Form	990-T	E	empt Organization		siness Income of			OMB No 1545-0047
	` ` `	For cale	ndar year 2019 or other tax year begin					<b>୭</b> ⋒1 <b>9</b>
Depar	tment of the Treasury		► Go to www irs.gov/Form990					<u> </u>
Intern	al Revenue Service	Do	not enter SSN numbers on this form a					Open to Public Inspection for 501(c)(3) Organizations Only
A _	Check box if address changed		Name of organization ( Check be	ox if nai	me changed and see instruction	s)		oyer identification number oyees' trust, see instructions )
BEX	empt under section	1	CHRISTIANA CARE HEA	LTH	SERVICES, INC.			
Х	501( C Ø3 )	Print	Number, street, and room or suite no	f a P O	box, see instructions		51-0	103684
	408(e) 220(e)	Type						ated business activity code structions )
	408A530(a)		P.O. BOX 2653				(500 111	34003013 )
	529(a)	ļ	City or town, state or province, country	•	• ,	İ	0.0	
	ok value of all assets end of year	<u> </u>	WILMINGTON, DE 1980		90			
	4179624084.		up exemption number (See instruct				404(=)	Annual Other trust
			ck organization type X 501				401(a)	
	nter the number of ade or business he	-	nization's unrelated trades or busine アクロー1	sses	<del></del>	<del></del>	•	(or first) unrelated e than one, describe the
			end of the previous sentence, cor	molete	<del> '</del>	•		·
	ade or business, th		•	inpicto	raits raile ii, complete a si	criedule Willor eat	in addition	141
			corporation a subsidiary in an affili	ated a	roup or a parent-subsidiary of	ontrolled group?		X Yes No
	•		identifying number of the parent co	-		, controlled group		
JT	he books are in car	e of ▶SF	. VP'S OFFICE			e number ▶ 30	2-428-	-2426
Pai	t I Unrelated	Trade o	or Business Income		(A) Income	(B) Expen	ses _	(C) Net
1a	Gross receipts or	sales						
b	Less returns and allowa	nces	c Balance ▶	1c				
2	Cost of goods so	ld (Sched	ule A, line 7)	2				
3	Gross profit Sub	tract line	2 from line 1c	3		<u> </u>		- Orriving
4a	Capital gain net i	ncome (a	ttach Schedule D)	4a			_ <u>_R</u>	EUFINED
þ			Part II, line 17) (attach Form 4797)	4b		/		70
C			rusts	4c	<u> </u>		ol M	AY 1 7 2021   6
5			r an S corporation (attach statement)		/		<u> </u>	\(\frac{1}{2}\) \(\frac{1}{2}\
6				6 7		1	700	DEN E
8			come (Schedule E)			<u>.</u>		IUEN. UT 1
9			nts from a controlled organization (Schedule P)					, , , , , , , , , , , , , , , , , , ,
10			ncome (Schedule I)	10				
11		-	lule J)	11				
12			tions, attach schedule)	12	5,076,292.	ATCH 3		5,076,292.
13	Total. Combine li	nes 3 thr	ough 12	13	5,076,292.			5,076,292.
Pai	rt II Deductio	ns Not	Taken Elsewhere (See insti	ructio	pris for limitations on d	eductions ) ([	Deduction	ons must be directly
			ne unrelated business incom	<del>/-</del>				·
14			directors, and trustees (Schedule K)	,				
15								3,430,207.
16								
17								
18			(see instructions), , , , ,				l l	
19 20			4562)				· ·   19	
21			on Schedule A and ejsewhere on re				21b	
22								
23			compensation plans					
24			5					1,395,633.
25			Schedule I).					
26	•		chedule J)./					
27			chedule)					250,452.
28			s 14 through 27					5,076,292.
29			le income before net operating					
30			g loss arising in tax years beginnir					
31			e income Subtract line 30 from line lotice, see instructions	29 .	<u></u>		31	Form <b>990-T</b> (2019)

v 19-8.3F 6\V

	•			
	Form	990-T (2019) CHRISTIANA CARE HEALTH SERVICES, INC.	51-0103684	Page 2
	Pai	t III Total Unrelated Business Taxable Income		
	32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see		
		instructions)	32	
	33	Amounts paid for disallowed fringes	33	
	34	Charitable contributions (see instructions for limitation rules)	34	
	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	0.
	36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see		
		instructions)	36	
	37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	37	
	38	<b>}</b>	<del>- +</del>	
		Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38	
	39	Unrelated business taxable income Subtract line 38 from line 37. If line 38 is greater than line 37,		0
	D-	enter the smaller of zero or line 37	39	0.
		t IV Tax Computation		
	40	Organizations Taxable as Corporations Multiply line 39 by 21% (0 21)	40	
	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	•
		t V Tax and Payments		
	46 a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 46a		
	b	Other credits (see instructions)		
		General business credit Attach Form 3800 (see instructions)	1	
		Credit for prior year minimum tax (attach Form 8801 or 8827)		
			46e	
	47	Subtract line 46e from line 45	47	
	48	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule).	48	
	49	Total tax Add lines 47 and 48 (see instructions)		0.
	50	· · · · · · · · · · · · · · · · · · ·	49	
		2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50	
		Payments A 2018 overpayment credited to 2019		
		2019 estimated tax payments		
	C .	Tax deposited with Form 8868	1	
		Foreign organizations Tax paid or withheld at source (see instructions)		
	e	Backup withholding (see instructions)		
		Credit for small employer health insurance premiums (attach Form 8941)		
	g	Other credits, adjustments, and payments  Form 2439  Other  Total  519  978.		
		X Form 4136 978. Other Total 51g 978.		
	52	Total payments Add lines 51a through 51g	52	978.
	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	
	55	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55	978.
	56	Enter the amount of line 55 you want	56	978.
	Par	VI 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		Yes No
		over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization mai	´ <b>⊢</b>	
		FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the f	•	
		here <b>&gt;</b>	oreign country	х
		During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreig	in truct?	X
	-		" "usi'	
	E0	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   S  Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the be-	at of my kennings :	ad boket it i
	C:	true conect and complete Declaration of preparer (other than townsyor) is based on all information of which preparer has any knowledge	st or my knowledge ar	ia beliet, it is
	Sign	1 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	the IRS discuss	this return
	Here	the formation of the first with	the preparer sho	wn below
			instructions)? X Yes	No
	Paid	Print/Type preparer's name Preparer's signature Check	If PTIN	
	raiu Prep	3/0/	ployed P0085	
		Only  Firm's name  PRICEWATERHOUSECOOPERS LLP  Firm's E	IN► 13-4008	324
	Jac	Firm's address > 2001 MARKET ST, SUITE 1800, PHILADELPHIA, PA 19103 Phone	no 267-330-3	000

Form **990-T** (2019)

Form 990-T (2019)		<del> </del>							Page 3
Schedule A - Cost of Go	ods Sold. Er	ter method	of invento				,	1	
1 Inventory at beginning of year				6 Inventor	y at end of ye	ear	6		
2 Purchases				7 Cost of	goods s	old. Subtract line			
3 Cost of labor	3			6 from	line 5 Ente	r here and in Part			
4a Additional section 263A co	sts								
(attach schedule)	4a			8 Do the	rules of	section 263A (v	vith r	espect to	Yes No
<b>b</b> Other costs (attach schedul	le) . 4b					or acquired for			
5 Total Add lines 1 through				to the or	ganization?			· · · · · ·	.   X
Schedule C - Rent Income	(From Real P	roperty a	nd Person	ial Propert	y Leased \	With Real Prope	rty)		
(see instructions)									
1 Description of property									
(1)									
(2)									
(3)			··· ·- · ·						
(4)						<del></del>			
	2 Rent recei	ved or accru	ed			_			
for personal property is more than 10% but not percentage				personal propert personal prope based on profit o	ty exceeds	3(a) Deductions directly connected with the in columns 2(a) and 2(b) (attach schedu			
(1)									
(2)									
(3)				<u> </u>					
(4)									
Total		Total				T			
(c) Total income Add totals of cohere and on page 1, Part I, line 6,						(b) Total deduction Enter here and or Part I, line 6, colu	n page		
Schedule E - Unrelated De			e instruction	ons)					
		,		ncome from or	3	Deductions directly co			able to
1 Description of deb	t-financed property			o debt-financed operty		ht line depreciation		(b) Other ded	
,,,,			<u> </u>	<u> </u>	(att	ach schedule)		(attach sche	equie)
(1)									
(2)			<del> </del>						
(3)		<u>.</u>	·						
(4)	F A	ated bears			+	<u></u>			
Amount of average     acquisition debt on or     allocable to debt-financed     property (attach schedule)	5 Average adju of or alloca debt-financed (attach scho	ble to property	4 0	Column divided olumn 5		s income reportable in 2 x column 6)		Allocable de umn 6 x total 3(a) and 3	l of columns
(1)				9	6				
(2)				9,	6				
(3)				9	6				
(4)				9	6				
						ere and on page 1, ne 7, column (A)		er here and t I, line 7, co	
Totals					•				

Form **990-T** (2019)

Total dividends-received deductions included in column 8 . . . . . . . .

Schedule F - Interest, Ann	uities, Royaitie	-		ntrolled Or			ations	(see ir	structi	ons)	<u> </u>
Name of controlled organization	2 Employer identification numb	per 3 Ne	t unrela	ated income instructions)	4 Total	_	fied inclu	ded in t	lumn 4 th he contro gross in	olling	6 Deductions directly connected with income in column 5
(1)											
(2)							_				
(3)											
(4)											
Nonexempt Controlled Organiz	zations										
7 Taxable Income	8 Net unrelated in (loss) (see instruc			otal of specific ayments made		inc	Part of coli luded in th inization's (	e control	lìng		Deductions directly     nected with income in     column 10
(1)											· · · · · · · · · · · · · · · · · · ·
(2)											
(3)											
(4)		_									
Totals	ncome of a Sec		· · · · c)(7),	(9), or (17		Pa	ter here and int I, line 8, on (see	column (	(A)		ter here and on page 1, int I, line 8, column (B)
1 Description of income	2 Amount of	fincome		3 Deduction directly cortact school	nected			Set-asi ach sch			5 Total deductions and set-asides (col 3 plus col 4)
(1)											
(2)											
(3)											
(4)	Enter here and Part I, line 9, c										Enter here and on page 1 Part I, line 9, column (B)
Totals ▶ Schedule I-Exploited Exe	empt Activity In	come. Oth	er Th	an Advert	isina Ir	come	(see ins	struction	ons)		
Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expens directly connected production unrelate business ind	es with n of d	4 Net incor from unrelat or business 2 minus col If a gain, o cols 5 thro	ne (loss) ed trade (column umn 3) ompute	5 G from	ross incom activity tha ot unrelated ness incom	e at i	6 Expe attributa colum	ble to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)									-		
(2)	-										
(3)											
(4)	_										
Totals	Enter here and on page 1, Part I, fine 10, col (A)	Enter here a page 1, Pa line 10, col	rt I,			•	•				Enter here and on page 1, Part II, line 25
Schedule J-Advertising Ir	come (see instr	uctions)			•						
Part I Income From Per			onsoli	dated Bas	sis					-	
1 Name of periodical	2 Gross advertising income	3 Directadvertising		4 Adver gain or (los 2 minus co a gain, co cols 5 thre	ss) (col ol 3) If mpute	L	Circulation income		6 Reade		7 Excess readership costs (column 6 minus column 5, but not more than column 4)
				33.3 3 4110	y						
(1)	-							_		_	
(2)							_	$-\!\!\!\!+$			
(3)	-										<u> </u>
(4)											
Totals (carry to Part II, line (5)) ▶											

Form **990-T** (2019)

%

%

%

%

(1)

(2)

(3)

(4)

Total. Enter here and on page 1, Part II, line 14

#### Form 990-T (2019) 51-0103684 Page 5 Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns Part II 2 through 7 on a line-by-line basis ) 4 Advertising 7 Excess readership costs (column 6 gain or (loss) (col 2 Gross 3 Direct 5 Circulation 6 Readership 2 minus col 3) If minus column 5, but 1 Name of periodical advertising ıncome costs advertising costs not more than a gain, compute ıncome cols 5 through 7 column 4) (1) (2) (3) (4) Totals from Part I. . . . Enter here and Enter here and on Enter here and on page 1, Part I, page 1, Part I, on page 1, line 11, col (A) line 11, col (B) Part II, line 26 Totals, Part II (lines 1-5) . . . . . Schedule K - Compensation of Officers, Directors, and Trustees (see instructions) 3 Percent of time devoted to 4 Compensation attributable to 1 Name 2 Title unrelated business

Form 990-T (2019)

# **Credit for Federal Tax Paid on Fuels**

OMB No 1545-0162

Department of the Treasury Internal Revenue Service (99) ▶ Go to www.irs.gov/Form4136 for instructions and the latest information.

Attachment Sequence No 23

Name (as shown on your income tax return)

CHRISTIANA CARE HEALTH SERVICES, INC.

Taxpayer identification number

51-0103684

Caution: Claimant has the name and address of the person who sold the fuel to the claimant and the dates of purchase. For claims on lines 1c and 2b (type of use 13 or 14), 3d, 4c, and 5, claimant has not waived the right to make the claim For claims on lines 1c and 2b (type of use 13 or 14), claimant certifies that a certificate has not been provided to the credit card issuer

#### Nontaxable Use of Gasoline

Note: CRN is credit reference number

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Off-highway business use		\$ 183	)		
b	Use on a farm for farming purposes		183	<b></b> }		362
С	Other nontaxable use (see Caution above line 1)		183	)	<b> </b> \$	
d	Exported		184			411

#### **Nontaxable Use of Aviation Gasoline**

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of cred	lit	(e) CRN
а	Use in commercial aviation (other than foreign trade)		\$ 15		\$		354
b	Other nontaxable use (see Caution above line 1)		193				324
С	Exported		194				412
d	LUST tax on aviation fuels used in foreign trade		001				433

#### Nontaxable Use of Undyed Diesel Fuel

Claimant certifies that the diesel fuel did not contain visible evidence of dye

exception. If any of the diesel fuel included in this clair	III ulu contain visibit	evidence o	uye, attacii an exp	anation and check here	
	(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
Nontaxable use	2	\$ 243	4,023 )		
Use on a farm for farming purposes		243	}	\$ 978 00	360
Use in trains		243			353
Use in certain intercity and local buses (see Caution above line 1)		17			350

#### 4 Nontaxable Use of Undyed Kerosene (Other Than Kerosene Used in Aviation)

Claimant certifies that the kerosene did not contain visible evidence of dye

exception. If any of the kerosene included in this claim did contain visible evidence of dye, attach an explanation and check here						
		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Nontaxable use taxed at \$ 244		\$ 243	)		
b	Use on a farm for farming purposes		243		\$	346
С	Use in certain intercity and local buses (see Caution above line 1)		17			347
d	Exported		244			414
е	Nontaxable use taxed at \$ 044		043			377
f	Nontaxable use taxed at \$ 219		218			369

Exception of the kerosene included in this claim did contain visible evidence of divergitable an explanation and check here

For Paperwork Reduction Act Notice, see the separate instructions.

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350

b С

Exported

▶ 🗆

5	Kerosene	Used in	Aviation	(see Caution above line 1	١

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Kerosene used in commercial aviation (other than foreign trade) taxed at \$ 244		\$ 200	- <del>1 -</del>	s	417
b	Kerosene used in commercial aviation (other than foreign trade) taxed at \$ 219		175			355
С	Nontaxable use (other than use by state or local government) taxed at \$ 244		243			346
d	Nontaxable use (other than use by state or local government) taxed at \$ 219		218			369
е	LUST tax on aviation fuels used in foreign trade		001			433

#### 6 Sales by Registered Ultimate Vendors of Undyed Diesel Fuel

### Registration No. ▶

Claimant certifies that it sold the diesel fuel at a tax-excluded price, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. Claimant certifies that the diesel fuel did not contain visible evidence of dye.

Exception. If any of the diesel fuel included in this claim did contain visible evidence of dye, attach an explanation and check here

(b) Rate
(c) Gallons
(d) Amount of credit
(e) CRN

a Use by a state or local government
5 243
5 360
b Use in certain intercity and local buses
17 350

## 7 Sales by Registered Ultimate Vendors of Undyed Kerosene (Other Than Kerosene For Use in Aviation)

#### Registration No. ▶

Claimant certifies that it sold the kerosene at a tax-excluded price, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. Claimant certifies that the kerosene did not contain visible evidence of dye.

Exception. If any of the kerosene included in this claim did contain visible evidence of dye, attach an explanation and check here

		(b) Rate	(c) Gallons	(d) Amount of credit		(e) CRN
а	Use by a state or local government	\$ 243	1			
b	Sales from a blocked pump	243	}	\$		346
С	Use in certain intercity and local buses	17				347

#### 8 Sales by Registered Ultimate Vendors of Kerosene For Use in Aviation Registration No. ▶

Claimant sold the kerosene for use in aviation at a tax-excluded price and has not collected the amount of tax from the buyer, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. See the instructions for additional information to be submitted.

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Use in commercial aviation (other than foreign trade) taxed at \$ 219		<b>\$</b> 175		\$	355
b	Use in commercial aviation (other than foreign trade) taxed at \$ 244		200		-	417
С	Nonexempt use in noncommercial aviation		025			418
d	Other nontaxable uses taxed at \$ 244		243			346
е	Other nontaxable uses taxed at \$ 219		218			369
f	LUST tax on aviation fuels used in foreign trade		001			433

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# 9 Reserved for future use (b) Rate (c) Gallons of alcohol Reserved for future use Reserved for future use Reserved for future use (c) Gallons of alcohol (d) Amount of credit (e) CRN of alcohol

#### 10 Biodiesel or Renewable Diesel Mixture Credit

#### Registration No. ▶

Biodiesel mixtures. Claimant produced a mixture by mixing biodiesel with diesel fuel. The biodiesel used to produce the mixture met ASTM D6751 and met EPA's registration requirements for fuels and fuel additives. The mixture was sold by the claimant to any person for use as a fuel or was used as a fuel by the claimant. Claimant has attached the Certificate for Biodiesel and, if applicable, the Statement of Biodiesel Reseller. Renewable diesel mixtures. Claimant produced a mixture by mixing renewable diesel with liquid fuel (other than renewable diesel). The renewable diesel used to produce the renewable diesel mixture was derived from biomass, met EPA's registration requirements for fuels and fuel additives, and met ASTM D975, D396, or other equivalent standard approved by the IRS. The mixture was sold by the claimant to any person for use as a fuel or was used as a fuel by the claimant. Claimant has attached the Certificate for Biodiesel and, if applicable, Statement of Biodiesel Reseller, both of which have been edited as discussed in the instructions for line 10. See the instructions for line 10 for information about renewable diesel used in aviation.

		(b) Rate	(c) Gallons of biodiesel or renewable diesel	(d) Amount of cr	(e) CRN	
а	Biodiesel (other than agri-biodiesel) mixtures	\$1 00		\$ 0	00	388
b	Agri-biodiesel mixtures	1 00		0	00	390
С	Renewable diesel mixtures	1 00		0	00	307

#### 11 Nontaxable Use of Alternative Fuel

	Caution: There is a reduced credit rate for use in certain intercity and local buses (type of use 5). See instructions							
		(a) Type of use	(b) Rate	(c) Gallons, or gasoline or diesel gallon equivalents	(d) Amount of credit	(e) CRN		
а	Liquefied petroleum gas (LPG) (see instructions)		\$ 183		\$	419		
b	"P Series" fuels		183			420		
C	Compressed natural gas (CNG) (see instructions)		183			421		
d	Liquefied hydrogen		183			422		
е	Fischer-Tropsch process liquid fuel from coal (including peat)		243			423		
f	Liquid fuel derived from biomass		243			424		
g	Liquefied natural gas (LNG) (see instructions)		243			425		
h	Liquefied gas derived from biomass		183			435		

#### 12 Alternative Fuel Credit

#### Registration No. ▶

		(b) Rate	(c) Gallons, or gasoline or diesel gallon equivalents	(d) Amount of cr	edit	(e) CRN
а	Liquefied petroleum gas (LPG) (see instructions)	\$ 50		\$ 0	00	426
b	"P Series" fuels	50		0	00	427
С	Compressed natural gas (CNG) (see instructions)	50		0	00	428
d	Liquefied hydrogen	50		0	00	429
е	Fischer-Tropsch process liquid fuel from coal (including peat)	50		0	00	430
f	Liquid fuel derived from biomass	50		0	00	431
g	Liquefied natural gas (LNG) (see instructions)	50		0	00	432
h	Liquefied gas derived from biomass	50		0	00	436
i	Compressed gas derived from biomass	50		0	00	437

Form 4136 (2019)

13	Registered Credit Card Issuers			Registration No. ►						
			(b) Rate	(c) Gallons	(d) Amount of cre	dit (e) CRN				
а	Diesel fuel sold for the exclusive use of a state or loca	l government	\$ 243		\$	360				
b	Kerosene sold for the exclusive use of a state or local	government	243			346				
С	Kerosene for use in aviation sold for the exclusive use government taxed at \$ 219	of a state or local	218			369				
14	Nontaxable Use of a Diesel-Water Fuel Emuls	sion								
	Caution: There is a reduced credit rate for use in	There is a reduced credit rate for use in certain intercity and local buses (type of use 5). See instructions								
		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of cre	dit (e) CRN				
а	Nontaxable use		\$ 197		\$	309				
b	Exported		198			306				
15	Diesel-Water Fuel Emulsion Blending		ı	Registration No.						
			(b) Rate	(c) Gallons	(d) Amount of cre	dit (e) CRN				
	Blender credit		\$ 046		\$	310				
16	Exported Dyed Fuels and Exported Gasoline	Blendstocks								
			(b) Rate	(c) Gallons	(d) Amount of cre	dit (e) CRN				
а	Exported dyed diesel fuel and exported gasoline blend at \$ 001	dstocks taxed	\$ 001		\$	415				
b	Exported dyed kerosene		001			416				
17	Total income tax credit claimed. Add lines 1 th Schedule 3 (Form 1040 or 1040-SR), line 12, Form line 23c, Form 1041, Schedule G, line 16b, or the p	1120, Schedule J,	lìne 20b, Foi		<del></del>	00 om <b>4136</b> (2019				
				<del></del>	<del></del>	m 41				

ATTACHMENT 4

FORM 990T - PART II - LINE 27 - TOTAL OTHER DEDUCTIONS

SUPPLIES & OTHER EXPENSES

250,452.

250,452.

PART II - LINE 27 - OTHER DEDUCTIONS

CHRISTIANA CARE HEALTH SERVICES, INC. FEIN 51-0103684 FOR THE YEAR ENDED 06/30/2020

FORM 990-T, PART II, LINE 20

CHARITABLE DEDUCTIONS

Year		Amount vailable	An	Current Year Amount Expired		Current Year Amount Used		Amount Carried to Next Year		
6/30/2018	\$	732,429	\$	_	\$	_	\$	732,429		
6/30/2019		390,465		-		-		390,465		
6/30/2020	2	,288,020					2,288,020			
	3	,410,914	\$	-	\$	_	3	,410,914		