		rm 990-T	Ex	empt Organi	zation B	luşir	ness Inco	me Ta	x Re	turn		OMB	ło 1545-0687
	Fo	rm 330-1			-		section 60		0/20	10	104	2	018
			I	r 2018 or other tax yea							2019	<b>4</b>	UIO
De	part	ment of the Treasury		o to www.irs.gov/F								Open to Pul	olic Inspection for
Int A	erna	Revenue Service Check box if	- Do not	enter SSN numbers on			hanged and see in	<u> </u>	zation is	a 501(c)(3			rganizations Only dification number
	L	J address changed		HOULTON REG			•	130 0000113.)			T (E	mployees' tri structions )	ust, see
₿		cempt under section	n Print or	20 HARTFORD		JOET.	IAL					23-713	1386
	r	501( C 2O3 ) 408(e)   220(	Type	HOULTON, ME							FU	nrelated bus	iness activity code
	┢	408A 530(										See instruction	ns)
	L	529(a)	-								-	722320	561000
С		ok value of all assets end of year	<b>F</b> Group	exemption number	(See instruct	ions.)*	•	,					
	at	23,834,079	G Check	k organization type	<b>►</b> X	501(c	) corporation	501	(c) trus	st []4	101(a)	trust	Other trust
Н	Ε			's unrelated trades o	r businesses		> 3 1	D	escribe	the only (	or first)	unrelated	<del></del>
	tr	ade or business he	re - CATERI	NG									ete Parts I-V.
				t in the blank spaces, then complete i		of the	previous sen	tence, co	mplete	Parts I a	nd II, c	omplete a	a Schedule M
T				ration a subsidiary		ted ar	oup or a parei	nt-subsidi	ary cor	ntrolled ar	oun?	►□Y	es X No
•				fying number of the				n oupoid	,	ra unou gr	306	Ш.	N. A.
J		he books are in care		HIA M THOMPS	<del></del>			Ţ	elepho	ne numbe	r► (2	(07) 532	2-2900
P				usiness Incom			(A) Inco			3) Expens	<del></del>		C) Net
	_	Gross receipts or s					· · · · · · · · · · · · · · · · · · ·	· · ·	9 30	AN AUTO	黝坡	Description of	DE STANKE
		Less returns and allowa			Balance►	1 c			W. W.			\$. C. A.	
	2	Cost of goods sold	l (Schedule A,	line 7)		2			15.00 M	Con Made	10.82	物域的	的一种的原则是
		Gross profit. Subtr				3			-	<b>科多名代物</b> 。			
		Capital gain net in	=	•		4a				<b>的"特殊"的"</b>			
		Net gain (loss) (Form 4			•	4b				THE WORLD		/_	
		Capital loss deduc Income (loss) from a				4c				N al moral		<b>/</b>	
	,	(attach statement)		- and corporation		5			沙龙			L	
	6	Rent income (Sche	edule C)	•		6					7		
		Unrelated debt-fina		•	•••	7			ļ.,			<u> </u>	
				om a controlled organizat		8		·		<u>/</u>			
	9			, (9), or (17) organization		9			_/	<u> </u>			
SC:		Exploited exempt				10	<del></del>	<del></del>	<u>/_</u>	<del></del>		-	
_		Advertising income				11	<del></del>	/-	POSV 14.	3:36:14.	SE SMOO	ļ	
Z	2	Other income (See	e instructions,	SEE STATE		12	,	1,882.	No.	W. W.			7,882.
η,	3	Total. Combine line	es 3 through 1		MIDIAI I	13	<del>/</del> ,	7,882.	. 1.65 G. 18.	enteral vieta i e e e	0.		7,882.
‴—		Deduction	ns Not Take	n Elsewhere (S	ee instru	ction	for limitat	ions on	dedu	ctions.)	(Exce	pt for	7,002.
		contribution	ons, deducti	ions must be di	rectly con	necte	d with the	unrelate	e <del>d bu</del> s	siness ír	icome	e.)	
ī 1		· ·		ors, and trustees (S	chedule K)	./	RECE				14		····
<del>-</del> 1		Salaries and wage			. /			` :.'			15		
<b>&gt;</b> 1		Repairs and maint	enance		/ .	B61(	. AUG 1	4 2020	S-0	• •	16	_ ,	
_ ر	7	Bad debts	hadula) (aaa .a			·		• •			17 18		<del></del>
ė, i		Interest (attach sci Taxes and licenses		istructions)	• •	1 1	OGDE	N H	-		19		<del></del>
	-			structions for limitat	ion rules)		.000	14, 0		ł	20		
		Depreciation (attac						21	•••	• •••	***		
		•	-	nedule A and elsev	vhere on ret	urn	ļ <del></del>	22a			22b		
2	23	Depletion .	. /		•		–	<del></del>			23		
	-	Contributions to de	eferred compe	nsation plans .							24		
2	25	Employee benefit	prøgrams					•			25	-	
2		Excess exempt ex									26		
		Excess readership			•			CFF (	CUVUE	EMENT 2	27		
		Other deductions (						. 255	oʻrw I È	oricitat t			7,277.
		Total deductions.		hrough 28. ne before net opera	atına loss de	eductio	n Subtract le	ne 29 froi	m line '	 13	2 <del>9</del>		7,277. 605.
		,		n tax years beginning on	-						3)	SCAP COMESS	BYNEW BUS.
			-	ne. Subtract line 3						1	32	AT 1 SALES	605.
B		For Paperwork Re					TEEA	0201L 1/31	/19			Form	990-T (2018)

9/10

2

Form 990 T (2018) HOULTON REGIONAL HOSPITAL 23-7134386 Page 2 Part III Total Unrelated Business Taxable Income Total of unrelated business taxable income computed from all unrelated trades or businesses (see 33 instructions) 4,303. 34 34 Amounts paid for disallowed fringes Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see 35 4,303 SEE STATEMENT 3 36 Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum 0. of lines 33 and 34 36 37 Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions) 37 Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36. 0. epter the smaller of zero or line 36. |Part1V | Tax Computation 39 Organizations Taxable as Corporations, Multiply line 38 by 21% (0.21) 39 n 40 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount 40 Tax rate schedule or Schedule D (Form 1041) on line 38 from 41 Proxy tax. See instructions Alternative minimum tax (trusts only). 42 43 Tax on Noncompliant Facility Income. See instructions 43 44 Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies. 44 0. Tax and Payments 45 a Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 45 a 45 b b Other credits (see instructions) 45 c c General business credit Attach Form 3800 (see instructions) 45 d d Credit for prior year minimum tax (attach Form 8801 or 8827). e Total credits. Add lines 45a through 45d 45 e 0. 46 Subtract line 45e from line 44 46 Ō. ☐ Form 4255 ☐ Form 8611 ☐ Form 8697 ☐ Form 8866 Other taxes Check if from 47 Other (attach schedule) Total tax. Add lines 46 and 47 (see instructions) 48 48 0. 2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2 49 50 a Payments A 2017 overpayment credited to 2018. b 2018 estimated tax payments 50 b 50 c c Tax deposited with Form 8868 d Foreign organizations Tax paid or withheld at source (see instructions) 50 d 50 e e Backup withholding (see instructions) f Credit for small employer health insurance premiums (attach Form 8941) 50 f g Other credits, adjustments, and payments | Form 2439 Form 4136 Other Total 50 g 51 Total payments. Add lines 50a through 50g 51 52 Estimated tax penalty (see instructions) Check if Form 2220 is attached 52 53 Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed 53 54° Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid 54 55 Enter the amount of line 54 you want Credited to 2019 estimated tax Part VI Statements Regarding Certain Activities and Other Information (see instructions) At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority over a Yes No financial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts If 'Yes,' enter the name of the foreign country here Х 57 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? X If 'Yes,' see instructions for other forms the organization may have to file 58 Enter the amount of tax-exempt interest received or accrued during the tax year ▶ rumy, Leclare Ibar Days examined this return, including accompanying schedules and statements, and to the best of my knowledge and statements and to the best of my knowledge and and domptee Decisiation of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign 8 May the IRS discuss this return with CEO Title Here the preparer shown below (see instructions)? Yes Print/Type preparer's name Preparer's signature Date Check 🛅 ıf Paid r–Barbara−J-McGuan<del>, C</del>PA 08/06/20 P0021945<del>7</del> self-employed Pre-Firm's EIN LBerry Dunn McNeil & Parker, LLC parer Use PO Box 1100 Portland, ME 04104-1100 Only

TEFA0202L 01/24/19

Form-990-T-(2018)

BAA

Schedule A - Cost of Good	ds Sold. Ente	r method of inve	ntory valuatioi	ր ▶						
1 Inventory at beginning of year	ar	1		6 Invent	ory at	end of year	6			
2 Purchases	Ī	2		7 Cost o	f goo	ds sold. Subtract				-
3 Cost of labor		3				ine 5. Enter here	7	٠,		
4 a Additional section 263A costs (attach	schedule)			ano in	Part	I, line 2			TV	- NI -
	·	4 a				/ I OC2 A / I			Yes	No
b Other costs (attach sch)	F	4 b				of section 263A (wit duced or acquired fo				
5 Total. Add lines 1 through 4b	,	5				ization?	, , , , ,	arcy uppry		Х
Schedule C - Rent Income	(From Real	Property and	Personal F	roperty	/ Lea	sed With Real P	rope	rty) (see ir	nstruct	ions)
1 Description of property										
(1)										
(2)						<del> </del>				
(3)										
(4)						,				
	2 Rent receive	d or accrued				3(a) Deduction	s dire	ctly connec	ted wit	th
(a) From personal property is more than 10% more than 50%)	personal	(if the perce property ex	eal and person entage of rent ceeds 50% or on profit or in	for persor If the rent	ial	the income in	n colu			
(1)										
(2)										
(3)										
(4)										
Total	·	Total								
(c) Total income. Add totals of col here and on page 1, Part I, line 6,		2(b) Enter				(b) Total deductions. here and on page 1, Pai I, line 6, column (B)				
Schedule E - Unrelated De		Income (see	instructions)							
1 Description of debt			2 Gross inco		<b>3</b> D	Peductions directly co debt-final	nnect	ted with or a	allocab EE SI	le to
i bescription of debt	-imanced prope	i ty	financed pi		dep	(a) Straight line preciation (attach sch		(b) Other de (attach sc	eductio	ns
(1)										
(2)	· -									
(3)	·							-		
(4)										
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	or allocable to	justed basis of debt-financed ach schedule)	6 Colum divided columi	by า 5		7 Gross income portable (column 2 x column 6)		Allocable of (column 6 : olumns 3(a)	x total	of
(1)				%						
(2)				8						
(3)				~						
(4)				%						
					Ente Par	er here and on page t I, line 7, column (A	1, En ). Pa	ter here and ort I, line 7,	d on pa columi	age 1, n (B)
Totals				•		<del> </del>				
Total dividends-received deduction	ons included in	column 8				<u></u>	<b>&gt;</b>			
BAA	•	TE	EA0203L 01/30/19	9				Form	990-T	(2018)

Schedule F - Interest, A	nnuitie	s, Royalti	es, a	nd Re	nts Fro	m	Controlled C	Orga	nizations	(see ins	struction	s)	
			Exem	pt Con	trolled Or	gai	nızatıons	-					
1 Name of controlled organization	ıden	mployer tification umber	11	Net unr ncome e instri			<b>4</b> Total of speci payments mad		5 Part of column 4 that is included in the controlling organization's gross income			6 Deductions directly connected with income in column 5	
(1)													
(2)													
(3)					<del>.</del> .	╄							
(4)													
Nonexempt Controlled Organiza													
7 Taxable Income	inc	et unrelated ome (loss) instructions)			f specified its made	d	10 Part of a sincluded in organization	i the d	controlling		connecte	ctions directly d with income olumn 10	
(1)													
(2)													
(3)		-											
(4)				-									
						•	Add columns here and on p 8, co		, Part I, line		and on	s 6 and 11. Enter page 1, Part I, line olumn (B).	
Totals.				===	) (T) (O)	_	(13)		•			<del> </del>	
Schedule G - Investmen	it Inco	me of a Se	ction	1 501(		_		nizat		•			
1 Description of income		2 Amount	of inc	ome	direc	ctly	eductions connected schedule)	(a	4 Set-aside ttach schedi		set-a	al deductions and isides (column 3 lus column 4)	
(1)							., <u>-</u>						
(1) (2) (3)												<del></del>	
(3)													
(4)		<u>-                                    </u>	1								<b>5</b> -4 1	1	
Totals	•	Enter here ar Part I, line 9,	colur	nn (A).								ere and on page 1 line 9, column (B)	
Schedule I — Exploited E	xempt	Activity I	icon	re. Otl	ner Thai	n /	Advertising I	ncor	ne (see ins	ruction	s)	<del> </del>	
1 Description of exploited a		2 Gross unrelate busines income fr trade o busines	s ed ss om r	3 Expensions connect process of u	ises directly ected with duction nrelated ess income	fro or 2	Net income (loss) om unrelated trade business (column minus column 3). f a gain, compute lumns 5 through 7.	5 Gros	s income from ity that is not ated business income	6 Exp	penses itable to imn 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)		1	-			T							
(2)		+		•		T							
(3)						T					,		
(4)						Γ							
		Enter here on page Part I, lin- column	1, e 10,	on p Part	here and page 1, I, line 10, mn (B).							Enter here and on page 1, Part II, line 26.	
Totals .		<u> </u>											
Schedule J - Advertisin					<del></del>								
Rartil Income From Pe	riodica												
1 Name of periodical		2 Gros advertisi income	ng	adve	Direct ertising osts	4 (	Advertising gain or loss) (col 2 minus col 3) If a gain, compute cols. 5 through 7.		irculation ncome		ndership osts	7 Excess readership costs (col. 6 minus col. 5, but not more than col. 4).	
(1)		ļ											
(2)		ļ				4							
(3)			_			+							
(4)		<del> </del>		<u> </u>		╀							
Totals (carry to Part II, line (5))	)	·											

Part II Income From Periodica 7 on a line-by-line basis.)	lls Reported o	n a Separate E	<b>Basis</b> (For each p	eriodical listed in	Part II, fill in col	lumns 2 through
1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col 3). If a gain, compute cols. 5 through 7.	5 Circulation income	6 Readership costs	7 Excess readership costs (col. 6 minus col. 5, but not more than col. 4).
(1)						
(2)						
(2)						
(4)						
Totals from Part I	·					
Totals, Part II (lines 1 – 5)	Enter here and on page 1, Part I, line 11, column (A)	Enter here and on page 1, Part I, line 11, column (B).	***			Enter here and on page 1, Part II, line 27.
Schedule K — Compensation o	f Officers, Dire	ctors, and Tr	ustees (see instri	uctions)	, , ,	
1 Name			2 Title	3 Percent of time devote to business	d to unrela	ation attributable ated business
					१	
	<del></del>				યુ	
					%	
					9	
Total. Enter here and on page 1, Part I	1, line 14 .				<b>•</b>	
BAA		TEE A0204 I	12/31/18		· F	orm 990-T (2018)

## **SCHEDULE M** (Form 990-T)

## **Unrelated Business Taxable Income for Unrelated Trade or Business**

OMB No 1545-0687

Department of the Treasury Internal Revenue Service

1a Gross receipts or sales

b Less returns and allowances

For calendar year 2018 or other tax year beginning 10/01, 2018, and ending 9/30, 20, 19.

► Go to www.irs.gov/Form990T for instructions and the latest information.

c Balance ► 1c

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

(A) Income

Open to Public Inspection for 501(c)(3) Organizations Only

(C) Net

Name of the organization HOULTON REGIONAL HOSPITAL

[Part I] Unrelated Trade or Business Income

Employer identification number 23-7134386

(B) Expenses

Unrelated business activity code (see instructions) > 531190 Describe the unrelated trade or business ► CONFERENCE ROOM RENTAL

2	Cost of goods sold (Schedule A, line 7)	2				٦	
3	Gross profit. Subtract line 2 from line 1c	3				•	
4a	Capital gain net income (attach Schedule D)	4a					
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b					
С	Capital loss deduction for trusts	4c					
5	Income (loss) from a partnership or an S corporation						
	(attach statement)	5		J			
6	Rent income (Schedule C)	6					
7	Unrelated debt-financed income (Schedule E)	7					
8	Interest, annuities, royalties, and rents from a controlled						
	organization (Schedule F)	8					
9	Investment income of a section 501(c)(7), (9), or (17)						
	organization (Schedule G) .	9		<u>-</u>			
10	Exploited exempt activity income (Schedule I)	10					
11	Advertising income (Schedule J)	11					
12	Other income (See instructions, attach schedule) STMT 4	12	2,960.				2,960.
13	Total. Combine lines 3 through 12	13	2,960.				2,960.
1 Part	III Deductions Not Taken Elsewhere (See Instructions for II	milauc	nis on deductions.) (E.	xcept for c	OHUHD	uuons,	
Part	deductions must be directly connected with the unrelated	busin				utions,	···
14	deductions must be directly connected with the unrelated Compensation of officers, directors, and trustees (Schedule	busin		xcept for c	14		
14 15	deductions must be directly connected with the unrelated Compensation of officers, directors, and trustees (Schedule Salaries and wages	busin		xcept for c	14	utions,	
14 15 16	deductions must be directly connected with the unrelated Compensation of officers, directors, and trustees (Schedule Salaries and wages Repairs and maintenance	busin		xcept for c	14 15 16	utions,	
14 15 16 17	deductions must be directly connected with the unrelated Compensation of officers, directors, and trustees (Schedule Salaries and wages Repairs and maintenance Bad debts	busin		xcept for c	14 15 16	utions,	
14 15 16 17 18	deductions must be directly connected with the unrelated Compensation of officers, directors, and trustees (Schedule Salaries and wages Repairs and maintenance Bad debts Interest (attach schedule) (see instructions)	busin		xcept for c	14 15 16 17	utions,	
14 15 16 17 18 19	deductions must be directly connected with the unrelated Compensation of officers, directors, and trustees (Schedule Salaries and wages Repairs and maintenance Bad debts Interest (attach schedule) (see instructions) Taxes and licenses	K)		xcept for c	14 15 16 17 18	utions,	
14 15 16 17 18 19 20	deductions must be directly connected with the unrelated Compensation of officers, directors, and trustees (Schedule Salaries and wages Repairs and maintenance Bad debts Interest (attach schedule) (see instructions) Taxes and licenses Charitable contributions (See instructions for limitation rules)	K)	ess income.)		14 15 16 17	utions,	
14 15 16 17 18 19 20 21	deductions must be directly connected with the unrelated Compensation of officers, directors, and trustees (Schedule Salaries and wages Repairs and maintenance Bad debts Interest (attach schedule) (see instructions) Taxes and licenses Charitable contributions (See instructions for limitation rules Depreciation (attach Form 4562)	busin K)	ess income.)	5,118.	14 15 16 17 18 19 20	utions,	F 110
14 15 16 17 18 19 20 21 22	deductions must be directly connected with the unrelated Compensation of officers, directors, and trustees (Schedule Salaries and wages Repairs and maintenance Bad debts Interest (attach schedule) (see instructions) Taxes and licenses Charitable contributions (See instructions for limitation rules Depreciation (attach Form 4562) Less depreciation claimed on Schedule A and elsewhere on	busin K)	ess income.)		14 15 16 17 18 19 20	utions,	5,118.
14 15 16 17 18 19 20 21 22 23	deductions must be directly connected with the unrelated Compensation of officers, directors, and trustees (Schedule Salaries and wages Repairs and maintenance Bad debts Interest (attach schedule) (see instructions) Taxes and licenses Charitable contributions (See instructions for limitation rules Depreciation (attach Form 4562) Less depreciation claimed on Schedule A and elsewhere on Depletion	busin K)	ess income.)		14 15 16 17 18 19 20 22b 23	utions,	5,118.
14 15 16 17 18 19 20 21 22 23 24	deductions must be directly connected with the unrelated Compensation of officers, directors, and trustees (Schedule Salaries and wages Repairs and maintenance Bad debts Interest (attach schedule) (see instructions) Taxes and licenses Charitable contributions (See instructions for limitation rules Depreciation (attach Form 4562) Less depreciation claimed on Schedule A and elsewhere on Depletion Contributions to deferred compensation plans	busin K)	ess income.)		14 15 16 17 18 19 20 22b 23 24	utions,	5,118.
14 15 16 17 18 19 20 21 22 23	deductions must be directly connected with the unrelated Compensation of officers, directors, and trustees (Schedule Salaries and wages Repairs and maintenance Bad debts Interest (attach schedule) (see instructions) Taxes and licenses Charitable contributions (See instructions for limitation rules Depreciation (attach Form 4562) Less depreciation claimed on Schedule A and elsewhere on Depletion Contributions to deferred compensation plans Employee benefit programs.	busin K)	ess income.)		14 15 16 17 18 19 20 22b 23	utions,	5,118.
14 15 16 17 18 19 20 21 22 23 24 25	deductions must be directly connected with the unrelated Compensation of officers, directors, and trustees (Schedule Salaries and wages Repairs and maintenance Bad debts Interest (attach schedule) (see instructions) Taxes and licenses Charitable contributions (See instructions for limitation rules Depreciation (attach Form 4562) Less depreciation claimed on Schedule A and elsewhere on Depletion Contributions to deferred compensation plans	busin K)	ess income.)		14 15 16 17 18 19 20 22b 23 24 25	utions,	5,118.
14 15 16 17 18 19 20 21 22 23 24 25 26	deductions must be directly connected with the unrelated Compensation of officers, directors, and trustees (Schedule Salaries and wages Repairs and maintenance Bad debts Interest (attach schedule) (see instructions)  Taxes and licenses Charitable contributions (See instructions for limitation rules Depreciation (attach Form 4562)  Less depreciation claimed on Schedule A and elsewhere on Depletion  Contributions to deferred compensation plans Employee benefit programs.  Excess exempt expenses (Schedule I)	busin K)	ess income.)	5,118.	14 15 16 17 18 19 20 22b 23 24 25 26		5,118.

BAA For Paperwork Reduction Act Notice, see instructions.

30

31

32

instructions)

Schedule M (Form 990-T) 2018

-14,594

-14,594.

30

31

32

Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13

Unrelated business taxable income. Subtract line 31 from line 30

Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see

(	1401011111									_	
Schedule A — Cost of Good	ds Sold. Ente	r method of inve	entory valuat	ion 🟲						·	
1 Inventory at beginning of year	ar	1		6 Inv	ento	ry at e	end of year	6			
2 Purchases.		2					s sold. Subtract				
3 Cost of labor	[	3					ne 5. Enter here line 2	7			
4 a Additional section 263A costs (attack	h schedule)			and	u III I	Part 1,	iiile 2 .		<del></del>	Yes	No
<b>b</b> Other costs	-	4 a					of section 263A (wi				
(attach sch)  5 Total. Add lines 1 through 4l	, Ի	5					luced or acquired fo zation?	or resa	le) apply		х
Schedule C - Rent Income			d Persona					ropei	<b>ty)</b> (see i	nstruct	
1 Description of property				<u></u>						<del></del>	
(1)	<del></del>										
(2)											
(3)											
(4)				•							
	2 Rent receive	d or accrued					24-> Dood od o				
(a) From personal prop (if the percentage of rent for property is more than 10% more than 50%)	personal	(if the perce property ex	eal and perso entage of rer ceeds 50% of I on profit or	nt for per or if the r	rsona rent i	al	3(a) Deduction the income ii (ati	n colur			
(1)											
(2)											
(3)											
(4)											
Total		Total									
(c) Total income. Add totals of col here and on page 1, Part I, line 6		2(b). Enter					(b) Total deductions. here and on page 1, Pa I, line 6, column (B)				
Schedule E - Unrelated De	ebt-Financed	Income (see	instructions)	)							
1 Description of debt		· · · · · ·	2 Gross ind	come fro		<b>3</b> De	ductions directly co			allocab	le to
. 5000	Timanood prop	,	financed			depr	<b>(a)</b> Straight line eciation (attach sch	, (	b) Other d (attach so		
(1)											
(2)											
(3)											
(4)											
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	or allocable to	justed basis of debt-financed ach schedule)	divid	umn 4 ed by mn 5			7 Gross income ortable (column 2 x column 6)	(	Allocable ( column 6 lumns 3(a	x total	of
(1)					%						
(2)					કૃ						
(3)					ક						
(4)					%	l		<u> </u>			
						Enter Part	here and on page I, line 7, column (A	1, Ente ). Par	er here an t I, line 7,	d on pa columi	age 1, 1 (B).
Totals					<b>&gt;</b>						
Total dividends-received deduction	ons included in	column 8						<b>-</b>			
BAA		TE	EA0203L 01/30	)/19			<del></del>		Form	990-T	(2018)

Schedule F = Interest, A	muna							Jigai	IIZALIOIIS	(366 111	Structions	<u> </u>
		<u> </u>	Exem	pt Con	trolled Or	gar	nizations					
1 Name of controlled organization	ıde	Employer ntification number	II	Net unr ncome e instri		•	4 Total of speci payments mad		5 Part of that is in the con organiz gross i	cluded trolling ation's	in co	eductions directly onnected with ome in column 5
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Nonexempt Controlled Organiz		<del></del>				. –				<del></del>	44.5	
<b>7</b> Taxable Income	ind	et unrelated come (loss) instructions)			f specified nts made	1	10 Part of a nucluded in organization	the c	ontrolling		connected	tions directly I with income Ilumn 10
(1)			Ī				- · · -					
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<u>.</u>			<u> </u>				Add columns here and on p 8, co		, Part I, line		e and on p	6 and 11. Enter age 1, Part I, line umn (B).
Totals .												
Schedule G - Investmen	t Inco	me of a Se	ctior	501(	c)(7), (9)	), (	or (17) Orgai	nizati	on (see ins	tructio	ns)	
1 Description of income		2 Amount	of inc	ome	direc	ctly	ductions connected schedule)	(a	4 Set-aside ttach schedi		set-as	deductions and sides (column 3 us column 4)
(1)										•	· · · · ·	
(2)												
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(4)												
Totals	▶	Enter here an Part I, line 9,	colur	nn (A)						-	Part I, I	re and on page 1 ne 9, column (B)
Schedule I — Exploited E	xemp			ie, Otl	her Tha	n /	Advertising I	ncor	ne (see ins	truction	is)	· · · · · · · · · · · · · · · · · · ·
1 Description of exploited a	ctivity	2 Gross unrelate busines income fro trade of busines	d s om r	conne pro- of u	ises directly ected with duction inrelated ess income	fro or 2 r	Net income (loss) om unrelated trade business (column minus column 3) a gain, compute umns 5 through 7.	activ	s income from ity that is not ated business income	attribi	penses utable to umn 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)												
(2)						$\vdash$						
(3)		<del>                                     </del>				-						
(4)		<del> </del>										
		Enter here on page Part I, line column (	1, 10,	on p	here and page 1, I, line 10, mn (B).			L				Enter here and on page 1, Part II, line 26.
Totals						Ц.						I
Schedule J - Advertisin												
Part I Income From Pe	riodic	als Reporte	ed or	ı a Co	nsolida	tec	d Basis					
1 Name of periodical		2 Gross advertisii income	ng	adve	Direct ertising osts	(	Advertising gain or loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.		irculation ncome		adership osts	7 Excess readership costs (col 6 minus col. 5, but not more than col. 4).
(1)						Ī	-					
(2)						]						]
(3)					_	1						4
(4)						1						
Totals (carry to Part II, line (5))	)	•										

Part II Income From Periodic 7 on a line-by-line basis.)	als Reported or	a Separate E	Basis (For each p	eriodical listed in	Part II, fill in col	umns 2 through
1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5 Circulation income	6 Readership costs	7 Excess readership costs (col. 6 minus col. 5, but not more than col. 4).
(1)						
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(4)						
Totals from Part I	<b>&gt;</b>		\ \bar{\chi}{\chi}		n de la de la de la decembra de la d La decembra de la dec	
Totals, Part II (lines 1 – 5)	Enter here and on page 1, Part I, line 11, column (A)	Enter here and on page 1, Part I, line 11, column (B)	4 4 4 4			Enter here and on page 1, Part II, line 27.
Schedule K - Compensation of	of Officers, Dire	ctors, and Tri	ustees (see instru	uctions)		<u> </u>
1 Name			2 Title	3 Percent of time devoted to business	d to unrela	ation attributable ited business
				9	8	
<u> </u>				9	8	
	•			9	8	-
				9	8	
Total. Enter here and on page 1, Part	II, line 14	•			<b>•</b>	
BAA		TEÉA0204 L	12/31/18	-	F	orm <b>990-T</b> (2018)

## **SCHEDULE M** (Form 990-T)

## **Unrelated Business Taxable Income for Unrelated Trade or Business**

OMB No 1545-0687

For calendar year 2018 or other tax year beginning 10/01, 2018, and ending 9/30, 20, 19

Department of the Treasury Internal Revenue Service  So to www.irs.gov/Form9907 for instructions and the latest information.  Department of the Treasury Internal Revenue Service  Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)								Open to Public Inspection for 501(c)(3) Organizations Only		
Name o	of the organization	Employer identifi	entification number							
		HOULTON REGIONAL HOS				23-713438	6			
		ss activity code (see instruct			_	- · · · · · · · · · · · · · · · · · · ·				
De	scribe the unre	elated trade or business > B	LLING SERVIO	CE FEE	S	•	<del></del>			
Part	Unrelated	d Trade or Business Inco	ne		(A) Income	(B) Expense	s	(C) Net		
1a	Gross receipts	s or sales		1						
b	Less returns and	allowances	<b>c</b> Balance ►	1c						
2	Cost of goods	sold (Schedule A, line 7)	-	2						
3	•	Subtract line 2 from line 1c		3						
4a	, ,	et income (attach Schedule		4a						
b	Net gain (loss)	(Form 4797, Part II, line 17) (at	tach Form 4797)	4b		<u></u>				
С	•	eduction for trusts		4c						
5		from a partnership or an S	corporation	_						
	(attach staten			5			$\longrightarrow$			
6	Rent income			6						
7		ot-financed income (Schedule	-	7		ļ	$\longrightarrow$			
8	Interest, annu organization (	iities, royalties, and rents fro Schedule F)	m a controlled	8						
9		come of a section 501(c)(7),	(9), or (17)							
	organization (	(Schedule G)		9						
10	•	mpt activity income (Schedu	le I)	10						
11		come (Schedule J)		11	<u> </u>					
12		(See instructions; attach scl	nedule) STMT 8	12	3,698.			3,698.		
13	Total. Combin	ne lines 3 through 12		13	3,698.	<u> </u>		3,698.		
Part		ns Not Taken Elsewhere (Se				.) (Except for c	ontrib	utions,		
	deductions	s must be directly connected	with the unrelate	a busine	ess income.)					
14	Compensation	n of officers, directors, and ti	ustees (Schedule	K)			14	_		
15	Salaries and	wages					15			
16	Repairs and r	naintenance .					16			
17	Bad debts						17			
18	Interest (attac	ch schedule) (see instruction:	s)				18			
19	Taxes and lice						19			
20		ntributions (See instructions	for limitation rule	s)			20			
21	•	(attach Form 4562)			21					
22	•	ition claimed on Schedule A	and elsewhere or	n return	22a		22b			
23	Depletion						23			
24		to deferred compensation pl	ans				24			
25		nefit programs					25			
26		pt expenses (Schedule I)					26			
27		rship costs (Schedule J)			•		27			
28		ons (attach schedule)	•				28			
29		ons. Add lines 14 through 28		- سالمممد	20 from line 12	•	29			
30 21		ss taxable income before net operati				2019 /222	30	3,698.		

BAA For Paperwork Reduction Act Notice, see instructions.

Unrelated business taxable income. Subtract line 31 from line 30

instructions)

Schedule M (Form 990-T) 2018

31

32

Schedule A - Cost of Good	ds Sold. Enter	method of inve	entory valuation	n ►						
1 Inventory at beginning of year		1			ry at e	end of year	6			
2 Purchases.		2		7 Cost of	f good	s sold. Subtract				
3 Cost of labor		3				ne 5 Enter here	<u> </u>			
4 a Additional section 263A costs (attach	h schedule)			and in	Part I,	line 2	7	<u> </u>	Tv.	
•	·   .	4 a							Yes	No
b Other costs	<u>                                     </u>	4 b				of section 263A (with uced or acquired fo				
(attach sch)  5 Total. Add lines 1 through 48	b :	5	·	to the			11036	iic) appiy		Х
Schedule C - Rent Income	(From Real F	roperty and	Personal F	roperty	Leas	ed With Real P	rope	rty) (see ır	nstruct	ions)
1 Description of property										
(1)										
(2)										
(3)										
(4)			<del>.</del>							
	2 Rent received	or accrued	,			2(a) Daduska		-41		
(a) From personal prop (if the percentage of rent for property is more than 10% more than 50%)	personal	(if the perce property ex	eal and person entage of rent ceeds 50% or i on profit or in	for person f the rent	al	3(a) Deduction the income ir (att	n colu			
(1)								-		
(2)										
(3)										
(4)										
Total	To	otal								
(c) Total income. Add totals of col here and on page 1, Part I, line 6,		(b). Enter ►				(b) Total deductions. here and on page 1, Pa I, line 6, column (B)				
Schedule E - Unrelated De	bt-Financed	ncome (see	instructions)							
1 Description of debt			2 Gross incor		3 De	ductions directly co debt-fina	nnect	ed with or a	allocab CE SI	le to
i Description of debt	-manced proper	.y	financed pr		depre	(a) Straight line eciation (attach sch		(b) Other de (attach sc	eductio	ns
(1)										
(2)										
(3)										
(4)										
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adju or allocable to property (attac	debt-financed	6 Colum divided column	by 1 5		7 Gross income ortable (column 2 x column 6)		Allocable d (column 6 x olumns 3(a)	c total	of
(1)				8						
(2)										
(3)				<u>~~~~</u>						
(4)		l		ક			$\perp$			
					Enter Part	here and on page I, line 7, column (A	1, Ent ). Pa	er here and rt I, line 7,	d on pa	age 1, n (B).
Totals .				•						
Total dividends-received deduction	ons included in c	olumn 8					>			
BAA		TE	EA0203L 01/30/19					Form	990-T (	(2018)

Schedule F — Interest, A	mum	es, Royalu			trolled Or			Jiyai	IIZAUUIIS	(See III:	Structions	
1 Name of controlled organization	ıder	mployer httfication number	TI.	Net uni ncome ee instri		4	4 Total of speci payments mad	fied de	5 Part of that is in the cor organia gross i	cluded trolling	in c	eductions directly onnected with ome in column 5
(1)						1						
(2)												
(3)						$\top$						
(4)						1						
Nonexempt Controlled Organiz	ations										<u> </u>	
7 Taxable Income	8 No	et unrelated ome (loss) instructions)			f specified nts made	d	10 Part of included in organization	i the c	ontrolling	,	connecte	tions directly d with income olumn 10
(1)			<del> </del>									
(2)			$\top$									
(3)			_		<u> </u>	$\dashv$				1		
(4)			+			$\dashv$				+		
					-		Add columns here and on p 8, co		, Part I, line		and on p	s 6 and 11. Enter page 1, Part I, line lumn (B).
Totals Schedule G — Investmen			-4:	- E01/	-)(7) (0	$\frac{1}{2}$	(17) O.zas	.:	07 (			
1 Description of income		2 Amount			3 dire	De	ductions connected schedule)		4 Set-aside ttach sched	S	5 Tota set-a	I deductions and sides (column 3 us column 4)
(1)							, , , , , , , , , , , , , , , , , , , ,				<del> </del>	<del> ' '</del>
(2)					-							
(3)												
(4)											· ·	
Totals Schedule I — Exploited E	<b>▶</b>	Enter here ar Part I, line 9	, colur	mn (A).	nor Tha	n /	\dvertising !	Incor	Ma (see ins	truction	Part I, I	ere and on page 1 ne 9, column (B)
1 Description of exploited a	•	2 Gros unrelate busines income fr trade o busines	s ed ss om or	3 Exper conne pro- of u	ises directly ected with duction nrelated ess income	4 I fro or 2 n	Net income (loss) m unrelated trade business (column ninus column 3). a gain, compute umns 5 through 7.	5 Gros activ	s income from ity that is not ated business income	6 Exp	penses itable to umn 5	7 Excess exempt expenses (column 6 minus column 5, bu not more than column 4).
(1)												
(2)												
(3)												
(4)												
Totals	,	Enter here on page Part I, lin column	e 1, e 10,	on p	here and page 1, I, line 10, mn (B)	1				·		Enter here and on page 1, Part II, line 26
Schedule J - Advertisin	a Inco	me (see ins	tructio	ns)								. 1
Part I Income From Pe					ncolida	tor	1 Racic					
Part I Income From Fe	riouica	<del></del>			Direct	_				6.5.		Tag
1 Name of periodical		2 Gros advertis income	ing	adve	ertising osts	(1	Advertising gain or oss) (col 2 minus col. 3). If a gain, compute cols. 5 through 7.		irculation ncome		dership osts	7 Excess readership costs (col. 6 minus col. 5, but not more than col. 4).
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(2)				<u> </u>		4						4
(3)		+				-		<u> </u>				-
(4)		<del>                                      </del>			<del></del> .	-						-
Totals (carry to Part II, line (5)	) <u>'</u>	•										

Page 5

Partill Income From Periodica 7 on a line-by-line basis.)	Is Reported or	n a Separate E	Basis (For each p	eriodical listed in	Part II, fill in col	lumns 2 through
1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col 3). If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (col 6 minus col 5, but not more than col 4).
(1)						
(2)						
(3)						
(4)	ļ <u></u>					
Totals from Part I .						
Totals, Part II (lines 1 − 5)	Enter here and on page 1, Part I, line 11, column (A)	Enter here and on page 1, Part I, line 11, column (B).				Enter here and on page 1, Part II, line 27.
Schedule K — Compensation of	f Officers, Dire	ctors, and Tri	ıstees (see ınstri	uctions)		'L
1 Name			2 Title	3 Percent of time devoted to business	d to unrela	ation attributable ated business
				۶	ł .	
			•	9	}	
				5	8	
				9	) i	,
Total. Enter here and on page 1, Part II	I, line 14				<b>&gt;</b>	
BAA		TEEA0204 L	12/31/18		F	orm <b>990-T</b> (2018)

2018 FEDERAL STATEMENTS			PAGE 1	
CLIENT HRH	HOULTON	N REGIONAL HOSPITAL	23-7134386	
8/06/20 STATEMENT 1 FORM 990-T, PART I, L OTHER INCOME	INE 12			03·42PM
PROGRAM SERVICE RE	VENUE		TOTAL \$	7,882. 7,882.
STATEMENT 2 FORM 990-T, PART II, I OTHER DEDUCTIONS	LINE 28			
FOOD CATERING COST	rs		TOTAL \$\frac{\$}{\$}	7,277. 7,277.
STATEMENT 3 FORM 990-T, PART III, NET OPERATING LOS	S DEDUCTION ORIGINAL	LOSS PREVIOUSLY		
9/30/07 9/30/08 9/30/09 9/30/10 9/30/11 9/30/12 9/30/13 9/30/14 9/30/15 9/30/16 9/30/17 9/30/18 NET OPERATING LOSS TAXABLE INCOME NET OPERATING LOSS	11 14 8 11 25 12 14 10 23 11 11	USED  5,816. \$ 1,573. 1,103. 3,380. 1,515. 5,742. 2,615. 1,545. 1,967. 3,128. 1,429. 1,674.	AVAII  0. \$ 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	15,816. 11,573. 14,103. 8,380. 11,515. 25,742. 12,615. 14,545. 10,967. 23,128. 11,674. 171,487. 4,303. 4,303.
STATEMENT 4 SCHEDULE M, PART I, OTHER INCOME PROGRAM SERVICE RE			TOTAL \$	2,960. 2,960.
STATEMENT 5 SCHEDULE M, PART II OTHER DEDUCTIONS HOUSEKEEPING & MAI OCCUPANCY & UTILIT	NTENANCE		\$ TOTAL <u>\$</u>	6,252. 6,184. 12,436.

2018	FEDERAL STATEMENTS	PAGE 2
CLIENT HRH	HOULTON REGIONAL HOSPITAL	23-7134386
8/06/20		03.42PN
STATEMENT 8 SCHEDULE M, PART I, LINE 12 OTHER INCOME		
BILLING SERVICE FEES		TOTAL \$ 3,698.