		~;;	.	Exempt Organizatio	n Rusiness	Inc	ome Tax Re) 3 Hur	93	42	0 1 2 2 7 IB No 1545-0047
	Form 990-T (and proxy tax under section 6033(e)) For calendar year 2019 or other tax year beginning 07/01, 2019, and ending 06/30, 20 20) U	4	2 019	
	Donoster		For cale	or other tax year be Bo to www.irs.gov/Form9							
		nent of the Treasury Revenue Service	 ▶Doi	not enter SSN numbers on this for					1(c)(3).	Open to	Public Inspection for 3) Organizations Only
] }	A Z	Check box if address changed		Name of organization (entification number
1		address changed opt under section	1	ASCENSION PROVIDENCE H	-		,				rust, see instructions)
! _		01(C)(3)	Print	Number, street, and room or suite i		struction	ons		i	38-	1358212
ľ		08(e) 220(e)	or Type	C/O TAX DEPARTMENT, P O							siness activity code
:	☐ 40		Type	City or town, state or province, cou		n posta	l code		(See i	nstructi	ons)
	□ 52			ST LOUIS, MO 63145-5998						5	60000
<u> </u>	C Book	value of all assets	F Gr	oup exemption number (See	instructions)▶					0928	3
5		465,661,519	G Ch	neck organization type 🕨 🔽	501(c) corporation	on	☐ 501(c) trust	[] 401(a)	trust	☐ Other trust
	H En	nter the number	of the c	organization's unrelated trade	s or businesses.	▶	1De	escrib	e the on	ly (or	first) unrelated
3				EXTERNAL BUSINESS SERVI			ne, complete Parts				
			•	at the end of the previous se	ntence, complete	Parts	s I and II, complet	e a S	schedule	M fo	r each additional
•				omplete Parts III-V.							
				e corporation a subsidiary in an							☑ Yes ☐ No
				and identifying number of the	parent corporation	on. ►					
				SARA O'BRIEN			Telephone n				314) 733-8000
				e or Business Income		1	(A) Income	(В) Expense	s	(C) Net
	1a	Gross receipts			a Polonoo	1	1,021,115				
	b	Less returns a			• Balailoor	1c 2	1,021,113				
	2			Schedule A, line 7) I line 2 from line 1c		3	1,021,115				1,021,115
	3 4a			ne (attach Schedule D) .		4a	1,021,113			-/	1,021,119
	ч а b			4797, Part II, line 17) (attach		4b	ő			\leftarrow	
	C		•	n for trusts		4c	0				0
	5	•		a partnership or an S corp		<u> </u>					
		statement) .				5	0				0
	6	Rent income (Schedu	ile C)		6	81,550		77	,065	4,485
	7	Unrelated deb	t-financ	ced income (Schedule E) .		7	0			0	0
	8	Interest, annuities	, royalties	s, and rents from a controlled organi	zation (Schedule F)	8	0			0	0
	9			ection 501(c)(7), (9), or (17) organiz		9	0			0	0
	10	Exploited exer	npt act	ıvıty ıncome (Schedule I)		10	0			0	0
	11	Advertising ind	come (S	Schedule J)		11/	0			0	0
.70	12			structions; attach schedule) .		1/2	0				0
7	13	Total. Combin	<u>e lines</u>	3 through 12		13	1,102,665			,065	1,025,600
	Part			Taken Elsewhere (See ins		ation	s on deductions.)	(Dec	luctions	must	be directly
2		connected	with t	he unrelated business incor	ne.)				— Т	44	
	14			cers, directors, and trustees (Schedule K)			• •	}	14	924,390
7	15 16		-		·/·			•	F	16	924,390
	16 17	Bad debts			<i>/</i>	• •			-	17	0
2	18			lule) (see instructions) .					: : 	18	0
CANN	19	Taxes and lice							`	19	14,616
₹ .	20			Form 4562)			. 20		اه		
$\widetilde{\mathbf{x}}$	21			med on Schedule A and else			. 21a		0	21b	0
	22	Depletion		_						22	0
	23	Contributions	to defei	rred compensation plans .	REC		/ED: :)		[23	0
	24				•	<u> </u>	(LD		[24	30,313
	25			nses (Schedule I) sts (Schedule J)	. g		<u> </u>			25	0
	26					17	2021 0		[26	0
	27	Other deduction	ons (atta	ach schedule)	ـــا۲		ا≌انند		. [27	7,672
	28	Total deduction	ons. Ac	dd lines 14 through 27 xable income before net ope	OGD	EN	· UT l		·	28	976,991
	29	Unrelated bus	iness ta	exable income before net ope	rating loss deduc	tion	subtract line 28 fro	m lin	e 13	29	48,609
	30			perating loss arising in tax						_	-
	<u>.</u>								}	30	0
	31/	Unrelated bus	iness ta	exable income. Subtract line 3	30 from line 29 .	<u> </u>	<u> </u>	_ <u>÷</u>		31	48,609 Farm 990-T (2018)

Cat No 11291J 1

Form 9	90-T (2019)		Page 2
Part			. age 2
	Total of unrelated business taxable income computed from all unrelated trades or businesses (see	T .T	
	instructions)	32	48,609
33	Amounts paid for disallowed fringes	33	
34	Charitable contributions (see instructions for limitation rules)	34	0
35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line		
	34 from the sum of lines 32 and 33	35	48,609
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see		
	instructions)	36	0
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	37	48,609
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38	1,000
39	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37.		
	epfer the smaller of zero or line 37	39	47,609
Part	M Tax Computation	1	
40 /	Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)	40	9,998
41	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on		
	the amount on line 39 from: ☐ Tax rate schedule or ☐ Schedule D (Form 1041) ↓ ▶	41	
42	Proxy tax. See instructions	42	
43	Alternative minimum tax (trusts only)	43	
44	Tax on Noncompliant Facility Income. See instructions	44	
45	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45	9,998
Part	V Tax and Payments	1	
46a ′	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 46a		
b	Other credits (see instructions)]	
С	General business credit. Attach Form 3800 (see instructions)]]	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)		
е	Total credits. Add lines 46a through 46d	46e	0
47	Subtract line 46e from line 45	47	9,998
48	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule),	48	0
49	Total tax. Add lines 47 and 48 (see instructions)	49	9,998
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50	
51a	Payments: A 2018 overpayment credited to 2019		
b	2019 estimated tax payments]	
С	Tax deposited with Form 8868	1	
d	Foreign organizations: Tax paid or withheld at source (see instructions) 514]	
е	Backup withholding (see instructions)		

55	Estimated tax penalty (see instructions). Oneck if Form 2220 is attached	Jģ			
54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54			0
55	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid . U	55		3	7,756
<i>5</i> 6	Enter the amount of line 55 you want	56			0
Part	Statements Regarding Certain Activities and Other Information (see instructions)				
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other	r au	thority	Yes	No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may h				i
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign	an co	ountry	l	
	here ▶				✓
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign	1 trus	st?		✓
	If "Yes," see instructions for other forms the organization may have to file.				
59	Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$		0		
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of true correct, and complete. Declaration of preparer (other than taxpaver) is based on all information of which preparer has any knowledge.	my k	nowledge	and be	ief, it is
	true correct, and complete Ligiciaration of preparer lother than taxinavers is based on all information of which bredater has any knowledge.				

0

Paid
Preparer
Use Only

Signature of officer

Date

Title

Preparer's name
Preparer's signature

Preparer's signature

Date
Check ☐ if self-employed
Firm's name ▶
Firm's address ▶
Phone no

Credit for small employer health insurance premiums (attach Form 8941) .

□ Other

Other credits, adjustments, and payments:

Form 2439

Total payments. Add lines 51a through 51g

☐ Form 4136

52

Here

May the IRS discuss this return with the preparer shown below (see instructions)? **Tes No**

47,754

VICE PRESIDENT, TAX

511

51g

Form	990-	r (201	9)

	90-T (2019)									<u> </u>	age 3
Sche	dule A—Cost of Goods S	old . Er	nter method of i	nvent	ory va	aluation 🕨					
1	Inventory at beginning of year	ar 📗	1	0	6		at end of year .	6			0
2	Purchases	. [2	0	7	Cost of g	oods sold. Subtract line				
3	Cost of labor	. [3	0		6 from line	5 Enter here and in Part				
4a	Additional section 263A co	osts				I, line 2		7			0
	(attach schedule)	. .	4a	0	8	Do the rul	les of section 263A (with	respe	ect to	Yes	No
b	Other costs (attach schedule	<u>)</u>) [4b	0			roduced or acquired for re				
5	Total. Add lines 1 through 4l	ь Г	5	0		to the orga	anization?				
Sche	dule C-Rent Income (Fro	om Re	al Property an	d Per	sonal	Property	Leased With Real Prop	erty)			
(see	e instructions)										
1. Desc	ription of property										
(1) PH	YSICIAN TIME SHARE										
(2)	·		•					-			
(3)											
(4)											
	2. Ro	ent receiv	ed or accrued								
(a) Fro	om personal property (if the percentage	e of rent	(b) From real a	nd perso	onal pro	perty (if the	3(a) Deductions directly co				ie
for	personal property is more than 10% be more than 50%)	ut not	percentage of rent 50% or if the ren				in columns 2(a) and 2	!(b) (atta	ich sched	lule)	
(1)		· · · · ·	· - · -			81,55	50			7	7.065
(2)											<u> </u>
(3)											
(4)								•			
Total		0	Total			81,55	0				
	tal income. Add totals of columns						(b) Total deductions. Enter here and on page 1,				
	nd on page 1, Part I, line 6, colum		d 2(b) Enter ►			81,55				7	7,065
	dule E-Unrelated Debt-F		ed Income (see	ınstru	ictions	s)	· · · · · · · · · · · · · · · · · · ·				
		·				come from or	3. Deductions directly conn			cable to	0
	 Description of debt-finar 	nced prop	erty		able to	debt-financed	debt-finance (a) Straight line depreciation		Other de	duction	<u>s</u>
					pro	perty	(attach schedule)		ttach sch		
(1)				ĺ							
(2)											
(3)											
(4)			_								
			e adjusted basis		6. C	olumn	7. Gross income reportable	8. AI	locable d	eductio	ns
a	acquisition debt on or illocable to debt-financed		allocable to anced property	ŀ		vided	(column 2 × column 6)	(colum	6 × tota		umns
	property (attach schedule)		ch schedule)		ву со	olumn 5			3(a) and	3(0))	
(1)						%					
(2)						%					
(3)						%					
(4)						%					
							Enter here and on page 1, Part I, line 7, column (A)		ere and line 7, c		
Totals						. ▶	0				0
	dividends-received deductions ⊪	ncluded	ın column 8				•				0

Schedule F-Interest, Ann	uities, Royalties,			Controlled Org	ganizations (se	e instruc	ctions)	
Name of controlled organization	2. Employer dentification number	3. Net unre	elated income instructions)		5. Part of column included in the organization's gr	controlling	conn	eductions directly ected with income in column 5
(1)						-	†	
(2)								
(3)								
(4)								
Nonexempt Controlled Organi	zations							
7. Taxable Income	8. Net unrelated in (loss) (see instruct			otal of specified yments made	10. Part of column included in the organization's gr	controlling	conne	Peductions directly cted with income in column 10
(1)						-	1	
(2)							1	
(3)							1	
(4)							<u> </u>	
					Add columns s Enter here and o Part I, line 8, co	on page 1,	Enter I	columns 6 and 11 nere and on page 1, , line 8, column (B)
Totals				<u> </u>			<u> </u>	0
Schedule G-Investment	Income of a Sect	ion 501(or (17) Organi Deductions		T		otal deductions
1. Description of income	2. Amount o	f income	dire	ctly connected ach schedule)	4. Set-aside (attach sched		and s	et-asides (col 3 plus col 4)
(1)								
(2)								
(3)			<u> </u>					
(4)			_					
	Enter here and Part I, line 9, o		,					re and on page 1, ne 9, column (B)
Totals	>		0					0
Schedule I-Exploited Exe	empt Activity Inc	ome, Otl	her Than	Advertising Ir	ncome (see inst	tructions	s)	
Description of exploited activ	2. Gross unrelated business inco from trade of business	me conr	Expenses directly nected with duction of nrelated ness income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5. Gross income from activity that is not unrelated business income	attribu	penses table to mn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)								
(2)								
(3)						<u> </u>		
(4)						L		
Totals	Enter here and page 1, Part line 10, col (a	I, pag	here and on e 1, Part I, 10, col (B) 0					Enter here and on page 1, Part II, line 25
Schedule J-Advertising I	ncome (see instrue	ctions)		<u> </u>			· · -	
Part I Income From P	eriodicals Repor	ted on a	Consoli	dated Basis				
1. Name of penodical	2. Gross advertising income		3. Direct tising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income		dership sts	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)								
(2)								
(3)								
(4)						·		
Totals (carry to Part II, line (5))	•	0	0	0				0 Form 990-T (2019

5/3/2021 10:52:09 AM

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

		<u> </u>					
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 (column 6 minus column 5, but not more than column 4)
(1)							
(2)							
(3)					1		
(4)							
Totals from Part I	•	0	0				0
		Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 26
Totals, Part II (lines 1-5)	•	0	o				0
Schedule K-Compensation	n of (Officers, Direc	tors, and True	stees (see instri	uctions)		
1 Nama				Title	3. Percent of		tion attributable to

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		. ▶	0

Form **990-T** (2019)

Form 990T Part II, Line 19	Taxes and Licenses	
	Description	Amount
EXTERNAL BUSINESS SERVICES		
(1) PAYROLL TAXES		14.616

Form 990T Part II, Line 27	Other Deductions		
	Description		Amount
EXTERNAL BUSINESS SERVICES	Description	· · · · · · · · · · · · · · · · · · ·	Amount
(1) SUPPLIES			2,002
(2) UTILITIES			5,670
		Total	7.672