Form 990-T	E	xempt Organization Bus			ax Return	1	OMB No 1545-0687
		(and proxy tax und			1909		2010
	For cal	endar year 2018 or other tax year beginning OCT 1, 20		and ending SEP		-	ZU 10
Department of the Treasury Internal Revenue Service		► Go to www.irs.gov/Form990T for in Do not enter SSN numbers on this form as it may	be ma	de public if your organiz			Open to Public Inspection for 501(c)(3) Organizations Only
A Check box if address changed		Name of organization (Check box if name c	hanged -	and see instructions.)		(Emp	oyer identification number loyees' trust, see ictions)
B Exempt under section	Print	CENTRAL TEXAS COMMUNITY HEALTH CE	NTERS	S			55-0853118
X 501(c (13)	or Type	Number, street, and room or suite no. If a P.O. box	k, see ir	structions.		(See :	ated business activity code nstructions)
408(e) 220(e)	.,,,,	2115 KRAMER, STE 100				ł	
408A530(a) 529(a)		City or town, state or province, country, and ZIP of AUSTIN, TX 78758	r foreig	n postal code			-
C Book value of all assets at end of year		F Group exemption number (See instructions.)	>		•		
38,889	577.	G Check organization type 🕨 🗓 501(c) corp			401(a)		Other trust 4
H Enter the number of the	organıza	tion's unrelated trades or businesses.	1		the only (or first) un		
trade or business here					complete Parts I-V.		
		ce at the end of the previous sentence, complete Pa	rts I an	d II, complete a Schedule	M for each addition	al trade	or
business, then complete			at aubo	diary controlled group?		Ye	x No
		oration a subsidiary in an affiliated group or a parer lifying number of the parent corporation.	ıt-şubsi	diary controlled group?	P (:5
J The books are in care of				Telenh	one number > 5:	12-97	8-9811
		de or Business Income		(A) Income	(B) Expenses		(C) Net
1a Gross receipts or sale				V 7	PS SOM STATE		SSE(68) / ARTON
b Less returns and allo		c Balance ▶	1 _C				
2 Cost of goods sold (S			2		BUTE STREET	a 2 2 2 2 3 3 4 4 4 5 4 5 4 5 4 5 4 5 5 5 6 6 7 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8 7 8 8 8 8 8 8 8 8 8 8 8 8 8	TO A STANDARD
3 Gross profit. Subtract			3	•			
4 a Capital gain net incon	ne (attac	h Schedule D) ·	4a		COMMERCIAL PROPERTY		
b Net gain (loss) (Form	4797, P	art II, line 17) (attach Form 4797)	4b				
c Capital loss deduction	n for trus	ets ·	4c				
5 Income (loss) from a	partners	ship or an S corporation (attach statement) 🕟 🤏	5				
6 Rent income (Scheduling)	le C)		6				
7 Unrelated debt-finance		•	7				
		nd rents from a controlled organization (Schedule F)	8			<u>' </u>	
		on 501(c)(7), (9), or (17) organization (Schedule G)	9				-
10 Exploited exempt acti	-	•	10				
11 Advertising income (12		THE PROPERTY OF THE	784R/9	
12 Other income (See in 13 Total, Combine lines			13	0.	1000 200100 1-220	F TOM	
Part K Deductio	ns No	ot Taken Elsewhere (See instructions for		itions on deductions.)			<u>. </u>
		utions, deductions must be directly connected			income)		
14 Compensation of off	icers, di	rectors, and trustees (Schedule Ka				14	
15 Salaries and wages		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Servi	C 0	15	
16 Repairs and mainter	ance		Inte	mal Revenue Servi eived US Bank - U 743	SB	16	
17 Bad debts			Rec	743		_17	
(attach sche	dule) (s	ee instructions)				18_	
Interest (attach sche Taxes and licenses Charitable contribution Depreciation (attach Less depreciation cl				AUG 21 2020		19	
20 Charitable contributi		e instructions for limitation rules)		Kansas Caty MC		20	
21 Depreciation (attach		· /		Kansas Caty MC	·		
3	aimed oi	Sehedule A and elsewhere on return		[22a]		22b	
23 Depletion	A	, ,				23	
24 Contributions to def	<i>M</i>	mpensation plans		,	-	24	
25 Employee benefit pr		See de de 10	•	n A **	•	25	
26 Excess exempt expe				***	• •	26 27	
27 Excess readership c			-		:		
28 Other deductions (at					•	28 29	0.
29 Total deductions. A		14 through 28 ncome before net operating loss deduction. Subtrac	t line 20) from line 12		30	0,
		ncome before het operating loss deduction. Subtractions says arising in tax years beginning on or after Janual				31	Manager State (1974)
		oss arising in tax years beginning on or after Janua ncome. Subtract line 31 from line 30	iy i, 2U	י (פונטווטנוטנוטנוים)	i	32	0.
7		work Reduction Act Notice, see instructions.			I	i	Form 990-T (2018)

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	orm 990-			55-085	3118		Page
\[Part	KI	Total Unrelated Business Taxable Income				
)	33	Total	of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)		33		0.
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				attach schedule)			
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_	30	$\overline{}$		best of my knowl	edge and belu	ef. It is true	
S	ign	co	rrect, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge			.,	
	_		8/17/25		-		
			Signature of officer Date Title				
_			Print/Type preparer's name Preparer's reinnature Date			, , 108	110
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			1 2 2 2 1/21 2 109/10/2020 1	oon omployed		249221	
	-			Firm's FIM			.5
•	use C	nly		THINI O LIN			
			·	Phone no	512 - 370-	3200	
Part M Total Unrelated Business Taxable Income 33 Total of invalidate business taxable income computed from all arristed trades or businesses (see mishuchons) 33 4 4 4 4 4 4 4 4							

Schedule A - Cost of Goods	Sold. Enter	method of inver	ntory v	aluation N/A		A			
1 Inventory at beginning of year	1		6	Inventory at end of year	r		6		
2 Purchases	2		7	Cost of goods sold. Su	Subtract line 6				
3 Cost of labor	3			from line 5. Enter here	and in F	Part I,	*		
4 a Additional section 263A costs			7	line 2		L	7		
(attach schedule)	4a		8	Do the rules of section	263A (v	with respect to		Yes No	
b Other costs (attach schedule)	4b			property produced or a	cquired	for resale) apply to			
5 Total. Add lines 1 through 4b	5			the organization?					
Schedule C - Rent Income (From Real	Property and	l Per	sonal Property L	ease	d With Real Prope	erty)		
(see instructions)									
Description of property									
(1)									
(2)									
(3)									
(4)									
.,,	2. Rent receive	ed or accrued		=					
(a) From personal property (if the perc rent for personal property is more 10% but not more than 50%)	entage of than	of rent for	personal	onal property (if the percentag property exceeds 50% or if ed on profit or income)	ge	3(a) Deductions directly columns 2(a) and	connected of 2(b) (attac	vith the income in h schedule)	
(1)									
(2)									
(3)									
(4)									
Total	0.	Total			0.				
(c) Total income. Add totals of columns there and on page 1, Part I, line 6, column		ter			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	>	0.	
Schedule E - Unrelated Deb		Income (see	ınstru	ctions)					
			7 ,	. Gross income from		Deductions directly conn to debt-finance		or allocable	
. 1. Description of debt-fin	anced property			or allocable to debt- financed property		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)				Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)			Allocable deductions mn 6 x total of columns 3(a) and 3(b))	
(1)				%					
(2)				%					
(3)				%					
(4)				%					
			-		Ei	nter here and on page 1,	Ente	r here and on page 1,	
					P	Part I, line 7, column (A)	Part	I, line 7, column (B)	
Totals				▶		0		0.	
Total dividends-received deductions in	cluded in column	n 8						0.	

Schedule F - Interest,	Annuities	, Royalti	es, and					ation	S (see ins	struction	ns)	
					Controlled O	· ·		Т.	- -			
Name of controlled organiza	tion	2. Employer identification number			related income a instructions)		otal of specified rments made	5. Part of column 4 that is included in the controlling organization's gross income		rolling	6. Deductions directly connected with income in column 5	
(1)								-			- , ,	
(2)												
(3)								<u> </u>				
(4)								\vdash				
Nonexempt Controlled Organ	ızatıons			<u> </u>	·							
7 Taxable Income		related income	(lone)	O Total	of specified payr		10. Part of colu	mp 0 th	at in included	11 0	dustions duratily assessed	
7. Taxable income		e instructions)	(1033)	g. rotar	made	nemo	in the controll	ing orga s incomi	nızatıon's		eductions directly connected n income in column 10	
(1)	ļ — ·					•						
(2)				· ·					•			
(3)												
(4)												
				l			A d d = a l		- 40			
							Add colur Enter here and line 8,		e 1, Part I,		dd columns 6 and 11 nere and on page 1, Part I, line 8, column (B)	
Totals						•			0.		0	
Schedule G - Investme	nt Incom	e of a Se	ection	501(c)(7). (9). or (17) Or	ganization					
	ructions)	0 0. 4 0.		001(0)(.	,, (0), 0. (, ৩.	garnzanon					
							3. Deductio	ns	T		5. Total deductions	
1. Desc	cription of incom	θ			2. Amount of	income	directly conne	cted	4. Set-	asides ichedule)	and set-asides (col 3 plus col 4)	
(1)					ļ		(attach sched	1016)	 	<u>-</u>	(cot 3 plus cot 4)	
												
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(3)							<u> </u>		ļ			
(4)				_	5		Mary Physical Links of the Control o	C \$ 7 x 7 M	CT7-PT07 466 47	act of the st	T C	
					Enter here and o Part 1, line 9, co	umn (A)					Enter here and on page 1 Part I, line 9, column (B)	
Totals							14.001	1	in a f		<u>₩</u> 0.	
Schedule I - Exploited	•	Activity I	ncome	, Other	Than Adv	ertisir	ng Income					
(see instru	uctions)						, · · · · · · · · · · · · · · · · · · ·					
,	2 0-		3 . Exp	enses	4. Net incom		5. Gross inco				7. Excess exempt	
1. Description of	2. Gro unrelated b	usiness	directly co		from unrelated business (co	lumn 2	from activity t	that	6. Exp		expenses (column 6 minus column 5.	
exploited activity	income trade or bu		of unre	elated	minus columi gain, compute		is not unrelat business inco		colur		but not more than	
			business	income	through	7			_		column 4)	
(1)											·	
(2)												
(3)										-		
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	Enter here		Enter her			11		1344 F		4 N. 44 A.	Enter here and	
	page 1, F		page 1, line 10,				A Part of the		A PARTY	314, 321. 15. 15. 15. 15. 15. 15. 15. 15. 15. 15.	on page 1, Part II, line 26	
Totals >]	0.		0.	1 3	The same of	N 16 35	, ,- ,- , , , , , , , ,		100	0.	
Schedule J - Advertision	ng Incom		etruction		Briston Janes Base	Marin Service	Annual Comment		مراهد القالمة والمتاهد	T. M. S. L. S. T. Serve	-3	
Partili Income From					hetchilos	Racie						
Traiting income From	renouica	is nepui	teu oi	i a Cons	soliuateu	Dasis						
					" .		Т					
1. Name of periodical		2. Gross advertising income		3. Direct rtising costs	4. Adverti or (loss) (co col 3) If a ga cols 5 th	i 2 minus iin, comput			6. Reade		Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1)			 		34 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	* H.J.	75	_			FTTI CHANGE	
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(2)						NAME OF STREET	\$		 		The second of	
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Totals (carry to Part II, line (5))	•	0		_ 0							0.	

Partill: 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)

	_		•	•		·				
Name of periodical			2. Gross advertising income			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		>	0.		0.	FARAGE REPORT	可经生物型的 型	THE WARRY	0	
			Enter here and on page 1, Part I, line 11, col (A)	page line 1	ere and on 1, Part I, 1, col (B)				Enter here and on page 1, Part II, line 27	
Totals, Part II (lines 1-5	5)	<u>▶</u>	0.		0.			Prince of the	0	
Schedule K - Co	ompensa	ation	of Officers, I	Directo	ors, and	Trustees (see ii	nstructions)			
	1 No.					7 Title	3. Percer time devot	and A. Compe	ensation attributable	

Form 990-T (2018)