4	000 T		Exempt Organization	n Business	Inc	ome Tax Re	turn	0	MB No 1545-0047
Form	990-T			ax under sect			17		<b>୭</b> ⋒ <b>4 •</b>
	4	For cale	ndar year 2019 or other tax year be	ginning,	2019,	and ending	, 20	.[	2019
	ent of the Treasury		► Go to www.irs.gov/Form9					Onen	to Public Inspection for
	Revenue Service	▶ Do :	not enter SSN numbers on this for	m as it may be made	public	of your organization	s a 501(c)(3).	501(c	(3) Organizations Only
A D	Check box if address changed		Name of organization (		and see	instructions)			dentification number 'trust, see instructions)
	pt under section	Print	SAINT LUKES SOUTH HOSPI						
	01( C)( <u>/3)</u>	or	Number, street, and room or suite r	no If a PO box, see in	structio	ons	E He		3-1203262 pusiness activity code
40		Туре	12300 METCALF AVENUE					e instruc	
∐ 40 □ 50	• •	1	City or town, state or province, cou OVERLAND PARK, KS 66213	intry, and ZIP or toreign	n posta	code			446110
☐ 52 <b>Č</b> Book	value of all assets	F Gr	oup exemption number (See	instructions )		<del></del>			440110
at en	d of vear		neck organization type		on	☐ 501(c) trust		a) trus	t  Other trust
H En			organization's unrelated trade						r first) unrelated
			_			ne, complete Parts			·
			at the end of the previous se						
tra	ide or business	, then c	omplete Parts III-V.	•		·			
l Du	ring the tax year	, was th	e corporation a subsidiary in an	affiliated group or	a pare	nt-subsidiary contro	lled group?	>	Yes No
If '	'Yes," enter the	name a	and identifying number of the	parent corporation	on. ▶	SAINT LUKE'S HE	ALTH SYSTE	M <u>43-1</u>	747502
			MATTHEW MARINO			Telephone n	umber 🕨		(913) 317-7900
_			e or Business Income		,	(A) Income	(B) Exper	ses	(C) Net
1a			es2,134,132						/
b	Less returns a		***********************	<b>c</b> Balance ►	1c	2,134,132			
2	-		Schedule A, line 7)		2	1,758,207			
3			t line 2 from line 1c		3	375,925			375,925
4a			ne (attach Schedule D)		4a	0			0
b			4797, Part II, line 17) (attach		4b	0	/		0
с 5			n for trusts    .   .   .   .  .  . a  partnership  or  an  S  cor <sub>l</sub>		4c	0			0
5			a parmership or an 3 con		_	0			_
6	•		lle C)		5			0	0
7			ced income (Schedule E)		7	0		0	<del> </del>
8			s, and rents from a controlled organi		8	0		0	
9	-	•	ection 501(c)(7), (9), or (17) organiz	•	19	0		0	<del></del>
10			ivity income (Schedule I)		10	0		0	<del></del>
11	•	•	Schedule J)		11	0		0	<del></del>
12	_		structions; attach schedule) .		12	0			0
13	Total. Combin	ne lines	3 through 12	/	13	375,925		0	
Part	I Deduction	ns Not	Taken Elsewhere (See ins	tructions for limit	ation	s on deductions.)	(Deduction	ns mu:	st be directly
	connected	d with t	he unrelated business incor	ne.)		7			
14	Compensation	of office	cers, directors, and trustees (	製配金の下VCI	<u>U.</u>			14	0
15	Salaries and v	vages	/ / / 101	- T2	$\cdots$			15	179,362
16	•		ance	NOV 2 3 2020	3 .	읶		16	0
17				1101	[			17	0
18	•		iule) (see ijiistructions) . [ . [.	SORENI	77	<del>-</del>		18	0
19				OGDEN.		ا		19	0
20			Form 4562)			20		<u> </u>	
21	•		imed on Schedule A and else					21b	
22	•	-	<b>.</b>					22	0
23		,	rred compensation plans .					23	0
24 25			grams					24	41,486
25 26			nses (Schedule I)					25	0
26 27			sts (Schedule J) ach schedule)					26 27	303,581
21 28			ach schedule)					28	524,429
20 29	/		ad lines 14 through 27 exable income before net ope					29	(148,504)
30	/		perating loss arising in tax	•				25	(140,504)
//	instructions)					•		30	Ì
31	•		xable income. Subtract line					31	(148,504)
<del></del>			Nation and instructions		<u> </u>	<u> </u>	· · · ·	101	(148,304)

For Paperwork Reduction Act Notice, see instructions.

at No 11291J 1 Form **990-T** (2019)

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	0-1 (2019)			Page Z
Part I				
32	Total of unrelated business taxable income computed from all unrelated trades or businesses	s (see		
	instructions)		32	0
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. Subtra-	ct line		
	34 from the sum of lines 32 and 33		35	0
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 3	35 .	37	0
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)		38	0
39	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than lin			
	enter the smaller of zero or line 37		39	0
Part	V Tax Computation			
40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)	. ▶	40	0
41	Trusts Taxable at Trust Rates. See instructions for tax computation. Income ta	x 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	0
Part	V Tax and Payments			
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)			
e	Total credits. Add lines 46a through 46d		46e	0
47	Subtract line 46e from line 45		47	0
48	Other taxes. Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach sche		48	0
49	Total tax. Add lines 47 and 48 (see instructions)		49	0
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	0		
b	2019 estimated tax payments	0	<u> </u>	
С	Tax deposited with Form 8868			
d	Foreign organizations <sup>-</sup> Tax paid or withheld at source (see instructions)			
e	Backup withholding (see instructions)			
f	Credit for small employer health insurance premiums (attach Form 8941)			
g	Other credits, adjustments, and payments.   Form 2439	_		
	☐ Form 4136 ☐ Other ☐ 0 Total ► <b>[51g]</b>	0	-	
52	Total payments. Add lines 51a through 51g		52	0
53	Estimated tax penalty (see instructions). Check if Form 2220 is attached	▶□	53	
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		55	0
56	Enter the amount of line 55 you want Credited to 2020 estimated tax   0 Refund		56	0
Part '				ty Yes No
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature			''y
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization	on may	nave to t	ile
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the	.ne iore	ign coun	
	here >			
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to	, a forei	gn trust?	
	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 \$\\ Under pegalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to	the bost	of my knowle	edge and belief it is
Sign	1. At	wledge 🕝		
-	Watt Magazana I Inland			discuss this return parer shown below
Here	Signature of officer  Date  Title			ons)? <b>Yes No</b>
				PTIN
Paid			ck lif employed	'"'
Prep				I
Use (	Only Firm's name >		's EIN ►	
	Firm's address ►	Phor	ie rio	

										<del>-y-</del> -
Schedule A—Cost of Goo	<b>ds Sold.</b> En	ter method of	ınvento	ory va	luation <b>&gt;</b>					
1 Inventory at beginning	of year	1	0	6	Inventory a	at end of year	6			0
2 Purchases	[	2 1,75	8,207	7		oods sold. Subtract line				
3 Cost of labor	[	3	0		6 from line	5. Enter here and in Part	1!			
4a Additional section 26	3A costs				I, line 2 .		7		1,758	8,207
(attach schedule) .	4	la	0	8	Do the rul	es of section 263A (with	respε	ect to	Yes	No
<b>b</b> Other costs (attach sch	nedule) 4	lb	0			roduced or acquired for r				
5 Total. Add lines 1 throu			8,207			nization?				
Schedule C-Rent Incom	e (From Rea	al Property an	d Pers	sonal	Property I	Leased With Real Prop	perty)			
(see instructions)										
Description of property										
(1)				_						
(2)										
(3)										
(4)										
	2. Rent receive	ed or accrued								
(a) From personal property (if the per- for personal property is more than more than 50%)		(b) From real a percentage of ren 50% or if the ren	t for pers	onal pro	perty exceeds	3(a) Deductions directly of in columns 2(a) and				е
(1)		· ·-								
(2)										
(3)										
(4)										
Total	0	Total				0				
(c) Total income. Add totals of cohere and on page 1, Part I, line 6,						(b) Total deductions.  Enter here and on page 1  Part I, line 6, column (B)				0
Schedule E-Unrelated D	ebt-Finance	ed Income (see	e instru	ctions	)				_	
1. Description of de			2. G	ross inc	come from or debt-financed	Deductions directly connidebt-finance     (a) Straight line depreciation	ed prope			
/4\	·	<del></del>	-	pro	perty 	(attach schedule)		ttach sch		
(1) (2)	<del>-</del>		+		<del></del>	<u> </u>	<u> </u>			
(3)			+			<del></del>	_			
(4)		-							-	
4. Amount of average     acquisition debt on or     allocable to debt-financed     property (attach schedule)	of or debt-fina	e adjusted basis allocable to anced property h schedule)		4 dr	olumn vided lumn 5	7. Gross income reportable (column 2 × column 6)	(column	ocable de n 6 × total 3(a) and	of colu	
(1)					%					
(2)					%					
(3)		<u> </u>			%				-	
(4)		···			%				_	
	·				**	Enter here and on page 1, Part I, line 7, column (A).		ere and line 7, c		
Totals					▶	0				0
Total dividends-received deduct	tions included	ın column 8 .								0
					<u>`</u>			Form 9	90-T	

Schedule F-Interest, Ann	uities, Royalties,				anizations (se	e instruc	ctions)	
		Exempt	Controlled	Organizations				
1. Name of controlled organization	2. Employer Identification number	1	lated income instructions)	4. Total of specified payments made	5. Part of column included in the corganization's great transfer in the corganization's great transfer in the column included in the colu	controlling	conn	eductions directly ected with income in column 5
(1)								
(2)								
(3)								
(4)							_	
Nonexempt Controlled Organiz	zations	<del></del>		•	•			
7. Taxable Income	8. Net unrelated in (loss) (see instruct			otal of specified yments made	10. Part of column included in the coorganization's gro	controlling	conne	reductions directly cted with income in column 10
(1)					_			
(2)								
(3)								
(4)								
					Add columns 5 Enter here and c Part I, line 8, co	on page 1, olumn (A)	Enter h Part i,	columns 6 and 11. here and on page 1, line 8, column (B)
Totals	<u> </u>			<u> ▶</u>	<del></del>		0	0
Schedule G-Investment I	ncome of a Sect	ion 501(			zation (see inst	tructions		
1. Description of income	2. Amount o	f income	dire	Deductions ctly connected ach schedule)	4. Set-aside (attach schede		and s	otal deductions et-asides (col. 3 plus col. 4)
(1)								
(2)								
(3)								·
(4)								·
	Enter here and Part I, line 9, o		,			İ		re and on page 1, ne 9, column (B).
Totals	<u> </u>		0					0
Schedule I—Exploited Exe	empt Activity Inc	ome, Otl	her Than	Advertising In	come (see inst	tructions	s)	
Description of exploited activity	2. Gross unrelated business inco from trade of business	me conr	Expenses directly sected with duction of nrelated ess 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)								
(4)								
Totals	Enter here and page 1, Part line 10, col (a	I, pag	here and on e 1, Part I, I0, col (B) 0		1			Enter here and on page 1, Part II, line 25
Schedule J-Advertising I	ncome (see instru			<del></del>			<del></del> .	<u></u>
	eriodicals Repor		Consoli	dated Basis				
				4. Advertising	<del></del>	<u> </u>		7. Excess readership
1. Name of periodical	2. Gross advertising income		. Direct tising costs	gain or (loss) (col. 2 minus col 3) If a gain, compute cols. 5 through 7	5. Circulation income		dership ists	costs (column 6 minus column 5, but not more than column 4)
(1)								
(2)								
(3)								
(4)								
Totals (carry to Part II, line (5))	<b>&gt;</b>	0	0	0			F	0 form <b>990-T</b> (2019)

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)						<u> </u>
(3)						
(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.
<b>Totals,</b> Part II (lines 1–5) ▶	0	0				0

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

1. Name	2. Title	3. Percent of time devoted to business	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 27

Other Deductions

Description		Amount
RETAIL PHARMACY		
(1) MISCELLANEOUS		7,400
(2) SUPPLIES		2,527
(3) FACILITY AND ADMINISTRATIVE EXPENSES		290,963
(4) PURCHASED SERVICES		2,691
	Total	303,581

## Form 990T Part III, Line 36

Deduction for net operating loss arising in tax years beginning before January 1, 2018

Year Generated	Amount Generated	Converted Contributions	Amount Used in Prior Years	Amount Used in Current Year	Amount Remaining	NOL Expires
2001	63,206		26,992		36,214	, <u></u>
2004	37,020				37,020	
2005	72,372				72,372	
2006	87,968				87,968	
2007	78,893				78,893	
2008	111,457				111,457	
2009	484,215		·		484,215	
2010	98,340				98,340	
2011	90,295				90,295	
2012	150,857				150,857	-
2013	166,411				166,411	
2014	113,073				113,073	
2015	56,978				56,978	
2016	101,734				101,734	
2017	152,502				152,502	· -
2018	225,970				225,970	
Totals	2,091,291	0	26,992	0	2,064,299	