,612	\$ _	\$	6,951 13,448 13,881
Cash and cash equivalents – held for investments United States government obligations Corporate bonds Mutual funds: Fixed income	\$ 6,951 13,448 12,612 54,790	\$ _	\$	6,951 13,448 13,881 54,790
Cash and cash equivalents – held for investments United States government obligations Corporate bonds Mutual funds: Fixed income Equities – small cap	\$ 6,951 13,448 12,612 54,790 3,124	\$ _	\$	6,951 13,448 13,881 54,790 3,124

### Notes to Consolidated Financial Statements (continued) (In Thousands)

#### **15. Fair Value Measurements (continued)**

Fair value for Level 1 is based upon quoted prices in active markets. Fair value for Level 2 is based on quoted prices for similar instruments in active markets, quoted prices for identical or similar instruments in markets that are not active and model-based valuation techniques for which all significant assumptions are observable in the market or can be corroborated by observable market data for substantially the full term of the assets. While the System believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different estimate of fair value at the reporting date. A financial instrument's categorization within the three levels of the valuation hierarchy is not indicative of the investment risk associated with the underlying assets.

The carrying values of cash, patient receivables, accounts payable and accrued expenses, other current assets and liabilities are reasonable estimates for fair value due to the short-term nature of these financial instruments.

#### 16. Liquidity and Available Resources

The table below represents financial assets available for general expenditures within one year:

	December 31						
		2024	2023				
Financial assets at year-end:							
Cash and cash equivalents	\$	22,798	\$	25,110			
Short-term investments		139,164		130,059			
Assets limited as to use		19,611		24,717			
Patient accounts receivable, net		38,580		38,604			
Current portion of pledges receivable, net		322		549			
Total financial assets		220,475		219,039			
Less amounts not available to be used within one year:							
Assets limited as to use		18,751		23,980			
Financial assets available to meet general expenditures							
over the next twelve months	\$	201,724	\$	195,059			

### Notes to Consolidated Financial Statements (continued) (In Thousands)

#### 16. Liquidity and Available Resources (continued)

The System has assets limited as to use for donor-restricted purposes, refundable advance fees (prior to the Sale Date), supplemental retirement plan and professional liabilities, as more fully described in Notes 1 and 4. The majority of assets limited as to use is not available for general expenditure within the next year.

As part of the System's liquidity management plan, cash in excess of daily requirements is invested in short-term investments and money market funds. Occasionally, the Board of Trustees designates a portion of any operating surplus to an operating reserve, which was approximately \$4,900 as of December 31, 2024 and 2023. This fund established by the Board of Trustees may be drawn upon, if necessary, to meet unexpected liquidity needs.

As of December 31, 2024 and 2023, the System was in compliance with financial covenants of outstanding long-term debt; see Note 7.

#### **17. Events Subsequent to December 31, 2024**

Subsequent events have been evaluated through April 10, 2025 which is the date the accompanying consolidated financial statements were available to be issued. Except as disclosed Note 1, no subsequent events have occurred that require disclosure in or adjustment to the accompanying consolidated financial statements.

Supplementary Information

## Consolidating Balance Sheet

## December 31, 2024 (With Comparative Consolidated Amounts at December 31, 2023) (In Thousands)

						CentraState			ntraState				CentraState		
	Centra	aState	CentraState		CentraState	CentraState	Healthcare	CentraSta		Iedical	CentraState	CentraState		Healthcare Sys	
	Healt		Medical	Center for	Healthcare	Assisted	Foundation,	Healthcar		sociates,	Specialists,	Cardiology,		Consolidated	
	Systen	ı, Inc.	Center, Inc.	Aging, Inc.	Affiliates, Inc.	Living, Inc.	Inc.	Services, Ir	ic.	P.C.	P.C.	P.C.	Eliminations	2024	2023
Assets															
Current assets:															
Cash and cash equivalents	\$	37 \$	14,628	\$ 890	\$ 1,231	\$ 629	\$ 3,855	\$ 1,43	4 \$	33	\$ 81	\$ (20)	\$ - \$	22,798 \$	25,110
Short-term investments		_	133,731	-	5,052	381	_		_	_	_	_	_	139,164	130,059
Assets limited as to use that are required for current															
liabilities		_		-	-	_	860		_	_	_	_	_	860	737
Patient accounts receivable, net		_	35,366	_	1,602	88	_		_	_	_	1,524		38,580	38,604
Due from affiliates		_	19,535	893	_	_	4		_	_	2,685	_	(22,018)	1,099	2,689
Other current assets		_	8,871	7	148	23	473	12	4	_	_	-	_	9,646	10,422
Total current assets		37	212,131	1,790	8,033	1,121	5,192	1,55	8	33	2,766	1,504	(22,018)	212,147	207,621
Assets limited as to use – noncurrent		_	5,986	_	_	_	12,765		_	_	_	_	_	18,751	23,980
Due from affiliates – noncurrent		_	5,050	_	_	_	_	3,42	9	_	_	_	(8,479)	_	_
Investment in subsidiary		_		-	-	_	—		_	_	-	-	_	_	-
Interest in CentraState Healthcare Foundation, Inc.		_	20,150	1,110	139	19	—		_	_	-	-	(21,418)	_	-
Property, plant, and equipment, net		_	230,939	-	840	5,632	318	5,99	7	_	-	-	_	243,726	278,483
Operating lease assets		_	7,547	-	-	_		41	1	_	_	_	_	7,958	9,557
Noncurrent assets		—	5,639	_	_	_	651	2,56	0	_	_	_	_	8,850	9,071
Total assets	\$	37 \$	487,442	\$ 2,900	\$ 9,012	\$ 6,772	\$ 18,926	\$ 13,95	5 \$	33	\$ 2,766	\$ 1,504	\$ (51,915) \$	491,432 \$	528,712

## Consolidating Balance Sheet (continued)

## December 31, 2024 (With Comparative Consolidated Amounts at December 31, 2023) (*In Thousands*)

	CentraStat Healthcar System, In	e l	entraState Medical enter, Inc.	Center for Aging, Inc.	CentraState Healthcare Affiliates, Inc.	CentraState Assisted Living, Inc.	CentraState Healthcare Foundation, Inc.	CentraState Healthcare Services, Inc.	CentraState Medical Associates, P.C.	CentraState Specialists, P.C.	CentraState Cardiology, P.C.	Eliminations —	CentraSt Healthcare Sys Consolidated 2024	stem, Inc.	
Liabilities and net assets	/		,	0 0,		<i>C</i> /									
Current liabilities:															
Current maturities of long-term debt and finance lease															
obligations	\$	- \$	294 \$		\$ 4	\$ 10	\$ –	\$ –	\$ –	\$ –	\$ –	\$ - \$	<b>308</b> \$	294	
Accounts payable and accrued expenses		_	45,993	737	1,373	1,087	71	181	4	4	202	_	49,652	59,160	
Due to affiliates – current		_	1,252	4	7,258	6,337	1,315	2,968	(273)	-	3,157	(22,018)	_	_	
Estimated third-party payor settlements - current		_	_	_	_	—	_	-	_	-	_	_	_	14	
Operating lease liability – current		_	1,667	_	_	-	_	52	_	-	-	-	1,719	1,505	
Other current liabilities		_	—	_	34	_	41	_	_	_	_	_	75	276	
Total current liabilities		-	49,206	741	8,669	7,434	1,427	3,201	(269)	4	3,359	(22,018)	51,754	61,249	
Long-term debt and finance lease obligations, excluding															
current maturities		_	112,098	_	39	88	_	4,029	_	_	_	_	116,254	115,870	
Professional liability insurance and other noncurrent															
liabilities		_	6,328	_	_	_	_	_	_	_	_	_	6,328	6,249	
Estimated third-party payor settlements – noncurrent		_	10,975	_	_	_	_	_	_	_	_	-	10,975	19,889	
Due to affiliates		_	20,101	_	_	3,542	_	1,508	_	_	_	(8,479)	16,672	10,805	
Operating lease liability – noncurrent		_	5,880	_	_	_	_	359	_	_	_	_	6,239	8,052	
Deferred revenue and refundable advance fees		_	_	_	_	_	_	_	_	_	_	_	_	48,794	
Total liabilities		_	204,588	741	8,708	11,064	1,427	9,097	(269)	4	3,359	(30,497)	208,222	270,908	
Net assets:															
Net assets (deficiency) without donor restrictions	3	7	262,704	1,049	165	(4,311)	(3,919)	4,858	302	2,762	(1,855)		261,792	234,542	
Net assets with donor restrictions		_	20,150	1,110	139	19	21,418		_	,	-	(21,418)	21,418	23,262	
Total net assets (deficiency)	3	7	282,854	2,159	304	(4,292)	17,499	4,858	302	2,762	(1,855)	(21,418)	283,210	257,804	
· · ·	\$ 3	7 \$	487,442 \$	2,900	\$ 9,012	· · · · · · · · · · · · · · · · · · ·		\$ 13,955	\$ 33	\$ 2,766		\$ (51,915) \$	491,432 \$	528,712	

## Consolidating Statement of Operations

## Year Ended December 31, 2024 (With Comparative Consolidated Amounts for the Year Ended December 31, 2023) (In Thousands)

	entraState Medical enter, Inc.	Center for Aging, Inc.	He	ntraState calthcare liates, Inc.	CentraState Assisted Living, Inc.	CentraState Healthcare Foundation, Inc.	CentraState Healthcare Services, Inc	Associates,	CentraState Specialists, P.C.	CentraState Cardiology, P.C.	Eliminations	CentraSt Healthcare Sys Consolidated 2024	tem, Inc.
Revenue:													
Net patient service revenue	\$ 381,351	\$ -	- \$	12,032	\$ –	\$ –	\$ -	- \$ -	\$ 63	\$ 4,588	\$ - \$	<b>398,034</b> \$	360,516
Other revenue	15,988	14,941	l	284	6,245	346	2,403		-	-	(1,401)	38,806	66,534
Gain on sale of Center for Aging, Inc.	_	21,287	7	_	_	-	-		-	-	_	21,287	-
Investment return	 183	1,061	[	182	20	_	1,225		_	_	(243)	2,428	5,834
Total revenue	397,522	37,289	)	12,498	6,265	346	3,628	-	63	4,588	(1,644)	460,555	432,884
Expenses:													
Salaries and wages	153,524	6,201	l	7,160	4,198	_	-		_	_	_	171,083	162,779
Employee benefits	37,194	2,013	3	2,242	1,282	_	-		_	_	_	42,731	39,795
Professional fees	14,855					_	-		-	-	_	14,855	10,203
Supplies and other expenses	177,382	6,089	)	4,339	1,809	1,338	2,483		64	7,293	(1,401)	199,396	213,090
Depreciation and amortization	18,254	1,834	ł	383	470	43	586	<b>.</b> —	_	_	_	21,570	22,953
Interest expense	3,751	369	)		83	_	257		_	_	(243)	4,217	3,293
Total expenses	 404,960	16,506	5	14,124	7,842	1,381	3,326	i –	64	7,293	(1,644)	453,852	452,113
Income (loss) from operations	 (7,438)	20,783	3	(1,626)	(1,577)	(1,035)	302		(1)	(2,705)	_	6,703	(19,229)
Net change in unrealized gains and losses on investments	5,847	510	)	160	4	_	-		_	_	_	6,521	8,777
Excess (deficiency) of revenue over expenses	 (1,591)	21,293	3	(1,466)	(1,573)	(1,035)	302		(1)	(2,705)	-	13,224	(10,452)
Net assets released from restrictions for capital purposes	2,980	807	7	_	_	_	-		_	_	_	3,787	3,699
Grant receipts for purchase of fixed assets	862	_		_	_	_	-		_	_	_	862	2,395
Net assets transfer to AHS Insurance Company, Ltd.	_	-	-	_	_	_	-		_	_	_	_	(1,903)
Net assets transfer from Atlantic Health System	9,377	-	-	_	_	_	-		_	_	_	9,377	15,054
Net assets transfers – other	19,025	(23,480	))	_	_	_	-		_	4,455	_	<i>_</i>	· -
Change in net assets without donor restrictions	\$ 30,653	\$ (1,380		(1,466)	\$ (1,573)	\$ (1,035)	\$ 302	2 \$ -	\$ (1)		\$ - \$	27,250 \$	8,793

## Consolidating Statement of Changes in Net Assets

### Year Ended December 31, 2024 (With Comparative Consolidated Amounts for the Year Ended December 31, 2023) (In Thousands)

	CentraState Healthcare System, Inc.	Ν	entraState Medical enter, Inc.	Center for Aging, Inc.	Heal	raState thcare tes, Inc.	CentraState Assisted Living, Inc.	CentraSta Healthcar Foundatio Inc.	re ( n,	CentraState Healthcare Services, Inc.	CS Medical Associates, P.C.	CentraState Specialists, P.C.	CentraState Cardiology, P.C.	Eliminations	CentraState He System, I Consolidated 2024	nc.
Net Assets Without Donor Restrictions																
Net assets as of beginning of year	\$ 37	\$	232,051 \$	+ _,>		1,631 \$			,	4,556	\$ 302	\$ 2,763		\$	234,542 \$	225,749
Change in net assets without donor restrictions			30,653	(1,380)		(1,466)	(1,573)	(1,03	5)	302	_	(1)	1,750	_	27,250	8,793
Net assets as of end of year	\$ 37	\$	262,704 \$	\$ 1,049	\$	165 5	6 (4,311)	\$ (3,91	9) \$	4,858	\$ 302	\$ 2,762	\$ (1,855)	\$ - \$	261,792 \$	234,542
Net Assets With Donor Restrictions Net assets as of beginning of year Change in beneficial interest in CentraState Healthcare	\$ –	\$	20,919	-,		89 5		\$ 23,26	52 \$	- 3	\$ –	\$ –	\$ –	\$ (23,262) \$	23,262 \$	19,838
Foundation, Inc.	-		(769)	(1,138)		50	13		_	-	-	-	-	1,844	-	_
Contributions, investment return and other	-		-	-		_	_	3,23		-	-	-	-	-	3,231	9,326
Net assets released from restrictions for operations	-		-	-		_	_	(1,28	<b>(8</b> )	-	-	-	-	-	(1,288)	(2,203)
Net assets released from restrictions for capital																
purposes			—	_		—	_	(3,78	37)	_	_	_	_	_	(3,787)	(3,699)
Change in net assets with donor restrictions			(769)	(1,138)		50	13	(1,84	4)					1,844	(1,844)	3,424
Net assets as of end of year	\$ -	\$	20,150	\$ 1,110	\$	139 5	5 19	\$ 21,41	8 \$	- 3	\$ –	\$ -	\$ -	\$ (21,418) \$	21,418 \$	23,262

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