

NO/AIDS Task Force doing business as CrescentCare

**Consolidated Financial Statements and
Independent Auditors' Reports**

June 30, 2025 and 2024

NO/Aids Task Force
doing business as CrescentCare
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INDEPENDENT AUDITORS' REPORT

Board of Trustees
NO/AIDS Task Force
doing business as CrescentCare
New Orleans, Louisiana

Report on the Audit of the Financial Statements

Opinion

We have audited the accompanying consolidated financial statements of NO/AIDS Task Force doing business as CrescentCare (the Organization), a nonprofit organization, which comprise the statements of financial position as of June 30, 2025 and 2024, and the related consolidated statements of operations and changes in net assets and cash flows for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Organization as of June 30, 2025 and 2024, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS) 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 Auditors' Responsibilities for the Audit of the Consolidated Financial Statements section of our report. We are required to be independent of the Organization, and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our 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 financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

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

Auditors' Responsibilities for the Audit of the Consolidated Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' 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, including omissions, 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 financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the consolidated financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances but not for the purpose of expressing an opinion on the effectiveness of the Organization's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the consolidated financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Organization's ability to continue as a going concern for a reasonable period of time.

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

Supplemental Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying supplemental information shown on pages 29 through 33, as listed in the table of contents, is presented for purposes of additional analysis and is not a required part of these financial statements. The accompanying schedule of expenditures of federal awards is presented for purposes of additional analysis, as required by the Uniform Guidance, and is not a required part of these financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements.

The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting, and other records used to prepare the financial statements, or to the financial statements themselves, and other additional procedures in accordance with GAAS. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Other Reporting Required by *Government Auditing Standards*

In accordance with *Government Auditing Standards*, we have also issued our report dated December 18, 2025, on our of the Organization's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Organization's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Organization's internal control over financial reporting and compliance.

D3A PLLC

Spokane Valley, Washington
December 18, 2025

NO/AIDS Task Force
doing business as CrescentCare
Consolidated Statements of Financial Position
June 30, 2025 and 2024

ASSETS	2025	2024
<i>Current assets</i>		
Cash and cash equivalents	\$ 17,949,651	\$ 13,907,850
Patient accounts receivable	1,719,461	2,536,711
Less allowance for credit loss	(819,331)	(1,382,741)
Patient accounts receivable, net	900,130	1,153,970
Other receivables:		
Grants	4,443,845	5,329,574
340B pharmacy	4,749,426	3,416,397
Prepaid expenses and other	226,461	218,798
Investments	5,441,848	5,150,567
Total current assets	33,711,361	29,177,156
<i>Assets limited as to use</i>		
Held by trustee for construction fund	-	1,911,438
Held by trustee for reserve fund	376,833	501,960
Total assets limited as to use	376,833	2,413,398
<i>Noncurrent assets</i>		
Investment in accountable care organization	122,541	-
Investment in Housing Partnership	400,107	400,107
Receivable for 2515 Canal St. Project	14,013,000	14,013,000
Receivable for 1631 Elysian Fields Project	-	14,027,240
Property, buildings, and equipment, net	31,837,415	31,971,354
Total noncurrent assets	46,373,063	60,411,701
Total assets	\$ 80,461,257	\$ 92,002,255
LIABILITIES AND NET ASSETS		
<i>Current liabilities</i>		
Accounts payable	\$ 4,238,428	\$ 2,853,486
Construction accounts payable	-	747,016
Accrued compensation and related liabilities	2,225,921	2,318,526
Current maturities of long-term debt	327,857	4,023,676
Accrued interest	35,151	35,151
Refundable advances	587,992	-
Total current liabilities	7,415,349	9,977,855
<i>Noncurrent liabilities</i>		
Long-term debt, less current portion	33,176,974	53,563,270
Total liabilities	40,592,323	63,541,125
<i>Net assets without donor restrictions</i>		
Controlling interest	37,885,066	27,958,906
Noncontrolling interest	1,983,868	502,224
Total net assets without donor restrictions	39,868,934	28,461,130
Total liabilities and net assets	\$ 80,461,257	\$ 92,002,255

See accompanying notes to financial statements

NO/AIDS Task Force
doing business as CrescentCare
Consolidated Statements of Operations and Changes in Net Assets
Years Ended June 30, 2025 and 2024

	2025	2024
<i>Operating revenues</i>		
Patient service revenue	\$ 5,898,357	\$ 5,019,567
Grants	21,496,476	21,624,691
340B pharmacy	55,821,526	45,002,610
Investment return, net	1,205,813	1,249,271
Historic tax credits	3,081,428	-
Other	825,272	1,033,128
Total operating revenues	88,328,872	73,929,267
<i>Operating expenses</i>		
Salaries and wages	18,569,855	17,991,043
Payroll taxes and benefits	6,328,653	5,516,329
Professional fees	994,686	766,415
Medications	34,661,223	27,495,863
340B administration fees	9,123,527	7,324,407
Supplies	1,097,155	1,025,676
Contract medical providers	728,151	589,226
Dental referrals	517,541	376,128
Depreciation	1,683,745	1,327,480
Occupancy	600,174	743,752
Client assistance	4,634,362	4,283,231
Laboratory tests	262,152	292,734
Professional development and support	221,472	168,980
Property and operations	1,360,893	1,096,934
Insurance	462,861	307,086
Software, technology, and telephones	1,405,177	1,375,139
Interest	1,285,302	1,298,183
Advertising and outreach	108,478	83,588
Other	561,311	619,862
Total operating expenses	84,606,718	72,682,056
<i>Operating income</i>	3,722,154	1,247,211
<i>Gain on debt forgiveness</i>	5,954,026	-
<i>Change in net assets without donor restrictions</i>	9,676,180	1,247,211
Net assets without donor restrictions, beginning of year	28,461,130	27,213,919
<i>Member capital contributions - noncontrolling interest</i>	1,749,162	-
<i>Member distributions - priority returns</i>	(17,538)	-
	1,731,624	-
Net assets without donor restrictions, end of year	\$ 39,868,934	\$ 28,461,130

See accompanying notes to financial statements.

NO/AIDS Task Force
doing business as CrescentCare
Consolidated Statements of Operations and Changes in Net Assets (Continued)
Years Ended June 30, 2025 and 2024

	2025	2024
Reconciliation of net assets:		
Controlling interest:		
Net assets, beginning of year	\$ 27,958,906	\$ 26,682,550
Change in net assets	9,926,160	1,276,356
Total controlling interest	37,885,066	27,958,906
Non-controlling interest:		
Beginning of year	502,224	531,369
Member capital contributions - non-controlling interest	1,749,162	-
Member distributions - priority returns	(17,538)	-
Change in net assets	(249,980)	(29,145)
Total noncontrolling interest	1,983,868	502,224
Net assets, end of year	\$ 39,868,934	\$ 28,461,130

See accompanying notes to financial statements.

NO/AIDS Task Force
doing business as CrescentCare
Consolidated Statements of Cash Flows
Years Ended June 30, 2025 and 2024

	2025	2024
<i>Change in Cash and Cash Equivalents</i>		
<i>Cash flows from operating activities</i>		
Cash received from patient services	\$ 6,152,197	\$ 5,202,795
Cash received from grants	22,970,197	22,117,553
Cash received from 340B pharmacy	54,488,497	44,352,333
Cash received from investment return	939,602	869,687
Cash received from other revenue	3,906,700	849,239
Cash paid to or on behalf of employees	(24,991,113)	(22,968,000)
Cash paid for supplies and other expenses	(55,361,884)	(45,454,535)
Cash paid for interest	(1,141,509)	(780,227)
Net cash from operating activities	6,962,687	4,188,845
<i>Cash flows from financing activities</i>		
Principal payments on long-term debt	(2,495,480)	(229,249)
Cash distributions in priority returns	(17,538)	-
Net cash from financing activities	(2,513,018)	(229,249)
<i>Cash flows from investing activities</i>		
Purchase of investments	(147,611)	(112,584)
Cash paid for property, buildings, and equipment	(2,296,822)	(11,296,865)
Net cash from investing activities	(2,444,433)	(11,409,449)
Net increase (decrease) in cash and cash equivalents	2,005,236	(7,449,853)
Cash and cash equivalents, beginning of year	16,321,248	23,771,101
Cash and cash equivalents, end of year	\$ 18,326,484	\$ 16,321,248
<i>Reconciliation of Cash and Cash Equivalents to the Statements of Financial Position</i>		
Cash and cash equivalents	\$ 17,949,651	\$ 13,907,850
Cash and cash equivalents held by trustee for construction fund	-	1,911,438
Cash and cash equivalents held by trustee for reserve fund	376,833	501,960
Total cash and cash equivalents	\$ 18,326,484	\$ 16,321,248

See accompanying notes to financial statements.

NO/AIDS Task Force
doing business as CrescentCare
Consolidated Statements of Cash Flows (Continued)
Years Ended June 30, 2025 and 2024

	2025	2024
<i>Reconciliation of Change in Net Assets Without Donor Restrictions to Net Cash from Operating Activities</i>		
Change in net assets without donor restrictions	\$ 9,676,180	\$ 1,247,211
<i>Adjustments to reconcile change in net assets without donor restrictions to net cash from operating activities</i>		
Depreciation	1,683,745	1,327,480
Amortization of debt issuance costs	143,793	517,956
Unrealized gain on investments	(266,211)	(379,584)
Gain on debt forgiveness	(5,954,026)	-
(Increase) decrease in assets:		
Patient accounts receivable	253,840	183,228
Grants receivable	885,729	492,862
340B pharmacy receivable	(1,333,029)	(650,277)
Prepaid expenses and other	(7,663)	(96,457)
Increase (decrease) in liabilities:		
Accounts payable	1,384,942	1,007,054
Accrued compensation and related liabilities	(92,605)	539,372
Refundable advances	587,992	-
Net cash from operating activities	\$ 6,962,687	\$ 4,188,845

Supplemental Noncash Activities

During the year ended June 30, 2025, Chase Community Equity, LLC, made its final capital contributions totaling \$1,749,162 to Master Tenant. These contributions were made through a direct payment to Hope Federal Credit Union on behalf of NO/AIDS Task Force doing business as CrescentCare to settle an outstanding note payable.

See accompanying notes to financial statements.

**NO/AIDS Task Force
doing business as CrescentCare
Notes to Consolidated Financial Statements
Years Ended June 30, 2025 and 2024**

1. Organization and Summary of Significant Accounting Policies:

a. Organization

NO/AIDS Task Force doing business as CrescentCare (the Organization) is a nonprofit organization. The Organization was founded in 1983 in response to the early devastating effects of the AIDS epidemic in the New Orleans area. The services provided grew organically in response to the needs of patients. In response to the community need for health care in post-Hurricane Katrina New Orleans, as well as the opportunities under the Affordable Care Act, the agency expanded its mission and services when it became a Federally Qualified Health Center in 2013. The Organization's mission is strengthening the entire community through whole-person healthcare and education. The Organization's vision is a community without barriers to care, where all people have the power to be healthy and whole. The Organization's values are inclusivity, representation, and dignity.

Related Organizations:

CrescentCare Holdings, Inc. – CrescentCare Holdings, Inc. (Holdings), was formed in April 2017 as a separate 501(c)(3) entity in order to facilitate the construction of a new 65,000-square foot facility at 1631 Elysian Fields in New Orleans, Louisiana. Financing for the facility was made possible using the New Markets Tax Credit (NMTC) program. Holdings is 100 percent owned by the Organization. The NMTC compliance period ended on July 31, 2024. On August 1, 2024, all assets, liabilities, and operations of Holdings were transferred to CrescentCare. See Note 11 for more detail.

CrescentCare MidCity, LLC – CrescentCare MidCity, LLC (MidCity), was formed in June 2022 as a Louisiana limited liability company to own, rehabilitate, and finance the rehabilitation of property at 2515 Canal Street in New Orleans, Louisiana. Financing the rehabilitation is made possible using the New Markets Tax Credit program and Federal and State Historic Tax Credit programs. The property is a certified historic structure that is eligible for investment tax credits for qualifying rehabilitation expenditures pursuant to Section 47 of the Internal Revenue Code (IRC) and must continue to be operated in a manner that qualifies for Federal Historic Tax Credits and State Historic Tax Credits through the end of the Historic Tax Credit periods. MidCity is 10 percent owned by MidCity and 90 percent owned by CCMC Managing Member, LLC.

CCMC Master Tenant, LLC – CCMC Master Tenant, LLC (Master Tenant), was formed in November 2022 as a Louisiana limited liability company organized as a Special Purpose Entity solely to acquire the leasehold interest in the property and equipment owned by MidCity in order to sublease the property to the Organization and obtain long-term appreciation, cash income, and return of capital for the Members. Master Tenant is 1 percent owned by CCMC Managing Member, LLC, and 99 percent owned by Chase Community Equity, LLC, the historic tax credit investor.

CCMC Managing Member, LLC – CCMC Managing Member, LLC (Managing Member), was formed in November 2022 as a Louisiana limited liability company to act as the managing member in the MidCity and Master Tenant companies and fulfill all duties and obligations in such capacity as required by the respective operating agreements of the companies. Managing Member is 100 percent owned by the Organization.

NO/AIDS Task Force
doing business as CrescentCare
Notes to Consolidated Financial Statements (Continued)
Years Ended June 30, 2025 and 2024

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

a. Organization (continued)

The Organization's programs are as follows:

Education and prevention – CrescentCare Prevention Department uses data-driven interventions and evidence-based approaches targeting those at high risk for HIV infection, Hepatitis C (HCV), and other sexually transmitted infections (STI). The agency works closely with both the Louisiana Office of Public Health and the Center for Disease Control to ensure programs align with national best practices. In addition to the more traditional methods of prevention, education, outreach, HIV testing in community settings, promotion of risk reduction, and distribution of risk reduction materials, staff also focus on the new biomedical interventions PrEP (Pre-Exposure Prophylaxis), PEP (Post Exposure Prophylaxis), and TAP (Treatment as Prevention), with services to actively link clients to PrEP, PEP, and treatment. The agency provides many of its services in community settings and at nontraditional hours such as evenings and weekends.

Prevention staff provides HIV, HCV, and STI testing at satellite locations, as well as at community locations. One-on-one, client-centered linkage programs are available to ensure as many clients as possible are linked to appropriate services and treatment.

Primary medical care – The Organization operates two clinics that provide comprehensive medical care. Clinic services range from adult primary medical care, pediatrics, dental, and medical nutrition therapy. The Organization accepts most insurance plans and offers a sliding fee scale for those who meet the financial and household requirements. In calendar year 2024, the Organization performed 33,665 total visits for 11,926 medical patients.

Dental – The Organization offers comprehensive dental services. In calendar year 2024, the Organization performed 1,418 dental visits for 573 patients.

Case management – The Organization provides various levels of case management to all of its clients. The Organization provides case managers who connect clients with community resources.

Behavioral health – The Organization offers behavioral health counseling, substance use counseling, and psychiatry services. In calendar year 2024, the Organization performed 15,522 visits for 2,774 patients.

Clinic support – The Organization's Clinic Support assists medical professionals in a clinical setting, which includes setting patient appointments, collecting patient data and insurance information, gathering data for analysis and research, and providing any additional support required by clinics. The Organization also assists with insurance (and medical) co-payments for qualified individuals. Staff assist eligible clients in enrolling in pharmaceutical medication assistance programs for access to free or low-cost medications.

NO/AIDS Task Force
doing business as CrescentCare
Notes to Consolidated Financial Statements (Continued)
Years Ended June 30, 2025 and 2024

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

a. Organization (continued)

Food for Friends – The Organization operates its Food for Friends program, which serves home-delivered meals to patients and provides a food pantry. The Organization works with a contractor to provide meals to HIV clients who are homebound due to their severe illness and have no other access to food. The Organization also started a food pantry service for those clients who are able to prepare their own meals but do not have the resources to meet their nutritional needs. These individuals are unable to afford the food and personal care items needed to help maintain their health.

Housing and housing support services – The Organization provides assistance to those living with HIV and who are chronically homeless to obtain acceptable and affordable housing. The Organization is funded to provide housing, case management, and support services to individuals living with HIV/AIDS in the Houma/Thibodeaux area.

Mental Health Rehabilitation Program – The Mental Health Rehabilitation Program assists persons with significant disabilities to obtain and maintain housing in the community. Individuals are case-managed, and support is tailored to each one's needs.

340B pharmacy – The Organization is a covered entity in the U.S. Department of Health and Human Services, Health Resources and Services Administration, Office of Pharmacy Affairs and participates in the 340B Drug Pricing Program (340B program) whereby medications are purchased by a qualified third-party pharmacy company for the Organization clients at a discounted price, resulting in revenue for the Organization based on these savings. The Organization contracts with several local pharmacies for the 340B program. The intent of the 340B program is to permit the covered entity to stretch scarce federal resources as far as possible, reaching more eligible patients and providing more comprehensive services.

Legal services – The Organization provides civil legal assistance to income-eligible persons in Louisiana with legal issues involving matters related to or arising from their HIV status. Persons living with HIV/AIDS face a variety of problems requiring the assistance of legal professionals with experience in various areas of the law. Practice areas include personal and estate planning, simple successions, securing public benefits, protection of privacy, discrimination, consumer protection defense, and free notarial services.

b. Summary of Significant Accounting Policies

Basis of presentation – Financial statement presentation follows the recommendations of the Financial Accounting Standards Board (FASB). The Organization is required to report information regarding its financial position and operations according to two classes of net assets: with donor restrictions and without donor restrictions.

Cash and cash equivalents – Cash and cash equivalents include investments in highly liquid investments with an original maturity of three months or less.

NO/AIDS Task Force
doing business as CrescentCare
Notes to Consolidated Financial Statements (Continued)
Years Ended June 30, 2025 and 2024

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

b. Summary of Significant Accounting Policies (continued)

Property, buildings, and equipment – Property, buildings, and equipment are recorded at cost. The Organization capitalizes all expenditures for equipment in excess of \$5,000; the fair value of donated assets is similarly capitalized. Depreciation is provided over the estimated useful lives of the respective assets on a straight-line basis. Leasehold improvements are amortized over the shorter of the estimated useful life of the improvement or the term of the related lease. Impairment of long-lived assets is tested whenever events or changes in circumstances indicate that their carrying amount may not be recoverable. The carrying value of a long-lived asset is considered impaired when the anticipated undiscounted cash flow from such asset is separately identifiable and is less than its carrying value. In that event, a loss is recognized based on the amount by which the carrying value exceeds the fair market value of the long-lived asset. Fair market value is determined primarily using appraisals. Losses on long-lived assets to be disposed of are determined in a similar manner, except that fair market values are reduced for the cost to dispose. There were no impairments of long-lived assets recorded by management during the years ended June 30, 2025 and 2024.

Depreciation has been computed on the straight-line method over the following estimated useful service lives:

Buildings and improvements	5 to 40 years
Furniture and equipment	1 to 20 years

Donated property and equipment – Donations of property and equipment are recorded as support at their estimated fair value at the date of donation. Such donations are reported as support without donor restrictions, unless the donor has restricted the donated asset to a specific purpose or for use for a specified period of time. Assets donated with explicit restrictions regarding their use and contributions of cash that must be used to acquire property and equipment are reported as restricted support.

Investments and related returns – Investments in marketable securities with readily determinable fair values are reported at their fair value based on available market quotes in the consolidated statements of financial position and as increases or decreases in net assets without donor restrictions, unless their use is restricted by explicit donor stipulations or law. Dividends, interest, and realized and unrealized gains and losses that are restricted by donors are reported as increases in net assets with donor restrictions.

Dividends, interest, and realized and unrealized gains and losses absent restriction are reported as increases and decreases in net assets without donor restrictions. All components of investment returns, including related expenses, are reported as investment return, net in the accompanying consolidated statements of operations and changes in net assets.

NO/AIDS Task Force
doing business as CrescentCare
Notes to Consolidated Financial Statements (Continued)
Years Ended June 30, 2025 and 2024

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

b. Summary of Significant Accounting Policies (continued)

Investment in accountable care organization – The Organization holds an ownership interest of approximately 3.5 percent in Louisiana Primary Care Accountable Care Organization, LLC (LPCACO). LPCACO is a joint venture with 22 other federally qualified health centers and the Louisiana Primary Care Association created to participate in the Medicare Shared Savings Program and provide higher-quality coordinated care to their patients while helping to slow the growth of healthcare costs. The ownership interest in LPCACO is accounted for using the equity method. The Organization's proportionate share of LPCACO's change in net assets is reflected in the Organization's statements of operations.

Investment in Housing partnership – In June 2013, the Organization invested \$250,000 in GCHP-Claiborne MM, LLC (Investee), a limited liability company which is the managing member of GCHP-Claiborne, LLC, an entity which owns a housing development created using a Low-Income Housing Tax Credit (LIHTC) project. The primary owner of Investee is a nonprofit community housing developer who builds housing units serving a client population consistent with the Organization's mission. The Organization's 21 percent interest in the Investee is being accounted for as an equity method investment, whereby the Organization recognizes 21 percent of the Investee's change in net assets in the accompanying consolidated statements of operations and changes in net assets, and the investment balance itself reflects 21 percent of the Investee's net assets in the accompanying consolidated statements of financial position.

The development was completed and began operations in August 2014. At the end of the compliance period for the LIHTC (15 years), the Organization has a right of first refusal and option to purchase the development at the higher of fair market value, or an amount which approximates pay off of existing debt at the date of purchase. During 2025, the Organization did not make any changes to investment in subsidiary.

Contributions – Contributions received are reflected as net assets with or without donor restrictions, depending on the existence and/or nature of the donor restrictions.

Support that is restricted by the donor is reported as an increase in net assets without donor restrictions if the restriction expires in the reporting period in which the support is recognized. All other donor-restricted support is reported as net assets with donor restrictions, depending on the nature of the restriction. When a restriction expires, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statements of operations and changes in net assets as net assets released from restrictions. As of June 30, 2025 and 2024, the Organization's net assets with donor restrictions were not material to the consolidated financial statements.

Federal income tax – The Organization and Holdings are exempt from federal income taxes under Section 501(c)(3) of the IRC. Accordingly, no provision for income tax is necessary. The Organization evaluates uncertain tax positions whereby the effect of the uncertainty would be recorded if the outcome was considered probable and reasonably estimable. As of June 30, 2025 and 2024, the Organization had no uncertain tax positions requiring accrual.

NO/AIDS Task Force
doing business as CrescentCare
Notes to Consolidated Financial Statements (Continued)
Years Ended June 30, 2025 and 2024

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

b. Summary of Significant Accounting Policies (continued)

Federal income tax (continued) – MidCity and Master Tenant are not subject to income taxes. Income or loss from MidCity and Master Tenant is reported on the returns of the individual members. Management believes that they have adequately addressed all relevant tax positions and there are no unrecorded tax liabilities. Generally, MidCity and Master Tenant’s tax returns remain open for three years for federal tax examination.

Deferred financing costs – Deferred financing costs are amortized over the period the related obligation is outstanding using the straight-line method. The amount is reported as a reduction of long-term debt on the consolidated statements of financial position. Amortization of deferred financing costs is included in interest expense in the consolidated financial statements.

Assets limited as to use – Assets limited as to use include cash deposits held by trustees in construction funds and reserve funds relating to long-term debt.

Upcoming accounting pronouncement – Accounting standards that have been issued or proposed by FASB that do not require adoption until a future date are not expected to have a material impact on the consolidated financial statements upon adoption.

Performance indicator – The consolidated statements of operations and changes in net assets include a performance indicator as required by U.S. generally accepted accounting principles. Changes in net assets which are excluded from the performance indicator, consistent with industry practice, include restricted grants and contributions, unrealized gains and losses on other than trading debt securities, the releases of restrictions for capital items, gain on forgiveness of debt, and gains and losses on disposal of equipment.

Subsequent events – Subsequent events have been reviewed through December 18, 2025, the date on which the consolidated financial statements were available to be issued.

2. Liquidity and Availability of Financial Assets:

The Organization’s financial assets available within one year of the consolidated statements of financial position to meet cash needs for general expenditures are as follows:

	2025	2024
Cash and cash equivalents	\$ 17,949,651	\$ 13,907,850
Patient accounts receivable	900,130	1,153,970
Grants receivable	4,443,845	5,329,574
340B pharmacy receivables	4,749,426	3,416,397
Investments	5,441,848	5,150,567
Financial assets available to meet cash needs for general expenditures within one year	\$ 33,484,900	\$ 28,958,358

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Notes to Consolidated Financial Statements (Continued)
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2. Liquidity and Availability of Financial Assets (continued):

None of the financial assets are subject to donor or other contractual restrictions that make them unavailable for general expenditure within one year of the consolidated statements of financial position. As a part of the Organization's liquidity management, it has a policy to structure its financial assets to be available as its general expenditures, liabilities, and other obligations come due. The Organization also has a line of credit which it may draw upon (see Note 10).

3. Patient Accounts Receivable:

The Organization operates in the healthcare industry, and patient accounts receivables are primarily derived from Medicare, Medicaid, commercial insurance, and uninsured patients. At each statement of financial position date, the entity recognizes an expected allowance for credit losses. In addition, also at each reporting date, this estimate is updated to reflect any changes in credit risk since the patient accounts receivable was initially recorded. This estimate is calculated on a pooled basis where similar risk characteristics exist.

The allowance for credit losses estimate is derived from a review of the Organization's historical losses based on the aging of patient accounts receivables. This estimate is adjusted for management's assessment of current conditions, reasonable and supportable forecasts regarding future events, and any other factors deemed relevant by the entity. The Organization believes historical loss information is a reasonable starting point in which to calculate the expected allowance for credit losses, as the entity's payor mix has remained reasonably consistent from year to year.

The Organization writes off patient accounts receivables when there is information that indicates the patient is facing significant financial difficulty and there is no possibility of recovery. If any recoveries are made from any accounts previously written off, they will be recognized in income or an offset to credit loss expense in the year of recovery, in accordance with the entity's accounting policy election.

The allowance for credit losses for patient accounts receivable and the related activity are as follows:

	2025	2024
Receivables from Medicare	\$ 153,202	\$ 273,102
Receivables from Medicaid	334,254	475,274
Receivables from patients and their insurance carriers	1,232,005	1,788,335
Less allowance for credit losses	(819,331)	(1,382,741)
Total patient accounts receivable	\$ 900,130	\$ 1,153,970

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Notes to Consolidated Financial Statements (Continued)
Years Ended June 30, 2025 and 2024

3. Patient Accounts Receivable (continued):

Patient accounts receivable reported as current assets by the Organization consisted of these amounts:

	2025	2024
Beginning balance	\$ (1,382,741)	\$ (311,708)
Provision for credit losses	(550,135)	(1,095,626)
Writeoffs	1,113,545	24,593
Ending balance	\$ (819,331)	\$ (1,382,741)

4. Contract Balances:

Opening and closing balances of contract receivables were as follows:

	2025	2024	2023
Patient accounts	\$ 900,130	\$ 1,153,970	\$ 1,337,198
340B pharmacy	4,749,426	3,416,397	2,766,120
Receivable for 2515 Canal St. Project	14,013,000	14,013,000	14,013,000
Receivable for 1631 Elysian Fields Project	-	14,027,240	14,027,240
Total contract receivables	\$ 19,662,556	\$ 32,610,607	\$ 32,143,558

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5. Investments:

The Organization's investments in marketable securities are stated at fair value and consisted of the following balances:

	2025	2024
Money market	\$ 63,219	\$ 90,998
Certificates of deposit	2,890,401	1,938,002
Domestic equities	404,089	1,071,833
International equities	194,060	469,424
Mutual funds		
Equity funds	1,264,378	991,165
Open end bond funds	625,701	589,145
	\$ 5,441,848	\$ 5,150,567

At June 30, 2025, the Organization's certificates of deposit included maturities of \$1,882,110 within one year and \$1,008,291 between one and two years. At June 30, 2024, the Organization's certificates of deposit included maturities of \$585,177 within one year and \$1,352,825 between one and two years.

6. Fair Value Measurements:

The three levels of the fair value hierarchy are described as follows:

- **Level 1:** Unadjusted quoted prices in active markets that are accessible at the measurement date for identical assets or liabilities.
- **Level 2:** Quoted prices in markets that are not considered to be active or financial instruments without quoted market prices, but for which all significant inputs are observable, either directly or indirectly.
- **Level 3:** Prices or valuations that require inputs that are both significant to the fair value measurement and unobservable.

Financial assets and liabilities are classified in their entirety based on the lowest level of input that is significant to the fair value measurement. The Organization's assessment of the significance of a particular input to fair value measurement requires judgment and may affect the valuation of fair value assets and liabilities and their placement within the fair value hierarchy levels.

Investments in marketable securities are stated at fair value, which is determined by using market quotations and other information available at the valuation date.

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Notes to Consolidated Financial Statements (Continued)
Years Ended June 30, 2025 and 2024

6. Fair Value Measurements (continued):

The following tables disclose, by level within the fair value hierarchy, the Organization's assets and liabilities measured and reported on the consolidated statements of financial position at fair value on a recurring basis as of the following dates:

		2025			
		Level 1	Level 2	Level 3	Total
Money market	\$	63,219	\$ -	\$ -	\$ 63,219
Certificates of deposit		2,890,401	-	-	2,890,401
Domestic equities		404,089	-	-	404,089
International equities		194,060	-	-	194,060
Mutual funds					
Equity funds		1,264,378	-	-	1,264,378
Open end funds		625,701	-	-	625,701
	\$	5,441,848	\$ -	\$ -	\$ 5,441,848

		2024			
		Level 1	Level 2	Level 3	Total
Money market	\$	90,998	\$ -	\$ -	\$ 90,998
Certificates of deposit		1,938,002	-	-	1,938,002
Domestic equities		1,071,833	-	-	1,071,833
International equities		469,424	-	-	469,424
Mutual funds					
Equity funds		991,165	-	-	991,165
Open end funds		589,145	-	-	589,145
	\$	5,150,567	\$ -	\$ -	\$ 5,150,567

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Notes to Consolidated Financial Statements (Continued)
Years Ended June 30, 2025 and 2024

7. Property, Buildings, and Equipment:

A summary of property, buildings, and equipment is as follows:

	2025	2024
Land	\$ 2,552,719	\$ 2,140,982
Buildings and improvements	34,591,395	33,463,193
Furniture and equipment	4,924,060	4,937,669
	42,068,174	40,541,844
Less accumulated depreciation	10,230,759	8,570,490
Property, buildings, and equipment, net	\$ 31,837,415	\$ 31,971,354

8. Patient Service Revenue:

Patient service revenue is reported at the amount that reflects the consideration to which the Organization expects to be entitled in exchange for providing patient care. These amounts are due from patients, third-party payors (including health insurers and government programs), and others, and include variable consideration for retroactive revenue adjustments due to settlement of audits, reviews, and investigations. Generally, the Organization bills the patients and third-party payors several days after the services are performed. Revenue is recognized as performance obligations are satisfied.

Performance obligations are determined based on the nature of the services provided by the Organization. Revenue for performance obligations satisfied over time is recognized based on actual charges incurred in relation to total expected (or actual) charges. The Organization believes that 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. Generally, performance obligations satisfied over time relate to patients in the clinic receiving medical, dental, or behavioral health services. The Organization measures the performance obligation from the commencement of a service to the point when it is no longer required to provide services to that patient, which is generally at the time of completion of the services. Revenue for performance obligations satisfied at a point in time is generally recognized when goods are provided to patients and customers in a retail setting (for example, pharmaceuticals) and the Organization does not believe it is required to provide additional goods or services related to that sale.

The Organization determines the transaction price based on standard charges for goods and services provided, reduced by contractual adjustments provided to third-party payors, discounts provided to uninsured patients in accordance with the Organization's policy, and implicit price concessions provided to uninsured patients. The Organization determines its estimates of contractual adjustments and discounts based on contractual agreements, its discount policies, and historical experience. The Organization determines its estimate of implicit price concessions based on its historical collection experience with this class of patients.

8. Patient Service Revenue (continued):

Agreements with third-party payors typically provide for payments at amounts less than established charges. A summary of the payment arrangements with major third-party payors follows:

- **Medicare** – Services rendered to Medicare program beneficiaries are paid at federally qualified health organizations prospectively determined rates.
- **Medicaid** – Services rendered to Medicaid program beneficiaries are paid at a prospectively determined rate.
- **Other** – Payment agreements with certain commercial insurance carriers, health maintenance organizations, and preferred provider organizations provide for payment using prospectively determined rates per encounter and discounts from established charges.

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 healthcare 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 Organization'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 the Organization. In addition, the contracts the Organization has with commercial payors also provide for retroactive audit and review of claims.

Settlements with third-party payors for retroactive adjustments due to audits, reviews, or investigations are considered variable consideration and are included in the determination of the estimated transaction price for providing patient care. These settlements are estimated based on the terms of the payment agreement with the payor, correspondence from the payor, and the Organization's historical settlement activity, including an assessment to ensure that it is probable that a significant reversal in the amount of cumulative revenue recognized will not occur when the uncertainty associated with the retroactive adjustment is subsequently resolved. Estimated settlements are adjusted in future periods as adjustments become known (that is, new information becomes available) or as years are settled or are no longer subject to such audits, reviews, and investigations. Adjustments arising from a change in the transaction price were not significant in 2025 or 2024.

Generally, patients who are covered by third-party payors are responsible for related deductibles and coinsurance, which vary in amount.

The Organization also provides services to uninsured patients, and offers those uninsured patients a discount, either by policy or law, from standard charges. The Organization estimates the transaction price for patients with deductibles and coinsurance and from those who are uninsured based on historical experience and current market conditions. The initial estimate of the transaction price is determined by reducing the standard charge by any contractual adjustments, discounts, and explicit price concessions. Subsequent changes to the estimate of the transaction price are generally recorded as adjustments to patient service revenue in the period of the change. Subsequent changes that are determined to be the result of an adverse change in the patient's ability to pay are recorded as bad debt expense.

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8. Patient Service Revenue (continued):

Consistent with the Organization's mission, care is provided to patients regardless of their ability to pay. Therefore, the Organization has determined it has provided explicit price concessions to uninsured patients and patients with other uninsured balances (for example, copays and deductibles). The explicit price concessions included in estimating the transaction price represent the difference between amounts billed to patients and the amounts the Organization expects to collect based on its collection history with those patients.

Explicit price concessions provided to patients who are financially unable to pay for the healthcare services they received were approximately \$1,084,000 and \$772,000 for the years ended June 30, 2025 and 2024, respectively. The Organization determines the costs associated with providing this care by aggregating direct and indirect costs, including salaries and wages, benefits, supplies, and other operating expenses, based on its costing system. The costs for providing healthcare to patients who are financially unable to pay for the healthcare services they receive were approximately \$1,268,000 and \$905,000 for the years ended June 30, 2025 and 2024, respectively.

Implicit price concessions provided to patients other than those unable to pay for the healthcare services they received were approximately \$550,000 and \$1,095,000 for the years ended June 30, 2025 and 2024, respectively.

Patients who meet the Organization's criteria for charity care are provided care without charge or at amounts less than established rates. Such amounts determined to qualify as charity care are not reported as revenue.

The Organization has determined that the nature, amount, timing, and uncertainty of revenue and cash flows are affected by the following factors: payors, geography, service lines, methods of reimbursement, and timing of when revenue is recognized.

The composition of patient service revenue by primary payor is as follows:

	2025	2024
Medicare	\$ 904,546	\$ 438,120
Medicaid	3,318,253	3,125,850
Patients and their insurance carriers	1,675,558	1,455,597
Patient service revenue	\$ 5,898,357	\$ 5,019,567

Revenue from patient's deductibles and coinsurance are included in the preceding categories based on the primary payor.

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Notes to Consolidated Financial Statements (Continued)
Years Ended June 30, 2025 and 2024

8. Patient Service Revenue (continued):

The composition of patient care service revenue and 340B pharmacy revenue based on the timing of revenue recognition follows:

	2025	2024
Timing of revenue and recognition:		
Healthcare services transferred over time	\$ 5,898,357	\$ 5,019,567
340B pharmacy sales at a point in time	55,821,526	45,002,610
	\$ 61,719,883	\$ 50,022,177

9. New Markets Tax Credit Program:

Holdings and MidCity participate in the NMTC program. NMTC programs were established as part of the Community Renewal Tax Relief Act of 2000. The goal of the NMTC program is to spur revitalizations efforts of low-income and impoverished communities across the United States by providing tax credit incentives to investors in certified community development activities. The tax credit for investors equals 39 percent of the investment, and investors receive the tax credit over a seven-year NMTC compliance period. A community development entity (CDE) is required to participate and has the primary mission of providing financing for the revitalization projects in low-income communities.

Receivable for 1631 Elysian Fields Project:

As part of the 1631 Elysian Fields Project, the Organization loaned approximately \$14,000,000 to Chase NMTC CrescentCare Investment Fund (Chase NMTC) (not related to the Organization or related organizations). Chase NMTC used the loan proceeds (and other funding) to make equity investments in CNMC SUB-CDE 151, PCDC Health Opportunities Fund XVII LLC, and Hope New Markets 7, LLC, which in turn loaned funds to Holdings. The loan to Chase NMTC was recorded as a receivable for 1631 Elysian Fields Project in the accompanying consolidated statements of financial position. The included put option for the Chase NMTC was executed August 1, 2024. See Note 11.

Receivable for 2515 Canal St. Project:

As part of the 2515 Canal St. Project, the Organization loaned approximately \$14,000,000 to COCRF Investor 244, LLC (not related to the Organization or related organizations). COCRF Investor 244, LLC, used the loan proceeds (and other funding) to make equity investments in COCRF SubCDE 126, LLC, GCHP-NMTC-2020 Number 2, LLC, and Hope New Markets 21, LLC, which, in turn, loaned funds to MidCity (see Note 12). The loan to COCRF Investor 224, LLC has been recorded as a receivable for 2515 Canal St. Project in the accompanying consolidated statements of financial position.

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Notes to Consolidated Financial Statements (Continued)
Years Ended June 30, 2025 and 2024

10. Line of Credit:

The Organization has a secured line of credit with its investment brokerage institution. The secured line of credit has a maximum borrowing of up to \$5,200,000 as of June 30, 2025 and 2024, and is secured by the Organization's investments portfolio. For the years ended June 30, 2025 and 2024, the secured line of credit had a balance of \$-0- and carried an interest rate of 5.84 percent and 6.86 percent, respectively.

11. Long-term Debt:

A summary of long-term debt follows:

	2025	2024
CNMC SUB-CDE 151 note payable, 1.0% interest only, due quarterly until June 2024. Quarterly payments of \$36,546, including interest of 1.0%, begin September 2024. The note was fully forgiven on August 1, 2024.	\$ -	\$ 3,000,000
PCDC Health Opportunities Fund XVII LLC note payable, 1.0% interest only, due quarterly until June 2024. Quarterly payments of \$118,159, including interest of 1.0% begin September 2024. The note was fully forgiven on August 1, 2024.	-	9,700,000
Hope New Markets 7, LLC note payable, 1.0% interest only, due quarterly until June 2024. Quarterly payments of \$91,527, including interest of 1.0%, begin September 2024. The note was fully forgiven on August 1, 2024.	-	7,760,000
National Cooperative Bank, N.A., note payable, due in monthly installments of \$53,530, including interest of 4.94%, with a balloon payment of \$6,895,330 due in January 2032.	8,538,748	8,747,700
Hope Federal Credit Union note payable, 6.0% interest only, due monthly until December 2023. Monthly payments of \$23,982, including interest of 6.0% beginning January 2024 with a balloon payment of \$3,656,756 plus accrued interest due in December 2029.	3,959,649	4,000,000
Hope Federal Credit Union note payable, 5.0% interest only due monthly until February 2024. Balloon payment of \$2,926,591, plus accrued interest was paid in full during fiscal year 2025.	-	2,926,591
Enterprise Community Loan Fund, Inc., note payable, 4.4% interest only, due monthly until December 2023. Monthly payments of \$12,348, including interest of 4.4% beginning January 2024 with a balloon payment of \$2,153,939 plus accrued interest due in December 2029.	2,356,426	2,401,571

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11. Long-term Debt (continued):

	2025	2024
Erich and Hannah Sachs Foundation note payable, 4.5% interest only, due semi-annually. This loan was paid in full in January 2025.	\$ -	\$ 1,000,000
Gulf Coast Housing Partnership, Inc. note payable, 0.0% interest, due in annual payments of \$100. Balloon payment of the remaining principal is due at maturity. The original maturity date of January 2053 automatically extends every five years as long as no default has occurred.	799,800	799,900
Hope New Markets 21, LLC note payable, 1.5% interest only, due quarterly until September 2029. Balloon payment of \$4,000,000, plus accrued interest due in December 2029.	4,000,000	4,000,000
Hope New Markets 21, LLC note payable, 1.5% interest only, due quarterly until December 2029. Quarterly payments of \$23,022, including interest of 1.5% begin March 2030 and continue through December 2052.	1,820,000	1,820,000
GCHP-NMTC-2020 Number 2, LLC note payable, 1.5% interest only, due quarterly until September 2029. Balloon payment of \$1,612,184, plus accrued interest due in December 2029.	1,612,184	1,612,184
GCHP-NMTC-2020 Number 2, LLC, note payable, 1.5% interest only, due quarterly until December 2029. Quarterly payments of \$91,623, including interest of 1.5% begin March 2030 and continue through December 2052.	7,117,816	7,117,816
COCRF SubCDE 126, LLC, note payable, 1.0% interest only, due quarterly until September 2029. Balloon payment of \$887,816, plus accrued interest due in December 2029.	887,816	887,816
COCRF SubCDE 126, LLC, note payable, 1.0% interest only, due quarterly until December 2029. Quarterly payments of \$50,091, including interest of 1.0% begin March 2030 and continue through December 2052.	4,112,184	4,112,184
Finance lease obligations to various payors for equipment, payable in monthly installments ranging from \$473 to \$6,534 including interest of 2.3%-5%.	6,932	31,174
Deferred finance costs	(1,706,724)	(2,329,990)
	33,504,831	57,586,946
<i>Less current maturities</i>	327,857	4,023,676
Total long-term debt	\$ 33,176,974	\$ 53,563,270

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11. Long-term Debt (continued):

During the year ended June 30, 2018, the Organization obtained a loan totaling \$10,000,000 from Primary Care Development Corporation. This loan was used to partially finance the loan made to Chase NMTC as part of the 1631 Elysian Fields Project, as described in Note 10. During December 2021, the Organization refinanced the outstanding principal with National Cooperative Bank, N.A. The new loan matures in January 2032 and carries a 4.94 percent interest rate.

In January 2023, the Organization obtained loans of \$6,929,591 from Hope Federal Credit Union, \$2,500,000 from Enterprise Community Loan Fund, Inc., \$1,000,000 from the Erich and Hannah Sachs Foundations, and \$800,000 from Gulf Coast Housing Partnership, Inc. These loans were used to partially finance the loan made to COCRF Investor 244, LLC, as part of the 2515 Canal St. Project, as described in Note 9. The Organization has entered into an agreement to sell all state historic tax credits earned from the rehabilitation of the 2515 Canal St. Project. Proceeds from the sale was applied directly to the balloon payment of \$2,926,591 that was due in March 2024. Due to delays in completion of the project, the tax credit sale and payment were not completed until January of 2025. The tax credit was sold for \$3,081,428, which was used to pay off the remaining loan balance.

As explained in Note 9, Holdings and MidCity participate in the NMTC program.

Holdings NMTC:

Under the NMTC program, Holdings has obtained loans of \$7,760,000, \$9,700,000, and \$3,000,000, payable to CDEs (the Agreements). Quarterly payments of interest are required for the first seven years. These loans are secured by the property and equipment and other assets of Holdings and the Organization and are also subject to certain financial and other covenants as specified under the agreements. The Agreements were structured as 30-year debt financing with a seven-year NMTC compliance period. This included a put option for the Organization to acquire the loans, which was executed on August 1 2024, transferring the remaining principal balance of the loans from the lender to the Organization for \$1,000. The Organization then forgave the remaining principal balance of the loan to CCH resulting in a gain on forgiveness of debt of \$5,954,026.

MidCity NMTC:

Through the NMTC program, MidCity has obtained loans of \$5,000,000, \$8,730,000, and \$5,820,000, payable to the Loans. Quarterly payments of interest are required for the first seven years with balloon payments totaling \$6,500,000 plus accrued interest due in December 2029. Principal and interest payments on the remaining \$13,050,000 begin in March 2030 and will be due in quarterly installments through the maturity dates. The Loans have stated interest rates from 1 percent to 1.5 percent and mature in December 2052. These loans are secured by the property and equipment and other assets of MidCity and the Organization and are also subject to certain financial and other covenants as specified under the agreements. The agreements were structured as 30-year debt financing with a seven-year NMTC compliance period. At the end of the seven-year compliance period, the Organization will have the option to acquire all membership rights of the investment fund and forgive the remaining debt.

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Years Ended June 30, 2025 and 2024

11. Long-term Debt (continued):

Future maturities of long-term debt are:

Years Ending June 30,	Total
2026	\$ 327,857
2027	333,837
2028	349,891
2029	369,555
2030	12,901,042
Thereafter	20,929,373
	35,211,555
Deferred financing costs	(1,706,724)
	\$ 33,504,831

Total interest costs for the years ended June 30, 2025 and 2024, were approximately \$1,285,000 and \$1,575,000, respectively, of which approximately \$-0- and \$277,000, respectively, was capitalized.

12. Retirement Plan:

The Organization offers a defined contribution 401(k) plan (the Plan) to its employees. Eligibility into the Plan is allowed after a six-month waiting period, with entry dates of January 1 and July 1 of each year. The Organization makes a qualified matching contribution and a nonelective profit-sharing contribution for eligible employees. The Organization's matching contribution was 100 percent of the first 1 percent of compensation that an employee defers, plus 50 percent of the next 5 percent for the years ended June 30, 2025 and 2024. The nonelective profit-sharing contribution was 1.5 percent of compensation for eligible employees for 2025 and 2024. Contributions to the Plan were approximately \$707,000 and \$671,000 for the years ended June 30, 2025 and 2024, respectively.

13. Commitments and Contingencies:

Medical malpractice claims – The Organization receives professional liability insurance under the Federal Tort Claims Act at no cost through the Department of Health and Human Services. The term of the coverage is by project period and all claims, if any, are 100 percent covered. The policy provides protection on an “occurrence” basis, whereby only malpractice claims that occur during the period that the insurance is in effect are covered. No liability has been accrued for future coverage for acts occurring in this year. In addition, the Organization maintains supplemental gap insurance for professional liability.

Litigation, claims, and disputes – The Organization is subject to the usual contingencies in the normal course of operations relating to the performance of its tasks under its various programs. In the opinion of management, the ultimate settlement of any litigation, claims, and disputes in process will not be material to the financial position, operations, or cash flows of the Organization.

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Years Ended June 30, 2025 and 2024

13. Commitments and Contingencies (continued):

Conditional grants and contracts – At June 30, 2025, the Organization had remaining available award balances on federal conditional grants and contracts for sponsored projects of approximately \$9,660,000. These award balances are not recognized as assets and will be recognized as revenue as the projects progress and conditions are met, generally as expenses are incurred.

Self-insurance – As of January 1, 2024, the Organization self-insures for its healthcare benefits provided to its employees. Employee medical claims are paid by the Organization through third-party plan administrators. Employees file their claims with the administrators. The administrators pay the claims out and are reimbursed by the Organization. Expenses for self-insured healthcare benefits coverage totaled approximately \$3,631,000 and \$1,570,000 for the years ended June 30, 2025 and 2024, respectively. The Organization accrued liabilities of approximately \$252,000 and \$571,000 at June 30, 2025 and 2024, respectively, for estimated claims incurred prior to year end and filed with the administrators after year end. The Organization has stop-loss insurance coverage of \$100,000 per individual during the calendar year.

14. Concentration of Risk:

Grants – Grants received require the fulfillment of certain conditions as set forth in the grant instruments. The Organization intends to fulfill the conditions of all grants, recognizing that failure to fulfill the conditions could result in the return of the funds to donors. The Organization, by accepting the grants and their terms, has agreed to the conditions of the donors.

Grants and government support represented approximately 24 percent and 29 percent of the Organization's total support and revenue for fiscal 2025 and 2024, respectively.

Cash and cash equivalents – The Organization has concentrated its credit risk for cash by maintaining deposits in financial institutions in New Orleans, Louisiana, which may at times exceed amounts covered by insurance provided by the U.S. Federal Deposit Insurance Corporation. The Organization has not experienced any losses and does not believe that significant credit risk exists as a result of this practice.

Patient accounts receivable – The Organization grants credit without collateral to its patients, most of whom are local residents. The majority of these patients are geographically concentrated in and around New Orleans, Louisiana.

The mix of patient receivables was as follows

	2025	2024
Medicare	16 %	16 %
Medicaid	26	25
Other third-party payors	16	24
Patients	42	35
	100 %	100 %

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15. Functional Expenses:

The costs of providing the various programs and other activities of the Organization have been summarized on a functional basis in the accompanying consolidated statements of operations and changes in net assets. Accordingly, certain costs such as occupancy, telephone, and supplies have been allocated among the various programs and supporting services on the basis of an agency approved cost allocation plan.

Expenses related to providing these services were as follows:

	June 30, 2025			
	Program Total	Supporting Services		Total Expenses
		Management and General	Fundraising	
Salaries and wages	\$ 15,837,230	\$ 2,683,084	\$ 49,541	\$ 18,569,855
Payroll taxes and benefits	5,563,195	756,909	8,549	6,328,653
Professional fees	247,260	706,476	40,950	994,686
Medications	34,661,223	-	-	34,661,223
340B administration fees	9,123,527	-	-	9,123,527
Supplies	1,060,856	36,299	-	1,097,155
Contract medical providers	728,151	-	-	728,151
Dental referrals	517,541	-	-	517,541
Depreciation	1,543,476	138,774	1,495	1,683,745
Occupancy	274,356	325,720	98	600,174
Client assistance	4,634,042	-	320	4,634,362
Laboratory tests	262,152	-	-	262,152
Professional development and support	173,772	45,266	2,434	221,472
Property and operations	1,131,669	226,511	2,713	1,360,893
Insurance	333,436	129,425	-	462,861
Software, technology, and telephones	55,840	1,331,641	17,696	1,405,177
Interest	1,129,727	152,041	3,534	1,285,302
Advertising and outreach	72,866	2,379	33,233	108,478
Other	104,791	350,071	106,449	561,311
Total expenses	\$ 77,455,110	\$ 6,884,596	\$ 267,012	\$ 84,606,718

NO/AIDS Task Force
doing business as CrescentCare
Notes to Consolidated Financial Statements (Continued)
Years Ended June 30, 2025 and 2024

15. Functional Expenses (continued):

	June 30, 2024			
	Program Total	Management and General	Fundraising	Total Expenses
Salaries and wages	\$ 15,366,539	\$ 2,567,403	\$ 57,101	\$ 17,991,043
Payroll taxes and benefits	4,752,596	754,808	8,925	5,516,329
Professional fees	330,169	426,196	10,050	766,415
Medications	27,495,863	-	-	27,495,863
340B administration fees	7,324,407	-	-	7,324,407
Supplies	980,123	45,485	68	1,025,676
Contract medical providers	589,226	-	-	589,226
Dental referrals	376,128	-	-	376,128
Depreciation	1,089,452	234,313	3,715	1,327,480
Occupancy	475,063	267,051	1,638	743,752
Client assistance	4,283,002	229	-	4,283,231
Lab tests	292,734	-	-	292,734
Professional development and support	97,940	55,045	15,995	168,980
Property and operations	914,408	179,479	3,047	1,096,934
Insurance	186,203	120,883	-	307,086
Software, technology, and telephones	1,293,298	77,977	3,864	1,375,139
Interest	1,108,807	185,256	4,120	1,298,183
Advertising and outreach	70,210	4,034	9,344	83,588
Other	119,421	498,814	1,627	619,862
Total expenses	\$ 67,145,589	\$ 5,416,973	\$ 119,494	\$ 72,682,056

16. Intercompany Transactions:

Master Tenant and MidCity entered into lease agreements in which Master Tenant rents a facility and equipment from MidCity. The property lease commenced on June 1, 2024, and has a term of 32 years from the commencement date. Annual lease payments range from \$230,743 to \$2,230,354 and are due quarterly based on the rent schedule as provided in the lease agreement. The equipment leases commenced on June 1, 2024, and have terms of 15 years from the commencement date. Annual lease payments range from \$33,000 to \$34,000 and are due quarterly based on the rent schedule as provided in the lease agreements. The operating leases results in estimated right-of-use (ROU) assets of \$15,895,000 and intercompany lease liabilities of \$16,961,000 at June 30, 2025. The operating lease ROU asset and liability are eliminated on the consolidated statements of financial position and the related payments between Master Tenant and MidCity are eliminated on the consolidated statements of operations and changes in net assets.

The Organization and Master Tenant entered into a sublease agreement in which the Organization rents the facility and equipment from Master Tenant. The sublease commenced on June 1, 2024, and has a term of 15 years from the commencement date. Annual lease payments range from \$315,000 to \$1,667,508 and are due quarterly based on the rent schedule as provided in the lease agreement. The operating lease results in an estimated ROU asset of \$8,663,000 and an intercompany lease liability of \$9,369,000 at June 30, 2025. The operating lease ROU asset and liability are eliminated on the consolidated statements of financial position and the related payments between the Organization and Master Tenant are eliminated on the consolidated statements of operations and changes in net assets.

SUPPLEMENTAL INFORMATION

NO/AIDS Task Force
doing business as CrescentCare
Consolidating Statement of Financial Position
June 30, 2025

	NO/AIDS Task Force doing business as CrescentCare	CCMC Managing Member, LLC	CCMC Master Tenant, LLC	CrescentCare MidCity, LLC	Adjustments and Eliminations	Total
ASSETS						
<i>Current assets</i>						
Cash and cash equivalents	\$ 17,677,257	\$ -	\$ 141,252	\$ 131,142	\$ -	\$ 17,949,651
Patient accounts receivable	1,719,461	-	-	-	-	1,719,461
Less allowance for credit loss	(819,331)	-	-	-	-	(819,331)
Patient accounts receivable, net	900,130	-	-	-	-	900,130
Other receivables:						
Grants	4,443,845	-	-	-	-	4,443,845
340B pharmacy	4,749,426	-	-	-	-	4,749,426
Intercompany receivables	204,214	-	2,331,847	1,066,178	(3,602,239)	-
Prepaid expenses and other	212,261	14,200	-	-	-	226,461
Investments	5,441,848	-	-	-	-	5,441,848
Total current assets	33,628,981	14,200	2,473,099	1,197,320	(3,602,239)	33,711,361
<i>Assets limited as to use</i>						
Held by trustee for reserve fund	-	-	-	376,833	-	376,833
Total assets limited as to use	-	-	-	376,833	-	376,833
<i>Noncurrent assets</i>						
Investment in accountable care organization	122,541	-	-	-	-	122,541
Investment in Housing Partnership	400,107	-	-	-	-	400,107
Investment in CCMC Master Tenant, LLC	-	18,650	-	-	(18,650)	-
Investment in CrescentCare MidCity, LLC	-	436,631	595,597	-	(1,032,228)	-
Receivable for 2515 Canal St. Project	14,013,000	-	-	-	-	14,013,000
Operating lease right-of-use asset	8,662,941	-	15,895,224	-	(24,558,165)	-
Property, buildings, and equipment, net	14,326,013	-	-	17,511,402	-	31,837,415
Total noncurrent assets	37,524,602	455,281	16,490,821	17,511,402	(25,609,043)	46,373,063
Total assets	\$ 71,153,583	\$ 469,481	\$ 18,963,920	\$ 19,085,555	\$ (29,211,282)	\$ 80,461,257
LIABILITIES AND NET ASSETS						
<i>Current liabilities</i>						
Accounts payable	\$ 4,238,428	\$ -	\$ -	\$ -	\$ -	\$ 4,238,428
Accrued compensation and related liabilities	2,225,921	-	-	-	-	2,225,921
Current maturities of long-term debt	327,857	-	-	-	-	327,857
Current maturities of operating lease liabilities	-	-	42,174	-	(42,174)	-
Intercompany payables	1,694,222	36,656	-	99,982	(1,830,860)	-
Accrued interest	35,151	-	-	-	-	35,151
Refundable advances	587,992	-	-	-	-	587,992
Total current liabilities	9,109,571	36,656	42,174	99,982	(1,873,034)	7,415,349
<i>Noncurrent liabilities</i>						
Long-term debt, less current portion	15,223,630	-	-	17,953,344	-	33,176,974
Operating lease liabilities, less current portion	9,368,930	-	16,919,228	-	(26,288,158)	-
Total noncurrent liabilities	24,592,560	-	16,919,228	17,953,344	(26,288,158)	33,176,974
Total liabilities	33,702,131	36,656	16,961,402	18,053,326	(28,161,192)	40,592,323
<i>Net assets without donor restrictions</i>						
Controlling interest	37,451,452	432,825	18,650	1,032,229	(1,050,090)	37,885,066
Noncontrolling interest	-	-	1,983,868	-	-	1,983,868
Total net assets without donor restrictions	37,451,452	432,825	2,002,518	1,032,229	(1,050,090)	39,868,934
Total liabilities and net assets	\$ 71,153,583	\$ 469,481	\$ 18,963,920	\$ 19,085,555	\$ (29,211,282)	\$ 80,461,257

See accompanying independent auditors' report.

NO/AIDS Task Force
doing business as CrescentCare
Consolidating Statement of Financial Position (Continued)
June 30, 2024

ASSETS	NO/AIDS Task Force doing business as CrescentCare	CCMC Managing Member, LLC	CCMC Master Tenant, LLC	CrescentCare MidCity, LLC	CrescentCare Holdings, Inc.	Adjustments and Eliminations	Total
<i>Current assets</i>							
Cash and cash equivalents	\$ 13,907,850	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 13,907,850
Patient accounts receivable	2,536,711	-	-	-	-	-	2,536,711
Less allowance for credit loss	(1,382,741)	-	-	-	-	-	(1,382,741)
Patient accounts receivable, net	1,153,970	-	-	-	-	-	1,153,970
Other receivables:							
Grants	5,329,574	-	-	-	-	-	5,329,574
340B pharmacy	3,416,397	-	-	-	-	-	3,416,397
Intercompany receivables	219,943	-	6,310	33,717	255,185	(515,155)	-
Prepaid expenses and other	203,189	14,200	-	-	1,409	-	218,798
Investments	5,150,567	-	-	-	-	-	5,150,567
Total current assets	29,381,490	14,200	6,310	33,717	256,594	(515,155)	29,177,156
<i>Assets limited as to use</i>							
Held by trustee for construction fund	-	-	-	1,911,438	-	-	1,911,438
Held by trustee for reserve fund	-	-	-	459,333	42,627	-	501,960
Total assets limited as to use	-	-	-	2,370,771	42,627	-	2,413,398
<i>Noncurrent assets</i>							
Investment in Housing Partnership	400,107	-	-	-	-	-	400,107
Investment in CCMC Master Tenant, LLC	-	21,175	-	-	-	(21,175)	-
Investment in CrescentCare MidCity, LLC	-	93,045	557,421	-	-	(650,466)	-
Receivable for 2515 Canal St. Project	14,013,000	-	-	-	-	-	14,013,000
Receivable for 1631 Elysian Fields Project	14,027,240	-	-	-	-	-	14,027,240
Operating lease right-of-use asset	31,190,552	-	16,407,564	-	-	(47,598,116)	-
Property, buildings, and equipment, net	1,809,525	-	-	16,893,276	13,268,553	-	31,971,354
Total noncurrent assets	61,440,424	114,220	16,964,985	16,893,276	13,268,553	(48,269,757)	60,411,701
Total assets	\$ 90,821,914	\$ 128,420	\$ 16,971,295	\$ 19,297,764	\$ 13,567,774	\$ (48,784,912)	\$ 92,002,255
LIABILITIES AND NET ASSETS							
<i>Current liabilities</i>							
Accounts payable	\$ 2,853,486	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,853,486
Construction accounts payable	-	-	-	747,016	-	-	747,016
Accrued compensation and related liabilities	2,318,526	-	-	-	-	-	2,318,526
Current maturities of long-term debt	4,023,676	-	-	-	-	-	4,023,676
Current maturities of operating lease liabilities	626,268	-	39,936	-	-	(666,204)	-
Intercompany payables	429,417	34,098	6,615	4,998	-	(475,128)	-
Accrued interest	35,151	-	-	-	-	-	35,151
Total current liabilities	10,286,524	34,098	46,551	752,014	-	(1,141,332)	9,977,855
<i>Noncurrent liabilities</i>							
Long-term debt, less current portion	15,687,459	-	-	17,895,283	19,980,528	-	53,563,270
Operating lease liabilities, less current portion	30,570,594	-	16,401,345	-	-	(46,971,939)	-
Total noncurrent liabilities	46,258,053	-	16,401,345	17,895,283	19,980,528	(46,971,939)	53,563,270
Total liabilities	56,544,577	34,098	16,447,896	18,647,297	19,980,528	(48,113,271)	63,541,125
<i>Net assets without donor restrictions</i>							
Controlling interest	34,277,337	94,322	21,175	650,467	(6,412,754)	(671,641)	27,958,906
Noncontrolling interest	-	-	502,224	-	-	-	502,224
Total net assets without donor restrictions	34,277,337	94,322	523,399	650,467	(6,412,754)	(671,641)	28,461,130
Total liabilities and net assets	\$ 90,821,914	\$ 128,420	\$ 16,971,295	\$ 19,297,764	\$ 13,567,774	\$ (48,784,912)	\$ 92,002,255

See accompanying independent auditors' report.

NO/AIDS Task Force
doing business as CrescentCare
Consolidating Statement of Operations and Changes in Net Assets
Year Ended June 30, 2025

	NO/AIDS Task Force doing business as CrescentCare	CCMC Managing Member, LLC	CCMC Master Tenant, LLC	CrescentCare MidCity, LLC	CrescentCare Holdings, Inc.	Adjustments and Eliminations	Total
<i>Operating revenues</i>							
Patient service revenue	\$ 5,898,357	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 5,898,357
Grants	21,496,476	-	-	-	-	-	21,496,476
340B pharmacy	55,821,526	-	-	-	-	-	55,821,526
Investment return, net	1,089,114	341,061	38,176	-	116,699	(379,237)	1,205,813
Historic tax credits	-	-	-	3,081,428	-	-	3,081,428
Other	3,906,700	-	1,015,466	1,292,612	-	(5,389,506)	825,272
Total operating revenues	88,212,173	341,061	1,053,642	4,374,040	116,699	(5,768,743)	88,328,872
<i>Operating expenses</i>							
Salaries and wages	18,569,855	-	-	-	-	-	18,569,855
Payroll taxes and benefits	6,328,653	-	-	-	-	-	6,328,653
Professional fees	843,218	2,448	13,535	106,639	28,846	-	994,686
Medications	34,661,223	-	-	-	-	-	34,661,223
340B administration fees	9,123,527	-	-	-	-	-	9,123,527
Supplies	1,097,155	-	-	-	-	-	1,097,155
Contract medical providers	728,151	-	-	-	-	-	728,151
Dental referrals	517,541	-	-	-	-	-	517,541
Depreciation	1,123,206	-	-	477,901	82,638	-	1,683,745
Occupancy	1,615,640	-	1,292,612	-	-	(2,308,078)	600,174
Client assistance	4,634,362	-	-	-	-	-	4,634,362
Laboratory tests	262,152	-	-	-	-	-	262,152
Professional development and support	221,472	-	-	-	-	-	221,472
Property and operations	1,360,893	-	-	-	-	-	1,360,893
Insurance	462,861	-	-	-	-	-	462,861
Software, technology, and telephones	1,405,177	-	-	-	-	-	1,405,177
Interest	919,901	-	-	326,310	39,091	-	1,285,302
Advertising and outreach	108,478	-	-	-	-	-	108,478
Historic tax credit contribution	-	-	-	3,081,428	-	(3,081,428)	-
Other	561,989	110	-	-	-	(788)	561,311
Total operating expenses	84,545,454	2,558	1,306,147	3,992,278	150,575	(5,390,294)	84,606,718
<i>Operating income (loss)</i>	3,666,719	338,503	(252,505)	381,762	(33,876)	(378,449)	3,722,154
Gain on debt forgiveness	-	-	-	-	5,954,026	-	5,954,026
Transfers	(492,604)	-	-	-	492,604	-	-
<i>Change in net assets without donor restrictions</i>	3,174,115	338,503	(252,505)	381,762	6,412,754	(378,449)	9,676,180
Net assets without donor restrictions, beginning of year	34,277,337	94,322	523,399	650,467	(6,412,754)	(671,641)	28,461,130
<i>Member capital contributions</i>	-	-	1,749,162	-	-	-	1,749,162
<i>Member distributions - priority returns</i>	-	-	(17,538)	-	-	-	(17,538)
	-	-	1,731,624	-	-	-	1,731,624
Net assets without donor restrictions, end of year	\$ 37,451,452	\$ 432,825	\$ 2,002,518	\$ 1,032,229	\$ -	\$ (1,050,090)	\$ 39,868,934

See accompanying independent auditors' report.

NO/AIDS Task Force
doing business as CrescentCare
Consolidating Statement of Operations and Changes in Net Assets (Continued)
Year Ended June 30, 2024

	NO/AIDS Task Force doing business as CrescentCare	CCMC Managing Member, LLC	CCMC Master Tenant, LLC	CrescentCare MidCity, LLC	CrescentCare Holdings, Inc.	Adjustments and Eliminations	Total
<i>Operating revenues</i>							
Patient service revenue	\$ 5,019,567	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 5,019,567
Grants	21,624,691	-	-	-	-	-	21,624,691
340B pharmacy	45,002,610	-	-	-	-	-	45,002,610
Investment return, net	1,248,440	40,950	4,583	-	831	(45,533)	1,249,271
Other	1,033,128	-	85,060	107,967	443,836	(636,863)	1,033,128
Total operating revenues	73,928,436	40,950	89,643	107,967	444,667	(682,396)	73,929,267
<i>Operating expenses</i>							
Salaries and wages	17,991,043	-	-	-	-	-	17,991,043
Payroll taxes and benefits	5,516,329	-	-	-	-	-	5,516,329
Professional fees	684,100	2,615	11,115	12,185	56,400	-	766,415
Medications	27,495,863	-	-	-	-	-	27,495,863
340B administration fees	7,324,407	-	-	-	-	-	7,324,407
Supplies	1,025,676	-	-	-	-	-	1,025,676
Contract medical providers	589,226	-	-	-	-	-	589,226
Dental referrals	376,128	-	-	-	-	-	376,128
Depreciation	156,867	-	-	70,569	1,100,044	-	1,327,480
Occupancy	1,272,648	-	107,967	-	-	(636,863)	743,752
Client assistance	4,283,231	-	-	-	-	-	4,283,231
Laboratory tests	292,734	-	-	-	-	-	292,734
Professional development and support	168,980	-	-	-	-	-	168,980
Property and operations	1,096,934	-	-	-	-	-	1,096,934
Insurance	307,086	-	-	-	-	-	307,086
Software, technology, and telephones	1,375,139	-	-	-	-	-	1,375,139
Interest	1,018,351	-	-	54,385	225,447	-	1,298,183
Advertising and outreach	83,588	-	-	-	-	-	83,588
Other	602,564	17,283	-	-	15	-	619,862
Total operating expenses	71,660,894	19,898	119,082	137,139	1,381,906	(636,863)	72,682,056
<i>Operating income (loss)</i>	2,267,542	21,052	(29,439)	(29,172)	(937,239)	(45,533)	1,247,211
<i>Change in net assets without donor restrictions</i>	2,267,542	21,052	(29,439)	(29,172)	(937,239)	(45,533)	1,247,211
Net assets without donor restrictions, beginning of year	32,009,795	73,270	552,838	158,270	(5,475,515)	(104,739)	27,213,919
<i>Member capital contributions</i>	-	-	-	521,369	-	(521,369)	-
Net assets without donor restrictions, end of year	\$ 34,277,337	\$ 94,322	\$ 523,399	\$ 650,467	\$ (6,412,754)	\$ (671,641)	\$ 28,461,130

See accompanying independent auditors' report.

NO/AIDS Task Force

doing business as CrescentCare

**Schedule of Compensation, Benefits, and Other Payments to Chief Executive Officer
Year Ended June 30, 2025**

Agency Head Name: Alice Riener, Chief Executive Officer

Salary	\$	203,961
Benefits - Insurance		17,712
Benefits - Retirement		10,198
<hr/>		
Total	\$	231,871

See accompanying independent auditors' report.

SINGLE AUDIT

AUDITORS' SECTION



INDEPENDENT AUDITORS' 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*

Board of Trustees
NO/AIDS Task Force
doing business as CrescentCare
New Orleans, Louisiana

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States, the consolidated financial statements of NO/AIDS Task Force doing business as CrescentCare (the Organization) (a nonprofit organization), which comprise the consolidated statement of financial position as of June 30, 2025, and the related consolidated statements of operations and changes in net assets and cash flows for the year then ended, and the related notes to the consolidated financial statements, and have issued our report thereon dated December 18, 2025.

Report on Internal Control Over Financial Reporting

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

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 may exist that have not been identified.

Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Organization'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 Organization'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 Organization's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

D3A PLLC

Spokane Valley, Washington
December 18, 2025



INDEPENDENT AUDITORS' REPORT ON COMPLIANCE FOR
EACH MAJOR PROGRAM AND ON INTERNAL CONTROL
OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE

Board of Trustees
NO/AIDS Task Force
doing business as CrescentCare
New Orleans, Louisiana

Report on Compliance for Each Major Federal Program

Opinion on Each Major Program

We have audited NO/AIDS Task Force doing business as CrescentCare's (the Organization) 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 Organization's major federal programs for the year ended June 30, 2025. The Organization's major federal programs are identified in the summary of auditors' results section of the accompanying schedule of audit findings and questioned costs.

In our opinion, the Organization complied, in all respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major programs for the year ended June 30, 2025.

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; 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 Auditors' Responsibilities for the Audit of Compliance section of our report.

We are required to be independent of the Organization 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 Organization'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 Organization's federal programs.

Auditors' 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 Organization'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 Organization'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 Organization'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 Organization'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 Organization'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 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 Auditors' 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.

D3A PLLC

Spokane Valley, Washington
December 18, 2025

NO/AIDS Task Force
doing business as CrescentCare
Schedule of Audit Findings and Questioned Costs
Year Ended June 30, 2025

Section I – Summary of Auditors’ Results

Financial Statements:

Type of auditors’ report issued:

Unmodified

Internal control over financial reporting:

- Material weakness(es) identified?
- Significant deficiency(ies) identified?

___ yes X no
 ___ yes X none reported

Noncompliance material to financial statements noted?

___ yes X no

Federal Awards:

Internal control over major federal programs:

- Material weakness(es) identified?
- Significant deficiency(ies) identified?

___ yes X no
 ___ yes X none reported

Type of auditors’ report issued on compliance for major federal programs:

Unmodified

Any audit findings disclosed that are required to be reported
 in accordance with 2 CFR 200.516(a)?

___ yes X no

Identification of Major Federal Programs:

Federal Assistance Listing Numbers

Name of Federal Program or Cluster

14.267

Housing Opportunities for Persons With AIDS

93.243

Substance Abuse and Mental Health Services Projects
 of Regional and National Significance

93.939

HIV Prevention Activities Non-Governmental Organization Based

93.940

HIV Prevention Activities Health Department Based

93.914

HIV Emergency Relief Project Grants

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

Auditee qualified as low-risk auditee?

___ yes X no

**NO/AIDS Task Force
doing business as CrescentCare
Schedule of Audit Findings and Questioned Costs (Continued)
Year Ended June 30, 2025**

Section II – Financial Statement Findings

No matters were reported for 2025.

Section III – Federal Award Findings and Questioned Costs

No matters were reported for 2025.

AUDITEE'S SECTION

NO/AIDS Task Force
doing business as CrescentCare
Schedule of Expenditures of Federal Awards
Year Ended June 30, 2025

Federal Grantor/Pass-through Grantor/Program Title or Cluster Title	Federal Assistance Listing Number	Pass-through Entity Identifying Number	Additional Award Information	Total Federal Expenditures
U.S. Department of Housing and Urban Development Pass-Through Programs from:				
<i>Louisiana Department of Health and Hospitals</i> Housing Opportunities for Persons With AIDS	14.241	2000544883 2000735482 2000599165		\$ 1,368,830
<i>City of New Orleans Office of Housing Policy and Community Development</i> Housing Opportunities for Persons With AIDS	14.241	LAH21F001 LAH22F001		2,295,648
<i>Unity of Greater New Orleans, Inc.</i> Housing Opportunities for Persons With AIDS	14.241	LA-H190014 LA-H220051		224,757
Total of Federal Assistance Listing Number 14.241				3,889,235
<i>Louisiana Department of Health and Hospitals</i> CDBG - Entitlement Grants Cluster Community Development Block Grant Program for Entitlement Communities	14.218	2000153419 2000490469		109,524
<i>Unity of Greater New Orleans, Inc.</i> Continuum of Care Program	14.267	LA0274L6H032206 LA0274L6H032307		1,827,084
Total U.S. Department of Housing and Urban Development				\$ 5,825,843
U.S. Department of Health and Human Services Direct Programs:				
Health Center Program Cluster Health Center Program (Community Health Centers, Migrant Health Centers, Health Care for the Homeless, and Public Housing Primary Care)	93.224			\$ 2,254,367
Grants for New and Expanded Services under the Health Center Program	93.527		COVID-19	8,076
Total Health Centers Program Cluster				2,262,443
Coordinated Services and Access to Research for Women, Infants, Children, and Youth	93.153			1,054,717
Substance Abuse and Mental Health Services Projects of Regional and National Significance	93.243			1,677,396
Sexually Transmitted Diseases (STD) Prevention and Control Grants	93.977			282,279
Grants for Capital Development in Health Centers	93.526			28,131
Grants to Provide Outpatient Early Intervention Services with Respect to HIV Disease	93.918			854,890
Certified Community Behavioral Health Clinic Expansion Grants	93.696			1,049,848
HIV Prevention Activities Non-Governmental Organization Based	93.939			836,214
Total U.S. Department of Health and Human Services Direct Programs				\$ 8,045,918

See accompanying independent auditors' report and notes to the schedule of expenditures of federal awards.

NO/AIDS Task Force
doing business as CrescentCare
Schedule of Expenditures of Federal Awards (Continued)
Year Ended June 30, 2025

Federal Grantor/Pass-through Grantor/Program Title or Cluster Title	Assistance Listing Number	Pass-through Entity Identifying Number	Additional Award Information	Federal Expenditures
U.S. Department of Health and Human Services Pass-through Programs from:				
<i>City of Baton Rouge and Parish of East Baton Rouge</i> HIV Emergency Relief Project Grants	93.914	Not available		\$ 115,709
<i>City of New Orleans Office of Health Policy & AIDS Funding</i> HIV Emergency Relief Project Grants	93.914	3611-02343 4583		3,968,125
Total of Federal Assistance Listing Number 93.914				4,083,834
<i>City of Baton Rouge and Parish of East Baton Rouge</i> Ending the HIV Epidemic: A Plan for America - Ryan White HIV/AIDS Program Parts A and B	93.686	Not available		184,002
<i>Louisiana Department of Health and Hospitals</i> HIV Care Formula Grants	93.917	2000441493 2000706532		254,050
HIV Prevention Activities Health Department Based	93.940	2000489571 2000562104 2000524779 2000656891 2000656892		1,159,717
Human Immunodeficiency Virus (HIV)/Acquired Immunodeficiency Virus Syndrome (AIDS) Surveillance	93.944	2000471817 2000731576		435,902
<i>Metropolitan Human Services District</i> Block Grants for Prevention and Treatment of Substance Abuse	93.959	23333		241,724
<i>Vera Institute of Justice</i> Grant to Provide Legal Services for Unaccompanied Children	93.U01	140D0422C0009		173,512
Total U.S. Department of Health and Human Services Pass-through Programs				\$ 6,532,741
Total U.S. Department of Health and Human Services				\$ 14,578,659
Total expenditures of federal awards				\$ 20,404,502

See accompanying independent auditors' report and notes to the schedule of expenditures of federal awards.

NO/AIDS Task Force
doing business as CrescentCare
Notes to the Schedule of Expenditures of Federal Awards
Year Ended June 30, 2025

1. Basis of Presentation:

The accompanying schedule of expenditures of federal awards (the Schedule) includes the federal award activity of NO/AIDS Task Force doing business as CrescentCare (the Organization) under programs of the federal government for the year ended June 30, 2025. The information in this Schedule is presented in accordance with the requirements of Title 2 U.S. Code of Federal Regulations Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Because the Schedule presents only a selected portion of the operations of the Organization, it is not intended to and does not present the financial position, changes in net assets, or cash flows of the Organization.

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 accordance with the Uniform Guidance, wherein certain types of expenditures are not allowable or are limited as to reimbursement. Therefore, some amounts presented in this Schedule may differ from amounts presented or used in the preparation of the consolidated financial statements.

3. De Minimis Indirect Cost Rate:

During the year ended June 30, 2025, the Organization did not elect to use the 10 percent de minimis indirect cost rate allowed under the Uniform Guidance, as they have a 35 percent indirect cost rate agreement in effect.

**NO/AIDS Task Force
doing business as CrescentCare
Summary Schedule of Prior Audit Findings
Year Ended June 30, 2025**

2024-001 Auditor Detected Journal Entries

Status: Corrected.

2024-002 Prior Period Adjustment

Status: Corrected