Volunteers In Medicine Clinic Application Summary

The Ward Foundation Board Meeting

Request Date:	March 7, 2022
Project Title:	Disease Screening Tests that Enable Wellness of the
	Underserved Population of HHI
Request Amount:	\$18,000.00
Program Area:	Health and Human Services

Organization Information	Contact Dowson for Application
Organization Information	Contact Person for Application
Organization Name:	Ms. Ginger Moran
Volunteers In Medicine Clinic	
Physical Address of	Director of Development
Organization:	(843) 689-6612
15 Northridge Drive	gmoran@vimclinic.org
Hilton Head Island, SD 29926	
Phone:	
Tel: (843) 689-6612	
Fax: (843) 689-5694	
Mailing Address (If awarded a	
grant, the check will be sent to	
this address):	
15 Northridge Drive	
Hilton Head Island, SC 29926	
Organization's Web Address:	
http://15 Northridge Drive	
http://toritorianiage.bii/e	
Tax ID:	
570959206	
Tax Status:	
501c(3)	

Organization's annual operating budget: \$2,910,640.00

Background

Founded in 1993, VIM Clinic provides free comprehensive medical, dental and mental health care for those in our community who cannot afford it and would otherwise go without. This is accomplished across 23 medical specialties and five disease management clinics through the efforts of more than 650 volunteers. This small army enables the clinic to offer our economically disadvantaged neighbors the care that they need in order to work, study, enjoy life and remain productive through their unique contributions to our local economy.

To be eligible to receive care at VIM, one must be at or below 250% of the Federal Poverty Level, be uninsured or underinsured and live or work on Hilton Head and Daufuskie Islands. With compassion, skill and dignity, we give the great gift of free healthcare to our neighbors and their families who need us. One in five or our neighbors is uninsured. The need is extraordinary as our patients are some of the most medically underserved in the country. Thousands of patients rely on us – adults, children and entire families. In fact, VIM Hilton Head Island now serves as the flagship model for 92 other free & charitable clinics across the nation.

Project/Program Budget (if applicable): \$120,000.00

Project/Program Title: Disease Screening Tests that Enable Wellness of the Underserved Population of HHI

Detailed Project/Program Description

The proposed Disease Screening Tests that Enable Wellness of the Underserved Population of HHI program addresses a critical health need – guaranteeing that the underserved of Hilton Head and Daufuskie Islands have full access to disease screening lab tests. Serving as the cornerstone of VIM's Welleness and Prevention Program, disease screening labs are are a critical component to promoting the wellness of our clients, enabling them to go to work or school in order to maintain their productivity in our community.

This program helps provide the underserved population of VIM HHI the annual disease screening lab tests that are necessary for the prevention and early detection of diseases such as diabetes, hepatitis, prostate disease, high cholesterol, HIV/AIDS, heart disease, liver and kidney and thyroid organ disease, anemia, autoimmune disease, etc. Medical best practices indicate that annual disease screening lab testing is crucial for the prevention of serious chronic and poly-chronic disease and lowering the overall cost of care. However, VIM HHI is unable to raise the \$120,000 (about \$10 per month) necessary to fully fund the disease screening tests program that will enable the full implementation of our Wellness and Prevention Program for all 12 months of the coming fiscal year starting on July 1, 2022. Based on funds on hand, increased lab costs, and increase in medical orders for their use, and anticipated funding requests, we anticipate a significant shortfall in funds directed toward the disease screening test program in the coming fiscal year that is currently underfunded. By providing \$18,000 for the Disease Screening Tests that Enable Wellness of the Underserved Population of HHI program,

The Ward Foundation will help the underserved population living or working on Hilton Head receive the critical disease screening tests that promote wellness and prevention. As you know, the majority of the patients that we serve are working in the hospitality and tourism industries that fuel the economic engine of this island that we love to call home. We are grateful for the Ward Foundation's tremendous assistance in enabling the clinic to successfully meet its mission, making vast improvements in the lives of our less fortunate neighbors and families who need us the very most.

What other organizations in your geographical area provide similar services? There are no other non-profit organizations that provide comprehensive disease screening labs to uninsured patients within this geographic area.

If funds were received from The Ward Foundation last year, how were they used? Funds received last year from The Ward Foundation were directed to VIM's role in assisting with recovery from the COVID-19 pandemic. Specifically, funding was used to increase personnel through bi-lingual patient navigation efforts to effect an expedited vaccination effort of the at-risk Hilton Head Island low income population. VIM utilized our unique and trusting relationship with this population of our community to contact, educate and ultimately administer these vaccine hesitant individuals for a clearer understanding of the safety, efficacy and importance of vaccinations.

How will you measure the results of this grant?

Program success is providing each patient with the opportunity to receive an annual (or more immediate when medically required) disease screening test since this is the medical best practice to provide prevention and early diagnosis of chronic and poly-chronic diseases. Annual disease screening lab testing provides the best outcomes in the prevention or early diagnosis of diseases such as diabetes, hepatitis, prostate disease, high cholesterol, HIV/AIDS, heart disease, liver and kidney and thyroid organ disease, anemia, autoimmune disease, etc.

The success of VIM HHI's Wellness Program is based on the ability to provide clients with disease screening tests that are foundational to promoting the health of our clients rather than treating acute diseases in our clients. The outcomes of this proactive focus are lower health care costs and the increased ability of our clients to go to work or school in order to maintain their productivity in our community.

A significant measurable outcome of Disease Screening Tests that Enable Wellness of the Underserved Population of HHI program is increased health education of our patients. The VIM HHI medical staff educates all patients on the health benefits of good nutrition, exercise, and regular testing, as well as the negative aspects of smoking, obesity, and risky behaviors. The success of this patient health education is measured by client behavior modification leading to better health outcomes (e.g., lower weight, lower blood pressure, lower body mass index (BMI), lower A1C, etc.).

The measurable outcomes of this program include: 1) delivery of annual disease screening lab tests; 2) patient education on the correlation between regular disease

screening tests and good health and productivity; and 3) patient ability to make informed decisions along with their doctor on prevention or early diagnosis of acute and chronic diseases.

How many clients do you serve? 4,212

What is the cost per client served of this grant? 5.85

What percent are from low-income families? 100

Recommendation/Notes

Volunteers In Medicine Clinic Approved FY 2022 Budget

	FY 22 Budget
Income	
Patient Donations	140,000
Event Proceeds	410,000
Contributions	1,936,500
Miscellaneous Income	6,500
Total Income	2,493,000
Expense	
Promotional, Develop & Events	135,500
Administrative Costs	166,250
Depreciation Expense	140,000
Employee Costs	1,780,890
Occupancy Costs	157,000
Program Costs	531,000
Total Expenses	2,910,640
Net Operating Income	\$ (417,640)
Other Income	
Contributed Services & Materials	5,000,000
Investment Income	371,800
Total Other Income	5,371,800
Other Expense	
Cost of Contributed Services & Materials	5,000,000
Investment Expense	36,000
Total Other Expense	5,036,000
Net Other Income & Expense	\$ 335,800
Net Income	\$ (81,840)

THE VOLUNTEERS IN MEDICINE CLINIC FINANCIAL STATEMENTS JUNE 30, 2021 AND 2020

THE VOLUNTEERS IN MEDICINE CLINIC Hilton Head Island, South Carolina

June 30, 2021 and 2020

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Independent Auditors' Report

To the Board of Directors *The Volunteers in Medicine Clinic* Hilton Head Island, South Carolina

We have audited the accompanying financial statements of *The Volunteers in Medicine Clinic* (the "Clinic"), which comprise the statements of financial position as of June 30, 2021 and 2020, and the related statements of activities and changes in net assets, cash flows, and functional expenses for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management as well as evaluating the overall presentation of the financial statements.

We believe the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Clinic as of June 30, 2021 and 2020, 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.

Wibster Rogens LLP

Bluffton, South Carolina December 15, 2021

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1 Westbury Park Way, Suite 200 (29910) PO Box 1999 (29910) Bluffton, South Carolina 843-706-8440, Fax 843-706-8441 www.websterrogers.com

STATEMENTS OF FINANCIAL POSITION JUNE 30, 2021 AND 2020

	2021	2020
ASSETS		
Current Assets Cash and cash equivalents Cash in deposit accounts Cash in brokerage accounts	\$ 1,365,873 59,688	\$ 1,411,401 71,105
Total cash and cash equivalents	1,425,561	1,482,506
Investments Receivables-other Prepaid expenses	9,191,177 7,840 93,302	7,222,560 9,610 50,260
Total current assets	10,717,880	8,764,936
Property and Equipment, net	1,809,392	1,717,965
TOTAL ASSETS	\$ 12,527,272	\$ 10,482,901
LIABILITIES AND NET ASSETS		
Current Liabilities Accounts payable Deposits held for others Accrued salaries Other accrued liabilities	\$	\$ 99,552 18,375 38,490 7,955
Total current liabilities	176,896	164,372
Long-term Liabilities Paycheck Protection Program loan	<u> </u>	254,700
Total long term liabilities	<u> </u>	254,700
TOTAL LIABILITIES	176,896	419,072
Net Assets Without donor restrictions Undesignated Board designated	3,224,712 5,381,351	2,508,412 4,302,597
Net assets without donor restrictions	8,606,063	6,811,009
With donor restrictions Use restrictions Perpetual in nature	1,898,284 1,846,029	1,420,766 1,832,054
Net assets with donor restrictions	3,744,313	3,252,820
TOTAL NET ASSETS	12,350,376	10,063,829
TOTAL LIABILITIES AND NET ASSETS	\$ 12,527,272	\$ 10,482,901

STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS YEARS ENDED JUNE 30, 2021 AND 2020

	2021					2020				
	Without Donor		Restrictions		Without Donor		Restrictions			
	Restrictions	Time or Use	Perpetual	Total	Restrictions	Time or Use	Perpetual	Total		
Support and Revenues										
Contributed support										
Contributions and grants	\$ 1,214,496	\$ 1,051,704	\$ 13,975	\$ 2,280,175	\$ 854,243	\$ 1,016,409	\$ 19,092	\$ 1,889,744		
Services and materials donated	4,367,582	-	-	4,367,582	4,824,946	-	-	4,824,946		
Benefit events	270,449	-	-	270,449	504,210	-	-	504,210		
Other income - forgiveness of PPP loan	254,700			254,700			-			
Total contributed support	6,107,227	1,051,704	13,975	7,172,906	6,183,399	1,016,409	19,092	7,218,900		
Investment return, net of expenses	1,349,453	612,600	-	1,962,053	(1,348)	(581)	-	(1,929)		
Administrative fees	120,541	-	-	120,541	128,448	-	-	128,448		
Miscellaneous income	11,588	-	-	11,588	6,650	-	-	6,650		
Rental income	5,250	-	-	5,250	2,400	-	-	2,400		
Net assets released from restrictions	1,186,786	(1,186,786)		-	958,132	(958,132)				
Total support and revenues	8,780,845	477,518	13,975	9,272,338	7,277,681	57,696	19,092	7,354,469		
Expenses										
Program services	6,327,458	-	-	6,327,458	6,696,820	-	-	6,696,820		
Support services										
Administrative and general	357,491	-	-	357,491	213,619	-	-	213,619		
Fundraising	300,842			300,842	456,310			456,310		
Total expenses	6,985,791			6,985,791	7,366,749			7,366,749		
Change in net assets	1,795,054	477,518	13,975	2,286,547	(89,068)	57,696	19,092	(12,280)		
Net Assets at Beginning of Year	6,811,009	1,420,766	1,832,054	10,063,829	6,900,077	1,363,070	1,812,962	10,076,109		
Net Assets at End of Year	\$ 8,606,063	\$ 1,898,284	\$ 1,846,029	\$ 12,350,376	\$ 6,811,009	\$ 1,420,766	\$ 1,832,054	\$ 10,063,829		

STATEMENTS OF CASH FLOWS YEARS ENDED JUNE 30, 2021 AND 2020

	2021	2020
Cash Flows From Operating Activities Change in net assets Adjustments to reconcile changes in net assets to net cash provided by operating activities:	\$ 2,286,547	\$ (12,280)
Forgiveness of Payroll Protection Program loan Depreciation Unrealized gains on investments Realized (gain) loss on sale of investments	(254,700) 138,824 (1,453,117) (390,061)	- 142,753 (59,010) 97,538
(Increase) decrease in: Receivables Prepaid expenses Increase (decrease) in:	1,770 (43,042)	5,640 22,662
Accounts payable Deposits held for others Accrued expenses Deferred revenue	(43,796) (1,323) 57,643 	48,712 3,602 22,645 (89,500)
Net cash flows provided by operating activities	298,745	182,762
Cash Flows From Investing Activities Proceeds from sale of investments Purchase of investments Purchase of property and equipment	1,378,420 (1,503,859) (230,251)	2,378,663 (2,223,593) (212,142)
Net cash flows used in investing activities	(355,690)	(57,072)
Cash Flows From Financing Activities Proceeds from Paycheck Protection Program loan		254,700
Net cash flows provided by financing activities		254,700
Net increase (decrease) in cash and cash equivalents	(56,945)	380,390
Cash and Cash Equivalents at Beginning of Year	1,482,506	1,102,116
Cash and Cash Equivalents at End of Year	<u>\$ 1,425,561</u>	\$ 1,482,506
Schedule of Non-Cash Investing and Fina	ancing Activities	
Grants awarded directly from investment funds	\$ 17,121	\$ 17,400

The accompanying Notes to Financial Statements are an integral part of these statements.

\$

254,700

Forgiveness of Paycheck Protection Program loan

\$_____

STATEMENT OF FUNCTIONAL EXPENSES YEAR ENDED JUNE 30, 2021

	2021					
	Program	Administrative				
	Services	and General	Fundraising	Total		
Compensation and related costs						
Contributed professional services	\$ 1,257,675	\$-	\$-	\$ 1,257,675		
Salaries and wages	1,020,141	151,193	198,508	1,369,842		
Payroll taxes	83,281	610	14,653	98,544		
Employee benefits	4,354	1,648	1,014	7,016		
Insurance	43,835	7,015	6,403	57,253		
Education, training, and travel	560	34,590	239	35,389		
Recruiting and recognition	1,690	11,863	884	14,437		
Total compensation and related costs	2,411,536	206,919	221,701	2,840,156		
Administrative and development costs						
Benefit expenses	-	-	11,539	11,539		
Advertising, printing, and promotional	5,665	600	18,435	24,700		
Board expenses	1,192	656	1,025	2,873		
Computer network costs	64,315	1,961	16,688	82,964		
Credit card processing fees	-	-	6,554	6,554		
Copier lease and usage	6,429	994	927	8,350		
General office expenses	13,843	4,650	1,732	20,225		
Internet & web cost	-	-	750	750		
Postage and delivery	2,706	392	2,044	5,142		
Dues and memberships	10,208	397	1,727	12,332		
Professional fees	24	124,665	<u> </u>	124,689		
Total administrative and development costs	104,382	134,315	61,421	300,118		
Program costs						
Laboratory costs	69,441	-	-	69,441		
Pathology services	17,644	-	-	17,644		
Screenings	179,737	-	-	179,737		
Medicine and drug costs	2,058,297	-	-	2,058,297		
Medical supplies	41,851	-	-	41,851		
Dental supplies	25,341	-	-	25,341		
Patient support	36,735	-	-	36,735		
Classroom instruction	11,030	-	-	11,030		
Hospital/surgery center costs	719,972	-	-	719,972		
Physician costs	282,682	-	-	282,682		
Personal protection equipment	24,843	158	76	25,077		
Software and equipment maintenance	34,730	-	-	34,730		
Medical equipment and services	55,154			55,154		
Total program costs	3,557,457	158	76	3,557,691		

STATEMENT OF FUNCTIONAL EXPENSES (CONTINUED) YEAR ENDED JUNE 30, 2021

	2021					
	Program	Administrati	ive			
	Services	and Genera	al Fundraising	Total		
Occupancy costs						
Rent/storage	\$ 1,430	\$ 1,26	6 \$ -	\$ 2,696		
Utilities	32,904	1,76	53 1,773	36,440		
Telephone and communications	10,039	2,04	1,424	13,508		
Janitorial	31,390	1,62	27 650	33,667		
Waste removal	7,839	75	57 944	9,540		
Building repairs and maintenance	16,715	3,35	54 947	21,016		
Insurance	28,284	(1,60	08) 2,758	29,434		
Property taxes	2,268	11	320	2,702		
Total occupancy costs	130,869	9,31	188,816	149,003		
Depreciation	123,214	6,78	818,828	138,823		
Total expenses	\$ 6,327,458	\$ 357,49	91 \$ 300,842	\$ 6,985,791		

STATEMENT OF FUNCTIONAL EXPENSES YEAR ENDED JUNE 30, 2020

	2020					
	Program	Administrative				
	Services	and General	Fundraising	Total		
Compensation and related costs						
Contributed professional services	\$ 1,437,460	\$-	\$-	\$ 1,437,460		
Salaries and wages	941,766	138,953	218,438	1,299,157		
Payroll taxes	81,404	1,781	17,382	100,567		
Employee benefits	4,238	1,923	1,594	7,755		
Insurance	54,552	7,467	9,023	71,042		
Education, training, and travel	3,250	5,386	3,211	11,847		
Recruiting and recognition	3,559	1,017	323	4,899		
Total compensation and related costs	2,526,229	156,527	249,971	2,932,727		
Administrative and development costs						
Benefit expenses	-	-	135,322	135,322		
Advertising, printing, and promotional	6,513	613	13,569	20,695		
Board expenses	2,539	182	1,786	4,507		
Computer network costs	59,429	4,234	15,579	79,242		
Credit card processing fees	-	-	13,441	13,441		
Copier lease and usage	7,073	604	1,199	8,876		
General office expenses	14,509	3,031	2,631	20,171		
Internet & web cost	-	750	-	750		
Postage and delivery	3,193	408	1,853	5,454		
Dues and memberships	10,128	364	749	11,241		
Professional fees	80	25,525		25,605		
Total administrative and development costs	103,464	35,711	186,129	325,304		
Program costs						
Laboratory costs	72,698	-	-	72,698		
Pathology services	37,823	-	-	37,823		
Screenings	178,377	-	-	178,377		
Medicine and drug costs	2,433,610	-	-	2,433,610		
Medical supplies	49,624	-	-	49,624		
Dental supplies	30,715	-	-	30,715		
Patient support	21,466	-	-	21,466		
Classroom instruction	10,550	-	-	10,550		
Hospital/surgery center costs	769,189	-	-	769,189		
Physician costs	151,289	-	-	151,289		
Personal protection equipment	16,869	-	-	16,869		
Software and equipment maintenance	37,638	-	-	37,638		
Medical equipment and services	38,920			38,920		
Total program costs	3,848,768			3,848,768		

STATEMENT OF FUNCTIONAL EXPENSES (CONTINUED) YEAR ENDED JUNE 30, 2020

	2020						
	Program	Admi	Administrative				
	Services	and General		Fundraising		Total	
Occupancy costs							
Rent/storage	\$ 153	\$	1,104	\$	-	\$	1,257
Utilities	30,679		3,604		3,963		38,246
Telephone and communications	9,098		1,476		1,206		11,780
Janitorial	16,932		1,475		1,133		19,540
Landscaping	1,925		250		325		2,500
Building repairs and maintenance	8,607		1,040		1,254		10,901
Insurance	25,688		2,375		3,611		31,674
Property taxes	1,082		64		153		1,299
Total occupancy costs	94,164		11,388		11,645		117,197
Depreciation	124,195		9,993		8,565		142,753
Total expenses	\$ 6,696,820	\$	213,619	\$	456,310	\$	7,366,749

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2021 AND 2020

Note 1. Nature of Organization

The Volunteers in Medicine Clinic (the "Clinic") was incorporated as a nonprofit organization on May 14, 1992, for the purposes of understanding and serving the health and wellness needs of the medically underserved population living and/or working on Hilton Head and Daufuskie Islands in South Carolina. The Clinic provides these services through proceeds from private contributions and grants.

Note 2. Summary of Significant Accounting Policies

Basis of accounting

The Clinic maintains its accounts on the accrual basis of accounting. Revenues are recognized when the earnings process is completed and expenses are recognized in the period incurred.

Financial statement presentation

Financial statement presentation follows accounting standards issued by the Financial Accounting Standards Board ("FASB") for Not-for-Profit Organizations. These standards require the Clinic to report information regarding its financial position and activities according to two classes of net assets: net assets without donor restrictions and net assets with donor restrictions.

Net assets without donor restrictions – net assets that are not subject to donor-imposed stipulations. Net assets without donor restrictions also include funds designated for specific purposes by actions of the Board of Directors.

Net assets with donor restrictions – net assets subject to donor-imposed stipulations that may or will be met either by actions of the Organization and/or the passage of time. When a restriction expires, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statement of activities as net assets released from donor restrictions.

Cash and cash equivalents

The Clinic considers its short term, highly liquid investments with an original maturity of three months or less at the date of acquisition to be cash equivalents.

Investments

Investment purchases are recorded at cost or, if donated, at fair value on the date of donation. Thereafter, investments are reported at their fair values in the statements of financial position based on quoted market prices. Investments consist of equity securities, mutual funds, and debt securities. Realized gains and losses on dispositions are based on the net proceeds and the average cost of the shares sold. Unrealized gains and losses are charged or credited to the statements of activities. Investment returns are reported as without donor restrictions unless their use is restricted by explicit donor stipulation or by law. Investment return/(loss) is reported in the statements of activities and consists of interest and dividend income, realized and unrealized capital gains and losses, less external and direct internal investment expenses.

Fair value measurements

Accounting principles generally accepted in the United States of America provide a framework for measuring fair value (FASB ASC 820-10), *Fair Value Measurements and Disclosures*. The framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820-10 are described below:

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2021 AND 2020

Note 2. Summary of Significant Accounting Policies (Continued)

- Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Clinic has the ability to access.
- Level 2 Inputs to the valuation methodology include:
 - Quoted prices for similar assets or liabilities in active markets,
 - Quoted prices for identical or similar assets or liabilities in inactive markets,
 - Inputs other than quoted prices that are observable for the asset or liability,
 - Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specific (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

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

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

Receivables - other

Receivables - other primarily represent accrued earnings on investments.

Property and equipment

The Clinic records newly acquired real and personal property and major improvements at cost and donated property at fair value at the date of donation. Contributions with donor-imposed stipulations regarding how long the contributed assets must be used are recorded as net assets with donor restrictions; otherwise, the contributions are recorded as net assets without donor restrictions. The Clinic calculates depreciation on fixed assets using straight line and accelerated methods over the estimated useful lives which are as follows:

	Years
Buildings and improvements	25
Equipment	3 - 10

Maintenance and repairs are charged to expense as incurred. When assets are retired or otherwise disposed of, the cost is removed from the asset account, and the related depreciation reserve is adjusted with the difference charged to income.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2021 AND 2020

Note 2. Summary of Significant Accounting Policies (Continued)

Donated services and supplies

Donated services and supplies are recognized as contributions when such services require specialized skills or would otherwise need to be purchased by the Clinic. Such amounts, which are based upon information provided by third-party service providers, are recorded at their estimated fair value determined on the date of contribution and are reported as "services and materials donated" on the accompanying statement of activities and as "contributed professional services" and included in "medicine and drug costs" in the applicable expense category and statements of functional expenses, respectively. Donated services from individual volunteers in areas not requiring specialized skills are not recognized as contributions in the financial statements since they do not meet the recognition criteria under accounting standards.

Allocation of functional expenses

Directly identifiable expenses are charged to program services. Expenses related to more than one function are charged to program and supporting services on the basis of personnel time or space utilized for the related activities. Administrative and general expenses include those expenses that are not directly identifiable with any other specific function, but provide for the overall support and direction of the Clinic.

Compensated absences

Compensated absences are expensed as incurred.

Use of estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amount of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amount of revenue and expense during the reporting period. Actual results could differ from those estimates, and those differences could be material.

Revenue recognition

The Clinic recognizes revenue from contracts with customers in accordance with ASC Topic 606 which provides a five-step model for recognizing revenue from contracts with customers as follows:

- Identify the contract with the customer
- Identify the performance obligations in the contract
- Determine the transaction price
- Allocate the transaction price to the performance obligations in the contract
- Recognize revenue when or as the performance obligations are satisfied

Contributions received are recorded as restricted or unrestricted by donor depending on the existence and/or nature of any donor restrictions. Support that is restricted by the donor is reported as an increase in net assets unrestricted by donor if the restriction expires in the reporting period in which the support is recognized. All other donor-restricted support is reported as an increase in net assets with donor restrictions depending on the nature of the restriction. When a restriction expires, that is when a stipulated time restriction ends or purpose restriction is accomplished, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statement of activities as net assets released from restrictions.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2021 AND 2020

Note 2. Summary of Significant Accounting Policies (Continued)

Individual grant arrangements are evaluated and determined whether they are nonreciprocal, meaning the granting entity has not received a direct benefit of commensurate value in exchange for the resources provided. Instead, revenue is recognized like a conditional contribution when the barrier to entitlement is overcome. The barrier to entitlement is considered overcome when the expenditures associated with each grant are determined to be allowable and all other significant conditions of the grant are met.

Recently issued pronouncements

In February 2016, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update ASU 2016-02, *Leases (Topic 842),* which will require leases to be recorded as an asset on the balance sheet for the right to use leased asset and a liability for the corresponding lease obligation for leases with terms of more than 12 months. ASU 2016-02 is effective for annual periods beginning after December 15, 2020, with early adoption permitted. On May 20, 2020, the FASB extended the effective date to reporting periods beginning after December 15, 2021. The Clinic is currently evaluating the impact of this new guidance on its financial statements.

In February 2016, the FASB issued Accounting Standards Update ASU 2020-07, *Presentation and Disclosures by Not-For-Profit Entities for Contributed Nonfinancial Assets (Topic 958),* to improve transparency of contributed nonfinancial assets for not-for-profit entities through enhancements to presentations and disclosures. The ASU requires a not-for-profit organization to present contributed nonfinancial assets as a separate line item in the statements of activities, apart from contributions of cash or other financial assets, along with expanded disclosure requirements. ASU 2020-07 is effective for annual periods beginning after June 15, 2021, with early adoption permitted. The Clinic is currently evaluating the impact of this new guidance on its financial statements.

Other accounting standards that have been issued or proposed by the FASB or other standard-setting bodies are not expected to have a material impact on the Clinic's net assets or changes in net assets.

Note 3. Liquidity and Availability

The Clinic regularly monitors liquidity required to meet its operating needs while also striving to maximize the return on investments of its funds. As part of the Clinic's liquidity management plan, cash in excess of 75 to 125 percent of the current year's approved operating expense budget will be held in liquid securities.

Financial assets available for general expenditure, that is, without donor or other restrictions limiting their use, within one year of the statements of financial position date, comprise the following:

	2021	2020
Current assets, at June 30: Less prepaid expenses	\$ 10,717,880 93,302	\$ 8,764,936 50,260
Less those unavailable for general expenditures within one year, due to donor restrictions or board designations:		
Restrictions by donor with time or purpose restrictions	1,898,284	1,420,766
Restrictions by donor in perpetuity	1,846,029	1,832,054
Board designated	5,381,351	4,302,597
Financial assets available to meet the cash requirement for operational expenditures within one year	<u>\$ 1,498,914</u>	\$ 1,159,259

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2021 AND 2020

Note 3. Liquidity and Availability (Continued)

During 1998, management conducted a fund-raising campaign which resulted in significant current and future contributions. The contributions received and invested represent the amount initially received in cash and invested. These funds were raised to provide a financial base to help provide the needed funds to sustain the Clinic, especially in the face of an economic downturn, disaster relief, or other financial challenges. Some of these donations were for perpetuity (current balance approximately \$1.8 million), others were board designated (current balance approximately \$5.2 million) to fund operations or in the case of a catastrophic event.

By policy established by the Board of Directors, the amount of funds that may be distributed in any year from the investments to the operating funds shall be no more than 4.5% of the trailing 12 quarter average of the endowment.

Donors may impose restrictions on the use of the contributed funds. Time restrictions require resources to be used in a certain period or after a specified date. Purpose restrictions require resources to be used for a specified purpose.

Note 4. Concentrations of Credit Risk

Financial instruments that potentially subject the Clinic to concentrations of credit risk consist principally of cash and cash equivalent accounts held at financial institutions and investments. The credit worthiness of the parties to these transactions is subject to continuous review and evaluation.

The Clinic places its cash and cash equivalents on deposit with financial institutions in the United States. The Securities Investor Protection Corporation (SIPC) provides protection from loss resulting from brokerage firm fraud or failure for cash and securities up to \$500,000, including \$250,000 for cash. The Federal Deposit Insurance Corporation (FDIC) insures deposits held at insured financial institutions up to \$250,000 for each deposit ownership category.

The Clinic, from time to time, may have amounts on deposit in excess of the respective insurance and protection limits. The Clinic's uninsured or unprotected cash balances totaled \$1,102,096 and \$1,152,532 as of June 30, 2021 and 2020, respectively.

Note 5. Investments

Summary of investments at June 30 are as follows:

	2021	2020
Held at brokerage firm	\$ 8,721,685	\$ 6,846,521
Endowment fund held by other entity, the Community Foundation of the Lowcountry, Inc. (CFL)		
Board designated, invested by CFL	456,927	367,589
Donor restricted, spendable portion	12,565	8,450
Total held by CFL	469,492	376,039
Total reported on Statements of Financial Position	<u>\$ 9,191,177</u>	\$ 7,222,560

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2021 AND 2020

Note 5. Investments (Continued)

Investments held at brokerage firm

The amortized costs, gross unrealized gains and losses, and estimated fair values of investment securities held at a brokerage firm are summarized as follows:

	Amortized Cost	Unrealized Gains	Unrealized Losses	Estimated Fair Value
June 30, 2021				
Corporate debt	\$ 1,067,806	\$ 50,681	\$-	\$ 1,118,487
Equity securities	2,374,170	1,705,142	(26,259)	4,053,053
Mutual funds	391,533	197,197	-	588,730
Exchange traded funds	2,540,208	428,929	(7,722)	2,961,415
Total	\$ 6,373,717	\$ 2,381,949	\$ (33,981)	\$ 8,721,685
	Amortized	Unrealized	Unrealized	Estimated
	Cost	Gains	Losses	Fair Value
June 30, 2020				
Certificates of Deposit	\$ 129,805	\$ 1,027	\$-	\$ 130,832
Corporate debt	1,065,862	55,768	(19,373)	1,102,257
Equity securities	2,508,956	963,832	(118,341)	3,354,447
Mutual funds	233,610	29,438	-	263,048
Exchange traded funds	1,898,282	123,145	(25,490)	1,995,937
Total	\$ 5,836,515	\$ 1,173,210	\$ (163,204)	\$ 6,846,521

The following schedule details the investment return, net of expenses, as reflected in the statements of activities for the years ended June 30, 2021 and 2020:

	2021	
Dividends & capital gains	\$ 122,022	\$ 132,243
Interest	32,004	49,257
Investment fees	(35,151)	(35,565)
Realized/unrealized gains (losses) on investments	1,843,178	(147,864)
	\$ 1,962,053	\$ (1,929)

Endowment investment fund

During 1998, management conducted a fundraising campaign which resulted in significant contributions. The contributions received and invested represent the amount initially received in cash and invested. These funds were raised to provide a financial base to help provide the needed funds to sustain the Clinic, especially in the face of an economic downturn, disaster relief, or other financial challenges. Some of these donations were for perpetuity. Amounts related to this campaign reported in the statement of financial position in investment funds as of June 30, 2021 and 2020, were \$1,376,537 and \$1,456,015, respectively.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2021 AND 2020

Note 5. Investments (Continued)

Endowment investment fund – agency funds

The Board of Directors elected to invest funds in an endowment with the Community Foundation of the Lowcountry Inc. (the "Foundation"). These funds are managed by the Foundation as part of a pool of investments, and the Clinic has no control regarding investment decisions. Funds available for distribution on an annual basis are determined by calculating 4.5% of the average market value of the fund over a 12-quarter period. Assets may also be distributed to meet emergency funding needs of the Clinic as determined by the Foundation in its sole discretion. The Clinic may elect to add all or any part of the distribution back to the fund.

Amounts related to this fund reported in the statement of financial position included in investments as of June 30, 2021 and 2020, were \$456,927 and \$367,589, respectively.

The Foundation investments represent the proportional interest in the investment pool managed by the Foundation. The investments are reported at their fair value which is estimated as the fair value of the underlying assets held by the Foundation. This investment is categorized as Level 3 under the fair value measurement hierarchy. The components of the investment funds related to the endowment are classified as net assets donor restricted-perpetual in nature.

Endowment investment fund – third-party funds

The Clinic also has an endowment fund which is the accumulation of amounts donated to the Foundation by third-party donors for the ultimate benefit of The Volunteers in Medicine Clinic (Third Party Fund). In accordance with generally accepted accounting principles, the Clinic has excluded from their financial statements the non-spendable portion of the contributions and related investment gains, losses, and fees that are from third-party donors. The balance of the non-spendable portion excluded from the financial statements was \$164,573 and \$126,928 as of June 30, 2021 and 2020, respectively.

Funds available for distribution from this fund on an annual basis (the spendable portion) are determined by calculating 4.5% of the average market value of the fund over a 12-quarter period. The Clinic may elect to add all or any part of the distribution back to the fund. The Clinic made no such election in 2021 or 2020. The spendable portion of this fund reported in the statements of financial position included as investments as of June 30, 2021 and 2020, was \$12,565 and \$8,450, respectively.

Note 6. Fair Value Measurements

Following is a description of the valuation methodology used for assets measured at fair value. There have been no changes in the methodology used at June 30, 2021 and 2020.

- U.S. Treasuries, equity securities, and exchange traded funds: Valued at the closing price reported on the active market on which the individual securities are traded.
- *Debt securities*: Valued at the closing price reported on the active market on which the individual bonds are traded.
- *Mutual funds*: Valued at the quoted net asset value (NAV) of shares held by the Clinic at year end.
- *Investment held by other entity*: As the Clinic does not know the precise allocation of the underlying assets on an ongoing basis, the asset is classified as Level 3 within the valuation hierarchy based upon the asset's fair value as represented by the fund's management.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2021 AND 2020

Note 6. Fair Value Measurements (Continued)

The method described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Clinic believes its valuation method is appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following tables set forth by level, within the fair value hierarchy, the Clinic's assets at fair value as of June 30, 2021 and 2020:

	Assets at Fair Value as of June 30, 2021				
	Level 1	Level 2	Level 3	Total Fair Value	
Corporate debt	\$ 1,118,487	\$-	\$-	\$ 1,118,487	
Equity securities	4,053,053	-	-	4,053,053	
Mutual funds	588,730	-	-	588,730	
Exchange traded funds	2,961,415	-	-	2,961,415	
Investments held by CFL			469,492	469,492	
Total assets	\$ 8,721,685	<u>\$ -</u>	\$ 469,492	<u>\$ 9,191,177</u>	
	A	ssets at Fair Valu	e as of June 30, 20	20	
				Total	
	Level 1	Level 2	Level 3	Fair Value	
Certificates of deposit	\$ 130,832	\$-	\$-	\$ 130,832	
Corporate debt	1,102,257	-	-	1,102,257	
Equity securities	3,354,447	-	-	3,354,447	
Mutual funds	263,048	-	-	263,048	
Exchange traded funds	1,995,937	-	-	1,995,937	
Investments held by CFL			376,039	376,039	
Total assets	\$ 6,846,521	<u>\$ -</u>	\$ 376,039	\$ 7,222,560	

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2021 AND 2020

Note 6. Fair Value Measurements (Continued)

The following table sets forth a summary of changes in the fair value of the Clinic's Level 3 assets for the years ended June 30, 2021 and 2020:

	Investments Held by CFL	
Balance, June 30, 2019	\$	390,112
Grants given		(20,648)
Unrealized gains		10,299
Management fees		(3,724)
Balance, June 30, 2020		376,039
Grants given		(17,121)
Unrealized gains		115,154
Management fees		(4,580)
Balance, June 30, 2021	\$	469,492

Total net gains and losses for Level 3 assets for the periods ended June 30, 2021 and 2020, are included in net realized and unrealized gains (losses) on investments in the statements of activities. The transfers out of Level 3 assets for the years ended June 30, 2021 and 2020, were \$17,121 and \$20,648, respectively.

Note 7. Property and Equipment

Property and equipment consist of the following at June 30:

	2021	2020
Land	\$ 781,240	\$ 781,240
Buildings	2,012,300	1,888,033
Computers and software	673,956	650,169
Medical furniture, fixtures, and equipment	647,474	580,143
Office furniture, fixtures, and equipment	555,439	540,574
Subtotal	4,670,409	4,440,159
Less accumulated depreciation	2,861,017	2,722,194
Net property and equipment	<u>\$ 1,809,392</u>	\$ 1,717,965

Note 8. Debt

Under the Coronavirus, Aid, Relief, and Economic Security (CARES) Act, the Clinic received \$254,700 on April 16, 2020, under the Small Business Administration Payroll Protection Program (PPP Ioan). The interest rate is 1%, and payments start 7 months from the date of disbursement. The payment term is 24 months, with the first 6 months of principal and interest being deferred, with interest accruing, then converting to monthly principal and interest payment amortized over 18 months. The Ioan was forgiven in December 2020 and is reported as Other Income - forgiveness of PPP Ioan on the statement of activities.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2021 AND 2020

Note 9. Net Assets – Without Donor Restrictions

Net assets without donor restrictions consist of the following as of June 30:

	2021	2020
Board designated endowed funds	\$ 5,219,557	\$ 4,035,672
Imlay/McConnell fund	161,794	266,925
Total board designated funds	5,381,351	4,302,597
Undesignated	3,224,712	2,508,412
Total net assets without donor restrictions	\$ 8,606,063	<u>\$ 6,811,009</u>

Note 10. Net Assets – With Donor Restrictions – Time or Use

The Clinic has received various contributions which are restricted in their use. Net assets restricted by donoruse restrictions are available for the following purposes at June 30:

	2021	 2020	
Dental clinic	\$ 92,766	\$ 118,344	
Healing services	208	320	
Mammography	127,547	89,214	
Patient surgical navigation	105,161	141,293	
Wellness program	19,685	29,631	
Other restricted programs	248,883	277,247	
Endowment available for appropriations	1,304,034	 764,717	
Total net assets restricted by donor regarding use	<u>\$ 1,898,284</u>	\$ 1,420,766	

The Clinic had no net assets with donor restrictions due to time at June 30, 2021 or 2020.

Note 11. Net Assets – Endowment

The Clinic's endowment consists of net assets restricted by donor and designated by the Board. As required by generally accepted accounting principles, net assets associated with endowment funds, including funds designated by the Board of Directors to function as endowments, are classified and reported based on the existence or absence of donor- imposed restrictions.

The State of South Carolina adopted the Uniform Prudent Management of Institutional Funds Act (UPMIFA) effective July 1, 2008. The Board of Directors of the Clinic has interpreted the UPMIFA as requiring the preservation of the original gift as of the gift date of the donor-restricted endowment funds absent explicit donor stipulations to the contrary. As a result of this interpretation, the Clinic classifies as net assets restricted by donor-perpetual in nature: (1) the original value of the gifts donated to the permanent endowment, (2) the original value of subsequent gifts to the permanent endowment, and (3) accumulations or reductions to the permanent at the time the accumulation is added to or the reduction subtracted from the fund.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2021 AND 2020

Note 11. Net Assets – Endowment (Continued)

The remaining portion of the endowment fund that is not classified in net assets restricted by donor-perpetual in nature is classified as net assets with donor restrictions-use restrictions and net assets without donor restrictions-board designated funds until these amounts are appropriated for expenditure by the Clinic in a manner consistent with the standard of prudence described in the UPMIFA. In accordance with the UPMIFA, the Clinic considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds:

- The duration and preservation of the fund
- The purposes of the Clinic and the restricted by donor endowment fund
- General economic conditions
- The possible effect of inflation and deflation
- The expected total return from income and the appreciation of investments
- Other resources of the Clinic
- The investment policy of the Clinic

At June 30, 2021, the Foundation held the following endowment net assets composition by type of fund:

	Without donor restrictions Board	With donor	restrictions	
	Designated	Time or Use	Perpetual	Total
Donor-restricted endowment funds Board-designated endowment funds	\$- 5,219,592	\$ 1,302,155 	\$ 1,846,029 	\$ 3,148,184 5,219,592
Total funds	<u> </u>	<u>\$ 1,302,155</u>	<u>\$ 1,846,029</u>	<u>\$ 8,367,776</u>

The following are the changes in endowment net assets for the year ended June 30, 2021:

	Without donor <u>restrictions</u> Board Designated	With donor Time or Use	restrictions Perpetual	Total
Endowment net assets, July 1, 2020	\$ 4,035,707	\$ 764,717	\$ 1,832,054	\$ 6,632,478
	φ 4,035,707	\$ 764,717	φ 1,032,054	\$ 0,032,470
Investment return: Investment income, net of expenses	1,349,453	612,600	-	1,962,053
Contribution	-	-	13,975	13,975
Appropriation of endowment assets for expenditure	(165,568)	(75,162)	<u> </u>	(240,730)
Endowment net assets, June 30, 2021	\$ 5,219,592	\$ 1,302,155	\$ 1,846,029	\$ 8,367,776

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2021 AND 2020

Note 11. Net Assets – Endowment (Continued)

At June 30, 2020, the Foundation had the following endowment net assets composition by type of fund:

	Without donor restrictions	With dopor	rootriotiono	
	Board Designated	With donor Time or Use	Perpetual	Total
Donor-restricted endowment funds Board-designated endowment funds	\$- 4,035,707	\$ 764,717 	\$ 1,832,054 -	\$ 2,596,771 4,035,707
Total funds	\$ 4,035,707	<u>\$ 764,717</u>	\$ 1,832,054	\$ 6,632,478

The following are the changes in endowment net assets for the year ended June 30, 2020:

	Without donor restrictions Board		restrictions	
	Designated	Time or Use	Perpetual	Total
Endowment net assets, July 1, 2019	\$ 4,205,266	\$ 837,816	\$ 1,812,962	\$ 6,856,044
Investment return: Investment income, net of expenses	(1,348)	(581)	-	(1,929)
Contribution	-	-	19,092	19,092
Appropriation of endowment assets for expenditure	(168,211)	(72,518)	<u> </u>	(240,729)
Endowment net assets, June 30, 2020	\$ 4,035,707	\$ 764,717	\$ 1,832,054	\$ 6,632,478

<u>Funds with deficiencies</u> – From time to time, the fair value of the assets associated with individual donorrestricted endowment funds may fall below the level that the donor or the UPMIFA requires the Clinic to retain as a fund of perpetual duration. There were no such deficiencies as of June 30, 2021 and 2020.

<u>Return objectives and risk parameters</u> – The Clinic has adopted investment and spending policies that attempt to provide a predictable stream of funding to programs supported by the Clinic. Endowment assets include those assets of donor-restricted funds that the Clinic must hold in perpetuity or for a donor specified period as well as board-designated funds. Under this policy, as approved by the Board, the endowment assets are invested in a manner that is intended to produce a high level of total investment return consistent with a prudent level of portfolio risk. The Clinic expects its endowment funds, over time, to provide an average rate of return of approximately 4.5% annually. Actual returns in any given year may vary from this amount.

<u>Strategies employed for achieving objectives</u> – To satisfy long-term rate-of-return objectives, the Clinic relies on a total return strategy in which investment returns are achieved through both capital appreciation (realized and unrealized) and current yield (interest and dividends). The Clinic targets a diversified asset allocation that places a greater emphasis on equity-based investments to achieve its long-term return objectives within prudent risk constraints.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2021 AND 2020

Note 11. Net Assets – Endowment (Continued)

<u>Spending policy and how the investment objectives relate to spending policy</u> – The Clinic's spending policy is to appropriate for distribution each year up to 4.5% of its endowment fund's average fair value over the prior 12 quarters through the calendar year-end preceding the fiscal year in which the distribution is planned. In establishing this policy, the Clinic considered the long-term expected return on its endowment. Accordingly, over the long term, the Clinic expects the current spending policy to allow its endowment to grow at an average of 1.5% annually. This is consistent with the Clinic's objective to maintain the purchasing power of the endowment assets held in perpetuity or for a specified term as well as to provide additional real growth through new gifts and investment return. In June 2020, \$304,000 was taken from the endowment investments and transferred to the operating fund. As of June 30, 2021, the endowment investments designated by the Board or restricted by donors that is not perpetual in nature is \$6,521,748.

At June 30, 2021 and 2020, the Clinic's net assets restricted by donor-perpetual in nature consist of investments providing a permanent source of income for operations and for the use of furthering the mission of the Clinic.

Note 12. Operating Leases

Clinic as lessor

The Clinic had a non-cancelable lease agreement for the rental of a portion of the Clinic's facilities. The lease income was \$200 per month until May 31, 2020, and then \$400 per month for the remaining 7 months of the lease. The lease expired at December 31, 2020, and was renewed for 12 months ending December 31, 2021, with a new monthly payment of \$475. As of June 30, 2021 and 2020, the total cost and accumulated depreciation of the facility and improvements of which a portion is leased was as follows:

	2021	2020
Cost of facility and improvements Accumulated depreciation	\$ 1,327,794 (585,115)	\$ 1,296,233 (542,943)
	\$ 742,679	\$ 753,290

The lease income under this lease was approximately \$5,250 and \$2,400 for the years ended June 30, 2021 and 2020, respectively.

Clinic as lessee

During May of 2019, the Clinic entered into a five-year operating lease for two copiers. Per the lease agreement, the lease will automatically renew on a month-to month basis after the ending of the lease term. Lease payments are \$370 per month.

In June 2021, the Clinic entered into a forty-five-year lease agreement with the Town of Hilton Head Island. The lease is for land to be used as a parking lot and the payments will be \$1 per year.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2021 AND 2020

Note 12. Operating Leases (Continued)

The future annual lease payments are summarized below:

<u>Fiscal Year</u>	A	Amount	
2022	\$	4,493	
2023		4,493	
2024		3,703	
Thereafter		42	
	\$	12,731	

Note 13. Income Taxes

The Clinic is a not-for-profit organization under Internal Revenue Code Section 501(c)(3). Accordingly, no provision for federal or state income taxes is reflected in the accompanying financial statements. The Clinic believes that it has appropriate support for any tax positions taken and, as such, does not have any uncertain tax positions that are material to the financial statements as of June 30, 2021 and 2020. The Clinic files information returns in the U.S. federal jurisdiction and the state of South Carolina.

Note 14. Retirement Plan

The Clinic sponsors a 403(b)-tax deferred annuity plan in which any employee may elect to defer a portion of their compensation. The Plan does not include a provision for employer contributions.

Note 15. Commitments and Contingent Liabilities

<u>Grants</u>

Amounts received or receivable from grantor agencies in previous years are subject to audit and adjustment by grantor agencies. Any disallowed claims, including amounts already collected, could become a liability of the Clinic. The amount of program expenditures which may be disallowed by the granting agencies cannot be determined at this time, although the Clinic expects such amounts, if any, to be immaterial.

Note 16. COVID-19

The COVID-19 pandemic has constrained the Clinic's ability to provide the volume of care typically available due to safety concerns for their volunteers and patients. The extent of the impact of COVID-19 on the Clinic's operational and financial performance will depend on certain developments, including the duration and spread of the pandemic, the availability and effectiveness of vaccines, the effects on the U.S. and global economy, and the impacts on the Clinic's donors, employees, and vendors. The overall extent to which COVID-19 may impact the Clinic's future financial position and changes in net assets and cash flows is uncertain, and the accompanying financial statements include no adjustments relating to the effects of this pandemic.

Note 17. Subsequent Events

The Clinic has evaluated subsequent events through December 15, 2021, in connection with the preparation of these financial statements, which is the date that the financial statements were available to be issued. There are no subsequent events to report at this date.

FINANCIAL STATEMENTS

JUNE 30, 2020 AND 2019

THE VOLUNTEERS IN MEDICINE CLINIC Hilton Head Island, South Carolina

June 30, 2020 and 2019

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Independent Auditors' Report

To the Board of Directors *The Volunteers in Medicine Clinic* Hilton Head Island, South Carolina

We have audited the accompanying financial statements of *The Volunteers in Medicine Clinic* (the "Clinic"), which comprise the statements of financial position as of June 30, 2020 and 2019, and the related statements of activities and changes in net assets, cash flows, and functional expenses for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management as well as evaluating the overall presentation of the financial statements.

We believe the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Clinic as of June 30, 2020 and 2019, 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.

WebsterRogue LLP

Bluffton, South Carolina December 17, 2020

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- 1 -

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STATEMENTS OF FINANCIAL POSITION JUNE 30, 2020 AND 2019

	2020	2019		
ASSETS				
Current Assets Cash and cash equivalents Cash in deposit accounts Cash in brokerage accounts	\$ 1,411,401 71,105	\$		
Total cash and cash equivalents	1,482,506	1,102,116		
Investments Receivables-other Prepaid expenses	7,222,560 9,610 50,260	7,416,158 15,250 72,922		
Total current assets	8,764,936	8,606,446		
Property and Equipment, net	1,717,965	1,648,576		
TOTAL ASSETS	\$ 10,482,901	\$ 10,255,022		
LIABILITIES AND NET ASSETS				
Current Liabilities Accounts payable Deposits held for others Accrued salaries Deferred revenue Other accrued liabilities	\$ 99,552 18,375 38,490 - 7,955	\$ 50,840 14,773 23,800 89,500 -		
Total current liabilities	164,372	178,913		
Long-term Liabilities Paycheck Protection Program loan	254,700			
Total long term liabilities	254,700			
TOTAL LIABILITIES	419,072	178,913		
Net Assets Without donor restrictions Undesignated Board restrictions	2,508,412 4,302,597	2,606,850 4,293,227		
Net assets without donor restrictions	6,811,009	6,900,077		
With donor restrictions Use restrictions Perpetual in nature	1,420,766 1,832,054	1,363,070 1,812,962		
Net assets with donor restrictions	3,252,820	3,176,032		
TOTAL NET ASSETS	10,063,829	10,076,109		
TOTAL LIABILITIES AND NET ASSETS	\$ 10,482,901	\$ 10,255,022		

STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS YEARS ENDED JUNE 30, 2020 AND 2019

	2020				2019			
	Without Donor			Without Donor	With Donor Restrictions			
	Restrictions	Time Use	Perpetual	Total	Restrictions	Time Use	Perpetual	Total
Support and Revenues Contributed support Contributions and grants Services and materials donated	\$ 854,243 4,824,946	\$ 1,016,409 -	\$ 19,092 -	\$ 1,889,744 4,824,946	\$ 825,510 4,795,643	\$ 1,029,585 -	\$ 19,072 -	\$ 1,874,167 4,795,643
Benefit events, net	504,210		-	504,210	464,067			464,067
Total contributed support	6,183,399	1,016,409	19,092	7,218,900	6,085,220	1,029,585	19,072	7,133,877
Investment return, net of expenses	(1,348)	(581)	-	(1,929)	297,732	131,218	-	428,950
Rental income	2,400	-	-	2,400	6,989	-	-	6,989
Administrative fees	128,448	-	-	128,448	176,498	-	-	176,498
Miscellaneous income	6,650	-	-	6,650	9,104	-	-	9,104
Net assets released from restrictions	958,132	(958,132)			920,605	(920,605)	-	
Total support and revenues	7,277,681	57,696	19,092	7,354,469	7,496,148	240,198	19,072	7,755,418
Expenses								
Program services Support services	6,696,820	-	-	6,696,820	6,640,851	-	-	6,640,851
Administrative and general	213,619	-	-	213,619	210,269	-	-	210,269
Fundraising	456,310			456,310	457,754			457,754
Total expenses	7,366,749			7,366,749	7,308,874			7,308,874
Change in net assets	(89,068)	57,696	19,092	(12,280)	187,274	240,198	19,072	446,544
Net Assets at Beginning of Year	6,900,077	1,363,070	1,812,962	10,076,109	6,712,803	1,122,872	1,793,890	9,629,565
Net Assets at End of Year	\$ 6,811,009	\$ 1,420,766	\$ 1,832,054	\$ 10,063,829	\$ 6,900,077	\$ 1,363,070	\$ 1,812,962	\$ 10,076,109

STATEMENTS OF CASH FLOWS YEARS ENDED JUNE 30, 2020 AND 2019

	2020		2019	
Cash Flows From Operating Activities				
Change in net assets	\$	(12,280)	\$	446,544
Adjustments to reconcile changes in net assets			-	,
to net cash provided by operating activities:				
Depreciation		142,753		175,212
Unrealized gains on investments		(59,010)		(132,951)
Realized (gain) loss on sale of investments		97,538		(111,244)
In-kind donations of investments		-		(29,331)
(Increase) decrease in:				
Receivables		5,640		5,190
Inventory		-		2,870
Prepaid expenses		22,662		(14,344)
Increase (decrease) in:				
Accounts payable		48,712		2,002
Deposits held for others		3,602		(4,864)
Accrued expenses		22,645		(5,960)
Deferred revenue		(89,500)		(19,250)
Net cash flows provided by operating activities		182,762		313,874
Cash Flows From Investing Activities				
Proceeds from sale of investments		2,378,663		1,268,834
Purchase of investments		(2,223,593)		(1,305,964)
Purchase of property and equipment		(212,142)		(189,440)
Net cash flows used in investing activities		(57,072)		(226,570)
Cash Flows From Financing Activities				
Proceeds from Paycheck Protection Program loan		254,700		-
Net cash flows provided by financing activities		254,700		-
Net increase in cash and cash equivalents		380,390		87,304
Cash and Cash Equivalents at Beginning of Year		1,102,116		1,014,812
Cash and Cash Equivalents at End of Year	\$	1,482,506	\$	1,102,116

Schedule of Non-Cash Investing Activities

In-kind donations of investments	\$ -	\$ 29,331
In-kind donations of property and equipment	\$ -	\$ 17,750
Grants awarded directly from investment funds	\$ 17,400	\$ 34,312

STATEMENT OF FUNCTIONAL EXPENSES YEAR ENDED JUNE 30, 2020

	2020				
	Program	Administrative			
	Services	and General	Fundraising	Total	
Compensation and related costs					
Contributed professional services	\$ 1,437,460	\$-	\$-	\$ 1,437,460	
Salaries and wages	941,766	138,953	218,438	1,299,157	
Payroll taxes	81,404	1,781	17,382	100,567	
Employee benefits	4,238	1,923	1,594	7,755	
Insurance	54,552	7,467	9,023	71,042	
Education, training, and travel	3,250	5,386	3,211	11,847	
Recruiting and recognition	3,559	1,017	323	4,899	
Total compensation and related costs	2,526,229	156,527	249,971	2,932,727	
Administrative and development costs Benefit expenses			135,322	135,322	
Advertising, printing, and promotional	- 6,513	613	13,569	20,695	
Board expenses	2,539	182	1,786	4,507	
Computer network costs	59,429	4,234	15,579	79,242	
Credit card processing fees	55,425	4,234	13,441	13,441	
Copier lease and usage	7.073	- 604	1,199	8,876	
General office expenses	14,509	3,031	2,631	20,171	
Internet & web cost	14,509	750	2,051	750	
Postage and delivery	- 3,193	408	- 1.853	5,454	
Dues and memberships	10,128	364	749	11,241	
Professional fees	80	25,525	-	25,605	
Total administrative and development costs	103,464	35,711	186,129	325,304	
	,	<u>_</u>	·	<u>.</u>	
Program costs Laboratory costs	72,698	_	_	72,698	
Pathology services	37,823	_	-	37,823	
Screenings	178,377	_	-	178,377	
Medicine and drug costs	2,433,610	_	-	2,433,610	
Medical supplies	49,624	_	_	49,624	
Dental supplies	30,715	_	_	30,715	
Patient support	21,466	_	-	21,466	
Classroom instruction	10,550	_	-	10,550	
Hospital/surgery center costs	769,189	_	-	769,189	
Physician costs	151,289	-	-	151,289	
Personal protection equipment	16,869	-	-	16,869	
Software and equipment maintenance	37,638	-	-	37,638	
Medical equipment and services	38,920			38,920	
Total program costs	3,848,768			3,848,768	

STATEMENT OF FUNCTIONAL EXPENSES (CONTINUED) YEAR ENDED JUNE 30, 2020

				20	20		
	Pro	ogram	Adm	inistrative			
	Sei	rvices	and	General	Fu	ndraising	Total
Occupancy costs							
Rent/storage	\$	153	\$	1,104	\$	-	\$ 1,257
Utilities		30,679		3,604		3,963	38,246
Telephone and communications		9,098		1,476		1,206	11,780
Janitorial		16,932		1,475		1,133	19,540
Landscaping		1,925		250		325	2,500
Building repairs and maintenance		8,607		1,040		1,254	10,901
Insurance		25,688		2,375		3,611	31,674
Property taxes		1,082		64		153	 1,299
Total occupancy costs		94,164		11,388		11,645	 117,197
Depreciation		124,195		9,993		8,565	142,753
Total expenses	\$6	,696,820	\$	213,619	\$	456,310	\$ 7,366,749

STATEMENT OF FUNCTIONAL EXPENSES YEAR ENDED JUNE 30, 2019

	2019			
	Program	Administrative	-	
	Services	and General	Fundraising	Total
Compensation and related costs				
Contributed professional services	\$ 2,026,209	\$-	\$-	\$ 2,026,209
Salaries and wages	868,675	121,478	220,064	1,210,217
Payroll taxes	67,006	7,692	15,014	89,712
Contract labor	23,973	-	3,000	26,973
Employee benefits	6,778	2,626	1,992	11,396
Insurance	44,242	7,369	7,919	59,530
Education, training, and travel	1,801	2,614	4,018	8,433
Recruiting and recognition	3,971	1,386	247	5,604
Total compensation and related costs	3,042,655	143,165	252,254	3,438,074
Administrative and development costs				
Benefit expenses	_	_	122,648	122,648
Development expenses		_	2,536	2,536
Advertising, printing, and promotional	- 339	-	13,190	13,529
Board expenses	559	-	700	700
•	-	-	20.921	
Computer network costs	51,606	2,882	-) -	75,409
Credit card processing fees	-	-	10,152	10,152
Copier lease and usage	7,699	1,232	1,334	10,265
General office expenses	23,809	3,250	5,967	33,026
Internet & web cost	-	-	750	750
Postage and delivery	3,231	620	4,068	7,919
Dues and memberships	7,938	140	-	8,078
Professional fees	94	23,500		23,594
Total administrative and development costs	94,716	31,624	182,266	308,606
Program costs				
Laboratory costs	80,896	-	-	80,896
Pathology services	54,786	-	-	54,786
Screenings	292,307	-	-	292,307
Medicine and drug costs	1,966,390	-	-	1,966,390
Medical supplies	105,190	-	-	105,190
Dental supplies	41,827	-	-	41,827
Patient education materials	30	-	-	30
Patient support	21,697	-	-	21,697
Classroom instruction	3,735	-	-	3,735
Classroom supplies	953	_	_	953
Hospital/surgery center costs	436,056	_	_	436,056
Physician costs	204,761	_	_	204,761
Software and equipment maintenance	44,581	_	-	44,581
Medical equipment and services	17,146		-	17,146
Total program costs	3,270,355	-		3,270,355

STATEMENT OF FUNCTIONAL EXPENSES (CONTINUED) YEAR ENDED JUNE 30, 2019

	2019						
	Prograi	n Ad	ministrative				
	Service	s <u>a</u> r	nd General	Fu	Indraising		Total
Occupancy costs							
Rent/storage	\$	- \$	1,086	\$	-	\$	1,086
Utilities	27	456	6,842		3,692		37,990
Telephone and communications	7	127	1,099		1,183		9,409
Janitorial	14	678	1,514		876		17,068
Landscaping		-	405		-		405
Building repairs and maintenance	11	429	4,847		2,213		18,489
Insurance	22	643	4,979		3,181		30,803
Property taxes	1	019	220		138		1,377
Total occupancy costs	84	352	20,992		11,283		116,627
Depreciation	148	773	14,488		11,951		175,212
Total expenses	\$ 6,640	.851 \$	210,269	\$	457,754	\$	7,308,874

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2020 AND 2019

Note 1. Nature of Organization

The Volunteers in Medicine Clinic (the "Clinic") was incorporated as a nonprofit organization on May 14, 1992, for the purposes of understanding and serving the health and wellness needs of the medically underserved population living and/or working on Hilton Head and Daufuskie Islands in South Carolina. The Clinic provides these services through proceeds from private contributions and grants.

Note 2. Summary of Significant Accounting Policies

Basis of accounting

The Clinic maintains its accounts on the accrual basis of accounting. Revenues are recognized when the earnings process is completed and expenses are recognized in the period incurred.

Financial statement presentation

Financial statement presentation follows accounting standards issued by the Financial Accounting Standards Board ("FASB") for Not-for-Profit Organizations. These standards require the Clinic to report information regarding its financial position and activities according to two classes of net assets: net assets without donor restrictions and net assets with donor restrictions.

Net assets without donor restrictions – net assets that are not subject to donor-imposed stipulations. Net assets without donor restrictions also include funds designated for specific purposes by actions of the Board of Directors.

Net assets with donor restrictions – net assets subject to donor-imposed stipulations that may or will be met either by actions of the Organization and/or the passage of time. When a restriction expires, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statement of activities as net assets released from donor restrictions.

Cash and cash equivalents

The Clinic considers its investments with an original maturity of three months or less to be cash equivalents.

Investments

Investment purchases are recorded at cost or, if donated, at fair value on the date of donation. Thereafter, investments are reported at their fair values in the statements of financial position based on quoted market prices. Investments consist of equity securities, mutual funds, and debt securities. Realized gains and losses on dispositions are based on the net proceeds and the average cost of the shares sold. Unrealized gains and losses are charged or credited to the statements of activities. Gains and losses on investments are reported as increases or decreases in unrestricted net assets unless their use is restricted by explicit donor stipulation or by law. Investment return/(loss) is reported in the statements of activities and consists of interest and dividend income, realized and unrealized capital gains and losses, less external and direct internal investment expenses.

Receivables - other

Receivables-other represent accrued earnings on investments and overpaid unemployment taxes to be refunded.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2020 AND 2019

Note 2. Summary of Significant Accounting Policies (Continued)

Property and equipment

The Clinic records newly acquired real and personal property and major improvements at cost and donated property at fair value at the date of donation. Contributions with donor-imposed stipulations regarding how long the contributed assets must be used are recorded as net assets with donor restrictions; otherwise, the contributions are recorded as net assets without donor restrictions. The Clinic calculates depreciation on fixed assets over the estimated useful lives using straight line and accelerated methods which are as follows:

• •

	Years
Buildings and improvements	25
Equipment	3 - 10

Maintenance and repairs are charged to expense as incurred. When assets are retired or otherwise disposed of, the cost is removed from the asset account, and the related depreciation reserve is adjusted with the difference charged to income.

Donated services and supplies

Donated services and supplies are recognized as contributions when such services require specialized skills and would otherwise need to be purchased by the Clinic. Such amounts, which are based upon information provided by third-party service providers, are recorded at their estimated fair value determined on the date of contribution and are reported as "services and materials donated" and as "contributed professional services" and in the applicable expense category on the accompanying statement of activities and statements of functional expenses, respectively. Donated services from individual volunteers in areas not requiring specialized skills are not recognized as contributions in the financial statements since they do not meet the recognition criteria under accounting standards.

Functional expenses

Directly identifiable expenses are charged to program services. Expenses related to more than one function are charged to program and supporting services on the basis of personnel time and space utilized for the related activities. Administrative and general expenses include those expenses that are not directly identifiable with any other specific function, but provide for the overall support and direction of the Clinic.

Compensated absences

Compensated absences are expensed as incurred.

Use of estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amount of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amount of revenue and expense during the reporting period. Actual results could differ from those estimates, and those differences could be material.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2020 AND 2019

Note 2. Summary of Significant Accounting Policies (Continued)

Revenue recognition - beginning July 1, 2019

In May 2014, the Financial Accounting Standards Board (FASB) issued ASC 2014-09, *Revenue from Contracts with Customers (ASC Topic 606)*. Effective July 1, 2019, the Clinic recognizes revenue from contracts with customers in accordance with ASU Topic 606 which provides a five-step model for recognizing revenue from contracts with customers as follows:

- Identify the contract with the customer
- Identify the performance obligations in the contract
- Determine the transaction price
- Allocate the transaction price to the performance obligations in the contract
- Recognize revenue when or as the performance obligations are satisfied

Impact of ASU 2014-09 Adoption

The Clinic adopted ASU 2014-09 using the modified retrospective method. Accordingly, the new guidance was applied retrospectively to contracts that were not completed as of July 1, 2019 (the date of the initial application). In addition, the Clinic utilized the practical expedient which allows it to evaluate the impact of contract modifications as of the adoption date rather than evaluating the impact of the modifications at the time they occurred prior to the adoption date. There were no uncompleted contracts at July 1, 2019. As such, there were no effects to the Clinic's financial statements upon adoption of ASU 2014-09.

Contributions received are recorded as restricted or unrestricted by donor depending on the existence and/or nature of any donor restrictions. Support that is restricted by the donor is reported as an increase in net assets unrestricted by donor if the restriction expires in the reporting period in which the support is recognized. All other donor-restricted support is reported as an increase in net assets with donor restrictions depending on the nature of the restriction. When a restriction expires, that is when a stipulated time restriction ends or purpose restriction is accomplished, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statement of activities as net assets released from restrictions.

Recent accounting guidance

In November 2016, the FASB issued ASU 2016-18, *Statement of Cash Flows: Restricted Cash*, which provides guidance on the presentation of restricted cash or restricted cash equivalents in the statement of cash flows. The amendments in this update were effective for annual financial statements issued for fiscal years beginning after December 15, 2018. The Organization implemented the standard for the year ended June 30, 2020, and has adjusted the presentation of these statements accordingly. The pronouncement has been applied retrospectively to all periods presented. There was no effect on previously stated total net assets and cash and cash equivalents.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2020 AND 2019

Note 2. Summary of Significant Accounting Policies (Continued)

Recent accounting guidance (continued)

In June 2018, the FASB issued ASU 2018-08, *Not-For-Profit Entities (Topic 958): Clarifying the Scope and Accounting Guidance for Contributions Received and Contributions Made.* The new guidance helps distinguish if grants and contracts with resource providers are exchange transactions or contributions. Once a transaction is deemed to be a contribution, the ASU also provided guidance to help determine when a contribution is conditional and evaluates the possibility that a condition will not be met is remote. Unconditional contributions are recognized immediately and classified as either net assets with or without donor restrictions, while conditional contributions received are accounted for as a liability until the barriers to entitlement are overcome, at which point the transaction is recognized as unconditional and classified as either net assets with or without restrictions. The amendments in this update were effective for annual financial statements issued for fiscal years beginning after December 15, 2018. The adoption of this standard for the year ended June 30, 2020, did not result in a change to the financial statements of the Clinic.

Recently issued pronouncements

In February 2016, the FASB issued new guidance ASU 2016-02, *Leases (Topic 842)*, which will require leases to be recorded as an asset on the balance sheet for the right to use leased asset and a liability for the corresponding lease obligation for leases with terms of more than 12 months. ASU 2016-02 is effective for annual periods beginning after December 15, 2020, with early adoption permitted. On May 20, 2020, the FASB extended the effective date to reporting periods beginning after December 15, 2021. The Clinic is currently evaluating the impact of this new guidance on its financial statements.

Other accounting standards that have been issued or proposed by the FASB or other standard-setting bodies are not expected to have a material impact on the Clinic's net assets or changes in net assets.

Reclassifications

Certain reclassifications were made to the 2019 financial statements in order to conform to 2020 presentation. These reclassifications had no effect on changes in net assets with donor restrictions, changes in net assets without donor restrictions, and total net assets.

Note 3. Liquidity and Availability

Financial assets available for general expenditure, that is, without donor or other restrictions limiting their use, within one year of the balance sheet date, comprise the following:

	 2020	 2019
Current assets, at June 30: Less prepaid expenses	\$ 8,764,936 50,260	\$ 8,606,446 72,922
Less those unavailable for general expenditures within one year, due to donor or board restrictions:		
Restrictions by donor with time or purpose restrictions	1,420,766	1,363,070
Restrictions by donor in perpetuity	1,832,054	1,812,962
Board restricted	 4,302,597	 4,293,227
Financial assets available to meet the cash requirement for operational expenditures within one year	\$ 1,159,259	\$ 1,064,265

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2020 AND 2019

Note 3. Liquidity and Availability (Continued)

During 1998, management conducted a fund-raising campaign which resulted in significant current and future contributions. The contributions received and invested represent the amount initially received in cash and invested. These funds were raised to provide a financial base to help provide the needed funds to sustain the Clinic, especially in the face of an economic downturn, disaster relief, or other financial challenges. Some of these donations were for perpetuity (current balance approximately \$1.8 million), others were board designated (current balance approximately \$4.1 million) to fund operations or in the case of a catastrophic event.

By policy established by the Board of Directors, the amount of funds that may be distributed in any year from the investments to the operating funds shall be no more than 4.5% of the trailing 12 quarter average of the endowment.

Donors may impose restrictions on the use of the contributed funds. Time restrictions require resources to be used in a certain period or after a specified date. Purpose restrictions require resources to be used for a specified purpose.

Note 4. Concentrations of Credit Risk

Financial instruments that potentially subject the Clinic to concentrations of credit risk consist principally of cash and cash equivalent accounts held at financial institutions and investments. The credit worthiness of the parties to these transactions is subject to continuous review and evaluation.

The Clinic places its cash and cash equivalents on deposit with financial institutions in the United States. The Securities Investor Protection Corporation (SIPC) provides protection from loss resulting from brokerage firm fraud or failure for cash and securities up to \$500,000, including \$250,000 for cash. The Federal Deposit Insurance Corporation (FDIC) insures deposits held at insured financial institutions up to \$250,000 for each deposit ownership category.

The Clinic, from time to time, may have amounts on deposit in excess of the respective insurance and protection limits. The Clinic's uninsured or unprotected cash balances totaled \$1,152,532 and \$650,493 as of June 30, 2020 and 2019, respectively.

Note 5. Investments

Summary of investments at June 30 are as follows:

	2020	2019
Held at brokerage firm	\$ 6,846,521	\$ 7,026,046
Endowment fund held by other entity, the Community Foundation of the Lowcountry, Inc. (CFL)		
Board designated, invested by CFL	367,589	381,662
Donor restricted, spendable portion	8,450	8,450
Total held by CFL	376,039	390,112
Total reported on Statements of Financial Position	\$ 7,222,560	\$ 7,416,158

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2020 AND 2019

Note 5. Investments (Continued)

Investments held at brokerage firm

The amortized costs, gross unrealized gains and losses, and estimated fair values of investment securities held at a brokerage firm are summarized as follows:

huma 20, 2020	Amortized Cost	Unrealized Gains	Unrealized Losses	Estimated Fair Value
June 30, 2020 Certificates of Deposit Corporate debt Equity securities Mutual funds Exchange traded funds	\$ 129,805 1,065,862 2,508,956 233,610 1,898,282	\$ 1,027 55,768 963,832 29,438 123,145	\$ - (19,373) (118,341) - (25,490)	\$ 130,832 1,102,257 3,354,447 263,048 1,995,937
Total	\$ 5,836,515	\$ 1,173,210	\$ (163,204)	\$ 6,846,521
	Amortized Cost	Unrealized Gains	Unrealized Losses	Estimated Fair Value
June 30, 2019 Corporate debt Municipal debt Equity securities Mutual funds Exchange traded funds	\$ 804,411 84,314 2,459,956 795,444 1,927,599	\$28,759 - 890,950 - 149,065	\$ (392) (8,142) (43,707) (57,940) (4,271)	\$ 832,778 76,172 3,307,199 737,504 2,072,393
Total	\$ 6,071,724	\$ 1,068,774	\$ (114,452)	\$ 7,026,046

The following schedule details the investment return, net of expenses, as reflected in the statements of activities for the years ended June 30, 2020 and 2019:

	 2020	 2019
Dividends & capital gains	\$ 132,243	\$ 124,384
Interest	49,257	54,063
Investment fees	(35,565)	(34,285)
Realized/unrealized gains (losses) on investments	 (147,864)	 284,788
	\$ (1,929)	\$ 428,950

Endowment investment fund - agency funds

The Board of Directors elected to invest funds in an endowment with the Community Foundation of the Lowcountry Inc. (the "Foundation"). These funds are managed by the Foundation as part of a pool of investments, and the Clinic has no control regarding investment decisions. Funds available for distribution on an annual basis are determined by calculating 4.5% of the average market value of the fund over a 12-quarter period. Assets may also be distributed to meet emergency funding needs of the Clinic as determined by the Foundation in its sole discretion. The Clinic may elect to add all or any part of the distribution back to the fund.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2020 AND 2019

Note 5. Investments (Continued)

Endowment investment fund – agency funds (continued)

Amounts related to this fund reported in the statement of financial position as investment funds as of June 30, 2020 and 2019, were \$367,589 and \$381,662, respectively.

The Foundation investments represent the proportional interest in the investment pool managed by the Foundation. The investments are reported at their fair value which is estimated as the fair value of the underlying assets held by the Foundation. This investment is categorized as Level 3 under the fair value measurement hierarchy. The components of the investment funds related to the endowment are classified as net assets donor restricted-perpetual in nature.

Endowment investment fund - third-party funds

The Clinic also has an endowment fund which is the accumulation of amounts donated to the Foundation by third-party donors for the ultimate benefit of The Volunteers in Medicine Clinic (Third Party Fund). In accordance with generally accepted accounting principles, the Clinic has excluded from their financial statements the non-spendable portion of the contributions and related investment gains, losses, and fees that are from third-party donors. The balance of the non-spendable portion excluded from the financial statements was \$126,928 and \$128,547 as of June 30, 2020 and 2019, respectively.

Funds available for distribution from this fund on an annual basis (the spendable portion) are determined by calculating 4.5% of the average market value of the fund over a 12-quarter period. The Clinic may elect to add all or any part of the distribution back to the fund. The Clinic made no such election in 2020 or 2019. The spendable portion of this fund reported in the statements of financial position as investment funds as of June 30, 2020 and 2019, was \$8,450 and \$8,450, respectively.

Note 6. Fair Value Measurements

Accounting principles generally accepted in the United States of America provide a framework for measuring fair value (FASB ASC 820-10), *Fair Value Measurements and Disclosures*. The framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820-10 are described below:

- Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Clinic has the ability to access.
- Level 2 Inputs to the valuation methodology include:
 - Quoted prices for similar assets or liabilities in active markets,
 - Quoted prices for identical or similar assets or liabilities in inactive markets,
 - Inputs other than quoted prices that are observable for the asset or liability,
 - Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specific (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

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

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2020 AND 2019

Note 6. Fair Value Measurements (Continued)

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

Following is a description of the valuation methodology used for assets measured at fair value. There have been no changes in the methodology used at June 30, 2020 and 2019.

- U.S. Treasuries, equity securities, and exchange traded funds: Valued at the closing price reported on the active market on which the individual securities are traded.
- *Debt securities*: Valued at the closing price reported on the active market on which the individual bonds are traded.
- *Mutual funds*: Valued at the quoted net asset value (NAV) of shares held by the Clinic at year end.
- Investment held by other entity: As the Clinic does not know the precise allocation of the underlying assets on an ongoing basis, the asset is classified as Level 3 within the valuation hierarchy based upon the asset's fair value as represented by the fund's management.

The method described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Clinic believes its valuation method is appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following tables set forth by level, within the fair value hierarchy, the Clinic's assets at fair value as of June 30, 2020 and 2019:

	Assets at Fair Value as of June 30, 2020						
							Total
	Level 1	Lev	vel 2	<u> </u>	_evel 3	F	air Value
Certificates of deposit	\$ 130,832	\$	-	\$	-	\$	130,832
Corporate debt	1,102,257		-		-		1,102,257
Equity securities	3,354,447		-		-		3,354,447
Mutual funds	263,048		-		-		263,048
Exchange traded funds	1,995,937		-		-		1,995,937
Investments held by CFL			-		376,039		376,039
Total assets	\$ 6,846,521	\$	_	\$	376,039	\$	7,222,560

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2020 AND 2019

Note 6. Fair Value Measurements (Continued)

	Assets at Fair Value as of June 30, 2019						
				Total			
	Level 1	Level 2	Level 3	Fair Value			
Corporate debt	\$ 832,778	\$-	\$ -	\$ 832,778			
Municipal debt	76,172	-	-	76,172			
Equity securities	3,307,199	-	-	3,307,199			
Mutual funds	737,504	-	-	737,504			
Exchange traded funds	2,072,393	-	-	2,072,393			
Investments held by CFL			390,112	390,112			
Total assets	\$ 7,026,046	<u>\$ -</u>	\$ 390,112	\$ 7,416,158			

The following table sets forth a summary of changes in the fair value of the Clinic's Level 3 assets for the years ended June 30, 2020 and 2019:

	 vestments Held by CFL
Balance, June 30, 2018 Grants given	\$ 408,801 (34,312)
Unrealized gains Management fees	 19,344 (3,721)
Balance, June 30, 2019 Grants given Unrealized gains Management fees	 390,112 (20,648) 10,299 (3,724)
Balance, June 30, 2020	\$ 376,039

Total net gains and losses for Level 3 assets for the periods ended June 30, 2020 and 2019, are included in net realized and unrealized gains (losses) on investments in the statements of activities. The transfers out of Level 3 assets for the years ended June 30, 2020 and 2019, were \$20,648 and \$34,312, respectively.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2020 AND 2019

Note 7. Property and Equipment

Property and equipment consist of the following at June 30:

	2020	2019
Land	\$ 781,240	\$ 781,240
Buildings	1,888,033	1,722,429
Computers and software	650,169	610,851
Medical furniture, fixtures, and equipment	580,143	580,143
Office furniture, fixtures, and equipment	540,574	533,354
Subtotal	4,440,159	4,228,017
Less accumulated depreciation	2,722,194	2,579,441
Net property and equipment	<u>\$ 1,717,965</u>	\$ 1,648,576

Note 8. Debt

Under the Coronavirus, Aid, Relief and Economic Security (CARES) Act, the Clinic received \$254,700 on April 16, 2020. The interest rate is 1%, and payments start 7 months from the date of disbursement. The payment term is 24 months, with the first 6 months of principal and interest being deferred, with interest accruing, then converting to monthly principal and interest payment amortized over 18 months. The loan may be forgiven under certain circumstances. The balance as of June 30, 2020, is \$254,700.

Note 9. Net Assets – Without Donor Restrictions

Net assets without donor restrictions consist of the following as of June 30:

	2020	2019
Board designated endowed funds	\$ 4,035,672	\$ 4,205,229
Imlay/McConnell fund	266,925	87,998
Total board designated funds	4,302,597	4,293,227
Undesignated	2,508,412	2,606,850
Total net assets without donor restrictions	<u>\$ 6,811,009</u>	\$ 6,900,077

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2020 AND 2019

Note 10. Net Assets – With Donor Restrictions - Use

The Clinic has received various contributions which are restricted in their use. Net assets restricted by donoruse restrictions are available for the following purposes at June 30:

	 2020	 2019
Dental clinic	\$ 118,344	\$ 51,060
Healing services	320	320
Mammography	89,214	55,083
Patient surgical navigation	141,293	116,411
Wellness program	29,631	50,409
Other restricted programs	277,247	251,971
Endowment available for appropriations	764,717	837,816
Total net assets restricted by donor	\$ 1,420,766	\$ 1,363,070

Note 11. Net Assets – Endowment

The Clinic's endowment consists of net assets restricted by donor and the Board. As required by generally accepted accounting principles, net assets associated with endowment funds, including funds designated by the Board of Directors to function as endowments, are classified and reported based on the existence or absence of donor- imposed restrictions.

The State of South Carolina adopted the Uniform Prudent Management of Institutional Funds Act (UPMIFA) effective July 1, 2008. The Board of Directors of the Clinic has interpreted the UPMIFA as requiring the preservation of the original gift as of the gift date of the donor-restricted endowment funds absent explicit donor stipulations to the contrary. As a result of this interpretation, the Clinic classifies as net assets restricted by donor-perpetual in nature: (1) the original value of the gifts donated to the permanent endowment, (2) the original value of subsequent gifts to the permanent endowment, and (3) accumulations or reductions to the permanent at the time the accumulation is added to or the reduction subtracted from the fund.

The remaining portion of the endowment fund that is not classified in net assets restricted by donor-perpetual in nature is classified as net assets with donor restrictions-use restrictions and net assets without donor restrictions-board designated funds until these amounts are appropriated for expenditure by the Clinic in a manner consistent with the standard of prudence described in the UPMIFA. In accordance with the UPMIFA, the Clinic considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds:

- The duration and preservation of the fund
- The purposes of the Clinic and the restricted by donor endowment fund
- General economic conditions
- The possible effect of inflation and deflation
- The expected total return from income and the appreciation of investments
- Other resources of the Clinic
- The investment policy of the Clinic

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2020 AND 2019

Note 11. Net Assets – Endowment (Continued)

At June 30, 2020, the Foundation had the following endowment net assets composition by type of fund:

	Without donor <u>restrictions</u> Board	With donor	restrictions	
	Designated	Time Use	Perpetual	Total
Donor-restricted endowment funds Board-designated endowment funds	\$- 4,035,707	\$ 764,717 	\$ 1,832,054 	\$ 2,596,771 4,035,707
Total funds	\$ 4,035,707	<u> </u>	\$ 1,832,054	\$ 6,632,478

The following are the changes in endowment net assets for the year ended June 30, 2020:

	Without donor restrictions Board Designated	With dono Time Use	r restrictions Perpetual	Total
Endowment net assets, July 1, 2019	\$ 4,205,266	\$ 837,816	\$ 1,812,962	\$ 6,856,044
Investment return: Investment income, net of expenses	(1,348)	(581)		(1,929)
Contribution	-	-	19,092	19,092
Appropriation of endowment assets for expenditure	(168,211)	(72,518)		(240,729)
Endowment net assets, June 30, 2020	<u>\$ 4,035,707</u>	<u>\$ 764,717</u>	<u>\$ 1,832,054</u>	\$ 6,632,478

At June 30, 2019, the Foundation had the following endowment net assets composition by type of fund:

	Without donor restrictions			
	Board	With donor	restrictions	
	Designated	Time Use	Perpetual	Total
Donor-restricted endowment funds Board-designated endowment funds	\$- 4,205,266	\$ 837,816 -	\$ 1,812,962 -	\$ 2,650,778 4,205,266
Total funds	\$ 4,205,266	\$ 837,816	\$ 1,812,962	\$ 6,856,044

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2020 AND 2019

Note 11. Net Assets – Endowment (Continued)

The following are the changes in endowment net assets for the year ended June 30, 2019:

	Without donor restrictions Board	With donor	restrictions	
	Designated	Time Use	Perpetual	Total
Endowment net assets, July 1, 2018	\$ 4,070,348	\$ 778,354	\$ 1,793,890	6,642,592
Investment return: Investment income	297,732	131,218	-	428,950
Contribution	-	-	19,072	19,072
Appropriation of endowment assets for expenditure	(162,814)	(71,756)		(234,570)
Endowment net assets, June 30, 2019	\$ 4,205,266	\$ 837,816	\$ 1,812,962	\$ 6,856,044

<u>Funds with deficiencies</u> – From time to time, the fair value of the assets associated with individual donorrestricted endowment funds may fall below the level that the donor or the UPMIFA requires the Clinic to retain as a fund of perpetual duration. There were no such deficiencies as of June 30, 2020 and 2019.

<u>Return objectives and risk parameters</u> – The Clinic has adopted investment and spending policies that attempt to provide a predictable stream of funding to programs supported by the Clinic. Endowment assets include those assets of donor-restricted funds that the Clinic must hold in perpetuity or for a donor specified period as well as board-designated funds. Under this policy, as approved by the Board, the endowment assets are invested in a manner that is intended to produce a high level of total investment return consistent with a prudent level of portfolio risk. The Clinic expects its endowment funds, over time, to provide an average rate of return of approximately 4.5% annually. Actual returns in any given year may vary from this amount.

<u>Strategies employed for achieving objectives</u> – To satisfy long-term rate-of-return objectives, the Clinic relies on a total return strategy in which investment returns are achieved through both capital appreciation (realized and unrealized) and current yield (interest and dividends). The Clinic targets a diversified asset allocation that places a greater emphasis on equity-based investments to achieve its long-term return objectives within prudent risk constraints.

<u>Spending policy and how the investment objectives relate to spending policy</u> – The Clinic's spending policy is to appropriate for distribution each year up to 4.5% of its endowment fund's average fair value over the prior 12 quarters through the calendar year-end preceding the fiscal year in which the distribution is planned. In establishing this policy, the Clinic considered the long-term expected return on its endowment. Accordingly, over the long term, the Clinic expects the current spending policy to allow its endowment to grow at an average of 1.5% annually. This is consistent with the Clinic's objective to maintain the purchasing power of the endowment assets held in perpetuity or for a specified term as well as to provide additional real growth through new gifts and investment return. In June 2020, \$304,000 was taken from the endowment investments and transferred to the operating fund. As of June 30, 2020, the endowment investments restricted by the Board or donors that is not perpetual in nature is \$4,800,424.

At June 30, 2020 and 2019, the Clinic's net assets restricted by donor-perpetual in nature consist of investments providing a permanent source of income for operations and for the use of furthering the mission of the Clinic.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2020 AND 2019

Note 12. Operating Leases

Clinic as lessor

The Clinic has a non-cancelable lease agreement for the rental of a portion of the Clinic's facilities. The lease income was \$200 per month until May 31, 2020, and then \$400 per month for the remaining 7 months of the lease. The lease expires at December 31, 2020. As of June 30, 2020 and 2019, the total cost and accumulated depreciation of the facility and improvements of which a portion is leased was as follows:

	2020	2019
Cost of facility and improvements Accumulated depreciation	\$ 1,296,233 (542,943)	\$ 1,265,607 (504,516)
	\$ 753,290	\$ 761,091

The lease income under this lease was approximately \$2,400 and \$7,000 for the years ended June 30, 2020 and 2019, respectively.

Clinic as lessee

During May of 2019, the Clinic entered into a five-year operating lease for two copiers. Per the lease agreement, the lease will automatically renew on a month-to month basis after the ending of the lease term. Lease payments are \$370 per month.

The future annual lease payments are summarized below:

<u>Fiscal Year</u>	 Amount
2021	\$ 4,492
2022	4,492
2023	4,492
2024	 3,702
	\$ 17,178

Note 13. Income Taxes

The Clinic is a not-for-profit organization under Internal Revenue Code Section 501(c)(3). Accordingly, no provision for federal or state income taxes is reflected in the accompanying financial statements. The Clinic believes that it has appropriate support for any tax positions taken and, as such, does not have any uncertain tax positions that are material to the financial statements as of June 30, 2020 and 2019. The Clinic files information returns in the U.S. federal jurisdiction and the state of South Carolina.

Note 14. Retirement Plan

The Clinic sponsors a 403(b), tax deferred annuity plan in which any employee may elect to defer a portion of their compensation. The Plan does not include a provision for employer contributions.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2020 AND 2019

Note 15. Commitments and Contingent Liabilities

<u>Grants</u>

Amounts received or receivable from grantor agencies in previous years are subject to audit and adjustment by grantor agencies. Any disallowed claims, including amounts already collected, could become a liability of the Clinic. The amount of program expenditures which may be disallowed by the granting agencies cannot be determined at this time, although the Clinic expects such amounts, if any, to be immaterial.

Note 16. COVID-19

The COVID-19 pandemic has constrained the clinic's ability to provide the volume of care typically available due to safety concerns for our volunteers and patients. The extent of the impact of COVID-19 on the Clinic's operational and financial performance will depend on certain developments, including the duration and spread of the outbreak and its impacts on the Clinic's donors, employees, and vendors, all of which at present cannot be determined. Accordingly, the extent to which COVID-19 may impact the Clinic's financial position and changes in net assets and cash flows is uncertain, and the accompanying financial statements include no adjustments relating to the effects of this pandemic.

Note 17. Subsequent Events

The Clinic has evaluated subsequent events through December 17, 2020, in connection with the preparation of these financial statements, which is the date that the financial statements were available to be issued.



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	2 nd term expires 6/24	1^{st} term expires 6/23
	Technology Committee Co-chair	-
	Senior Vice President / Director of	Development Committee
	Loan Operations –	Retired printing business owner
	Coastal States Bank	
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Beaufort County Government



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	2 nd term expires 6/24	2 nd term expires 6/22
	Board Chair Executive Committee Chair	Governance & Planning Committee Executive Committee Secretary
	Senior Vice President of Risk Management and Patient Safety & Chief Privacy Officer – Catholic Healthcare System of Long Island	Former President – National Middle School Association; Former Faculty - Association for Supervision and Curriculum Dev.
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SPOUSE: Elizabeth	1 st term expires 6/24	SPOUSE: Dennis
2 nd term expires 6/24	Development Committee	1 st term expires 6/23
Medical Executive Committee	Retired nephrologist	Development Committee
Director of Dentistry -VIM	Retired CEO/managing partner Greater Columbus Regional Dialysis	Former Educator, Former Restaurant Owner



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2nd term expires 6/24

Finance Committee Chair Executive Committee Treasurer

Business Services Manager – Exxon Mobil

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1st term expires 6/24

Governance & Planning Committee

Retired New Jersey K - 12th Grade Public School Educator/Grant Writer

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1st term expires 6/24

Development Committee

Paralegal / Notary Public / Interpreter Mogil Law Firm

COLEMAN PETERSON chp@hollisent.com



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1st term expires 6/23

Governance & Planning Committee Chair

Business Executive

DAVID NAGEL, MD

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1st term expires 6/24

Medical Executive Committee

Retired Radiation Oncologist Susquehanna Health System

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2nd term expires 6/24

Development Committee Chair

Real Estate - Charter One



STEVEN SIEGELBAUM, MD | PATRICK SNOWMAN, MD | JEANETTE TAYLOR JONES | |

spsiegelbaum@gmail.com



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2nd term expires 6/24

Medical Executive Committee Chair Executive Committee

Retired Gastroenterology Physician; VIM Volunteer Doctor

JANET WILLIAMS janet.1.williams@ml.com



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1st term expires 6/24

Finance Committee

Vice President/Senior Financial Advisor at Merrill Lynch Patrick_Snowman@teamhealth.com



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1st term expires 6/22

Medical Executive Committee

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1st term expires 6/24

Governance & Planning Committee

RN and JD Health Care and Law Hennepin County Medical Center

RICHARD VANDERVEER, PhD

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2nd term expires 6/24

Board Vice Chair Development Committee

Retired CEO - GfK US Healthcare (healthcare marketing)



TILLON TLAD ISLAND		
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	EX-OFFICIO	
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Continuous term	Continuous term Executive Committee-Ex-Officio	Continuous term Executive Committee-Ex-Officio
Executive Committee – Ex-Officio	Retired President/CEO –	Retired Chairman –
Executive Director of VIM HHI	Circuit City Stores, Inc.	GE Consumer Financing