

Form 990-T

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No 1545-0047

For calendar year 2019 or other tax year beginning 01/01, 2019, and ending 12/31, 2019

2019

Department of the Treasury Internal Revenue Service

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

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

Form 990-T header section including: A Check box if address changed; B Exempt under section 501(c)(3); C Book value of all assets; D Employer identification number; E Unrelated business activity code; F Group exemption number; G Check organization type.

H Enter the number of the organization's unrelated trades or businesses. Describe the only (or first) unrelated trade or business here: ATCH 1

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes [] No [X]

J The books are in care of: KRISTAL CLAYMORE Telephone number: 913-355-3095

Table with 4 columns: Description, (A) Income, (B) Expenses, (C) Net. Rows include: 1a Gross receipts or sales, 2 Cost of goods sold, 3 Gross profit, 4a Capital gain net income, 5 Income (loss) from a partnership, 6 Rent income, 7 Unrelated debt-financed income, 8 Interest, annuities, royalties, and rents, 9 Investment income, 10 Exploited exempt activity income, 11 Advertising income, 12 Other income, 13 Total Combine lines 3 through 12.

Table with 4 columns: Description, (A) Income, (B) Expenses, (C) Net. Rows include: 14 Compensation of officers, directors, and trustees, 15 Salaries and wages, 16 Repairs and maintenance, 17 Bad debts, 18 Interest, 19 Taxes and licenses, 20 Depreciation, 21 Less depreciation claimed, 22 Depletion, 23 Contributions to deferred compensation plans, 24 Employee benefit programs, 25 Excess exempt expenses, 26 Excess readership costs, 27 Other deductions, 28 Total deductions, 29 Unrelated business taxable income before net operating loss deduction, 30 Deduction for net operating loss, 31 Unrelated business taxable income.

For Paperwork Reduction Act Notice, see instructions. Form 990-T (2019)

ENVELOPE POSTMARK DATE NOV 16 2020

SCANNED OCT 05 2021

Handwritten numbers: 910, 21

Part III Total Unrelated Business Taxable Income

Table with 3 columns: Line number, Description, and Amount. Lines 32-39 detailing unrelated business taxable income calculations.

Part IV Tax Computation

Table with 3 columns: Line number, Description, and Amount. Lines 40-45 detailing tax computation steps.

Part V Tax and Payments

Table with 3 columns: Line number, Description, and Amount. Lines 46a-56 detailing tax credits, taxes, and payments.

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

Table with 3 columns: Line number, Description, and Yes/No columns. Lines 57-59 regarding foreign interest and distributions.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here: Signature of Michael J Engle, Date 11/6/2020, Title CFO. Includes a box for 'May the IRS discuss this return with the preparer shown below?' with 'Yes' checked.

Paid Preparer Use Only: Print/Type preparer's name MICHAEL J ENGLE, Preparer's signature, Date 11/3/2020, Firm's name BKD, LLP, Firm's address 1201 WALNUT, SUITE 1700, KANSAS CITY, MO 64106-2246, Firm's EIN 44-0160260, Phone no 816-221-6300.

Schedule A - Cost of Goods Sold. Enter method of inventory valuation ▶

1	Inventory at beginning of year	1		6	Inventory at end of year	6	
2	Purchases	2		7	Cost of goods sold Subtract line 6 from line 5 Enter here and in Part I, line 2	7	
3	Cost of labor	3		8	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
4a	Additional section 263A costs (attach schedule)	4a					
b	Other costs (attach schedule)	4b					X
5	Total Add lines 1 through 4b	5					

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1 Description of property		
(1)		
(2)		
(3)		
(4)		
2 Rent received or accrued		
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	Total	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) ▶
(c) Total income. Add totals of columns 2(a) and 2(b) Enter here and on page 1, Part I, line 6, column (A) ▶		

Schedule E - Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property		2 Gross income from or allocable to debt-financed property	3 Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adjusted basis of or allocable to debt-financed property (attach schedule)	6 Column 4 divided by column 5	7 Gross income reportable (column 2 x column 6)	8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals ▶			Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)
Total dividends-received deductions included in column 8 ▶				

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

Table with 6 columns: 1 Name of controlled organization, 2 Employer identification number, 3 Net unrelated income (loss), 4 Total of specified payments made, 5 Part of column 4 that is included in the controlling organization's gross income, 6 Deductions directly connected with income in column 5. Rows (1) through (4).

Nonexempt Controlled Organizations

Table with 5 columns: 7 Taxable Income, 8 Net unrelated income (loss), 9 Total of specified payments made, 10 Part of column 9 that is included in the controlling organization's gross income, 11 Deductions directly connected with income in column 10. Rows (1) through (4) and a Totals row.

Totals

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

Table with 5 columns: 1 Description of income, 2 Amount of income, 3 Deductions directly connected, 4 Set-asides, 5 Total deductions and set-asides. Rows (1) through (4) and a Totals row.

Totals

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

Table with 7 columns: 1 Description of exploited activity, 2 Gross unrelated business income, 3 Expenses directly connected with production of unrelated business income, 4 Net income (loss) from unrelated trade or business, 5 Gross income from activity that is not unrelated business income, 6 Expenses attributable to column 5, 7 Excess exempt expenses. Rows (1) through (4) and a Totals row.

Totals

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

Table with 7 columns: 1 Name of periodical, 2 Gross advertising income, 3 Direct advertising costs, 4 Advertising gain or (loss), 5 Circulation income, 6 Readership costs, 7 Excess readership costs. Rows (1) through (4) and a Totals row.

Totals (carry to Part II, line (5))

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)

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)						
(4)						
Totals from Part I ▶						
Totals, Part II (lines 1-5) ▶	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

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

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

ATTACHMENT 1

ORGANIZATION'S ONLY UNRELATED TRADE OR BUSINESS ACTIVITY

THE TAXPAYER DOES NOT HAVE ANY ACTIVITIES GENERATING UNRELATED BUSINESS TAXABLE INCOME (AS DEFINED IN IRC §512(A)) IN THE CURRENT YEAR. FORM 990-T IS BEING FILED TO COMMENCE RUNNING ON THE PERIOD UNDER THE STATUTES OF LIMITATION FOR REPORTING UNRELATED BUSINESS INCOME.

ATTACHMENT 2

SCHD. K, FORM 990-T, COMPENSATION OF OFFICERS, DIRECTORS, & TRUSTEES

<u>NAME AND ADDRESS</u>	<u>TITLE</u>	<u>BUSINESS PERCENT</u>	<u>COMPENSATION</u>
FRANK DEVOCELLE 20333 W 151ST STREET OLATHE, KS 66061	FORMER PRESIDENT/CEO	0	0.
STANLEY HOLM 20333 W 151ST STREET OLATHE, KS 66061	PRESIDENT/CEO	0	0.
TIERNEY GRASSER 20333 W 151ST STREET OLATHE, KS 66061	TREASURER/CHIEF FINANCIAL OFFI	0	0.
JAMES L. WETZEL 20333 W 151ST STREET OLATHE, KS 66061	CHIEF MEDICAL OFFICER	0	0.
PATRICIA KATZER 20333 W 151ST STREET OLATHE, KS 66061	VP OF OPERATIONS	0	0.
JAMES R. HUBBARD 20333 W 151ST STREET OLATHE, KS 66061	DIRECTOR	0	0.
DOUGLAS M. HUSTON 20333 W 151ST STREET OLATHE, KS 66061	DIRECTOR	0	0.
KENNETH A. STELZER 20333 W 151ST STREET OLATHE, KS 66061	DIRECTOR/VICE CHAIRPERSON	0	0.
RICHARD K. SUMMERS 20333 W 151ST STREET OLATHE, KS 66061	DIRECTOR	0	0.
ELAINE TATHAM EDM 20333 W 151ST STREET OLATHE, KS 66061	DIRECTOR	0	0.

SCHD. K, FORM 990-T, COMPENSATION OF OFFICERS, DIRECTORS, & TRUSTEES

<u>NAME AND ADDRESS</u>	<u>TITLE</u>	<u>BUSINESS PERCENT</u>	<u>COMPENSATION</u>
CHIP WOOD 20333 W 151ST STREET OLATHE, KS 66061	DIRECTOR/CHAIRPERSON	0	0.
KRISTINE GISH HERRON, MD 20333 W 151ST STREET OLATHE, KS 66061	DIRECTOR	0	0.
LARRY K. BRUBAKER 20333 W 151ST STREET OLATHE, KS 66061	DIRECTOR	0	0.
MATT K. MCBRIDE 20333 W 151ST STREET OLATHE, KS 66061	DIRECTOR	0	0.
JEFF DOSSETT 20333 W 151ST STREET OLATHE, KS 66061	CHIEF OPERATIONS OFFICER	0	0.
JASON HANNAGAN 20333 W 151ST STREET OLATHE, KS 66061	SECRETARY/CHIEF LEGAL OFFICER	0	0.
JOHN STATON 20333 W 151ST STREET OLATHE, KS 66061	CHIEF AMBULATORY OFFICER	0	0.
RAVI YARLAGADDA 20333 W 151ST STREET OLATHE, KS 66061	CARDIOLOGIST	0	0.
PHANI ATTALURI 20333 W 151ST STREET OLATHE, KS 66061	GASTROINTESTINOLOGIST	0	0.
DAVID LEE 20333 W 151ST STREET OLATHE, KS 66061	MEDICAL ONCOLOGIST	0	0.

SCHD. K, FORM 990-T, COMPENSATION OF OFFICERS, DIRECTORS, & TRUSTEES

<u>NAME AND ADDRESS</u>	<u>TITLE</u>	<u>BUSINESS PERCENT</u>	<u>COMPENSATION</u>
LARRY CORUM 20333 W 151ST STREET OLATHE, KS 66061	MEDICAL ONCOLOGIST	0	0.
DUSAN STANOJEVIC 20333 W 151ST STREET OLATHE, KS 66061	CARDIOLOGIST	0	0.
KRYSTAL CLAYMORE 20333 W 151ST STREET OLATHE, KS 66061	CHIEF FINANCIAL OFFICER	0	0.
DAVID PURSELL 20333 W 151ST STREET OLATHE, KS 66061	VP/GENERAL COUNSEL	0	0.
TOTAL COMPENSATION			<u>0.</u>