

National Jewish Health and Subsidiary

Consolidated Financial Statements
(With Independent Auditor's Reports Thereon)

June 30, 2022 and 2021

National Jewish Health and Subsidiary

June 30, 2022 and 2021

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Independent Auditor's Report

Board of Directors
National Jewish Health
Denver, Colorado

Report on the Audit of the Consolidated Financial Statements

Opinion

We have audited the consolidated financial statements of National Jewish Health and Subsidiary (National Jewish Health) which comprise the consolidated statements of financial position as of June 30, 2022 and 2021, and the related consolidated statements of activities and cash flow for the years 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 National Jewish Health as of June 30, 2022 and 2021, and the changes in their net assets and their cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS) and the standards applicable to financial audits contained in *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 Consolidated Financial Statements section of our report. We are required to be independent of National Jewish Health and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the 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 National Jewish Health's ability to continue as a going concern within one year after the date that these consolidated financial statements are 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 National Jewish Health'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 National Jewish Health's ability to continue as a going concern for a reasonable period of time.

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

Supplementary Information

Our audits were conducted for the purpose of forming an opinion on the consolidated financial statements as a whole. The schedule of expenditures of federal awards required by Title 2 U.S. *Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* is presented for purposes of additional analysis and is 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

Board of Directors
National Jewish Health

America. In our opinion, the information is 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 October 25, 2022, on our consideration of National Jewish Health'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 National Jewish Health'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 National Jewish Health's internal control over financial reporting and compliance.

FORVIS,LLP

Denver, Colorado
October 25, 2022

National Jewish Health and Subsidiary
Consolidated Statements of Financial Position
June 30, 2022 and 2021
(In thousands)

	<u>2022</u>	<u>2021</u>
Current assets:		
Cash and cash equivalents	\$ 40,507	\$ 44,299
Accounts receivable:		
Patient care	28,231	29,810
Pledges and bequests, net	23,982	22,582
Contributions receivable - program services	7,357	7,111
Receivable from joint ventures	2,702	1,569
Other receivables	8,470	8,982
Assets held by trustees - current portion	2,952	2,805
Prepaid and other	5,694	5,516
Total current assets	<u>119,895</u>	<u>122,674</u>
Assets whose use is limited:		
Internally-designated assets	51,564	58,986
Assets held under split interest	6,136	6,704
Assets held by trustees - net of current portion	856	1,073
Total assets whose use is limited	<u>58,556</u>	<u>66,763</u>
Other assets:		
Long-term investments	74,706	82,949
Pledges, net of current portion and allowance	13,528	17,625
Beneficial interest under perpetual and other trust agreements	12,603	14,488
Contributions receivable under unitrust agreements	2,046	2,062
Right-of-use assets - operating leases	5,531	6,796
Right-of-use assets - finance leases	285	371
Right-of-use assets - building finance lease	70,699	-
Other	3,116	2,641
Total other assets	<u>182,514</u>	<u>126,932</u>
Property and equipment:		
Land, building and equipment, net	77,190	73,555
Building finance lease deposit	-	64,049
Total assets	<u>\$ 438,155</u>	<u>\$ 453,973</u>

National Jewish Health and Subsidiary
Consolidated Statements of Financial Position (continued)
June 30, 2022 and 2021
(In thousands)

	2022	2021
Current liabilities:		
Accounts payable and accrued expenses	\$ 20,441	\$ 18,074
Refundable advances, current portion	8,192	9,249
Accrued salaries, wages, and employee benefits	10,788	10,948
Unearned revenue	2,278	1,911
Estimated settlements with third-party payors	4,280	4,498
Split-interest agreements, current portion	1,350	1,517
Long-term debt, current portion	3,955	2,505
Operating lease liabilities, current portion	1,949	2,387
Finance lease liabilities, current portion	77	75
Building finance lease liabilities, current portion	4,293	-
CARES Act payable - employer social security taxes, current portion	2,441	2,441
Total current liabilities	<u>60,044</u>	<u>53,605</u>
CARES Act payable - employer social security taxes, net of current portion	-	2,441
Refundable advances, net of current portion	-	4,602
Split-interest agreements, net of current portion	7,484	8,740
Long-term debt, net of current portion	15,253	19,263
Operating lease liabilities, net of current portion	3,696	4,490
Finance lease liabilities, net of current portion	225	302
Building finance lease, net of current portion	67,757	64,049
Other	3,652	3,633
Total liabilities	<u>158,111</u>	<u>161,125</u>
Net assets:		
Without donor restrictions	109,804	114,812
With donor restrictions	170,240	178,036
Total net assets	<u>280,044</u>	<u>292,848</u>
Total liabilities and net assets	<u><u>\$ 438,155</u></u>	<u><u>\$ 453,973</u></u>

National Jewish Health and Subsidiary
Consolidated Statements of Activities
Years Ended June 30, 2022 and 2021
(In thousands)

	2022	2021
Changes in net assets without donor restrictions:		
Revenue, gains, and other support without donor restrictions:		
Patient service revenue	\$ 156,097	\$ 178,450
Grant research awards	59,814	57,270
Health initiatives revenue	13,172	13,525
Revenue (loss) from joint ventures	(1,455)	1,649
Other operating revenue	84,293	76,994
Gifts, special events - net and bequests	18,753	15,134
Split-interest contributions	370	521
Investment income (loss), net	(5,361)	8,361
Total revenue, gains, and other support without donor restrictions	<u>325,683</u>	<u>351,904</u>
Net assets released from restriction	15,483	12,998
Expenses:		
Academic services	111,147	106,853
Clinical services	158,612	162,812
Other programs	11,733	13,187
Fund development	8,367	7,152
Administration and support services	56,209	51,096
Total expenses	<u>346,068</u>	<u>341,100</u>
Other expense:		
Change in split-interest agreements	(106)	(381)
Total other expense	<u>(106)</u>	<u>(381)</u>
(Decrease) increase in net assets without donor restrictions	<u>(5,008)</u>	<u>23,421</u>

National Jewish Health and Subsidiary
Consolidated Statements of Activities (continued)
Years Ended June 30, 2022 and 2021
(In thousands)

	<u>2022</u>	<u>2021</u>
Changes in net assets with donor restrictions:		
Program services	188	2,255
Gifts, special events, and bequests	13,960	20,260
Net investment gain and change in value of split-interest agreements	(7,483)	19,982
Contributions - restricted in perpetuity	<u>1,022</u>	<u>775</u>
Total revenue with donor restrictions	7,687	43,272
 Total net assets released from restrictions	<u>(15,483)</u>	<u>(12,998)</u>
(Decrease) increase in net assets with donor restrictions	<u>(7,796)</u>	<u>30,274</u>
 (Decrease) increase in net assets	(12,804)	53,695
Net assets, beginning of year	<u>292,848</u>	<u>239,153</u>
Net assets, end of year	<u><u>\$ 280,044</u></u>	<u><u>\$ 292,848</u></u>

National Jewish Health and Subsidiary
Consolidated Statements of Cash Flows
Years Ended June 30, 2022 and 2021
(In thousands)

	2022	2021
Cash flows from operating activities:		
(Decrease) increase in net assets	\$ (12,804)	\$ 53,695
Items not requiring (providing) cash:		
Depreciation	8,523	8,460
Amortization - finance lease	1,437	50
Unrealized loss (gain)	24,565	(18,018)
Increase in net assets with donor restrictions in perpetuity	(1,022)	(774)
Bond premium, discount, and issuance cost amortization	(54)	(54)
Noncash operating lease expense	33	81
Changes in:		
Patient care accounts receivable	1,579	(2,842)
Pledges and bequests receivable	2,698	(5,633)
Other current assets	(799)	2,054
Contributions receivable - program services	(246)	(897)
Contributions receivable - other	16	29
Beneficial interest under perpetual trust	1,869	(2,289)
Other assets	(408)	(800)
Estimated third-party payor settlements	(218)	(2,151)
Accounts payable and accrued expenses, workers compensation, accrued salaries, wages, and employees benefits and unearned grants	499	10,428
Refundable advances	(5,659)	(2,248)
Net cash provided by operating activities	<u>20,009</u>	<u>39,091</u>

National Jewish Health and Subsidiary
Consolidated Statements of Cash Flows (continued)
Years Ended June 30, 2022 and 2021
(In thousands)

	<u>2022</u>	<u>2021</u>
Cash flows from investing activities:		
Purchases of property and equipment	(12,158)	(10,123)
Purchases of internally designated assets	(28,586)	(18,221)
Proceeds from sale of internally designated assets	26,648	14,830
Proceeds from sale of assets held by trustees	13	32
Purchases of investments and assets reserved for gift annuities	(41,517)	(26,014)
Proceeds from sale of investments and assets reserved for gift annuities	34,781	23,041
Net cash used in investing activities	<u>(20,819)</u>	<u>(16,455)</u>
Cash flows from financing activities:		
Repayment of long-term debt and finance lease liabilities	(2,580)	(5,303)
(Decrease) increase in split-interest liability	(1,424)	67
Increase in net assets with donor restrictions in perpetuity	1,022	774
Net cash used in financing activities	<u>(2,982)</u>	<u>(4,462)</u>
Net (decrease) increase in cash and cash equivalents	<u>(3,792)</u>	<u>18,174</u>
Cash and cash equivalents, beginning of year	44,299	26,125
Cash and cash equivalents, end of year	<u><u>\$ 40,507</u></u>	<u><u>\$ 44,299</u></u>
Supplemental schedule of noncash activities:		
Cash paid for interest	\$ 2,153	\$ 910
ROU assets obtained in exchange for		
new operating lease liabilities	\$ 1,211	\$ 6,796
Building finance lease deposit record as		
part of new financing lease agreement	\$ 8,001	\$ 42,520
Building finance lease deposit reclassified to		
ROU asset upon occupancy of building	\$ 72,050	\$ -

National Jewish Health and Subsidiary

Notes to Consolidated Financial Statements

June 30, 2022 and 2021

(In thousands)

(1) Corporate Organization

Organization

National Jewish Health and Subsidiary (National Jewish Health), a Colorado nonprofit corporation, is the leading respiratory hospital in the nation. Founded in 1899 as a nonsectarian charity hospital for tuberculosis patients, National Jewish Health today is the only facility in the world dedicated substantially to groundbreaking medical research and treatment of patients with respiratory, cardiac, immune and related disorders.

National Jewish Health is a nonprofit corporation as described in Section 501(c)(3) of the Internal Revenue Code (IRC) and is exempt from federal income taxes on related income pursuant to Section 501(a) of the IRC and a similar provision of state law.

In 2002, the National Jewish Illiquid Assets Holding Company, LLC, a wholly owned subsidiary of National Jewish Health, was incorporated. The purpose of this subsidiary is to hold donated property until sold. All related intercompany transactions and balances have been eliminated in consolidation.

Joint Ventures

Effective December 2013, National Jewish Health formed a limited liability corporation in a joint venture with the Icahn School of Medicine doing business as the Mount Sinai – National Jewish Respiratory Institute to oversee the creation and operations of a joint respiratory institute at various sites in the Mount Sinai integrated health care system in New York City, New York.

Effective August 2014, National Jewish Health entered into a joint operating agreement with Intermountain Healthcare (formerly Sisters of Charity of Leavenworth (SCL) Health)/St. Joseph Hospital for the joint management and operation of National Jewish Health's in-state patient care and St. Joseph Hospital. The new entity is overseen by a Board of Directors with representation from both entities.

Effective April 2017, National Jewish Health formed a limited liability corporation in a joint venture with Thomas Jefferson University doing business as the Jane and Leonard Korman Jefferson Health | National Jewish Health Respiratory Institute to oversee the development and operations of a joint respiratory institute at various sites in the Jefferson Health System in Philadelphia, Pennsylvania.

(2) Summary of Significant Accounting Policies

(a) Use of Estimates

The preparation of consolidated financial statements in conformity with U.S. generally accepted accounting principles requires management to make estimates and assumptions which 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 revenue and expenses during the reporting period. Actual results could differ significantly from those estimates.

National Jewish Health and Subsidiary
Notes to Consolidated Financial Statements
June 30, 2022 and 2021
(In thousands)

(b) Contributions, Promises to Give and Bequests

National Jewish Health receives funding from a number of sources such as: individuals, foundations, government programs, corporations, and pharmaceutical companies. Some contributions are restricted to specific purposes. These are provided for various programs including, but not limited to research, smoking cessation services, and educational programs.

Contributions received from donors and other funding agencies are recorded as net assets without donor restrictions, unless otherwise stipulated by the donor or agency. If the contribution is restricted, revenue is recorded to net assets with donor restrictions at the time of receipt or commitment is received, whichever is earlier. When the donor restriction expires, the contribution is reclassified to net assets without donor restrictions through net assets released from restriction in the consolidated statements of activities. All expenses directly related to donor restrictions are included in the appropriate expense category on the net assets without donor restrictions section of the consolidated statements of activities, creating a reduction in net assets without donor restrictions.

Unconditional promises to give expected to be collected within one year are recorded at fair value, while if collection is expected in future years they are recorded at their estimated fair value, which represents the present value of their estimated future cash flows. Amortization of the related present value discounts is included in contribution revenue.

Conditional promises to give are not included as revenue, gains, and other support without donor restrictions until the conditions placed on the gift by the donor or agency are substantially met. When the contribution is both conditional and restricted to a purpose, and both of these are met simultaneously, National Jewish Health has elected to record contribution revenue directly to net assets without donor restrictions according to the simultaneous release accounting election provided in FASB Accounting Standards Codification 958-605-45-4B.

Bequest income is recognized when all of the following criteria are met: (1) National Jewish Health has received notification of the donor's death; (2) National Jewish Health has a copy of the valid will or trust document evidencing the bequest; and (3) the value of the gift can be reasonably estimated. Accrued bequest income is shown as net assets with donor restrictions until received.

Contributions restricted to purchase property, plant, and equipment are reported as net assets with donor restrictions, then released to without donor restrictions when purchased and placed in service, unless the donor stipulates how long the assets must be used. In that case, the restriction is released as stipulated and the asset is depreciated over the asset's useful life.

National Jewish Health and Subsidiary
Notes to Consolidated Financial Statements
June 30, 2022 and 2021
(In thousands)

(c) Split-interest Agreements

National Jewish Health receives certain planned gift agreements in which National Jewish Health has an interest in the assets and receives benefits that are shared with another beneficiary designated by the donor. These contributions are termed split-interest agreements. National Jewish Health benefits from the following types of split-interest agreements: irrevocable charitable remainder trusts, charitable lead trusts, charitable gift annuities, pooled income funds, and perpetual trusts. Assets are invested and payments made to the appropriate beneficiary in accordance with the agreements. The fair value of the future payments is recorded as a liability.

Assets held under the split-interest agreements were \$6,136 and \$6,704 as of June 30, 2022 and 2021, respectively, and were recorded in the appropriate investment category. When applicable, the amounts to be received in future periods were discounted using a risk-adjusted rate of 5.3% in addition to the expected term of the split-interest agreements.

The amount of the contribution is recorded as the difference between the asset and the liability as revenue without donor restrictions unless otherwise restricted by the donor. Subsequent changes in the fair value are recorded as change in split-interest agreements on the consolidated statements of activities.

Included in long term investments, are assets held to meet the mandated annuity reserves as required by the governing state the agreement was written in.

(d) Grant Research Awards

Total grant research awards consist of grants from the federal government, charitable foundations, and private corporations. These grants are classified as exchange transactions if the grantor is receiving the direct benefit of the research and contributions. Most grants are contributions where the public receives the direct benefit. All grants have a restricted purpose and most are conditional. This is determined from the award document.

Generally, both the condition and restricted purposes are met simultaneously and National Jewish Health has elected the expediency of recording these grant awards to revenues, gains and other support without donor restrictions when the conditions and restrictions have been met. Unconditional restricted contributions are recorded to revenue, gains, and other support with donor restrictions at the time the grant is awarded, and released to revenue, gains, and other support without donor restrictions when the restricted purpose has been met.

Exchange transactions are recorded directly to revenue, gains, and other support without donor restrictions as performance obligations are met over time. Both the contributions and the exchange transactions are recorded as grant research awards in the consolidated statements of activities. The composition of total grant revenue for the years ended June 30, 2022 and 2021 is:

National Jewish Health and Subsidiary
Notes to Consolidated Financial Statements
June 30, 2022 and 2021
(In thousands)

	2022			2021		
	Without Donor Restrictions	With Donor Restrictions	Total	Without Donor Restrictions	With Donor Restrictions	Total
Contributions	\$ 56,988	\$ -	\$ 56,988	\$ 53,270	\$ -	\$ 53,270
Exchange transactions	2,826	-	2,826	4,000	-	4,000
	<u>\$ 59,814</u>	<u>\$ -</u>	<u>\$ 59,814</u>	<u>\$ 57,270</u>	<u>\$ -</u>	<u>\$ 57,270</u>

At June 30, 2022 and 2021, National Jewish Health had \$64,853 and \$63,047, respectively, of conditional contributions remaining consisting of federal grants and non-federal grants whose conditions and restrictions relate to National Jewish Health expending allowable costs. These agreements had award end dates ranging from one month to seven years.

Additionally, at June 30, 2022 and 2021, National Jewish Health had \$22,336 and \$8,628, respectively, of conditional contributions remaining consisting of state smoking cessation contracts whose conditions and restrictions relate to National Jewish Health performing services related to the contract. These contracts had award end dates ranging from six months to three years.

(e) Cash and Cash Equivalents

Cash and cash equivalents include investments in highly liquid debt instruments with original maturities of three months or less. Cash and cash equivalents included in long-term investments, endowment accounts, and assets limited as to use restricted internally by the board or externally are not considered to be cash and cash equivalents.

(f) Debt Issuance Costs

Bond issuance costs and bond discounts related to the issuance of bonds are deferred and amortized over the life of the respective bond issue using the straight-line method. Additionally, capital lease issuance costs related to the issuance of capital leases are deferred and amortized over the life of the capital lease using the straight-line method.

(g) Investments and Net Investment Return

Investment income, net includes interest and other investment income, dividend, realized and unrealized gains and losses on investments, less investment expenses. Investment income from endowment investments is reflected in net assets with donor restrictions, then is released from restriction when the Board appropriates the funds for expenditures. Other investment income is reflected in net assets without donor restrictions.

(h) Property and Equipment

Property and equipment is stated at cost if purchased, or if donated, is recorded at fair value at the date of donation. If donors stipulate how long the assets must be used, the contributions are recorded as net assets with donor restrictions, otherwise, they are recorded as net assets without donor restrictions. Non-depreciable assets (land) at June 30, 2022 and 2021 is \$13,081 and \$13,073, respectively. Depreciation of buildings and equipment is calculated using the straight-line

National Jewish Health and Subsidiary
Notes to Consolidated Financial Statements
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(In thousands)

method over the estimated useful lives of the assets in accordance with American Hospital Association guidelines. Depreciation expense for 2022 and 2021, respectively, is \$8,523 and \$8,460, while accumulated depreciation is \$146,392 and \$136,885. The estimated useful lives for buildings is 20 – 40 years and for equipment and software is 3 – 15 years. In 2020, National Jewish Health began amortizing the goodwill related to the sleep lab purchase over a period of three years (fiscal years ended June 30, 2020 – 2022), based on recent and expected future market changes and competition.

(i) Long-lived Asset Impairment

National Jewish Health evaluates the recoverability of the carrying value of long-lived assets whenever events or circumstances indicate the carrying amount may not be recoverable. If a long-lived asset is tested for recoverability and the undiscounted estimate of future cash flows expected to result from the use and eventual disposition of the asset is less than the carrying amount of the asset, the asset cost is adjusted to fair value and an impairment loss is recognized as the amount by which the carrying amount of a long-lived asset exceeds its fair value. There was no asset impairment loss in fiscal years ended June 30, 2022 and 2021.

(j) Net Assets

Net assets, revenues, gains and losses are classified based on the existence or absence of donor or grantor restrictions.

Net assets without donor restrictions are available for use in general operations and not subject to donor or certain grantor restrictions. The governing board has designated, from net assets without donor or certain grantor restrictions, net assets for operating reserves and an endowment.

Net assets with donor restrictions are subject to donor or certain grantor restrictions. Some restrictions are temporary in nature, such as those that will be met by the passage of time or other events specified by the donor. Other restrictions are perpetual in nature, where the donor or grantor stipulates that resources be maintained in perpetuity.

(k) Patient Service Revenue

Patient service revenue is recognized as National Jewish Health satisfies performance obligations under its contracts with patients. Patient service revenue is reported at the estimated transaction price or amount that reflects the consideration National Jewish Health expects to be entitled in exchange for providing patient care. These amounts are due from patients, third-party payors, and others for services rendered, taking into consideration both explicit price concessions (such as contractual agreements) and implicit price concessions (such as uncollectible self-pay portions). National Jewish Health pursues collection of self-pay portions, but anticipates a small amount of loss based on historical results. Due to insurance plans, government programs, charitable financial policies (state and National Jewish Health), and uncollectibles, amounts received are generally less than established billing rates.

National Jewish Health and Subsidiary

Notes to Consolidated Financial Statements

June 30, 2022 and 2021

(In thousands)

(l) Other Operating Revenue

Other operating revenue is primarily composed of contract pharmacy revenue totaling \$68,452 and \$67,175 for the years ended 2022 and 2021, respectively. The revenue is earned at a point in time as the performance obligation is met. Remaining other operating revenue also includes physician contracted services, radiology services, and other miscellaneous revenue.

(m) Subsequent Events

Subsequent events have been evaluated through October 25, 2022, which is the date the consolidated financial statements were issued.

(n) Presentation of Financial Statements

Management has elected to present the financial statements under the not-for-profit model rather than the healthcare model since National Jewish Health's non-patient revenues, gains and other support are historically in excess of patient service revenue. The difference in presentation would have no effect on the change in net assets.

(3) Patient Service Revenue

Patient service revenue generally relates to contracts with patients in which the performance obligations are to provide health care services to patients over a period of time. Revenue is estimated for patients who have not been discharged as of the reporting period based on actual charges incurred to date in relation to total expected charges. National Jewish Health believes this method provides a faithful depiction of the transfer of services over the term of the performance obligation based on the inputs needed to satisfy the obligation. The contractual relationship with patients also typically involves a third-party payer (Medicare, Medicaid, managed care plans, and commercial insurance companies), and the transaction prices for the services provided are dependent upon the terms provided by or negotiated with the third-party payers. The payment arrangements with third-party payers for the services provided to the related patients typically specify payment or reimbursement to National Jewish Health at other-than-standard charges.

Since all of its performance obligations relate to contracts with a duration of less than one year, National Jewish Health has elected to apply the optional exemption provided in FASB ASC 606-10-50-14(a), so is not required to disclose the aggregate amount of the transaction price allocated to performance obligations which are unsatisfied or partially unsatisfied at the end of the reporting period. National Jewish Health has also elected the practical expedient allowed under FASB ASC 606-10-32-18 so patient accounts are not adjusted for a financing component since National Jewish Health's expectation is accounts will be paid within one year. Generally, National Jewish Health bills within several days for services provided and the majority of receivables are paid within one year of service. National Jewish Health does enter into contracts where payments extend beyond one year. In these limited cases, the financing component is not deemed to be significant to the contract.

National Jewish Health and Subsidiary
Notes to Consolidated Financial Statements
June 30, 2022 and 2021
(In thousands)

National Jewish Health determines the transaction price based on standard charges for goods and services provided, reduced by explicit price concessions which consist of contractual adjustments provided to third-party payors, discounts provided to uninsured patients in accordance with its policy, and implicit price concessions provided to uninsured patients. National Jewish Health determines its estimates of contractual adjustments and discounts based on contractual agreements, its discount policies, and historical experience. National Jewish Health determines its estimate of implicit price concessions based on its historical collection experience with private pay and uninsured patients. For the fiscal years ended June 30, 2022 and 2021, implicit price concessions were \$1,776 and \$1,596, respectively.

National Jewish Health has determined the nature, amount, timing and uncertainty of revenue and cash flows are affected by payer class. The composition of patient service revenue by primary payor for the fiscal years ended 2022 and 2021 is as follows:

	2022	2021
Medicare	\$ 45,269	\$ 47,890
Medicaid	21,914	18,449
Managed Care, Commercial and Other	87,179	111,410
Self-Pay	1,735	701
Total patient service revenue	<u>\$ 156,097</u>	<u>\$ 178,450</u>

Laws and regulations concerning government programs, including Medicare and Medicaid, are complex and subject to varying interpretation. As a result of investigations by governmental agencies, various health care organizations have received requests for information and notices regarding alleged noncompliance with those laws and regulations, which, in some instances, have resulted in organizations entering into significant settlement agreements. Compliance with such laws and regulations may also be subject to future government review and interpretation, as well as significant regulatory action, including fines, penalties and potential exclusion from the related programs. There can be no assurance that regulatory authorities will not challenge the National Jewish Health's compliance with these laws and regulations, and it is not possible to determine the impact (if any) such claims or penalties would have upon National Jewish Health. In addition, the contracts National Jewish Health has with commercial payors also provide for retroactive audit and review of claims.

National Jewish Health provides services in Colorado to patients from throughout the United States and internationally. As of June 30, 2022 and 2021, National Jewish Health's patient care receivable for services rendered was \$28,231 and \$29,810, respectively.

Settlements with third-party payers for retroactive adjustments due to cost report or other audits and reviews are variable consideration and are included in the determination of the estimated transaction price for providing patient care. This includes an assessment to ensure it is probable a significant reversal in the amount of cumulative revenue recognized will not occur when the uncertainty associated with the retroactive adjustment is subsequently resolved. Estimated settlements are adjusted in future periods as adjustments become known based on newly available information or as years are settled or no longer subject to such audits and reviews. Adjustments arising from a change in the transaction price were not significant in 2022 nor 2021.

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Consistent with National Jewish Health's mission, care is provided to patients regardless of their ability to pay. Financial assistance is made available to patients based upon their ability to pay, and determinations in individual cases are made during National Jewish Health's preadmission process. Because National Jewish Health does not pursue collection of amounts determined to qualify as charity care, they are not reported as revenue. Expansion of eligibility coverage under Medicaid by the Affordable Care Act has decreased charity care substantially.

National Jewish Health's direct and indirect costs for services furnished under its charity care policy totaled \$396 and \$344 in 2022 and 2021, respectively. National Jewish Health also participates in the Medicare and Medicaid programs. Under these programs, National Jewish Health provides care to patients at payment rates determined by governmental agencies, regardless of actual cost. Governmental rates are frequently below cost.

(4) Natural and Functional Expense Analysis

The tables below present expenses by both their nature and their function for the fiscal years ended June 30, 2022 and 2021.

	June 30, 2022					
	Program Activities			Supporting Activities		
	Academic Services	Clinical Services	Other Services	Fund Development	Administration and Support Services	FY22 Total Expenses
Salaries and fringe benefits expense	\$ 82,658	\$ 50,372	\$ 6,309	\$ 4,971	\$ 34,595	\$ 178,905
Professional fees	7,043	5,723	1,514	636	4,178	19,094
Medical supplies and drugs expense	3,974	85,201	2,230	1	992	92,398
Occupancy expense	1,272	4,237	214	732	7,851	14,306
Office expense	568	674	220	875	2,766	5,103
Depreciation and interest	4,613	6,926	320	253	1,534	13,646
Collaborative agreements	8,815	-	-	-	-	8,815
Other expense	2,204	5,479	926	899	4,293	13,801
Total expenses	<u>\$ 111,147</u>	<u>\$ 158,612</u>	<u>\$ 11,733</u>	<u>\$ 8,367</u>	<u>\$ 56,209</u>	<u>\$ 346,068</u>

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	June 30, 2021					
	Program Activities			Supporting Activities		
	Academic Services	Clinical Services	Other Services	Fund Development	Administration and Support Services	FY21 Total Expenses
Salaries and fringe benefits expense	\$ 79,324	\$ 49,747	\$ 6,063	\$ 4,218	\$ 31,783	\$ 171,135
Professional fees	6,735	4,567	2,061	546	4,006	17,915
Medical supplies and drugs expense	4,563	93,313	2,817	-	990	101,683
Occupancy expense	940	3,785	476	719	6,384	12,304
Office expense	830	992	640	1,218	2,928	6,608
Depreciation and interest	3,730	4,375	658	221	1,459	10,443
Collaborative agreements	9,272	-	-	-	-	9,272
Other expense	1,459	6,033	472	230	3,546	11,740
Total expenses	<u>\$ 106,853</u>	<u>\$ 162,812</u>	<u>\$ 13,187</u>	<u>\$ 7,152</u>	<u>\$ 51,096</u>	<u>\$ 341,100</u>

The consolidated financial statements report certain categories of expenses attributable to more than one program or support function. Therefore, these expenses require allocation on a reasonable basis that is applied consistently. The expenses include depreciation and interest allocated based on the percentage of total expenses.

(5) Liquidity and Availability of Funds

The following reflects National Jewish Health's liquid financial assets available to meet cash needs for general expenditures for the period of one year after the consolidated statements of financial position dates of June 30, 2022 and 2021.

	2022	2021
Cash and cash equivalents	\$ 40,507	\$ 44,299
Patient care	28,231	29,810
Contributions receivable, without donor restrictions	7,357	7,111
Receivable from joint ventures	2,702	1,569
Pledges without donor restrictions and bequests, net	283	1,127
Other	8,470	8,982
Total liquid financial assets	<u>\$ 87,550</u>	<u>\$ 92,898</u>

National Jewish Health maintains a line of credit in the amount of \$15,000, which it could draw upon in the event of liquidity needs. This line of credit is unused as of June 30, 2022. National Jewish Health also has board-designated and donor-restricted assets limited to use which the institution does not intend to spend outside of approved expenditures. Of these, the internally designated assets of \$34,240 at June 30, 2022, may be drawn upon, if necessary, to meet unexpected liquidity needs.

National Jewish Health invests cash in excess of daily requirements in various short-term instruments as allowed by the investment policy.

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(6) Promises to Give

The following are unconditional promises to give recognized as receivables as of June 30, 2022 and 2021:

	<u>2022</u>	<u>2021</u>
Pledges and bequests, before discount and allowances	\$ 43,590	\$ 47,019
Less unamortized discount – pledges	(1,255)	(1,425)
Less allowance for uncollectibles – pledges and bequests	<u>(4,825)</u>	<u>(5,387)</u>
Net unconditional promises to give	<u><u>\$ 37,510</u></u>	<u><u>\$ 40,207</u></u>
Amounts due in:		
Less than one year	\$ 24,703	\$ 24,863
One to five years	12,662	17,121
More than five years	<u>6,225</u>	<u>5,035</u>
Total	<u><u>\$ 43,590</u></u>	<u><u>\$ 47,019</u></u>

Discount rates are established when the promise to give is made. Discount rates ranged from 0.21% to 3.42% for fiscal years ended June 30, 2022 and 2021, respectively.

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(7) Contributions Receivable

Contributions receivable are due within one year and for the fiscal years ended June 30, 2022 and 2021, consists of the following:

	2022
	Without Donor Restrictions
Grants	\$ 4,100
Health initiatives	3,208
Professional education	49
Total	<u>\$ 7,357</u>

	2021
	Without Donor Restrictions
Grants	\$ 3,850
Health initiatives	2,635
Professional education	626
Total	<u>\$ 7,111</u>

(8) Internally-designated Assets

The governing body has designated certain assets for strategic and other future purposes. On June 30, 2022 and 2021, the composition of internally designated assets stated at fair value, as determined by the most recent market quotations or an estimate based on significant other observable inputs are stated below:

	2022	2021
Cash and cash equivalents	\$ 2,113	\$ 2,629
Common stocks and equity funds	8,683	6,933
International securities and equities funds	4,147	6,277
Fixed income securities funds	27,766	34,382
U.S. government and agency obligations funds	4,824	2,922
Alternative investments	4,031	5,843
	<u>\$ 51,564</u>	<u>\$ 58,986</u>

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(9) Long-term Investments

The composition of long-term investments, stated at fair value, as determined by the most recent market quotations or an estimate based on significant other observable inputs at June 30, 2022 and 2021 is as follows:

	<u>2022</u>	<u>2021</u>
Cash and cash equivalents	\$ 406	\$ 389
Convertible securities and equities funds	24,107	23,980
International securities and equities funds	12,254	16,085
Fixed income securities funds	7,710	14,954
U.S. government and agency obligations funds	3,664	2,206
Alternative investments	<u>26,565</u>	<u>25,335</u>
	<u><u>\$ 74,706</u></u>	<u><u>\$ 82,949</u></u>

Investments as of June 30, 2022 and 2021 include gift annuity investments of \$10,368 and \$11,921, respectively, and the fair value of the gift annuity obligations under those agreements was \$7,203 and \$7,871, respectively. Reserves for gift annuities are held in separate investment accounts with required minimums as required by appropriate state requirements.

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(10) Composition of Investment Returns

The following summarizes investment returns and classification in the consolidated statements of activities:

	2022	
	Without Donor Restriction	With Donor Restriction
Interest income, net	\$ 1,263	\$ 2,659
Gains:		
Realized gains	2,546	4,688
Unrealized loss	<u>(9,170)</u>	<u>(15,395)</u>
Total losses	<u>(6,624)</u>	<u>(10,707)</u>
Total return on investments in stock and bond portfolios	<u>\$ (5,361)</u>	<u>\$ (8,048)</u>
	2021	
	Without Donor Restriction	With Donor Restriction
Interest income	\$ 1,003	\$ 1,989
Gains:		
Realized gains	2,224	5,409
Unrealized gains	<u>5,134</u>	<u>12,855</u>
Total gains	<u>7,358</u>	<u>18,264</u>
Total return on investments in stock and bond portfolios	<u>\$ 8,361</u>	<u>\$ 20,253</u>

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(11) Long-term Debt

Long-term debt at June 30, 2022 and 2021 is summarized as follows:

	<u>2022</u>	<u>2021</u>
Revenue Bonds, Series 2012 (a)	\$ 9,880	\$ 11,985
Revenue Bonds, Series 2005 (b)	7,900	8,300
Gove School Property (c)	1,250	1,250
Unamortized Bond Premium		
Revenue Bonds, Series 2012	<u>426</u>	<u>519</u>
	19,456	22,054
Less: unamortized debt issuance costs	(248)	(286)
Less: current portion	<u>(3,955)</u>	<u>(2,505)</u>
	<u><u>\$ 15,253</u></u>	<u><u>\$ 19,263</u></u>

(a) Series 2012 Revenue Bonds

The Colorado Health Facilities Authority issued \$26,790 aggregate principal amount of its Refunding Revenue Bonds Series 2012 (the 2012 Bonds) dated March 1, 2012. The proceeds were used to refund the Series 1998 and Series 1998B Bonds. The 2012 Bonds are subject to a mandatory sinking fund redemption beginning January 1, 2026. Final principal payments on the bonds are due in January 2027. Redemption amounts are as follows at June 30, 2022:

2023	\$ 2,205
2024	2,315
2025	2,425
2026	2,555
2027	<u>380</u>
	<u><u>\$ 9,880</u></u>

The 2012 Bonds bear interest at fixed rates varying from 3.00% to 5.00% and are secured by the rights to all future revenue derived from National Jewish Health's property, excluding revenue derived from donor-restricted property if such revenue is unavailable for debt service. The 2012 Bonds are subject to covenants which impose certain operating and financial restrictions on National Jewish Health. Management believes National Jewish Health is in compliance with all covenants for the years ended June 30, 2022 and 2021. Unamortized debt issuance costs for the 2012 Bonds were \$136 and \$166 at June 30, 2022 and 2021, respectively.

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(b) Series 2005 Revenue Bonds

In January 2005, the Colorado Health Facilities Authority issued \$13,500 aggregate principal amount of its Series 2005 Revenue Bonds (the 2005 Bonds) dated January 20, 2005. Proceeds from the 2005 Bonds were used to finance the construction of a clinical and research building, as well as several renovation projects and equipment. Unamortized debt issuance costs for the 2005 Bonds were \$111 and \$120 at June 30, 2022 and 2021, respectively.

The 2005 Bonds require annual payments of varying amounts. These payments began on January 1, 2007. Final principal payments on the bonds are due in January 2035. Redemption amounts are as follows at June 30, 2022:

2023	\$ 500
2024	500
2025	500
2026	500
2027	500
Thereafter	<u>5,400</u>
	<u><u>\$ 7,900</u></u>

The 2005 Bonds bear a variable rate of interest based on the rate at which the bonds could be remarketed at their face value and are secured by the rights to all future revenue derived from National Jewish Health's property, excluding revenue derived from donor-restricted property if such revenue is unavailable for debt service. The interest rate at June 30, 2022 was 0.95%. The 2005 Bonds are backed by an irrevocable transferable letter of credit, which is automatically extended without amendment for an additional period of 12 months. The letter of credit expires March 1, 2024, and is automatically extended by one year, each year, beginning March 1, unless otherwise terminated before the updated expiration date. Unless certain events occur, such as the expiration date of the letter of credit, advances made on the letter of credit are not due for 366 days from the date of the advance. At June 30, 2022 and 2021, no borrowings were outstanding. The 2005 Bonds are subject to covenants, which impose certain operating and financial restrictions on National Jewish Health. Management believes National Jewish Health is in compliance with all covenants for the years ended June 30, 2022 and 2021.

(c) Gove Middle School Property Promissory Note

In February 2011, National Jewish Health entered into a contract with School District No. 1, in the City and County of Denver and State of Colorado (DPS) to purchase the closed Gove Middle School property for \$9,000. DPS issued a non-recourse promissory note, collateralized by the land, in the amount of \$8,750 which bears interest at a fixed rate of 4%. An amendment to the contract dated May 28, 2020 extends the payments until October 1, 2022. The property is located adjacent to National Jewish Health's main campus and will be used for furthering National Jewish Health's clinical, research and educational mission. The final principal payment of \$1,250 is due October 1, 2022.

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(d) Held by Trustee

Assets held by trustees represent funds designated by the bond indenture to pay principal and interest on the 2012 and 2005 Bonds. These funds, which are comprised of cash and cash equivalents, relate to the following as of June 30, 2022 and 2021:

2022			
	Cash and Cash Equivalents	Fixed Income	Total
2012 Bonds			
Bond Reserve Fund	\$ 1,479	\$ 1,217	\$ 2,696
Bond Interest/Principal Fund	309	-	309
	<u>\$ 1,788</u>	<u>\$ 1,217</u>	<u>\$ 3,005</u>
2005 Bonds			
Bond Reserve Fund	\$ 783	\$ -	\$ 783
Bond Interest/Principal Fund	20	-	20
	<u>\$ 803</u>	<u>\$ -</u>	<u>\$ 803</u>
2021			
	Cash and Cash Equivalents	Fixed Income	Total
2012 Bonds			
Bond Reserve Fund	\$ 2,770	\$ -	\$ 2,770
Bond Interest/Principal Fund	305	-	305
	<u>\$ 3,075</u>	<u>\$ -</u>	<u>\$ 3,075</u>
2005 Bonds			
Bond Reserve Fund	\$ 783	\$ -	\$ 783
Bond Interest/Principal Fund	20	-	20
	<u>\$ 803</u>	<u>\$ -</u>	<u>\$ 803</u>

(12) Line of Credit

National Jewish Health has a \$15,000 unsecured revolving bank line of credit expiring on March 1, 2024. At June 30, 2022 and 2021, there was \$0 borrowed against this line. Interest accrues at a floating per annum rate of interest at the borrower's option of (a) 30 day SOFR rate plus 1.85% (b) 90 day SOFR rate plus 1.85% or (c) Prime Rate less 1%. Either selection shall not be less than 2.75%. National Jewish Health's borrowing interest rate was 2.90% and 2.75% on June 30, 2022 and 2021, respectively.

(13) Leases

Accounting Policies

National Jewish Health determines if an arrangement is a lease or contains a lease at inception. Each arrangement with monthly payments in excess of \$5,000 and total lease liability in excess of \$75,000 result in the recognition of right-of-use (ROU) assets and lease liabilities on the statements

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of financial position. ROU assets represent the right to use an underlying asset for the lease term, and lease liabilities represent the obligation to make lease payments arising from the lease, measured on a discounted basis. National Jewish Health determines lease classification as operating or finance at the lease commencement date and reports each on the statements of financial position on separate lines.

National Jewish Health elected not to combine lease and nonlease components, such as common area and other maintenance costs, property taxes, service and warranty agreements, in calculating the ROU assets and lease liabilities for its office buildings and equipment.

At lease inception, the lease liability is measured at the present value of the lease payments over the lease term. The ROU asset equals the lease liability adjusted for any initial direct costs, prepaid or deferred rent, and lease incentives. For finance leases, National Jewish Health uses the implicit rate when readily determinable. As most of the finance leases do not provide an implicit rate, National Jewish Health uses its incremental borrowing rate based on the information available at the commencement date to determine the present value of lease payments. For finance leases, National Jewish Health determines the present value of lease payments using the incremental or stated borrowing rate. For operating leases, National Jewish Health has made a policy election to use a risk-free rate (the rate of a zero-coupon U.S. Treasury instrument) for the initial and subsequent measurement. The risk-free rate is determined using a period comparable with the lease term.

The lease term may include options to extend or to terminate the lease that National Jewish Health is reasonably certain to exercise. Lease expense is generally recognized on a straight-line basis over the lease term.

National Jewish Health has elected not to record leases with an initial term of 12 months or less on the statements of financial position. Lease expense on such leases is recognized on a straight-line basis over the lease term.

Nature of Leases

National Jewish Health has entered into the following lease arrangements:

Finance Leases

These leases consist of the Building Finance Lease described below as well as other office and medical equipment leases. Termination of the leases generally are prohibited unless there is a violation under the lease agreements. Amortization of finance lease right-of-use asset was \$1,437 and \$50 for the years ended June 30, 2022 and 2021, respectively. Interest paid on finance lease liabilities was \$1,491 and \$7 for the years ended June 30, 2022 and 2021, respectively. The weighted average remaining lease term and discount rate for the years ended June 30, 2022 and 2021 was 39.35 years and 4.21%; and 4.88 years and 2.84%, respectively.

Building Finance Lease

On October 16, 2019, Colorado Health Facilities Authority Revenue Bonds (NJH-SJH Center for Outpatient Health project) Series 2019 in the aggregate principal of \$72,050 were issued on behalf of the NJH-SJH Center for Outpatient Health LLC (the Borrower), to fund construction of the

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Center for Outpatient Health building on land owned by National Jewish Health. The bonds were issued at a premium. The cash received in excess of \$72,050 approximated the amount of interest paid on the bonds prior to National Jewish Health occupying the newly constructed building in fiscal year 2022. This land is on the National Jewish Health main campus, and leased to the Borrower of the bonds. Concurrently, National Jewish Health entered into an installment sale contract with the Borrower for use and eventual purchase of the Center for Outpatient Health building. Obligations to make payments under the installment sale contract is a non-recourse obligation of National Jewish Health's limited to National Jewish Health's interest in the building and land.

The payment obligation under the installment sale contract is identical in timing and amount to the obligations of the Borrower under the bonds, which bear interest at fixed rates varying from 3.00% to 5.00% and terminates January 1, 2050. Payments under the installment sales contract will begin January 1, 2023. The obligation under the installment sale contract is guaranteed by Intermountain Healthcare.

As of June 30, 2022 and 2021, \$72,050 and \$64,049 of the bond funds have been expended for construction costs, respectively. The amount of funds expended prior to occupancy we classified as a building finance lease deposit on the consolidated statements of financial position. Since the facility is included in National Jewish Health's joint operating agreement (JOA) with Intermountain Healthcare | St. Joseph Hospital, 75% of the depreciation and interest for the facility will be recovered from Intermountain Healthcare | St. Joseph Hospital through the JOA. The Center for Outpatient Health opened in fall 2021.

Operating Leases

National Jewish Health leases office and clinic space that expire in various years through 2026. These leases generally contain renewal options for periods ranging from 1 to 5 years and require National Jewish Health to pay all executory costs (property taxes, maintenance and insurance). Lease payments have an escalating fee schedule, which range from a 0% to 3% percent increase each year. Termination of the leases is generally prohibited unless there is a violation under the lease agreement. Operating lease cost was approximately \$2,502 and \$2,448 for the years ended June 30, 2022 and 2021, respectively. Cash paid for amounts included in the measurement of operating lease liabilities was approximately \$2,468 and \$2,273, respectively. The weighted average remaining lease term and discount rate for the years ended June 30, 2022 and 2021 was 3.5 years and 0.68%; and 3.79 years and 0.30%, respectively.

Short-term Leases

National Jewish Health leases certain equipment with an expected lease terms are less than 12 months. Total lease expense included in operating expenses for the years ended June 30, 2022 and 2021, was \$39 and \$23, respectively.

All Leases

National Jewish Health has no material related-party leases. National Jewish Health's lease agreements do not contain any material residual value guarantees or material restrictive covenants.

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Future minimum lease payments and reconciliation to the consolidated statements of financial position at June 30, 2022, are as follows:

	Finance Leases	Operating Leases
2023	\$ 4,370	\$ 1,949
2024	4,377	1,370
2025	4,378	1,012
2026	4,334	772
2027	4,305	455
Thereafter	98,719	218
Total future undiscounted lease payments	120,483	5,776
Less future interest expense	48,131	131
Lease liabilities	<u>\$ 72,352</u>	<u>\$ 5,645</u>

(14) Commitments and Contingencies

(a) Professional Liability

Professional liability reserve estimates represent the estimated ultimate cost of all reported and unreported losses incurred through the respective consolidated statements of financial position. The reserves for unpaid losses and loss expenses are estimated using individual case-basis valuations and actuarial analyses. Those estimates are subject to the effects of trends in loss severity and frequency. The estimates are continually reviewed and adjustments are recorded as experience develops or new information becomes known. The time period required to resolve these claims can vary depending upon whether the claim is settled or litigated. The estimation of the timing of payments beyond a year can vary significantly. Although considerable variability is inherent in professional liability reserve estimates, we believe the reserves for losses and loss expenses are adequate based on information currently known. It is reasonably possible this estimate could change materially in the near term.

(b) Other

National Jewish Health has certain pending litigation and claims incurred in the ordinary course of business; however, management believes, based on the advice of legal counsel, the probable resolution of such contingencies will not materially affect the financial position or operations of National Jewish Health.

National Jewish Health maintains professional and general liability coverage through a claims-made policy with COPIC Insurance. The policy's liability is \$1,000 per medical incident and \$3,000 in the aggregate, with deductibles of \$100 per medical incident/occurrence and \$300 in the aggregate. In addition, umbrella coverage is provided to National Jewish Health through a

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claims-made policy with COPIC Insurance. The liability limit under the umbrella policy is \$20,000 combined medical incident and in aggregate.

(c) Risks and Uncertainties

National Jewish Health invests in securities which are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible changes in the values of investment securities will occur in the near term and those changes could materially affect the investment amounts reported in the consolidated statements of financial position.

Although the spread of the SARS-CoV-2 virus and the incidence of COVID-19 has declined, there remains economic uncertainties which may affect the financial position, result of operations and cash flows of National Jewish Health. The duration of these uncertainties and the ultimate financial effects cannot be reasonably estimated at this time.

(15) Net Assets

(a) Net Assets With Donor Restrictions

Net assets with donor restrictions at June 30, 2022 and 2021, are restricted for the following purpose or periods.

Net assets reserved for future unrestricted uses represent contributions not yet received by National Jewish Health. Endowed assets not yet appropriated for expenditure represent earnings on permanently endowed funds which have not been appropriated for expenditure by National Jewish Health in a manner consistent with the standard of prudence prescribed by State of Colorado Prudent Management of Institutional Funds Act (SPMIFA).

	2022	2021
Net assets reserved for future unrestricted uses	\$ 230	\$ 493
Subject to expenditure for specified purpose:		
Research, education, patient care and capital construction	82,765	81,283
Endowed assets not yet appropriated for expenditure	25,852	32,507
Unitrust and pooled income agreements	6,131	6,828
Beneficial interest in perpetual trust agreements	12,603	14,488
Permanent endowments	42,659	42,437
	<u>\$ 170,240</u>	<u>\$ 178,036</u>

National Jewish Health is an income beneficiary of several perpetual trusts controlled by unrelated third-party trustees. The trust document or the trustees' policies govern the investment and distribution of trust assets. Trust income distributed to National Jewish Health for the years ended June 30, 2022 and 2021 was \$561 and \$649, respectively.

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(b) Net Assets Without Donor Restrictions

Net assets without donor restrictions at June 30, 2022 and 2021, are comprised of both designated and undesignated amounts as follows:

	<u>2022</u>	<u>2021</u>
Undesignated	\$ 75,564	\$ 76,126
Designated by the board for operating reserve	21,177	23,940
Designated by the board for endowment	<u>13,063</u>	<u>14,746</u>
Net assets without donor restrictions	<u>\$ 109,804</u>	<u>\$ 114,812</u>

(c) Net Assets Released from Restrictions

Net assets were released from donor restrictions by incurring expenses satisfying the restricted purposes or by occurrence of other events specified by donors.

	<u>2022</u>	<u>2021</u>
Expiration of time restrictions	\$ 864	\$ 3,088
Subject to expenditures for specified purposes:		
Research, education, patient care		
and capital construction	12,165	4,168
Professional education	811	3,940
Distributions (proceeds are not restricted by donors)		
Beneficial interests in charitable trusts held by others	284	319
Release of appropriated endowment amounts		
without purpose restrictions	199	437
Release of appropriated endowment amounts		
with purpose restrictions	<u>1,160</u>	<u>1,046</u>
	<u>\$ 15,483</u>	<u>\$ 12,998</u>

(16) Endowment

National Jewish Health's endowment consists of approximately 80 individual donor-restricted funds established as endowments and intended for a variety of purposes. The endowment includes both donor-restricted endowment funds and funds designated by the Board of Directors to function as endowments. As required by United States of America generally accepted accounting principles (GAAP), net assets associated with endowment funds, including board-designated endowment funds, are classified and reported based on the existence or absence of donor-imposed restrictions.

The Board of Directors has interpreted SPMIFA as requiring the preservation of the fair value of the original gift as of the gift date of the endowment funds absent explicit donor stipulations to the

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contrary. As a result of this interpretation, National Jewish Health classifies amounts in its donor-restricted endowment funds as net assets with donor restrictions because those net assets are time restricted until the board appropriates such amounts for expenditure. Most of those net assets are also subject to the purpose restrictions which must be met before classifying those net assets to net assets without donor restrictions. The Board of Directors has also interpreted SPMIFA as permanently restricted net assets (a) the original value of gifts donated to the permanent endowment, (b) the original value of subsequent gifts to the permanent endowment and (c) accumulations to the permanent endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added to the fund. The remaining portion of the donor-restricted endowment fund that is not classified in permanently restricted net assets is classified as temporarily restricted net assets until those amounts are appropriated for expenditure by the organization in a manner consistent with the standard of prudence prescribed by SPMIFA. National Jewish Health has interpreted SPMIFA to permit spending from underwater funds in accordance with the prudent measures required under the law. National Jewish Health considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds:

- 1) The duration and preservation of the fund
- 2) The purpose of National Jewish Health and the donor-restricted endowment fund
- 3) General economic conditions
- 4) The possible effect of inflation and deflation
- 5) The expected total return from income and appreciation of investments
- 6) The resources of National Jewish Health
- 7) The investment policies of National Jewish Health

(a) Investment Policy

National Jewish Health has adopted investment and spending policies for endowment assets which attempt to provide a predictable stream of funding to programs supported by the endowment while balancing fund growth. Under this policy, approved by the Board of Directors, the assets are invested in a manner intended to produce results which exceed Consumer Price Index plus 5% per year as measured over a rolling 36-month period. To satisfy this long-term rate of return objective, National Jewish Health relies on a total return strategy in which investment returns are achieved through both capital appreciation and current yield. National Jewish Health targets a diversified asset allocation that places a greater emphasis on equity-based investments to achieve its long-term return objectives with prudent risk constraints.

(b) Spending Policy

National Jewish Health's spending policy varies by the purpose of the endowment and was established by the Board of Directors after considering all seven factors outlined by SPMIFA above. Funds with donor specific purposes have a spending policy of between 3% and 4% of the market value of the fund averaged over the past 12 fiscal quarters prior to when the distribution is made.

National Jewish Health and Subsidiary
Notes to Consolidated Financial Statements
June 30, 2022 and 2021
(In thousands)

National Jewish Health has a policy that permits spending from underwater endowment funds depending on the degree to which the fund is underwater, unless otherwise precluded by donor stipulations or laws and regulations. No expenditures from underwater endowment funds were appropriated for during the years ended June 30, 2022 and 2021.

The composition of net assets by type of endowment at June 30, 2022 is:

	Without Donor Restriction	With Donor Restriction	Total
Donor-restricted endowment funds	\$ -	\$ 70,922	\$ 70,922
Board-designated endowment funds	13,064	-	13,064
Total funds	<u>\$ 13,064</u>	<u>\$ 70,922</u>	<u>\$ 83,986</u>

Changes in endowment net assets for fiscal year ended June 30, 2022:

	Without Donor Restriction	With Donor Restriction	Total
Endowment net assets, beginning of year	\$ 14,746	\$ 77,894	\$ 92,640
Contributions	-	1,022	1,022
Endowment transfer	-	(1,359)	(1,359)
Investment income	171	2,347	2,518
Net assets released from restriction	-	(852)	(852)
Gain on sale of investments	577	6,438	7,015
Unrealized loss on investments	(2,430)	(14,568)	(16,998)
Endowment net assets, end of year	<u>\$ 13,064</u>	<u>\$ 70,922</u>	<u>\$ 83,986</u>

The composition of net assets by type of endowment fund at June 30, 2021:

	Without Donor Restriction	With Donor Restriction	Total
Donor-restricted endowment funds	\$ -	\$ 77,894	\$ 77,894
Board-designated endowment funds	14,746	-	14,746
Total funds	<u>\$ 14,746</u>	<u>\$ 77,894</u>	<u>\$ 92,640</u>

National Jewish Health and Subsidiary
Notes to Consolidated Financial Statements
June 30, 2022 and 2021
(In thousands)

Changes in endowment net assets for fiscal year ended June 30, 2021:

	Without Donor Restriction	With Donor Restriction	Total
Endowment net assets, beginning of year	\$ 12,578	\$ 61,957	\$ 74,535
Contributions	-	774	774
Endowment transfer	-	(1,483)	(1,483)
Investment income	127	1,641	1,768
Net assets released from restriction	-	(42)	(42)
Gain on sale of investments	587	2,959	3,546
Unrealized gain on investments	1,454	12,088	13,542
	<u>\$ 14,746</u>	<u>\$ 77,894</u>	<u>\$ 92,640</u>
Endowment net assets, end of year	<u>\$ 14,746</u>	<u>\$ 77,894</u>	<u>\$ 92,640</u>

(17) Fair Value Disclosure

Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Fair value measurements must maximize the use of observable inputs and minimize the use of unobservable inputs. A hierarchy of three levels of inputs may be used to measure fair value:

- Level 1: Quoted prices in active markets for identical assets or liabilities
- Level 2: Observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities; quoted prices in markets which are not active, other inputs which are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities.
- Level 3: Unobservable inputs which are supported by little or no market activity and are significant to the fair value of the assets or liabilities.

National Jewish Health and Subsidiary

Notes to Consolidated Financial Statements

June 30, 2022 and 2021

(In thousands)

(a) Recurring Measurements

The following tables represent the fair value measurement of assets recognized in the accompanying consolidated statements of financial position measured at fair value on a recurring basis and the level within the ASC 820 fair value hierarchy in which the fair value measurements fall at June 30, 2022 and 2021:

June 30, 2022	Fair Value	Fair Value Measurements at Reporting Date Using		
		Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Internally-designated assets				
Common stocks and equity funds	\$ 8,683	\$ 8,683	\$ -	\$ -
International securities and equities	4,147	4,147	-	-
Fixed income securities	27,766	27,766	-	-
U.S. government and agency securities	4,824	4,824	-	-
Alternative investments (A)	4,031	-	-	-
Total internally-designated assets	49,451	45,420	-	-
Assets reserved for gift annuities				
Common stocks and equity funds	1,293	1,293	-	-
International securities and equities	1,967	1,967	-	-
Fixed income securities	717	717	-	-
U.S. government and agency securities	2,019	2,019	-	-
Total assets reserved for gift annuities	5,996	5,996	-	-
Long-term investments				
Convertible securities and equities	24,107	24,107	-	-
International securities and equities	12,254	12,254	-	-
Fixed income securities	7,710	7,710	-	-
U.S. government and agency securities	3,664	3,664	-	-
Alternative investments (A)	26,565	-	-	-
Total long-term investments	74,300	47,735	-	-
Other				
Beneficial interest in perpetual trust	12,603	-	-	12,603
Total other	12,603	-	-	12,603
Total assets above	142,350	\$ 99,151	\$ -	\$ 12,603
Cash and cash equivalents not included above	2,661			
Total	\$ 145,011			

National Jewish Health and Subsidiary
Notes to Consolidated Financial Statements
June 30, 2022 and 2021
(In thousands)

June 30, 2021	Fair Value	Fair Value Measurements at Reporting Date Using		
		Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Internally-designated assets				
Common stocks and equity funds	\$ 6,933	\$ 6,933	\$ -	\$ -
International securities and equities	6,277	6,277	-	-
Fixed income securities	34,382	34,382	-	-
U.S. government and agency securities	2,922	2,922	-	-
Alternative investments (A)	5,843	-	-	-
Total internally-designated assets	56,357	50,514	-	-
Assets reserved for gift annuities				
International securities and equities	2,209	2,209	-	-
Fixed income securities	3,425	3,425	-	-
U.S. government and agency securities	895	895	-	-
Total assets reserved for gift annuities	6,529	6,529	-	-
Long-term investments				
Convertible securities and equities	23,980	23,980	-	-
International securities and equities	16,085	16,085	-	-
Fixed income securities	14,954	14,954	-	-
U.S. government and agency securities	2,206	2,206	-	-
Alternative investments (A)	25,335	-	-	-
Total long-term investments	82,560	57,225	-	-
Other				
Beneficial interest in perpetual trust	14,488	-	-	14,488
Total other	14,488	-	-	14,488
Total assets above	159,934	\$ 114,268	\$ -	\$ 14,488
Cash and cash equivalents not included above	3,193			
Total	\$ 163,127			

- (A) Certain investments that are measured at fair value using the net asset value per share (or its equivalent) practical expedient have not been classified in the fair value hierarchy. The fair value amounts included above are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the consolidated statements of financial position.

National Jewish Health and Subsidiary
Notes to Consolidated Financial Statements
June 30, 2022 and 2021
(In thousands)

Following is a description of the valuation methodologies and inputs used for assets and liabilities measured at fair value on a recurring basis and recognized in the accompanying consolidated statements of financial position, as well as the general classification of such assets and liabilities pursuant to the valuation hierarchy. There have been no significant changes in the valuation techniques during the year ended June 30, 2022.

(b) Investments

Where quoted market prices are available in an active market, securities are classified within Level 1 of the valuation hierarchy. If quoted market prices are not available, then fair values are estimated by using quoted prices of securities with similar characteristics or independent asset pricing services and pricing models, the inputs of which are market-based or independently sourced market parameters, including, but not limited to, yield curves, interest rates, volatilities, prepayments, defaults, cumulative loss projections and cash flows. Such securities are classified in Level 2 of the valuation hierarchy. In certain cases, where Level 1 or Level 2 inputs are not available, securities are classified within Level 3 of the hierarchy.

(c) Beneficial Interest in Perpetual Trust

Fair value is estimated at the present value of the trust assets using quoted market prices of securities with similar characteristics or independent asset pricing services and pricing models, the inputs of which are market-based or independently sourced market parameters. Due to the trusts being held into perpetuity, National Jewish Health will not have the ability to redeem the corpus, and therefore it is classified within Level 3 of the hierarchy.

(d) Alternative Investments

Except as described below, the fair value of alternative investments has been estimated using the net asset value per share of the investments. Alternative investments held at June 30 consist of the following:

June 30, 2022					
	<u>Fair Value</u>	<u>Unfunded</u>	<u>Redemption Frequency</u>	<u>Redemption Notice Period</u>	
Funds of Funds	\$ 30,596	\$ 17,500	Quarterly or Fund Termination	60 Days or Fund Termination	
June 30, 2021					
	<u>Fair Value</u>	<u>Unfunded</u>	<u>Redemption Frequency</u>	<u>Redemption Notice Period</u>	
Funds of Funds	\$ 31,178	\$ 10,029	Quarterly or Fund Termination	60 Days or Fund Termination	

National Jewish Health and Subsidiary
Notes to Consolidated Financial Statements
June 30, 2022 and 2021
(In thousands)

This category includes investments in funds of funds that pursue multiple strategies to diversify risks and reduce volatility. The funds' composite portfolio includes investments in U.S. common stocks, global real estate projects, private equity, pooled income vehicles and arbitrage investments. However, as of June 30, 2022, it is probable all investments in this category will be sold at an amount different from the net asset value of National Jewish Health's ownership interest in partners' capital. Therefore, the fair values of the investments in this category have been estimated using recent observable transaction information for similar investments. Investments with quarterly redemptions require lock-up periods of one year which has expired on the funds currently held. Of the remaining funds, they cannot be liquidated prior to the termination of the fund without the approval of the General Manager of the fund. Investment in the funds is intended to be long-term.

(e) Level 3 Reconciliation

The following is a reconciliation and ending balances of recurring fair value measurements recognized in the accompanying consolidated statements of financial position using significant unobservable (Level 3) inputs:

	Beneficial Interest in Perpetual Trust
Balance, June 30, 2020	\$ 12,199
Unrealized appreciation on investments in net assets	<u>2,289</u>
Balance, June 30, 2021	14,488
Unrealized depreciation on investments in net assets	<u>(1,885)</u>
Balance, June 30, 2022	<u><u>\$ 12,603</u></u>

National Jewish Health and Subsidiary
Notes to Consolidated Financial Statements
June 30, 2022 and 2021
(In thousands)

(f) Unobservable (Level 3) Inputs

The following tables present quantitative information about unobservable inputs used in recurring Level 3 fair value measurements.

Description	Fair Value June 30, 2022	Valuation Technique	Unobservable Inputs	Range Weighted Average
Beneficial Interest in Perpetual Trusts	\$ 12,603	Fair value of trust assets	Lack of redeemability	Not Applicable

Description	Fair Value June 30, 2021	Valuation Technique	Unobservable Inputs	Range Weighted Average
Beneficial Interest in Perpetual Trusts	\$ 14,488	Fair value of trust assets	Lack of redeemability	Not Applicable

(18) Employee Benefit Plans

National Jewish Health maintains a defined contribution plan (the Plan) covering substantially all benefit eligible employees. Under the terms of the Plan, National Jewish Health contributes between 5% and 6% of an employee's covered wages up to the Social Security wage base and between 10% and 11% of covered wages in excess of the Social Security wage base. The Plan contains no provisions requiring National Jewish Health to match a portion of employee contributions. Expenses under the Plan for 2022 and 2021 approximated \$6,853 and \$3,495, respectively. Due to concerns about the impact of COVID-19, the Plan was amended to suspend employer contributions to the Plan through the first half of the fiscal year 2021.

(19) Related-party Transactions

National Jewish Health from time-to-time in the normal course of business and within the guidelines of its conflict of interest policy, has entered into transactions with companies for which certain members of the companies' management also serve on the board of National Jewish Health. Management believes prices paid by National Jewish Health have been equal to or less than the prices that would have been paid in transactions with parties not related to National Jewish Health.

Supplementary Information

National Jewish Health and Subsidiary

Schedule of Expenditures of Federal Awards

Year Ended June 30, 2022

Federal Grantor/Program or Cluster Title	Federal AL Number	Pass-through Grantor	Pass-through Identifying Number	Passed Through to Subrecipients	Total Federal Expenditures
Research and Development Cluster					
National Institute of Food and Agriculture Agriculture and Food Research Initiative (AFRI)	10.310	University of Idaho	2020-67023-33261	\$ -	\$ 10,058
Occupational Safety and Health Administration: Occupational Safety and Health_Susan Harwood Training Grants	17.502	N/A	N/A	-	11,411
Office of Personnel Management Intergovernmental Personnel Act (IPA) Mobility Program	27.011	Center for Disease Control	N/A	-	28,223
National Institutes of Health: COVID-19 National Heart, Lung and Blood Institute National Heart, Lung and Blood Institute	93.HL15681 93.HL26820	Columbia University University of Colorado Denver	OT2HL156812 OT2HL156812	- -	753,974 37,855
COVID-19 Environmental Health	93.113	N/A	N/A	-	110,344
Environmental Health	93.113	N/A	N/A	179,704	1,181,291
Environmental Health	93.113	Emory University	R21ES032344	-	90,704
Environmental Health	93.113	University of Colorado Denver	R21ES028416	-	3,739
Total 93.113				179,704	1,386,078
Family Smoking Prevention and Tobacco Control Act Regulatory Research	93.077	American Heart Association	U54HL120163	-	45,946
National Center on Sleep Disorders Research	93.233	N/A	N/A	286,361	623,017
National Center on Sleep Disorders Research	93.233	Henry Ford Health System	R01HL159180	-	18,866
National Center on Sleep Disorders Research	93.233	Children's Hospital Philadelphia	R01HL152454	-	24,229
Total 93.233				286,361	666,112
Drug Abuse and Addiction Research Programs	93.279	N/A	N/A	-	535,830
Minority Health & Health Disparities Research	93.307	University of California San Francisco	R01MD010443	-	131,313

National Jewish Health and Subsidiary

Schedule of Expenditures of Federal Awards

Year Ended June 30, 2022

Federal Grantor/Program or Cluster Title	Federal AL Number	Pass-through Grantor	Pass-through Identifying Number	Passed Through to Subrecipients	Total Federal Expenditures
Discovery and Applied Research for Technological Innovations to Improve Human Health	93.286	University of Colorado Boulder	R21EB029261	-	86,025
National Center for Advancing Translational Sciences	93.350	N/A	N/A	930,344	1,190,042
National Center for Advancing Translational Sciences	93.350	University of Colorado Denver	UL1TR002535	-	676,917
National Center for Advancing Translational Sciences	93.350	University of Alabama Birmingham	UG3TR002450	-	56,810
Total 93.350				930,344	1,923,769
Cancer Cause and Prevention Research	93.393	Icahn School of Medicine at Mount Sinai	R01CA203193	-	4,059
Cancer Biology Research	93.396	Children's Hospital Philadelphia	R01CA201230	-	55
Cancer Biology Research	93.396	University of Colorado Denver	R01CA226879	-	65,897
Total 93.396				-	65,952
Cardiovascular Diseases Research	93.837	N/A	N/A	-	32,326
Cardiovascular Diseases Research	93.837	Minnesota Health	R43HL160356	-	22,242
Cardiovascular Diseases Research	93.837	University of Cincinnati	U54HL127672, U01HL131755	-	(1,840)
Total 93.837				-	52,728
COVID-19 Lung Diseases Research	93.838	N/A	N/A	4,655	263,085
COVID-19 Lung Diseases Research	93.838	University of Colorado Denver	U01HL123009, U01HL123010	-	6,646
Lung Diseases Research	93.838	N/A	N/A	4,077,357	22,132,394
Lung Diseases Research	93.838	Brigham & Women's Hospital	P01HL132825	-	24,485
Lung Diseases Research	93.838	Cincinnati Children's Hospital Medical	U01HL134745, R01HL149366	-	54,247
Lung Diseases Research	93.838	COPD Foundation, Inc.	U01HL128954	-	2,397
Lung Diseases Research	93.838	Indiana University	P01HL158507	-	166,728
Lung Diseases Research	93.838	Mayo Clinic	R01HL142992	-	6,949
Lung Diseases Research	93.838	National Heart Lung & Blood Institute	N/A	-	1,035,259
Lung Diseases Research	93.838	The Cleveland Clinic Foundation	R01HL155064	-	16,707
Lung Diseases Research	93.838	University California San Francisco	P01HL107202, U01HL137880, UHL1	-	1,075,776
Lung Diseases Research	93.838	University of Colorado Denver	R01HL152735, R01HL152756, R01H	-	343,894
Lung Diseases Research	93.838	University of North Carolina	U24HL138998, U24HL141762	-	134,883
Lung Diseases Research	93.838	University of Iowa	R01HL142042	-	24,522
Lung Diseases Research	93.838	University of Minnesota	R01HL153613	-	221,872
Lung Diseases Research	93.838	University of Virginia	R01HL153248	-	4,736
Lung Diseases Research	93.838	Wake Forest University	R01HL142992	-	4,302
Lung Diseases Research	93.838	Weill Cornell Medical College	R01HL136682, R01HL144718	-	149,826
Total 93.838				4,082,012	25,668,708

The accompanying notes are an integral part of this schedule.

National Jewish Health and Subsidiary

Schedule of Expenditures of Federal Awards

Year Ended June 30, 2022

Federal Grantor/Program or Cluster Title	Federal AL Number	Pass-through Grantor	Pass-through Identifying Number	Passed Through to Subrecipients	Total Federal Expenditures
Translation and Implementation Science Research for Heart, Lung, Blood Diseases, and Sleep Disorders	93.840	University of Colorado Denver	UG3HL151297	-	90,078
Arthritis, Musculoskeletal and Skin Diseases Research	93.846	N/A	N/A	194,208	932,234
Arthritis, Musculoskeletal and Skin Diseases Research	93.846	University of Colorado Denver	UH2AR067681, R01AR076450	-	15,349
Arthritis, Musculoskeletal and Skin Diseases Research	93.846	University of Colorado Boulder	R21AR077419, R21AR079154	-	41,068
Total 93.846				194,208	988,651
COVID-19 Allergy, Immunology and Transplantation Research	93.855	N/A	N/A	-	1,330,010
COVID-19 Allergy, Immunology and Transplantation Research	93.855	Benaroya Research Institute at VA Mason	UM1AI109565	-	154,098
COVID-19 Allergy, Immunology and Transplantation Research	93.855	Johns Hopkins University	UM2AI130836	-	81,359
Allergy, Immunology and Transplantation Research	93.855	N/A	N/A	2,087,257	10,183,127
Allergy, Immunology and Transplantation Research	93.855	Arizona State University	U19AI125357	-	9,368
Allergy, Immunology and Transplantation Research	93.855	Duke University	R01AI161296	-	107,049
Allergy, Immunology and Transplantation Research	93.855	John Hopkins University	UM2AI130836	-	170,353
Allergy, Immunology and Transplantation Research	93.855	Peak Diagnostic Partners LLC	R41AI154380	-	20,660
Allergy, Immunology and Transplantation Research	93.855	Regeneron Pharmaceutical, Inc.	U19AI117673	-	451,911
Allergy, Immunology and Transplantation Research	93.855	Stanford University	UAI147462A	-	354,636
Allergy, Immunology and Transplantation Research	93.855	University of AZ	U19AI125357	-	381,715
Allergy, Immunology and Transplantation Research	93.855	Univ of CA San Francisco	P01AI118688, R01AI136962, R01AI1	-	387,900
Allergy, Immunology and Transplantation Research	93.855	University of Colorado Denver	R01AI130198, T32AI007405, U01AI	-	140,904
Allergy, Immunology and Transplantation Research	93.855	University of Cincinnati	R01AI121028	-	24,397
Total 93.855				2,087,257	13,797,487
Biomedical Research and Research Training	93.859	N/A	N/A	48,297	608,148
Medical Library Assistance	93.879	National Network of Libraries of Medicine	N/A	-	2,200
Subtotal National Institutes of Health				7,808,183	46,844,913
National Science Foundation					
Biological Sciences	47.074	N/A	N/A	36,543	307,043

National Jewish Health and Subsidiary

Schedule of Expenditures of Federal Awards

Year Ended June 30, 2022

Federal Grantor/Program or Cluster Title	Federal AL Number	Pass-through Grantor	Pass-through Identifying Number	Passed Through to Subrecipients	Total Federal Expenditures
Department of Defense					
Military Medical Research and Development	12.420	N/A	N/A	411,773	2,634,925
Military Medical Research and Development	12.420	University of Alabama Birmingham	W81XWH-15-1-0705	-	29,320
Military Medical Research and Development	12.420	University of Colorado Denver	W81XWH-17-1-0597, W81XWH2110	-	190,484
Military Medical Research and Development	12.420	PAI Life Sciences	W81XWH1810765	-	6,476
Total 12.420				411,773	2,861,205
Department of Health and Human Services					
Food and Drug Administration Research	93.103	N/A	N/A	-	12,356
Food and Drug Administration Research	93.103	Insmed Inc.	U01FD006687	-	13,444
Food and Drug Administration Research	93.103	Oregon Health & Science University	75F40121C00120	-	7,741
Food and Drug Administration Research	93.103	Seattle Children's Hospital	R01FD006848	-	36,568
Total 93.103				-	70,109
Grants for Education, Prevention, and Early Detection of Radiogenic Cancers and Diseases	93.257	N/A	N/A	-	199,411
Occupational Safety and Health	93.262	University of Colorado	T42OH009229	-	16,992
Occupational Safety and Health	93.262	Colorado State University	U54OH008085	-	9,175
Total 93.262				-	26,167
Trans-NIH Research	93.310	N/A	N/A	21,827	97,608
Cancer Detection and Diagnostic Research	93.394	Icahn School of Medicine at Mount Sinai	U54CA260560	-	2,819
Aging Research	93.866	N/A	N/A	15,623	221,807
Subtotal Department of Health and Human Services				37,450	617,921
Total Research and Development Cluster				8,293,949	50,680,774

The accompanying notes are an integral part of this schedule.

National Jewish Health and Subsidiary

Schedule of Expenditures of Federal Awards

Year Ended June 30, 2022

Federal Grantor/Program or Cluster Title	Federal AL Number	Pass-through Grantor	Pass-through Identifying Number	Passed Through to Subrecipients	Total Federal Expenditures
Other Programs					
National and State Tobacco Control Program	93.387	Michigan Health Initiatives	E2021755, E20220457	-	539,057
National and State Tobacco Control Program	93.387	New Hampshire Health Initiatives	RFA-2021-DPHS-01-TOBAC-01	-	271,567
Total 93.387				-	810,624
COVID-19 Provider Relief Fund and American Rescue Plan (ARP) Rural Distribution	93.498	N/A	N/A	-	723,343
Department of Homeland Security					
Disaster Grants - Public Assistance (Presidentially Declared Disasters)	97.036	N/A	N/A	-	3,148,028
National Institutes of Health:					
Coal Miners Respiratory Impairment Treatment Clinics and Services	93.965	N/A	N/A	-	532,407
Coal Miners Respiratory Impairment Treatment Clinics and Services	93.965	University of Illinois	U3ARH27243	-	13,599
Total 93.965				-	546,006
Total Other Programs				-	5,228,001
Total Federal Expenditures				\$ 8,293,949	\$ 55,908,775

See accompanying notes to the schedule of expenditures of federal awards.

National Jewish Health and Subsidiary
Notes to Schedule of Expenditures of Federal Awards
Year Ended June 30, 2022

Note 1: Basis of Presentation

The accompanying schedule of expenditures of federal awards (the Schedule) includes the federal award activity of National Jewish Health and Subsidiary (National Jewish Health) 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 National Jewish Health, it is not intended to and does not present the consolidated statements of financial position, changes in net assets or cash flows of National Jewish Health.

Note 2: Summary of Significant Accounting Policies

Expenditures reported on the Schedule are reported 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. Negative amounts shown on the Schedule represent adjustments or credits made in the normal course of business to amounts reported as expenditures in prior years.

Note 3: Indirect Cost Rate

National Jewish Health has elected not to use the 10 percent de minimis indirect cost rate allowed under the Uniform Guidance and instead to use its federally approved indirect cost rate.



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**Report 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***

Independent Auditor's Report

Board of Directors
National Jewish Health and Subsidiary
Denver, Colorado

We have audited, in accordance with 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 National Jewish Health and Subsidiary (National Jewish Health) which comprise the consolidated statement of financial position as of June 30, 2022, and the related consolidated statements of activities and cash flows for the year then ended, and the related notes to the consolidated financial statements, and have issued our report thereon dated October 25, 2022.

Report on Internal Control Over Financial Reporting

In planning and performing our audit of the consolidated financial statements, we considered the National Jewish Health's 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 the National Jewish Health's internal control. Accordingly, we do not express an opinion on the effectiveness of the National Jewish Health's internal control.

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

Board of Directors
National Jewish Health and Subsidiary

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 the National Jewish Health's 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 the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

FORVIS,LLP

Denver, Colorado
October 25, 2022



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Report on Compliance for Each Major Federal Program and Report on Internal Control Over Compliance

Independent Auditor's Report

Board of Directors
National Jewish Health and Subsidiary
Denver, Colorado

Report on Compliance of Each Major Federal Program

Opinion on Each Major Federal Program

We have audited National Jewish Health and Subsidiary's (National Jewish Health) 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 each of the National Jewish Health's major federal programs for the year ended June 30, 2022. National Jewish Health's major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

In our opinion, the National Jewish Health complied, in all material respects, with the compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended June 30, 2022.

Basis for Opinion on Each 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 the National Jewish Health 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 the National Jewish Health's 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 the National Jewish Health's 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 the National Jewish Health's 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 the National Jewish Health's compliance with the requirements of each 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 the National Jewish Health's compliance with the compliance requirements referred to above and performing such other procedures as we considered necessary in the circumstances.
- Obtain an understanding of the National Jewish Health's 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 the National Jewish Health's 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

Board of Directors
National Jewish Health and Subsidiary

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.

FORVIS,LLP

Denver, Colorado
October 25, 2022

National Jewish Health and Subsidiary
Schedule of Findings and Questioned Costs
Year Ended June 30, 2022

Section I – Summary of Auditor’s Results

Financial Statements

1. Type of report the auditor issued on whether the financial statements audited were prepared in accordance with GAAP:

☒ Unmodified ☐ Qualified ☐ Adverse ☐ Disclaimer

2. Internal control over financial reporting:

Significant deficiency(ies) identified? ☐ Yes ☒ None Reported

Material weakness(es) identified? ☐ Yes ☒ No

3. Noncompliance material to the financial statements noted? ☐ Yes ☒ No

Federal Awards

4. Internal control over major federal awards programs:

Significant deficiency(ies) identified? ☐ Yes ☒ None Reported

Material weakness(es) identified? ☐ Yes ☒ No

5. Type of auditor’s report issued on compliance for major federal program(s):

☒ Unmodified ☐ Qualified ☐ Adverse ☐ Disclaimer

6. Any audit findings disclosed that are required to be reported by 2 CFR 200.516(a)? ☐ Yes ☒ No

National Jewish Health and Subsidiary
Schedule of Findings and Questioned Costs (continued)
Year Ended June 30, 2022

7. Identification of major federal programs:

Assistance Listing Number(s)	Name of Federal Program or Cluster
10.310, 17.502, 27.011, 93.077, 93.113, 93.233, 93.262, 93.279, 93.286, 93.307, 93.310, 93.350, 93.393, 93.394, 93.396, 93.837, 93.838, 93.840, 93.846, 93.855, 93.859, 93.866, 93.879, 93.HL15681, 93.HL26820	Research and Development Cluster
93.498	COVID-19 Provider Relief Fund and American Rescue Plan (ARP) Rural Distribution
97.036	Disaster Grants – Public Assistance (Presidentially Declared Disasters)

8. The dollar threshold used to distinguish between Type A and Type B programs was: \$1,677,263

9. National Jewish Health qualified as low-risk auditee?

☒ Yes

☐ No

National Jewish Health and Subsidiary
Schedule of Findings and Questioned Costs (continued)
Year Ended June 30, 2022

Section II – Financial Statement Findings

Reference Number	Finding
	No matters are reportable.

National Jewish Health and Subsidiary
Schedule of Findings and Questioned Costs (continued)
Year Ended June 30, 2022

Section III – Federal Award Findings and Questioned Costs

Reference Number	Finding
	No matters are reportable.

National Jewish Health and Subsidiary

Status of Prior Audit Findings

Year Ended June 30, 2022

Reference Number	Summary of Finding	Status
	No matters are reportable.	