
Financial statements of COTA Health

March 31, 2025

Independent Auditor's Report	1-2
Statement of financial position	3
Statement of operations	4
Statement of changes in net assets	5
Statement of cash flows	6
Notes to the financial statements	7-14

Independent Auditor's Report

To the Members of
COTA Health

Opinion

We have audited the financial statements of COTA Health (the "Organization"), which comprise the statement of financial position as at March 31, 2025, and the statements of operations, changes in net assets and cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies (collectively referred to as the "financial statements").

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Organization as at March 31, 2025, and the results of its operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards ("Canadian GAAS"). Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are independent of the Organization in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management and those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the Organization's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Organization or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Organization's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian GAAS will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with Canadian GAAS, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Organization's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Organization's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Organization to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

The logo for Deloitte LLP, featuring the word "Deloitte" in a stylized script font followed by "LLP" in a bold, sans-serif font.

Chartered Professional Accountants
Licensed Public Accountants
June 24, 2025


COTA Health
Statement of financial position
As at March 31, 2025

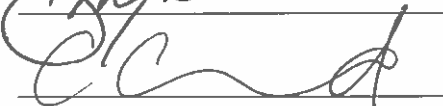
	Notes	2025 \$	2024 \$
Assets			
Current assets			
Cash		23,894,753	22,726,308
Short-term investments	3	635,094	589,569
Accounts receivable		2,295,494	3,324,164
Prepaid expenses		62,059	55,543
		<u>26,887,400</u>	<u>26,695,584</u>
Investments	3	8,823,476	7,954,044
Capital and intangible assets	4	6,355,253	6,439,938
		<u>42,066,129</u>	<u>41,089,566</u>
Liabilities			
Current liabilities			
Accounts payable and accrued liabilities	5	7,841,066	8,204,714
Deferred revenue	6	18,757,050	19,633,268
Current portion of mortgage payable	7	77,193	74,335
Current portion of forgivable loan	9	60,909	58,909
		<u>26,736,218</u>	<u>27,971,226</u>
Deferred capital contributions	8	2,037,559	2,096,031
Mortgage payable	7	1,145,723	1,223,057
Forgivable loan	9	1,660,519	1,531,612
		<u>31,580,019</u>	<u>32,821,926</u>
Economic dependence	10		
Lease commitments	14		
Net assets			
Invested in capital and intangible assets	12(a)	1,373,350	1,455,994
Internally restricted	13	9,112,760	6,811,646
		<u>10,486,110</u>	<u>8,267,640</u>
		<u>42,066,129</u>	<u>41,089,566</u>

The accompanying notes are an integral part of the financial statements.

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On behalf of the Board


_____, Director


_____, Director

COTA Health
Statement of operations
Year ended March 31, 2025

	Notes	2025 \$	2024 \$
Revenue			
Transfer payments and grants	6 and 10	106,319,116	88,400,462
Other income	9	3,008,348	2,340,990
Amortization of deferred capital contributions	8	58,472	34,553
Net investment income	11	472,515	1,574,351
		109,858,451	92,350,356
Expenses			
Direct transfer payment and grant costs		105,874,393	88,990,567
Indirect transfer payment and grant costs		1,517,484	1,060,135
Overhead		593,894	1,286,736
Amortization of capital and intangible assets		150,748	151,226
		108,136,519	91,488,664
Excess of revenue over expenses from operations		1,721,932	861,692
Change in net unrealized gain on investments		496,538	487,920
Excess of revenue over expenses		2,218,470	1,349,612

The accompanying notes are an integral part of the financial statements.

COTA Health**Statement of changes in net assets**

Year ended March 31, 2025

		Invested in capital and intangible assets	Internally restricted	Unrestricted	2025 Total	2024 Total
	Notes	\$	\$	\$	\$	\$
Balance, beginning of year		1,455,994	6,811,646	—	8,267,640	6,918,028
(Deficiency) excess of revenue over expenses	12(b)	(26,822)	893,550	1,351,742	2,218,470	1,349,612
Investment in capital and intangible assets	12(b)	(55,822)	55,822		—	—
Interfund transfers	13		1,351,742	(1,351,742)	—	—
Balance, end of year		1,373,350	9,112,760	—	10,486,110	8,267,640

The accompanying notes are an integral part of the financial statements.

COTA Health
Statement of cash flows
Year ended March 31, 2025

	2025	2024
	\$	\$
Operating activities		
Excess of revenue over expenses	2,218,470	1,349,612
Items not affecting cash		
Amortization of capital and intangible assets	150,748	151,226
Amortization of deferred capital contributions	(58,472)	(34,553)
Unrealized gain on investments	(496,538)	(487,920)
Realized gain on investments	(179,639)	(23,132)
Loan forgiveness earned	(65,454)	(58,909)
	1,569,115	896,324
Change in non-cash operating working capital		
Accounts receivable	1,028,670	(1,458,252)
Prepaid expenses	(6,516)	67,110
Accounts payable and accrued liabilities	(363,648)	167,634
Deferred revenue	(876,218)	5,451,139
	1,351,403	5,123,955
Financing activities		
Mortgage payments	(74,476)	(70,818)
Forgiveable loan received	196,361	—
Deferred capital contributions received	—	1,495,429
	121,885	1,424,611
Investing activities		
Purchase of investments, net	(238,780)	(233,837)
Purchase of capital and intangible assets	(66,063)	(1,406,749)
	(304,843)	(1,640,586)
Increase in cash	1,168,445	4,907,980
Cash, beginning of year	22,726,308	17,818,328
Cash, end of year	23,894,753	22,726,308

The accompanying notes are an integral part of the financial statements.

COTA Health ("COTA Health" or the "Organization") is an accredited provider of mental health and community support services. The Organization provides support to adults living with serious mental illness, geriatric mental health conditions, acquired brain injury, developmental disabilities and dual diagnosis. By enabling people to achieve greater independence, the Organization helps individuals remain in the community setting and avoid more costly hospital environments.

COTA Health delivers its services through a participative model of care involving clients, service providers, funders and community partners. COTA Health has a proud history of building community partnerships to develop integrated, cost-effective health care solutions. These community partnerships include collaborating with Local Health Integration Networks, provincial ministries and other providers of community support services.

COTA Health was incorporated on August 11, 1975 as a not-for-profit organization without share capital. On dissolution of COTA Health, any remaining assets must be given to an Ontario charitable organization. COTA Health is also registered with the federal government as a charitable organization and, as such, is exempt from income taxes under the Income Tax Act (Canada).

1. Significant accounting policies

(a) Basis of presentation

The financial statements have been prepared by management in accordance with Canadian accounting standards for not-for-profit organizations.

(b) Revenue recognition

COTA Health follows the deferral method of accounting for revenue. Transfer payments received for restricted purposes are recognized as revenue in the year in which the related expenses are incurred. Transfer payments received for unrestricted purposes are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured. For the year ended March 31, 2025, the Organization did not receive unrestricted contributions (nil in 2024).

Revenue received in advance of incurring the related expenses are deferred and recorded in the statement of operations when the related expenses are incurred.

Deferred capital contributions represent the unamortized amount of transfer payments received and spent for the purchase of capital and intangible assets. The amortization of deferred capital contributions is recorded as revenue in the statement of operations on the same basis as the amortization of the respective assets purchased using these contributions. Contributed land is recorded as a direct increase to net assets.

Donations are recorded when received. Pledges outstanding at year end are not recorded in the financial statements. Rental income is recorded as services are performed. Other income is recognized when earned, measurable, and collection is reasonably assured.

(c) Capital and intangible assets

Purchased capital and intangible assets are recorded at cost. Contributions of capital and intangible assets and leasehold improvements are capitalized at fair value at the date of contribution. Capital and intangible assets are amortized when they are available for use, using the following bases and annual rates:

Asset	Basis	Rate
Computer equipment	Declining balance	30%
Computer software	Straight-line	33-1/3%
Furniture and equipment	Declining balance	20%
Building	Straight-line	3-1/3%
Leasehold improvements	Straight-line	Term of lease

1. Significant accounting policies (continued)

(c) Capital and intangible assets (continued)

In the year of acquisition, only 50% of the amortization is recorded. Construction in progress does not commence amortization until it is complete and ready for use.

Capital and intangible assets are written down to fair value or replacement cost to reflect partial impairments when conditions indicate that the assets no longer contribute to the Organization's ability to provide goods and services, or that the value of future economic benefits or service potential associated with the capital and intangible assets are less than their net carrying amounts.

(d) Contributed services and materials

Contributed services and materials are not recognized in the financial statements because of the difficulty in determining their fair value.

(e) Financial assets and liabilities

Financial instruments are recorded at fair value upon initial recognition. Equity instruments that are quoted in an active market are subsequently measured at fair value. All other financial instruments are subsequently recorded at cost or amortized cost, unless management has elected to carry the instruments at fair value. The Organization has not elected to carry any such financial instruments at fair value.

Transaction costs incurred on the acquisition of financial instruments measured subsequently at fair value are expensed as incurred. All other financial instruments are adjusted by transaction costs incurred on acquisition and financing costs, which are amortized using the straight-line method.

Financial assets are assessed for impairment on an annual basis at the end of the fiscal year if there are indicators of impairment. If there is an indicator of impairment, the Organization determines if there is a significant adverse change in the expected amount or timing of future cash flows from the financial asset. If there is a significant adverse change in the expected cash flows, the carrying value of the financial asset is reduced to the highest of the present value of the expected cash flows, the amount that could be realized from selling the financial asset or the amount the Organization expects to realize by exercising its right to any collateral. If events and circumstances reverse in a future period, an impairment loss will be reversed to the extent of the improvement, not exceeding the initial carrying value.

(f) Use of estimates

The preparation of financial statements requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the year. Actual results could differ from those estimates. Items included in these financial statements that require significant estimates include accrued liabilities, fair value of investments, and deferred revenue.

2. Banking facility

COTA Health has a \$1,000,000 revolving operating line of credit. Interest is charged at the bank's prime rate plus 1.75% per annum and the facility is secured by a general security agreement. As at March 31, 2025 and 2024, no amounts were drawn on the facility.

3. Investments

COTA Health's investment portfolio comprises publicly traded securities and pooled funds. Fixed income securities pay interest quarterly, semi-annually or annually at fixed rates. Fair values are based on the quoted market prices of the securities.

Long-term investments consist of the following:

	2025	2024
	\$	\$
Canadian equities	2,311,265	1,958,176
Foreign equities	2,335,983	2,033,272
Fixed income pooled funds	4,176,228	3,962,596
	8,823,476	7,954,044

Short-term investments consist of the following:

	2025	2024
	\$	\$
Money market securities	595,736	573,365
Cash	39,358	16,204
	635,094	589,569

4. Capital and intangible assets

	Cost	Accumulated Amortization	2025 Net book value	2024 Net book value
	\$	\$	\$	\$
Land	3,322,598	—	3,322,598	3,322,598
Building	2,833,842	205,825	2,628,017	2,655,284
Computer equipment	1,524,038	1,517,911	6,127	8,753
Computer software	979,745	979,745	—	—
Furniture and equipment	2,118,814	2,042,013	76,801	97,139
Leasehold improvements	2,091,139	1,769,429	321,710	356,164
	12,870,176	6,514,923	6,355,253	6,439,938

5. Government remittances payable

At year end, COTA Health had remittances payable to the government of \$2,353 (\$4,072 in 2024) that are included in accounts payable and accrued liabilities.

6. Deferred revenue

Deferred revenue represents unspent transfer payment funds received. Changes in the deferred revenue balance are as follows:

	2025	2024
	\$	\$
Balance, beginning of year	19,633,268	14,182,129
Amounts received	110,274,752	95,491,530
Amounts recognized as revenue	(106,319,116)	(88,400,462)
Transfers to deferred capital contributions	—	(1,495,429)
Amounts returned to funders	(4,831,854)	(144,500)
Balance, end of year	18,757,050	19,633,268

Included in transfer payments and grants is an amount of \$683,900 (\$271,000 in 2024) for funding not yet received.

7. Mortgage on 1266 Danforth Safe Beds site

The Organization purchased a property located at 1266 Danforth Avenue, Toronto, Ontario (the "property"), for \$1.9 million during the fiscal year 2023. The property's purchase closing date was May 9, 2022. The Organization funded \$403,000 of the purchase price, through its reserves, and the remainder 75%, or \$1,425,000, through a mortgage repayable over 180 months or 15 years, with an interest rate of 4.40% and monthly repayments in the amount of \$10,828.

The future repayments of the mortgage for the next five years and thereafter are as follows:

Fiscal year	Principal repayment	Interest paid	Remaining principal balance
	\$	\$	\$
2026	77,193	52,761	1,145,723
2027	80,396	49,688	1,065,327
2028	84,111	46,116	981,216
2029	87,991	42,380	893,225
2030	92,044	38,472	801,181
Thereafter	801,181	144,235	—

8. Deferred capital contributions

The changes in the deferred capital contributions balance are as follows:

	2025	2024
	\$	\$
Balance, beginning of year	2,096,031	635,155
Contributions received and used to purchase capital and intangible assets	—	1,495,429
Amortization of deferred capital contributions	(58,472)	(34,553)
Balance, end of year	2,037,559	2,096,031

9. Forgivable loan

In January 2020, COTA Health received a forgivable loan from the City of Toronto (Housing Secretariat) (the "City") through the provincial program of Ontario Priorities Housing Initiative Program. The total amount approved was \$1,963,609 in the form of a 30-year interest free forgivable loan. Terms of the grant are detailed in a contribution agreement between the City and COTA Health.

At each anniversary of the occupancy date, the City will forgive 1/30th of the grant until it is fully forgiven. During the term of the grant, if COTA Health violates any condition in the contribution agreement, the City has the right to demand repayment of the unforgiven portion of the grant from Cota Health.

The first portion of the grant of \$1,767,248 was used to purchase the land of a residential property which COTA will be configuring to an affordable rental facility to accommodate 10 low income residents. Over the term of grant, COTA Health has committed to charging rent at no more than the affordable housing rental rates established by the City. The second portion of the grant of \$196,361 is used to re-configure the property in order to accommodate the 10 residents.

10. Transfer payments and grants

During the fiscal year Ontario Health funding all transferred to Ontario Health Toronto Central (previously Ontario Health Toronto Central, Ontario Health Central, Ministry of Health (Direct Funding)). The following summarizes transfer payments and grants by main funders:

	2025	2024
	\$	\$
Ministry of Children, Community and Social Services ("MCCSS")	76,026,633	58,793,923
Ontario Health Toronto Central (OH Toronto)	20,289,252	12,679,899
Ontario Health Central (OH Central)	—	7,619,775
Ministry of Health (Supportive Housing)	6,281,898	5,460,976
Ministry of Health (Direct funding)	—	1,116,556
Partnerships and other	1,730,653	1,643,499
City of Toronto	1,990,680	1,085,834
	106,319,116	88,400,462

COTA receives approximately 91% (89% in 2024) of its funding from the MCCSS, and OH Toronto.

As of April 1, 2024 funding previously received from Ontario Health Central, and Ministry of Health (Direct funding) is now being funded and received from Ontario Heath Toronto Central.

11. Net investment income

	2025	2024
	\$	\$
Interest and dividends	346,060	645,454
Net realized gain on sale of investments	179,639	974,013
Investment management fees	(53,184)	(45,116)
	472,515	1,574,351

12. Net assets invested in capital and intangible assets

(a) Net assets invested in capital and intangible assets consist of the following:

	2025 \$	2024 \$
Capital and intangible assets	6,355,253	6,439,938
Amounts financed by deferred capital contributions (Note 8)	(2,037,559)	(2,096,031)
Amounts financed by long-term debt	(2,944,344)	(2,887,913)
	<u>1,373,350</u>	<u>1,455,994</u>

(b) The net change in net assets invested in capital and intangible assets is as follows:

	2025 \$	2024 \$
Net changes in net assets invested in capital and intangible assets		
Purchase of capital and intangible assets	66,063	1,406,749
Amounts financed by deferred capital contributions (Note 8)	—	(1,495,429)
Amounts financed by foregiveable loan	(196,361)	—
Amounts financed by long-term debt (Note 7)	—	—
Mortgage payments	74,476	70,818
	<u>(55,822)</u>	<u>(17,862)</u>
Deficiency of revenue over expenses		
Amortization of capital and intangible assets	(150,748)	(151,226)
Amortization of deferred capital contributions (Note 8)	58,472	34,553
Loan forgiveness (Note 9)	65,454	58,909
	<u>(26,822)</u>	<u>(57,764)</u>
	<u>(82,644)</u>	<u>(75,626)</u>

13. Internally restricted net assets

On June 5, 2017, the Board of Directors approved a revision of the Reserve Fund Policy to expand the fund balance of the Contingency Fund and reclassify the Organization Development Fund into two new categories namely the Service Enhancement Fund and Strategic Initiatives Fund. Further, on June 20, 2024, the Board of Directors approved another revision of the Reserve Fund Policy to increase the Contingency Fund balance and create a Capital Reserve Fund to manage the repair and replacement of major property components that exceed typical wear and tear for Cota's owned buildings.

The Contingency Fund shall have a minimum balance of \$3,875,000 at all times. The Service Enhancement Fund shall have an annual allocation that equals 3% of the Contingency Fund balance and be used to enhance services delivery for COTA Health's programs. The Capital Reserve Fund shall receive annual contributions to the fund no less than 5% of the annual building occupancy revenues for each owned property. The Strategic Initiatives Fund shall hold the remaining balance of the total reserve and shall be used to advance the strategic mission and interests of the Organization. The table below presents the reclassification of this internally restricted fund in accordance with the Board of Directors resolutions.

13. Internally restricted net assets (continued)

The internally restricted net assets comprise the following:

	Balance beginning of year \$	Interfund transfers \$	Contributions (expenditures) \$	Balance end of year \$
Contingency Fund	3,400,000	475,000		3,875,000
Service Enhancement Fund	162,689	116,250	(97,041)	181,898
Capital Reserve Fund	—	866,270	21,538	887,808
Strategic Initiatives Fund	3,248,957	(49,956)	969,053	4,168,054
	<u>6,811,646</u>	<u>1,407,564</u>	<u>893,550</u>	<u>9,112,760</u>

14. Lease commitments

COTA Health is obligated to make the following approximate future minimum annual payments under operating leases for premises and office equipment, which expire at various dates up to October 31, 2031:

	\$
2026	889,970
2027	865,269
2028	495,949
2029	423,037
2030	368,662
2031	202,390
	<u>3,245,277</u>

15. Financial risks and concentrations of credit risk

(a) Market price risk

Market price risk is the risk that the value of an instrument will fluctuate as a result of changes in market prices, whether those changes are caused by factors specific to an individual investment, its issuer or all factors affecting all instruments traded in the market. As all of the Organization's short-term and long-term investments are carried at fair value with fair value changes recognized in the statement of operations, all changes in market conditions will directly result in an increase (decrease) in the excess of revenue over expenses. There has been no change to the risk exposure from 2024.

15. Financial risks and concentrations of credit risk (continued)

(b) Credit risk

Credit risk is the risk that an issuer or counterparty will be unable or unwilling to meet a commitment that it has entered into with the Organization.

The Organization's credit risk concentration is spread among listed equity securities, as discussed under market price risk above. All transactions in listed securities are settled/paid for upon delivery using approved brokers. The risk of default is considered minimal since delivery of securities sold is made only once the broker has received payment. On a purchase, payment is made once the securities have been received by the broker.

The Organization is also exposed to credit risk with respect to accounts receivable and deposits. The Organization assesses on a continuous basis, accounts receivable and provides for any amounts that are not collectible. There has been no change to the risk exposure from 2024.

(c) Interest rate risk

The Organization is exposed to interest rate risk on its fixed interest rate financial instruments. The value of fixed income funds will generally rise if interest rates rise and decrease if interest rates fall. Changes in interest may also affect the value of equity securities. The interest rate risk exposure is managed through the Board of Directors' approved policy of allocation of investable assets. The Organization is also exposed to interest rate risk as a result of its mortgage on the Safe Beds site, which is mitigated through a fixed interest rate. Other than with respect to the mortgage entered into in 2023, there has been no change to the risk exposure from 2024.

(d) Liquidity risk

Liquidity risk is the risk that the Organization will encounter difficulty in meeting obligations associated with financial liabilities.

The Organization believes it is not exposed to significant liquidity risk as all investments are held in instruments that are highly liquid and can be disposed of to settle commitments. Further details about the investments are included in Note 3.

The Organization manages its investment portfolio to earn investment income and invests according to a Statement of Investment Policies approved by the Board of Directors. There has been no change to the risk exposure from 2024.