

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2021 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2021 or fiscal plan year beginning <u>07/01/2021</u> and ending <u>06/30/2022</u>	
A This return/report is for:	☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) _____
B This return/report is:	☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here.	☐

Part II	Basic Plan Information—enter all requested information				
1a Name of plan <u>401(K) PROFIT-SHARING PLAN FOR EMPLOYEES OF KINGS VIEW</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>002</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>05/19/1985</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>002</u>	1c Effective date of plan <u>05/19/1985</u>	
1b Three-digit plan number (PN) ▶	<u>002</u>				
1c Effective date of plan <u>05/19/1985</u>					
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>KINGS VIEW</u> <u>7170 N FINANCIAL DR STE 110</u> <u>FRESNO, CA 93720-2935</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>94-1412648</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>559-256-7615</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>621420</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>94-1412648</u>	2c Plan Sponsor's telephone number <u>559-256-7615</u>	2d Business code (see instructions) <u>621420</u>	
2b Employer Identification Number (EIN) <u>94-1412648</u>					
2c Plan Sponsor's telephone number <u>559-256-7615</u>					
2d Business code (see instructions) <u>621420</u>					

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	04/14/2023	MICHAEL KOSAREFF
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Form 5500 (2021)
v. 210624

3a Plan administrator's name and address ☒ Same as Plan Sponsor		3b Administrator's EIN
		3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name		4b EIN 4d PN
5 Total number of participants at the beginning of the plan year		5 565
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d).		
a(1) Total number of active participants at the beginning of the plan year.....		6a(1) 359
a(2) Total number of active participants at the end of the plan year		6a(2) 352
b Retired or separated participants receiving benefits.....		6b 0
c Other retired or separated participants entitled to future benefits		6c 241
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d 593
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e 5
f Total. Add lines 6d and 6e		6f 598
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g 568
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested		6h 49
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....		7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2F 2G 2S 2T 3D		
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:		
9a Plan funding arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☐ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☐ Trust (4) ☐ General assets of the sponsor	
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)		
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☒ <u>1</u> A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)	

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2021 Form M-1 annual report. If the plan was not required to file the 2021 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2021 This Form is Open to Public Inspection
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For calendar plan year 2021 or fiscal plan year beginning 07/01/2021 and ending 06/30/2022		
A Name of plan 401(K) PROFIT-SHARING PLAN FOR EMPLOYEES OF KINGS VIEW	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 KINGS VIEW	D Employer Identification Number (EIN) 94-1412648	

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions	Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
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1 Coverage Information:

(a) Name of insurance carrier
MUTUAL OF AMERICA

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
13-1614399	88668	059936K	598	07/01/2021	06/30/2022

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
0	1789

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
SAN FRANCISCO REGIONAL OFFICE
1646 NORTH CALIFORNIA BOULEVARD SUI
TE 680
WALNUT CREEK, CA 94596-4172

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
0	1789	PORTION OF INCENTIVE COMP. PROGRAM	3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4	Current value of plan's interest under this contract in the general account at year end	4	1112312
5	Current value of plan's interest under this contract in separate accounts at year end.....	5	11003834

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶ **N/A**

b	Premiums paid to carrier	6b	
c	Premiums due but unpaid at the end of the year	6c	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ▶	6d	

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☒ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☐ other ▶

b	Balance at the end of the previous year	7b	968435
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c	Additions: (1) Contributions deposited during the year	7c(1)	62148	
	(2) Dividends and credits.....	7c(2)	0	
	(3) Interest credited during the year.....	7c(3)	6059	
	(4) Transferred from separate account.....	7c(4)	154750	
	(5) Other (specify below)	7c(5)	0	

(6) Total additions	7c(6)	222957
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d	Total of balance and additions (add lines 7b and 7c(6))	7d	1191392
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e	Deductions:			
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	78844	
	(2) Administration charge made by carrier.....	7e(2)	236	
	(3) Transferred to separate account.....	7e(3)	0	
	(4) Other (specify below)	7e(4)	0	

(5) Total deductions	7e(5)	79080
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f	Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	1112312
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Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
b ☐ Dental
c ☐ Vision
d ☐ Life insurance
e ☐ Temporary disability (accident and sickness)
f ☐ Long-term disability
g ☐ Supplemental unemployment
h ☐ Prescription drug
i ☐ Stop loss (large deductible)
j ☐ HMO contract
k ☐ PPO contract
l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received	9a(1)		
(2) Increase (decrease) in amount due but unpaid	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3))		9a(4)	0
b Benefit charges (1) Claims paid	9b(1)		
(2) Increase (decrease) in claim reserves	9b(2)		
(3) Incurred claims (add (1) and (2))		9b(3)	0
(4) Claims charged		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)		
(B) Administrative service or other fees	9c(1)(B)		
(C) Other specific acquisition costs	9c(1)(C)		
(D) Other expenses	9c(1)(D)		
(E) Taxes	9c(1)(E)		
(F) Charges for risks or other contingencies	9c(1)(F)		
(G) Other retention charges	9c(1)(G)		
(H) Total retention		9c(1)(H)	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. Specify nature of costs.	10b	

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2021
		This Form is Open to Public Inspection.

For calendar plan year 2021 or fiscal plan year beginning 07/01/2021 and ending 06/30/2022		
A Name of plan 401(K) PROFIT-SHARING PLAN FOR EMPLOYEES OF KINGS VIEW	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 KINGS VIEW	D Employer Identification Number (EIN) 94-1412648	

Part I	Service Provider Information (see instructions)
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You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

- a** Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)..... ☒ Yes ☐ No
- b** If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
FIDELITY INVESTMENTS	82 DEVONSHIRE STREET BOSTON, MA 02109

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
VANGUARD	PO BOX 2600 VALLEY FORGE, PA 19482-2600

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
DWS	222 SOUTH RIVERSIDE PLAZA CHICAGO, IL 60606-5808

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
INVESCO VI MAIN STREET	PO BOX 5270 DENVER, CO 80217-5270

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

AMERICAN CENTURY INVESTMENTS

PO BOX 419786
KANSAS CITY, MO 64141-6786

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

CALVERT

4550 MONTGOMERY AVENUE SUITE 1000N
BETHESDA, MD 20814

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

AMERICAN FUNDS

333 SOUTH HOPE STREET
LOS ANGELES, CA 90071

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

PIMCO

840 NEWPORT CENTER DRIVE
NEWPORT BEACH, CA 92660

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

T. ROWE PRICE

100 EAST PRATT STREET
BALTIMORE, MD 21202

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

MFS

111 HUNTINGTON AVENUE
BOSTON, MA 02199

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

VICTORY FUNDS

4900 TIEDEMAN ROAD, 4TH FLOOR
BROOKLYN, OH 44144

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

NEUBERGER BERMAN

1290 AVENUE OF THE AMERICAS
NEW YORK, NY 10104

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

GOLDMAN SACHS VIT FUNDS

200 WEST STREET
NEW YORK, NY 10282

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

DELAWARE FUNDS

ONE COMMERCE SQUARE,
2005 MARKET STREET
PHILADELPHIA, PA 19103

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

MUTUAL OF AMERICA INVESTMENT CORP

320 PARK AVENUE
NEW YORK, NY 10022

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
12 15 65	INSURANCE CARRIER	7485	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
(complete as many entries as needed)

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)

Part II Information on Participating Plans (to be completed by DFEs)

(Complete as many entries as needed to report all participating plans)

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
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plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2021 This Form is Open to Public Inspection
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For calendar plan year 2021 or fiscal plan year beginning <u>07/01/2021</u> and ending <u>06/30/2022</u>		
A Name of plan <u>401(K) PROFIT-SHARING PLAN FOR EMPLOYEES OF KINGS VIEW</u>	B Three-digit plan number (PN) ►	<u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>KINGS VIEW</u>	D Employer Identification Number (EIN) <u>94-1412648</u>	

Part I	Asset and Liability Statement
---------------	--------------------------------------

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash.....	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions.....	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	13057474	11003834
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	968435	1112312
(15) Other.....	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:		
(1)	Employer securities.....	1d(1)	
(2)	Employer real property.....	1d(2)	
e	Buildings and other property used in plan operation	1e	
f	Total assets (add all amounts in lines 1a through 1e)	1f	14025909 12116146
Liabilities			
g	Benefit claims payable	1g	
h	Operating payables	1h	
i	Acquisition indebtedness.....	1i	
j	Other liabilities.....	1j	
k	Total liabilities (add all amounts in lines 1g through 1j)	1k	0 0
Net Assets			
l	Net assets (subtract line 1k from line 1f).....	1l	14025909 12116146

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

		(a) Amount	(b) Total
Income			
a	Contributions:		
(1)	Received or receivable in cash from: (A) Employers	2a(1)(A)	252952
	(B) Participants	2a(1)(B)	829433
	(C) Others (including rollovers).....	2a(1)(C)	24584
(2)	Noncash contributions.....	2a(2)	
(3)	Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)	1106969
b	Earnings on investments:		
(1)	Interest:		
	(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	
	(B) U.S. Government securities	2b(1)(B)	
	(C) Corporate debt instruments	2b(1)(C)	
	(D) Loans (other than to participants)	2b(1)(D)	
	(E) Participant loans.....	2b(1)(E)	0
	(F) Other	2b(1)(F)	6059
	(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)	6059
(2)	Dividends: (A) Preferred stock.....	2b(2)(A)	
	(B) Common stock	2b(2)(B)	
	(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	
	(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)	0
(3)	Rents	2b(3)	
(4)	Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	
	(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	
	(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)	0
(5)	Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	
	(B) Other	2b(5)(B)	
	(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)	0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		-1791932
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		
c Other income.....	2c		0
d Total income. Add all income amounts in column (b) and enter total.....	2d		-678904
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	1223374	
(2) To insurance carriers for the provision of benefits.....	2e(2)	0	
(3) Other.....	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3).....	2e(4)		1223374
f Corrective distributions (see instructions).....	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		0
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees.....	2i(1)		
(2) Contract administrator fees.....	2i(2)		
(3) Investment advisory and management fees.....	2i(3)		
(4) Other.....	2i(4)	7485	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		7485
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		1230859
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d.....	2k		-1909763
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan.....	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☒ Unmodified (2) ☐ Qualified (3) ☐ Disclaimer (4) ☐ Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) ☒ DOL Regulation 2520.103-8 (2) ☐ DOL Regulation 2520.103-12(d) (3) ☐ neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: MOSS ADAMS, LLP

(2) EIN: 91-0189318

d The opinion of an independent qualified public accountant is **not attached** because:

(1) ☐ This form is filed for a CCT, PSA, or MTIA. (2) ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l.

During the plan year:

a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....

	Yes	No	Amount
4a	X		32

	Yes	No	Amount
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)			
4b		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)			
4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)			
4d		X	
e Was this plan covered by a fidelity bond?	X		1000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)		X	
4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
4k		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? ☐ Yes ☒ No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☐ Yes ☐ No ☐ Not determined
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2021 This Form is Open to Public Inspection.
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For calendar plan year 2021 or fiscal plan year beginning 07/01/2021 and ending 06/30/2022

A Name of plan 401(K) PROFIT-SHARING PLAN FOR EMPLOYEES OF KINGS VIEW	B Three-digit plan number (PN) ► 002
C Plan sponsor's name as shown on line 2a of Form 5500 KINGS VIEW	D Employer Identification Number (EIN) 94-1412648

Part I	Distributions
---------------	----------------------

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 13-3590259		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3	0

Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)
----------------	---

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?	☐ Yes	☐ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.			
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a		
b Enter the amount contributed by the employer to the plan for this plan year	6b		
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)	6c		
If you completed line 6c, skip lines 8 and 9.			
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?	☐ Yes	☐ No	☐ N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?	☐ Yes	☐ No	☐ N/A

Part III	Amendments
-----------------	-------------------

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box.....	☐ Increase	☐ Decrease	☐ Both	☐ No
--	-----------------------------------	-----------------------------------	-------------------------------	-----------------------------

Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
----------------	---

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?	☐ Yes	☐ No
11 a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)	☐ Yes	☐ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Schedule R (Form 5500) 2021
v. 201209

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

- 14** Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment).....

14a

b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14b

c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14c

- 15** Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year.....

15a

b The corresponding number for the second preceding plan year.....

15b

- 16** Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year.....

16a

b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers.....

16b

- 17** If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment..... ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

- 18** If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment..... ☐

- 19** If the total number of participants is 1,000 or more, complete lines (a) through (c)

a Enter the percentage of plan assets held as:

Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:

☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate line 19(b)?

☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify): _____

- 20 PBGC missed contribution reporting requirements.** If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation _____



*Reports of Independent Auditors and
Consolidated Financial Statements with
Supplementary Information*

Kings View and Affiliates

June 30, 2022

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Report of Independent Auditors

The Board of Directors
Kings View and Affiliates

Report on the Audit of the Consolidated Financial Statements

Opinion

We have audited the consolidated financial statements of Kings View and Affiliates (the “Organization”), which comprise the consolidated statement of financial position as of June 30, 2022, and the related consolidated statements of activities and change in net assets, functional expenses, and cash flows for the year then ended, and the related notes to the consolidated financial statements.

In our opinion, the accompanying consolidated financial statements present fairly, in all material respects, the consolidated financial position of Kings View and Affiliates as of June 30, 2022, and the changes in their net assets and their cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS) and the standards applicable to financial audits contained in *Government Auditing Standards (Government Auditing Standards)*, issued by the Comptroller General of the United States. 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 Organization and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. 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 Consolidated Financial Statements

Management is responsible for the preparation and fair presentation of the consolidated 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 from material misstatement, whether due to fraud or error.

In preparing the consolidated financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Organization’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 Consolidated Financial Statements

Our objectives are to obtain reasonable assurance about whether the consolidated financial statements as a whole are free from 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 and *Government Auditing Standards* 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 consolidated financial statements.

In performing an audit in accordance with GAAS and *Government Auditing Standards*, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the consolidated 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 consolidated 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 Organization'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 consolidated financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Organization'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 and Other Information

Our audit was conducted for the purpose of forming an opinion on the consolidated financial statements as a whole. The accompanying schedule of expenditures of federal awards as required by Title 2 U.S. Code of Federal Regulations (CFR) Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance), and the consolidating statement of financial position and consolidating statement of activities and change in net assets 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 was derived from and relates directly to the underlying accounting and other records used to prepare the consolidated financial statements. The information has been subjected to the auditing procedures applied in the audit of the consolidated financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the consolidated financial statements or to the consolidated financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the schedule of expenditures of federal awards, consolidating statement of financial position, and consolidating statement of activities and change in net assets are fairly stated, in all material respects, in relation to the consolidated financial statements as a whole.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated March 27, 2023, on our consideration of the Organization's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Organization's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Organization's internal control over financial reporting and compliance.

A handwritten signature in cursive script that reads "Moss Adams LLP".

Fresno, California
March 27, 2023

Consolidated Financial Statements

Kings View and Affiliates
Consolidated Statement of Financial Position
June 30, 2022

ASSETS

CURRENT ASSETS

Cash	\$ 5,985,876
Grants and contracts receivable, net	7,212,847
Prepaid expenses	518,064
Note receivable, current portion	<u>6,882</u>

Total current assets	<u>13,723,669</u>
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PROPERTY AND EQUIPMENT, net	<u>7,609,759</u>
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OTHER ASSETS

Other assets	77,298
Deferred income taxes	108,584
Note receivable, net of current portion	<u>328,853</u>

Total other assets	<u>514,735</u>
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Total assets	<u><u>\$ 21,848,163</u></u>
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LIABILITIES AND NET ASSETS

CURRENT LIABILITIES

Accounts payable	\$ 986,105
Income tax payable	8,711
Accrued salaries and benefits	2,161,802
Other accrued liabilities	427,439
Deferred revenue	687,633
Capital leases, current portion	162,408
Notes payable, current portion	<u>131,558</u>

Total current liabilities	4,565,656
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CAPITAL LEASES, net of current portion	104,607
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OTHER ACCRUED LIABILITIES	427,440
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NOTES PAYABLE, net of current portion	<u>10,610,336</u>
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Total liabilities	15,708,039
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NET ASSETS

Without donor restrictions	<u>6,140,124</u>
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Total liabilities and net assets	<u><u>\$ 21,848,163</u></u>
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Kings View and Affiliates
Consolidated Statement of Activities and Change in Net Assets
Year Ended June 30, 2022

CHANGE IN NET ASSETS WITHOUT DONOR RESTRICTIONS

Revenues and other support:

Net patient service revenue	\$ 7,021,842
Grants and contracts revenue	30,264,691
Other income	681,705
Gain on disposal of assets	<u>30,569</u>

Total revenues and other support	<u>37,998,807</u>
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Expenses and losses:

Program services	32,674,469
Supporting services	<u>4,825,643</u>

Total expenses	37,500,112
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Settlement loss (Note 11)	<u>900,000</u>
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CHANGE IN NET ASSETS WITHOUT DONOR RESTRICTIONS

BEFORE BENEFIT FROM INCOME TAXES	(401,305)
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BENEFIT FROM INCOME TAXES	<u>(99,873)</u>
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CHANGE IN NET ASSETS WITHOUT DONOR RESTRICTIONS	(301,432)
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NET ASSETS WITHOUT DONOR RESTRICTIONS, beginning of year	<u>6,441,556</u>
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NET ASSETS WITHOUT DONOR RESTRICTIONS, end of year	<u><u>\$ 6,140,124</u></u>
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Kings View and Affiliates
Consolidated Statement of Functional Expenses
Year Ended June 30, 2022

	Program Services									Supporting Services	
	Driving Under the Influence	Consulting Services	Mental Health	Substance Abuse	TelePsychiatry	Day Activity Centers	Transitional Aged Youth	Managed Care	Total Program Services	Management and General	Total Expenses
Salaries and wages	\$ 1,658,473	\$ 2,540,406	\$ 11,139,882	\$ 619,983	\$ 158,689	\$ 1,206,591	\$ 222,277	\$ 181,774	\$ 17,728,075	\$ 2,441,060	\$ 20,169,135
Benefits	387,921	580,787	2,425,908	157,401	48,829	372,577	55,895	35,994	4,065,312	607,054	4,672,366
Contract labor	-	-	941,408	70,259	1,775,943	-	-	-	2,787,610	-	2,787,610
Purchased services	283,127	1,529,240	538,513	63,135	17,362	160,531	18,740	1,333	2,611,981	737,955	3,349,936
Supplies	52,026	19,923	565,377	42,842	4,651	197,821	11,920	825	895,385	32,806	928,191
Minor equipment	10,575	47,677	111,204	3,098	2,971	3,253	2,247	2,270	183,295	29,862	213,157
Occupancy	563,434	301,353	1,544,489	93,506	46,861	158,356	50,380	193	2,758,572	264,132	3,022,704
Depreciation expense	46,471	21,376	797	635	1,883	160,672	-	-	231,834	220,927	452,761
Interest	6,474	652	-	9,408	-	13,865	-	-	30,399	129,416	159,815
Insurance	54,514	63,237	251,991	22,230	74,641	96,691	6,327	-	569,631	114,090	683,721
Travel	14,613	1,293	23,078	1,337	3,123	-	3,680	332	47,456	25,403	72,859
Other expenses	15,743	76,175	591,716	20,287	5,771	38,562	16,665	-	764,919	222,938	987,857
Total expenses	\$ 3,093,371	\$ 5,182,119	\$ 18,134,363	\$ 1,104,121	\$ 2,140,724	\$ 2,408,919	\$ 388,131	\$ 222,721	\$ 32,674,469	\$ 4,825,643	\$ 37,500,112

Kings View and Affiliates
Consolidated Statement of Cash Flows
Year Ended June 30, 2022

CASH FLOWS FROM OPERATING ACTIVITIES

Change in net assets without donor restrictions	\$ (301,432)
Adjustment to reconcile change in net assets without donor restrictions to net cash from operating activities:	
Depreciation	452,761
Gain on disposal of assets	(30,569)
Bad debt	227,764
Deferred income taxes	(108,584)
Change in operating assets and liabilities:	
Grants and contracts receivable	542,486
Prepaid expenses	51,329
Other receivables	62,429
Other assets	(6,600)
Accounts payable	44,236
Accrued salaries and benefits	(30,451)
Other accrued liabilities	854,879
Deferred revenue	120,661
Net cash from operating activities	<u>1,878,909</u>

CASH FLOWS FROM INVESTING ACTIVITIES

Purchases of property and equipment	(546,502)
Principal payments received on note receivable	6,547
Proceeds from sale of property and equipment	<u>59,143</u>
Net cash from investing activities	<u>(480,812)</u>

CASH FLOWS FROM FINANCING ACTIVITIES

Payments on capital lease obligations	<u>(152,010)</u>
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NET CHANGE IN CASH 1,246,087

CASH, beginning of year 4,739,789

CASH, end of year \$ 5,985,876

SUPPLEMENTAL DISCLOSURE OF CASH FLOWS INFORMATION

Cash payments during the year for interest	\$ 159,815
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SUPPLEMENTAL DISCLOSURE OF NONCASH FINANCING AND INVESTING ACTIVITIES

Assets acquired through capital lease obligations	\$ 64,056
Assets acquired through notes payable	\$ 5,769,218

NOTE 1 – NATURE OF ACTIVITIES AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Nature of activities – Kings View is a California nonprofit corporation, formed in 1948, and dedicated in 1951, affiliated with the Mennonite churches. Kings View has addressed the unique behavioral and social needs of the seriously mentally ill and their families in Central California for the past 70 years and is recognized as the industry leader for innovation and collaboration in aiding this population. Kings View began contracting for county mental health services in the 1960s, and operated its nationally recognized inpatient psychiatric treatment facility in Reedley from 1950 to 1991.

Kings View offers seven service lines throughout its geographic footprint: specialty mental health services, substance use disorder services, driving under the influence services, day activity centers, transitional aged youth services, telepsychiatry services, and managed care services. Through its multiple programs, Kings View addresses the needs of youth and adults consistently, compassionately, ethically, and respectfully.

Kings View's mental health programs cover all aspects of culturally competent behavioral health services including: outpatient, full service partnerships programs for those clients that require support in areas such as housing and dual diagnosis; wellness centers; mobile services that provide in-the-field mental health services to individuals of all ages and families in small rural communities, homeless services, and co-response to law enforcement.

Suicide prevention provides 24/7 services through the Central Valley Suicide Prevention Hotline and national 988 line. It also provides after hours support to other California counties.

The substance use disorder and driving under the influence programs operate in five counties and offer the following services: medication assisted treatment services, private outpatient alcohol/drug counseling services, intervention services, PC 1000 deferred entry of judgment services, and driving-under-the-influence services.

Day activity centers for adults with intellectual and developmental disabilities provide programs which include work activity, independent living, supported employment, day training activity center, and the adult development program. These programs provide vocational, socialization, academic, and community integration opportunities for people with developmental disabilities and a variety of other disabilities.

Transitional aged youth are served by Kings View in several programs. The Skills 4 Success program in Madera County prepares this population for the future through the following activities: classes on employment related topics, job readiness workshops, academic tutoring, paid work experience, leadership development, and job shadowing/mentoring.

Kings View was a pioneer in the telehealth field and provided psychiatry throughout Central and Northern California since 1997. The telepsychiatry department offers adult, child, adolescent, forensic, and intellectually challenged services and is one of the largest service providers on the west coast, using only board certified psychiatrists in providing services. They also conduct Treatment Authorization Request (TAR) reviews, medication monitoring, and court conservatorships.

Kings View initiated its managed care service line in 2022 in order to provide enhanced care to Medi-Cal Managed Care members and address the increased need for mental health services in California. The program is in its infancy stages and services will begin in January 2023.

Kings View and Affiliates

Notes to Consolidated Financial Statements

Kings View Professional Services, Inc. (KVPS) is a California C Corporation wholly owned by Kings View that became active in 2020. KVPS supports 24 California county behavioral health programs with their electronic health record (HER) systems. Services include HER customization, health information analytics, server hosting, medical billing support, and other information technology consulting. KVPS also provides cost report and quality assurance services.

Kings View Foundation, Inc. (Foundation) is a California nonprofit corporation wholly owned by Kings View that was formed in 2010. The Foundation provides fundraising services and holds investments that support the Kings View mission.

Principles of consolidation – The consolidated financial statements include the accounts of Kings View, as well as the Foundation and KVPS (collectively, the Organization). All material inter-organizational transactions and balances have been eliminated.

Method of accounting – The Organization uses the accrual basis method of accounting in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP).

Use of estimates – The preparation of consolidated financial statements in conformity with U.S. GAAP 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 of the consolidated financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Adoption of new accounting principle – On July 1, 2021, the Organization adopted Accounting Standards Update (ASU) 2020-07, *Not-for-Profit Entities (Topic 958): Presentation and Disclosures by Not-for-Profit Entities for Contributed Nonfinancial Assets*. This standard is intended to improve U.S. GAAP by increasing the transparency of contributed nonfinancial assets for not-for-profit (NFP) entities through enhancements to presentation and disclosure. The amendments in this update address certain stakeholders' concerns about the lack of transparency about the measurement of contributed nonfinancial assets recognized by NFPs, as well as the amount of those contributions used in an NFP's programs and other activities. The standard is effective for annual periods beginning after June 15, 2021, and as such, the Organization adopted the new standard effective July 1, 2021, under a retrospective basis. The adoption of this standard did not have a significant impact on the Organization's consolidated financial position, activities and change in net assets, or cash flows. No changes were recorded to previously reported transactions as a result of the adoption.

Classification of net assets – Net assets and revenues, expenses, gains and losses are classified based on the existence or absence of donor-imposed restrictions. Accordingly, net assets and changes therein are classified as follows:

Without Donor Restrictions – Net assets not subject to use or time restrictions. A portion of these net assets may be designated by the Board of Directors for specific purposes. The Organization has no board designated net assets at June 30, 2022.

With Donor Restrictions – Net assets subject to donor-imposed stipulations that they be maintained permanently by the Organization. The donors of these assets permit the Organization to use all of the income earned on related investments for general or specific purposes. Net assets with donor restrictions also include net assets subject to donor-imposed stipulations that may or will be met by actions of the Organization and/or the passage of time.

Kings View and Affiliates

Notes to Consolidated Financial Statements

Support that is restricted by the donor is reported as an increase in net assets without donor restrictions if the restriction expires in the reporting period in which the support is recognized. All other donor-restricted support is reported as an increase in net assets with donor restrictions. When a restriction expires, restricted net assets are reclassified to net assets without donor restrictions.

Grants and contracts receivable – Grants and contracts receivable are stated at the amount management expects to collect from outstanding balances. Management evaluates the need to write off a receivable based on its review of the tagging of the balances and historical collection experience. Management writes off a receivable when it is determined that it will not be collected. If accounts previously written off are collected, the payments are recorded as reductions in bad debt expense. At June 30, 2022, the allowance for doubtful accounts was \$316,500. All receivables are noninterest bearing. The Organization grants credit to its customers, substantially all of which are government agencies (federal, state, and local), and generally requires no collateral from its customers.

Concentrations of credit risk – The Organization maintains cash balances in several financial institutions. Noninterest bearing accounts are aggregated with interest bearing accounts and are insured up to \$250,000 by the Federal Deposit Insurance Corporation (FDIC). Uninsured cash balances at June 30, 2022, amount to approximately \$5,891,000.

The Organization grants credit without collateral to its patients, most of whom are insured under third-party payor agreements. At June 30, 2022, three third-party payors accounted for approximately 69% of the accounts receivable balance and three third-party payors accounted for approximately 53% of revenue recognized.

Property and equipment – Land is carried at cost. Property and equipment are carried at cost less accumulated depreciation. The Organization capitalizes property and equipment when cost exceeds \$5,000 and the useful life is greater than 12 months. Expenditures for major renewals and betterments that extend the useful lives of property and equipment are capitalized. Expenditures for maintenance and repairs, including planned major maintenance activities, are charged to expense as incurred. Tenant and leasehold improvements are depreciated over the lesser of the term of the lease or the estimated useful life. Depreciation of property and equipment is provided using the straight-line method based on the following estimated useful lives:

	<u>Years</u>
Buildings	10 to 40
Building improvements	5 to 30
Furniture and equipment	3 to 7
Vehicles	5

Long-lived assets – Long-lived assets to be held and used are reviewed for impairment whenever events or changes in circumstances indicate that the related carrying amount may not be recoverable. When required, impairment losses on assets to be held and used are recognized based on the fair value of the asset and long-lived assets to be disposed of are reported at the lower of the carrying amount or fair value less cost to sell. Assets held for sale are no longer depreciated. No impairment losses were recognized during the year ended June 30, 2022.

Compensated absences – Employees of the Organization are entitled to paid vacation, paid sick days, and personal days off, depending on the job classification, length of service, and other factors. The Organization records a liability for accrued vacation at pay rates currently in effect.

Kings View and Affiliates

Notes to Consolidated Financial Statements

Paycheck Protection Program loan – The Organization accounts for the debt incurred pursuant to the Paycheck Protection Program (PPP) under the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) in accordance with ASC 470, *Debt*. Accordingly, the Organization will account for any partial or full forgiveness of the debt as a debt extinguishment and include the amount forgiven in its consolidated statement of activities and change in net assets.

Net patient service revenue – Net patient service revenue is reported at the estimated net realizable amounts from patients, third-party payors, and others for services rendered. Any prior retroactive adjustments are recorded and expensed in the current reporting period.

Grants and contracts revenue – Federal, state, and local governments have awarded grants to support the Organization's program activities that are conditioned on performing certain services or incurring certain reimbursable expenditures. The grants are cost-reimbursement grants, which are recognized when the Organization incurs allowable and reasonable qualifying expenses. Cost-reimbursement grants are recognized as revenues increasing net assets without donor restriction because the conditions and restrictions are met in the same period.

Income taxes – Kings View and Kings View Foundation are qualified as tax-exempt organizations under section 501(c)(3) of the Internal Revenue Code and section 23701(d) of the State of California Corporate Code.

Kings View Professional Services is a California C Corporation subject to taxation. Provisions for income taxes are based on taxes payable or refundable for the current year and deferred taxes on temporary differences between the amount of taxable income and pretax financial income and between the tax basis of assets and liabilities and their reported amounts in the financial statements. Deferred tax assets and liabilities are included in the financial statements at currently enacted income tax rates applicable to the period in which the deferred tax assets and liabilities are expected to be realized or settled. As changes in tax laws or rate are enacted, deferred tax assets and liabilities are adjusted through the provision for income taxes. The deferred tax assets and liabilities represent the future tax consequences of those differences, which will either be taxable or deductible when the assets and liabilities are recovered or settled. A valuation allowance is recorded for deferred tax assets when it is more likely than not that such deferred tax asset will not be realized.

The Organization follows the accounting guidance for accounting for uncertainty in income taxes. Kings View and Kings View Foundation are subject to federal and state income taxes to the extent they have unrelated business income. In accordance with the guidance for uncertainty in income taxes, management has evaluated its material tax positions and determined that there are no uncertain tax positions as of June 30, 2022.

Functional allocation of expenses – Certain categories of expenses are attributable to more than one program or supporting function and are allocated on a reasonable basis that is consistently applied. The expenses that are allocated are compensation, benefits, and supplies, which are allocated on usage studies conducted, and occupancy and insurance, which are allocated based on square footage usage.

Kings View and Affiliates

Notes to Consolidated Financial Statements

Subsequent events – Subsequent events are events or transactions that occur after the consolidated statement of financial position date, but before the consolidated financial statements are available to be issued. The Organization recognizes in the consolidated financial statements the effects of all subsequent events that provide additional evidence about conditions that existed at the date of the consolidated statement of financial position, including the estimates inherent in the process of preparing the consolidated financial statements. The Organization's consolidated financial statements do not recognize subsequent events that provide evidence about conditions that did not exist at the date of the consolidated statement of financial position, but arose after the consolidated statement of financial position date and before the consolidated financial statements are available to be issued.

The Organization has evaluated subsequent events through March 27, 2023, which is the date the consolidated financial statements were available to be issued.

NOTE 2 – GRANTS AND CONTRACTS RECEIVABLE

Grants and contracts receivable consisted of the following at June 30, 2022:

Mental health	\$ 5,092,656
Consulting services	915,737
Work experience	304,374
TelePsychiatry	641,558
Substance abuse	170,857
Court ordered/diversion	335,041
Youth development	69,124
	7,529,347
Less: allowance for doubtful accounts	(316,500)
	<u>\$ 7,212,847</u>

NOTE 3 – NOTE RECEIVABLE

Note receivable consisted of the following at June 30, 2022:

Note receivable from Kings Housing Development Corporation, monthly payments of \$1,959, including principal and interest at 5% through August 2027, at which time monthly payments increase to \$2,127, including principal and interest at 6% through July 2032, at which time all unpaid sums of principal and interest shall be due and payable. Secured by apartment complex in Hanford, California.

	\$ 335,735
Less: current portion	(6,882)
	<u>\$ 328,853</u>

Kings View and Affiliates

Notes to Consolidated Financial Statements

Annual maturities of note receivable as of June 30, 2022, is as follows:

Year Ending June 30.

2023	\$	6,882
2024		7,236
2025		7,605
2026		7,994
2027		8,402
Thereafter		297,616
	\$	335,735

NOTE 4 – PROPERTY AND EQUIPMENT

Property and equipment consisted of the following at June 30, 2022:

Land	\$	1,813,905
Buildings and improvements		5,988,947
Furniture and equipment		3,192,026
Vehicles		1,002,004
		11,996,882
Less: accumulated depreciation		(4,387,123)
	\$	7,609,759

Depreciation expense for the year ended June 30, 2022, totaled \$452,761.

NOTE 5 – LINE OF CREDIT

The Organization has a line of credit with Bank of America with a total credit limit of \$2,000,000, with a maturity date of January 31, 2023. The interest rate is the Bloomberg Short-Term Bank Yield (BSBY) rate plus 3.60%. On December 27, 2022, the line was extended to January 31, 2024, with a reduction to the interest rate spread to the BSBY rate plus 2.50%. All other terms remained the same. There was no outstanding balance on the line of credit at June 30, 2022.

NOTE 6 – CAPITAL LEASES

Equipment and vehicles with a cost of \$1,370,828, and accumulated amortization of \$1,142,337 as of June 30, 2022, were acquired under capital leases. Amortization expense of the equipment and vehicles relating to the capital lease obligations is included in depreciation expense shown on the consolidated statement of functional expenses. The effective interest rates range from 3.65% to 8.00%. The assets under the capital leases are recorded at the lower of the present value of the minimum lease payments or the fair value of the assets.

Kings View and Affiliates

Notes to Consolidated Financial Statements

Minimum future lease payments under the capital leases as of June 30, 2022, are as follows:

Years Ending June 30,

2023	\$ 173,618
2024	72,021
2025	14,602
2026	14,602
2027	<u>10,634</u>
Total minimum future lease payments	285,477
Less: amount representing interest	<u>(18,462)</u>
Present value of net minimum lease payments	267,015
Less: current portion	<u>(162,408)</u>
Capital leases, net of current portion	<u><u>\$ 104,607</u></u>

Kings View and Affiliates

Notes to Consolidated Financial Statements

NOTE 7 – NOTES PAYABLE

Notes payable consisted of the following at June 30, 2022:

Note payable to the Mennonite Brethren Loan Fund, due in monthly principal and interest installments of \$6,690, including interest at a variable rate of 5.00% as of June 30, 2022, maturing November 2027, secured by the Organization's land and buildings. \$ 461,527

Construction note payable to the Mennonite Brethren Loan Fund, with maximum draws of \$900,000 during construction. Initial balance was refinanced in February 2021 from a note payable due to Bank of America, N.A. Monthly interest only payments are due during construction. After construction, monthly principal and interest payments are due of approximately \$5,393, including interest at a variable rate of 5.00% as of June 30, 2022, maturing February 2036, secured by deed of trust on property located in Tulare, California and Atwater, California. 280,319

Small Business Administration Paycheck Protection Program note payable to Bank of America, N.A., due in monthly principal and interest installments to be determined after settlement of forgiveness application, including interest at a rate of 1.00%, maturing within 24 months of settlement of forgiveness application. Note is subject to partial or full forgiveness under the CARES Act. 4,230,830

Note payable to the Mennonite Brethren Loan Fund, due in monthly principal and interest installments of \$33,727, including interest at a variable rate of 5.00% as of June 30, 2022, maturing February 2037, secured by deed of trust on property located in Tulare, California, Atwater, California, and Fresno, California. 5,769,218

Less: current portion 10,741,894
(131,558)

\$ 10,610,336

Annual maturities of notes payable as of June 30, 2022, is as follows:

Years Ending June 30,

2023	\$ 131,558
2024	4,419,481
2025	198,304
2026	208,449
2027	218,373
Thereafter	5,565,729
	<u>\$ 10,741,894</u>

Paycheck Protection Program – In response to the COVID-19 pandemic, the PPP was established under the CARES Act and administered by the U.S. Small Business Administration (SBA). Companies who met the eligibility requirements set forth by the PPP could qualify for PPP loans provided by local lenders, which supports payroll, rent, and utility expenses (qualified expenses). If the loan proceeds are fully utilized to pay qualified expenses over the covered period, as further defined by the PPP, the full principal amount of the PPP loan may qualify for loan forgiveness, subject to potential reduction based on the level of full-time employees maintained by the organization during the covered period as compared to a baseline period.

In April 2020, Kings View received proceeds of \$4,230,830 under the PPP provided by Bank of America. Based on the term and conditions of the loan agreement, the term of the PPP loan is two years with an annual interest rate of 1.0% and principal and interest payments will be deferred for the first six months of the loan term, which has been updated according to the Paycheck Protection Program Flexibility Act of 2020 (Flexibility Act).

In June 2020, the Flexibility Act was signed into law, which amended the CARES Act. The Flexibility Act changed key provisions of the PPP, including, but not limited to, (i) provisions relating to the maturity of PPP loans, (ii) the deferral period covering of PPP loan payments and (iii) the process for measurement of loan forgiveness. More specifically, the Flexibility Act extended the length of the measurement period (covered period) from eight weeks to 24 weeks from receipt of proceeds, while allowing borrowers that received PPP loans before June 5, 2020 to determine, at their sole discretion, a covered period of either eight weeks or 24 weeks.

After reviewing the applicable terms and conditions of the Flexibility Act, Kings View elected to extend the length of the covered period from the lesser of (i) period whereby qualified expenses equal loan proceeds or (ii) 24 weeks.

In October 2021, Kings View requested a portion of the proceeds of the PPP be forgiven by submitting a PPP Loan Forgiveness Application to its lender, Bank of America. In October 2022, Kings View submitted a revised application requesting \$4,041,994 of forgiveness. In accordance with the terms and conditions under the Flexibility Act, the lender has 60 days from receipt of the completed application to issue a decision to the SBA. If the lender determines that the borrower is entitled to forgiveness of some or all of the amount applied for under the statute and applicable regulations, the lender must request payment from the SBA at the time the lender issues its decision to the SBA. The SBA will, subject to any SBA review of the loan or loan application, remit the appropriate forgiveness amount to the lender, plus any interest accrued through the date of payment, not later than 90 days after the lender issues its decision to the SBA.

NOTE 8 – SALARY DEFERRAL AND INCENTIVE SAVINGS PLAN

The Organization has a Salary Deferral and Incentive Savings Plan 401(k) (the Plan) covering substantially all its employees. Under the Plan, employees may contribute up to the IRS pension plan limitations. The Organization's contributions are authorized at an amount equal to 50% of the first 4% of an employee's salary deferral. The Organization contributed \$288,747 to the Plan for the year ended June 30, 2022.

Kings View and Affiliates

Notes to Consolidated Financial Statements

NOTE 9 – OPERATING LEASES

The Organization leases office equipment, property, and vehicles, which require certain minimum annual rental payments. The leases vary in terms and expire between August 2022 and January 2027. Total office equipment, property, and vehicles lease expenses were \$86,199, \$1,779,583, and \$247,273, respectively, for the year ended June 30, 2022.

The future minimum lease payments under long-term contractual obligations at June 30, 2022, are as follows:

	Fiscal year ending June 30,					
	2023	2024	2025	2026	2027	Total
Lease classification:						
Equipment	\$ 53,431	\$ 40,190	\$ 26,795	\$ 18,224	\$ 4,977	\$ 143,617
Property	1,072,493	752,735	424,642	9,350	-	2,259,220
Vehicles	192,192	81,810	16,791	9,965	8,354	309,112
Total minimum future lease payments	<u>\$ 1,318,116</u>	<u>\$ 874,735</u>	<u>\$ 468,228</u>	<u>\$ 37,539</u>	<u>\$ 13,331</u>	<u>\$ 2,711,949</u>

NOTE 10 – BENEFIT FROM INCOME TAXES

Net deferred tax asset as of June 30, 2022, is as follows:

Deferred tax asset	
Net operating loss carryforward:	
Federal	\$ 78,804
State	29,780
Net deferred tax asset	<u>\$ 108,584</u>

Taxable temporary differences giving rise to a deferred tax asset relates to net operating loss carryforwards for federal and state income taxes of \$375,258 and \$355,347, respectively.

Kings View and Affiliates

Notes to Consolidated Financial Statements

The benefit from income taxes for the year ended June 30, 2022, is as follows:

Current:	
Federal	\$ 7,911
State	800
	<u>8,711</u>
Deferred:	
Federal	(78,804)
State	(29,780)
	<u>(108,584)</u>
Total benefit from income taxes	<u>\$ (99,873)</u>

NOTE 11 – RISKS AND UNCERTAINTIES

Federal grants – The Organization participates in a number of federal programs that are funded by grants received from various government funding agencies. Expenditures financed by grants are subject to audit by the appropriate grantor government. Periodic audits may be performed by these granting agencies and certain costs may be questioned as not being reimbursable under the terms of the contract. If expenditures are disallowed due to noncompliance with grant program regulations, the Organization may be required to reimburse the grantor government. At June 30, 2022, significant amounts of grant expenditures have not been audited, but the Organization's management believes that disallowed expenditures discovered in subsequent audits, if any, will not have a material effect on its overall financial position.

Claims – In October 2022, the Organization settled a Private Attorney General Act (PAGA) claim through mediation in the amount of \$900,000. In accordance with the settlement, the Organization has recorded other accrued liabilities in the consolidated statement of financial position of \$427,439 as a current liability and \$427,440 as a noncurrent liability. The settlement has been recorded as a loss in the consolidated statement of activities for the year ended June 30, 2022.

The Organization is subject to litigation and claims in the ordinary course of business. The Organization vigorously defends these actions and has forwarded these actions to their legal counsel and insurance carrier.

NOTE 12 – LIQUIDITY AND FUNDS AVAILABLE

The following table reflects the Organization's financial assets as of June 30, 2022, reduced by amounts not available for general expenditure within one year. Financial assets are considered unavailable when illiquid or not convertible to cash within one year.

Kings View and Affiliates

Notes to Consolidated Financial Statements

Financial assets available to meet cash needs for general expenditures within one year as of June 30, 2022:

Financial assets:	
Cash	\$ 5,985,876
Grants and contracts receivable	7,212,847
Note receivable	<u>335,735</u>
Financial assets, June 30, 2022	13,534,458
Less those unavailable for general expenditure within one year, due to:	
Noncurrent portion of note receivable	<u>(328,853)</u>
Financial assets available to meet cash needs for general expenditures within one year	<u>\$ 13,205,605</u>

To manage liquidity, the Organization maintains a line of credit in the amount of \$2,000,000 that can be drawn upon as needed during the year (see Note 5). At June 30, 2022, there was no outstanding borrowings on the line of credit. The Organization's spending policy is to structure its financial assets to be available for operations, capital assets, and opportunities to enhance the Organization's mission.

Supplementary Information

Kings View and Affiliates

Schedule of Expenditures of Federal Awards

Year Ended June 30, 2022

Federal Grantor/Pass-through Grantor/Program Title	Federal Assistance Listing Number	Pass-through Grantor's Number	Federal Expenditures
Medicaid Cluster			
U.S. Department of Health and Human Services			
Passed through County of Tulare:			
Medical Assistance Program - KVSAP Methodone Program	93.778	29798	\$ 877,052
Medical Assistance Program - Tulare One Stop Program	93.778	30311	334,282
Medical Assistance Program - Tulare Mobile Unit Program	93.778	30311	447,111
Passed through County of Fresno:			
Medical Assistance Program - Sanger M-Cal	93.778	A18-690	67,393
Medical Assistance Program - Fresno SUD OP	93.778	A18-690	36,370
Medical Assistance Program - East Triage	93.778	A-22-254	671,010
Medical Assistance Program - West Triage	93.778	A-22-254	576,132
Medical Assistance Program - Metro Triage	93.778	18-688	1,183,881
Medical Assistance Program - PATH SMHS	93.778	A21-214	99,191
Passed through County of Kings:			
Medical Assistance Program - Behavioral Health Services Mental Health	93.778	21-035.2	4,314,746
Passed through County of Shasta:			
Medical Assistance Program - Assisted Outpatient Treatment	93.778	2706-1-2020-01	229,030
Total Medicaid Cluster			8,836,198
Other Programs			
U.S. Department of Health and Human Services			
Projects for Assistance in Transition from Homelessness (PATH):			
Passed through County of Tulare	93.150	PA8721	136,063
Passed through County of Fresno	93.150	A21-214	308,000
Passed through County of Kings	93.150	21-035.2	35,950
Total PATH			480,013
Block Grants for Prevention and Treatment of Substance Abuse			
Passed through County of Fresno	93.959	A-18-690	39,853
Block Grants for Community Mental Health Services (BGCMS)			
Passed through County of Tulare	93.958	PA10125	110,993
Passed through County of Kings	93.958	21-035.2	396,697
Total BGCMS			507,690
Total U.S. Department of Health and Human Services			9,863,754
Total Expenditures of Federal Awards			\$ 9,863,754

Kings View and Affiliates
Notes to Schedule of Expenditures of Federal Awards
Year Ended June 30, 2022

NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of presentation – The accompanying schedule of expenditures of federal awards (the Schedule) includes the federal grant activity of Kings View under programs of the federal government for the year ended June 30, 2022. The information in this Schedule is presented in accordance with the requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Because the Schedule presents only a selected portion of the operations of the Organization, it is not intended to and does not present the financial position, changes in net assets, or cash flows of the Organization.

Relationship to financial reports – Information included in the accompanying Schedule is in substantial agreement with the information reported in the related federal financial reports for major programs.

Program costs – The Organization accounts for and reports on the costs of program activities covered under the federal grant awards on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in the Uniform Guidance, wherein certain types of expenditures are not allowable or are limited as to reimbursement.

Sub-recipients – Kings View did not provide federal funds to sub-recipients.

NOTE 2 – INDIRECT COSTS

The Organization has elected not to use the 10% de minimus indirect cost rate allowed under the Uniform Guidance. Indirect costs charged to federal grants are limited under each grant agreement.

Single Audit Reports

Report of Independent Auditors on Internal Control Over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance with *Government Auditing Standards*

The Board of Directors
Kings View and Affiliates

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the consolidated financial statements of Kings View and Affiliates, which comprise the consolidated statement of financial position for the year ended June 30, 2022, the related consolidated statements of activities and change in net assets, functional expenses, and cash flows for the year then ended, and the related notes to the consolidated financial statements, and have issued our report thereon dated March 27, 2023.

Report on Internal Control Over Financial Reporting

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

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control such that there is a reasonable possibility that a material misstatement of Kings View and Affiliates' consolidated financial statements will not be prevented, or detected and corrected, on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

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

Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether Kings View and Affiliates' consolidated financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the consolidated financial statements. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Kings View and Affiliates' internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

A handwritten signature in black ink that reads "Moss Adams LLP". The signature is written in a cursive, flowing style.

Fresno, California
March 27, 2023

Report of Independent Auditors on Compliance for the Major Federal Program and Report on Internal Control Over Compliance Required by the Uniform Guidance

The Board of Directors
Kings View and Affiliates

Report on Compliance for the Major Federal Program

Opinion on the Major Federal Program

We have audited Kings View and Affiliates' compliance with the types of compliance requirements identified as subject to audit in the OMB *Compliance Supplement* that could have a direct and material effect on Kings View and Affiliates' major federal program for the year ended June 30, 2022. Kings View and Affiliates' major federal program is identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

In our opinion, Kings View and Affiliates complied, in all material respects, with the compliance requirements referred to above that could have a direct and material effect on its major federal program for the year ended June 30, 2022.

Basis for Opinion on the Major Federal Program

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America (GAAS); the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States (*Government Auditing Standards*); and the audit requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Our responsibilities under those standards and the Uniform Guidance are further described in the Auditor's Responsibilities for the Audit of Compliance section of our report.

We are required to be independent of Kings View and Affiliates and to meet our other ethical responsibilities, in accordance with relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion on compliance for each major federal program. Our audit does not provide a legal determination of Kings View and Affiliates' compliance with the compliance requirements referred to above.

Responsibilities of Management for Compliance

Management is responsible for compliance with the requirements referred to above and for the design, implementation, and maintenance of effective internal control over compliance with the requirements of laws, statutes, regulations, rules, and provisions of contracts or grant agreements applicable to Kings View and Affiliates' federal programs.

Auditor's Responsibilities for the Audit of Compliance

Our objectives are to obtain reasonable assurance about whether material noncompliance with the compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on Kings View and Affiliates' compliance based on our audit. 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, *Government Auditing Standards*, and the Uniform Guidance will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Noncompliance with the compliance requirements referred to above is considered material, if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about Kings View and Affiliates' compliance with the requirements of the major federal program as a whole.

In performing an audit in accordance with GAAS, *Government Auditing Standards*, and the Uniform Guidance, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material noncompliance, 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 Kings View and Affiliates' compliance with the compliance requirements referred to above and performing such other procedures as we considered necessary in the circumstances.
- Obtain an understanding of Kings View and Affiliates' internal control over compliance relevant to the audit in order to design audit procedures that are appropriate in the circumstances and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of Kings View and Affiliates' internal control over compliance. Accordingly, no such opinion is expressed.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weaknesses in internal control over compliance that we identified during the audit.

Report on Internal Control Over Compliance

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. *A material weakness in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. *A significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the Auditor's Responsibilities for the Audit of Compliance section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance. Given these limitations, during our audit we did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above. However, material weaknesses or significant deficiencies in internal control over compliance may exist that were not identified.

Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

A handwritten signature in cursive script that reads "Moss Adams LLP".

Fresno, California

March 27, 2023

Kings View and Affiliates
Schedule of Findings and Questioned Costs
Year Ended June 30, 2022

Section I - Summary of Auditor's Results

CONSOLIDATED FINANCIAL STATEMENTS

Type of auditor's report issued on whether the consolidated financial statements audited were prepared in accordance with GAAP: Unmodified

Internal control over financial reporting:

Material weakness(es) identified? Yes X No

Significant deficiency(ies) identified? Yes X None reported

Noncompliance material to consolidated financial statements noted? Yes X No

FEDERAL AWARDS

Internal control over major federal programs:

Material weakness(es) identified? Yes X No

Significant deficiency(ies) identified? Yes X None reported

Any audit findings disclosed that are required to be reported in accordance with section 2 CFR 200.516(a)? Yes X No

IDENTIFICATION OF MAJOR FEDERAL PROGRAM AND TYPE OF AUDITOR'S REPORT ISSUED ON COMPLIANCE FOR THE MAJOR FEDERAL PROGRAM

<i>Federal Assistance Listing Number</i>	<i>Name of Federal Program/Cluster</i>	<i>Type of Auditor's Report Issued on Compliance for the Major Federal Program</i>
93.778	Medicaid Cluster	Unmodified

Dollar threshold used to distinguish between Type A and Type B programs: \$750,000

Auditee qualified as low-risk auditee? X Yes No

Section II - Financial Statement Findings

None reported.

Section III - Federal Award Findings and Questioned Costs

None reported.

Other Information

Kings View and Affiliates
Consolidating Statement of Financial Position
June 30, 2022

	Kings View	Kings View Foundation, Inc.	Kings View Professional Services, Inc.	Eliminations	Total Consolidated
ASSETS					
CURRENT ASSETS					
Cash	\$ 5,813,654	\$ 8,231	163,991	\$ -	\$ 5,985,876
Grants and contracts receivable, net	7,212,847	-	-	-	7,212,847
Prepaid expenses	518,064	-	-	-	518,064
Note receivable, current portion	6,882	-	-	-	6,882
Total current assets	13,551,447	8,231	163,991	-	13,723,669
PROPERTY AND EQUIPMENT, net	1,226,598	6,383,161	-	-	7,609,759
OTHER ASSETS					
Other assets	77,298	-	-	-	77,298
Deferred income taxes	-	-	108,584	-	108,584
Note receivable, net of current portion	328,853	-	-	-	328,853
Due from affiliates	2,482	103,055	-	(105,537)	-
Total other assets	408,633	103,055	108,584	(105,537)	514,735
Total assets	\$ 15,186,678	\$ 6,494,447	\$ 272,575	\$ (105,537)	\$ 21,848,163
LIABILITIES AND NET ASSETS					
CURRENT LIABILITIES					
Accounts payable	\$ 986,105	\$ -	\$ -	\$ -	\$ 986,105
Income tax payable	-	-	8,711	-	8,711
Accrued salaries and benefits	2,161,802	-	-	-	2,161,802
Other accrued liabilities	427,439	-	-	-	427,439
Deferred revenue	289,096	-	398,537	-	687,633
Capital leases, current portion	162,408	-	-	-	162,408
Notes payable, current portion	-	131,558	-	-	131,558
Due to affiliate	-	-	105,537	(105,537)	-
Total current liabilities	4,026,850	131,558	512,785	(105,537)	4,565,656
CAPITAL LEASES, net of current portion	104,607	-	-	-	104,607
OTHER ACCRUED LIABILITIES	427,440	-	-	-	427,440
NOTES PAYABLE, net of current portion	4,230,830	6,379,506	-	-	10,610,336
Total liabilities	8,789,727	6,511,064	512,785	(105,537)	15,708,039
NET ASSETS					
Without donor restrictions	6,396,951	(16,617)	(240,210)	-	6,140,124
Total liabilities and net assets	\$ 15,186,678	\$ 6,494,447	\$ 272,575	\$ (105,537)	\$ 21,848,163

Kings View and Affiliates
Consolidating Statement of Activities and Change in Net Assets
Year Ended June 30, 2022

	Kings View	Kings View Foundation, Inc.	Kings View Professional Services, Inc.	Eliminations	Total Consolidated
CHANGE IN NET ASSETS WITHOUT DONOR RESTRICTIONS					
Revenues and other support:					
Net patient service revenue	\$ 7,021,842	\$ -	\$ -	\$ -	\$ 7,021,842
Grants and contracts revenue	25,206,532	-	5,058,159	-	30,264,691
Other income	360,041	184,864	136,800	-	681,705
Gain on disposal of assets	30,569	-	-	-	30,569
Total revenues and other support	32,618,984	184,864	5,194,959	-	37,998,807
Expenses and losses:					
Program services	27,663,426	-	5,011,043	-	32,674,469
Supporting services	4,634,010	191,633	-	-	4,825,643
Total expenses	32,297,436	191,633	5,011,043	-	37,500,112
Settlement loss (Note 11)	900,000	-	-	-	900,000
CHANGE IN NET ASSETS WITHOUT DONOR RESTRICTIONS BEFORE BENEFIT FROM INCOME TAXES	(578,452)	(6,769)	183,916	-	(401,305)
BENEFIT FROM INCOME TAXES	-	-	(99,873)	-	(99,873)
CHANGE IN NET ASSETS WITHOUT DONOR RESTRICTIONS	(578,452)	(6,769)	283,789	-	(301,432)
NET ASSETS WITHOUT DONOR RESTRICTIONS, beginning of year	6,975,403	(9,848)	(523,999)	-	6,441,556
NET ASSETS WITHOUT DONOR RESTRICTIONS, end of year	\$ 6,396,951	\$ (16,617)	\$ (240,210)	\$ -	\$ 6,140,124

Attachment to July 2021 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name EMPLOYEE BENEFIT PLAN OF
Plan Sponsor's Name KINGS VIEW

EIN: 94-1412648
PN: 002

(a)	(b) identity of issuer, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral par, or maturity value.	(d) Cost	(e) Current value
*	Mutual of America	GROUP ANNUITY CONTRACT GENERAL ACCOUNT		1,112,312
*	Mutual of America	GROUP ANNUITY CONTRACT Aggressive Allocation Fund		13,646
*	Mutual of America	GROUP ANNUITY CONTRACT Conservative Allocation Fund		120,608
*	Mutual of America	GROUP ANNUITY CONTRACT Moderate Allocation Fund		30,716
*	Mutual of America	GROUP ANNUITY CONTRACT Bond Fund		106,053
*	Mutual of America	GROUP ANNUITY CONTRACT T. Rowe Price Blue Chip Growth		584,286
*	Mutual of America	GROUP ANNUITY CONTRACT Composite Fund		36,214
*	Mutual of America	GROUP ANNUITY CONTRACT Calvert VP SRI Balanced Port.		157,122
*	Mutual of America	GROUP ANNUITY CONTRACT Delaware VIP Small Cap Value S		18,014
*	Mutual of America	GROUP ANNUITY CONTRACT Equity Index Fund		330,194
*	Mutual of America	GROUP ANNUITY CONTRACT Fidelity VIP Mid-Cap		25,173
*	Mutual of America	GROUP ANNUITY CONTRACT Fidelity VIP Asset Manager		14,257
*	Mutual of America	GROUP ANNUITY CONTRACT Fidelity VIP Contrafund		35,237
*	Mutual of America	GROUP ANNUITY CONTRACT Fidelity VIP Equity Income		30,234
*	Mutual of America	GROUP ANNUITY CONTRACT Goldman Sachs VIT Small Cap		4,653
*	Mutual of America	GROUP ANNUITY CONTRACT American Funds IS New World		535
*	Mutual of America	GROUP ANNUITY CONTRACT Mid-Term Bond Fund		3,488
*	Mutual of America	GROUP ANNUITY CONTRACT Mid-Cap Equity Index Fund		72,610
*	Mutual of America	GROUP ANNUITY CONTRACT Mid Cap Value Fund		19,325

Attachment to July 2021 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name EMPLOYEE BENEFIT PLAN OF
Plan Sponsor's Name KINGS VIEW

EIN: 94-1412648
PN: 002

(a)	(b) identity of issuer, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral par, or maturity value.	(d) Cost	(e) Current value
*	Mutual of America	GROUP ANNUITY CONTRACT Neuberger Berman AMT Sust Eq		654
*	Mutual of America	GROUP ANNUITY CONTRACT International Fund		11,017
*	Mutual of America	GROUP ANNUITY CONTRACT Invesco VI Main St		41,212
*	Mutual of America	GROUP ANNUITY CONTRACT Retirement Income Fund		447,365
*	Mutual of America	GROUP ANNUITY CONTRACT Vanguard VIF Real Estate Index		73,963
*	Mutual of America	GROUP ANNUITY CONTRACT PIMCO VIT Real Return Port.		50,806
*	Mutual of America	GROUP ANNUITY CONTRACT Victory RS Small Cap Growth		12,217
*	Mutual of America	GROUP ANNUITY CONTRACT 2020 Retirement Fund		1,008,245
*	Mutual of America	GROUP ANNUITY CONTRACT 2025 Retirement Fund		2,163,006
*	Mutual of America	GROUP ANNUITY CONTRACT 2030 Retirement Fund		777,841
*	Mutual of America	GROUP ANNUITY CONTRACT 2035 Retirement Fund		882,509
*	Mutual of America	GROUP ANNUITY CONTRACT 2040 Retirement Fund		1,111,625
*	Mutual of America	GROUP ANNUITY CONTRACT 2045 Retirement Fund		811,268
*	Mutual of America	GROUP ANNUITY CONTRACT 2050 Retirement Fund		781,801
*	Mutual of America	GROUP ANNUITY CONTRACT 2055 Retirement Fund		638,050
*	Mutual of America	GROUP ANNUITY CONTRACT 2060 Retirement Fund		128,180
*	Mutual of America	GROUP ANNUITY CONTRACT 2065 Retirement Fund		7,400
*	Mutual of America	GROUP ANNUITY CONTRACT All America Fund		37,040
*	Mutual of America	GROUP ANNUITY CONTRACT Small Cap Equity Index Fund		54,733

Attachment to July 2021 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name EMPLOYEE BENEFIT PLAN OF

EIN: 94-1412648

Plan Sponsor's Name KINGS VIEW

PN: 002

(a)	(b) identity of issuer, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral par, or maturity value.	(d) Cost	(e) Current value
*	Mutual of America	GROUP ANNUITY CONTRACT DWS Capital Growth VIP		49,642
*	Mutual of America	GROUP ANNUITY CONTRACT Small Cap Growth Fund		32,219
*	Mutual of America	GROUP ANNUITY CONTRACT Small Cap Value Fund		63,078
*	Mutual of America	GROUP ANNUITY CONTRACT American Century VP Cap Apprec		19,834
*	Mutual of America	GROUP ANNUITY CONTRACT Vanguard VIF Diversified Value		67,773
*	Mutual of America	GROUP ANNUITY CONTRACT Vanguard VIF International		80,735
*	Mutual of America	GROUP ANNUITY CONTRACT Vanguard Total Bond Mkt I Prt		49,257

