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Section   Part	Form	990-T*	( E	xempt Organ	ization Bus	ine	ss Incom	e Tax	k Return	) [	OMB N	lo 1545-0687
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Name of organization is \$51(c)\$.   Street	•		For cal							<u>8</u>		UII
B Exercity under section    Solido   Point			<b>&gt;</b>								Open to P 501(c)(3) C	ublic Inspection for organizations Only
With the properties of the p	A [			Name of organization (	Check box if name cl	nanged	and see instruction	ıs.)		(Empl	loyees' tru:	
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ST. AUGUSTINE, FL 32086   621400   621500    Strong exemption interfers: Senter transmission   Sentence   Sen			Туре	400 HEALTH PA	ARK BLVD.		·			] ```		•
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## Describe the organization's primary unrelated business activity.    During the tax year, was the corporation as subsidiary and an affiliated group or a parent-subsidiary controlled group?	C Boo	ok value of all assets				<u> </u>						
During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?   Yes   X   No									401(a)	trust		Other trust
Tree books are in care of ▶ MURRAY MARSH, JR. Telephone number ▶ (904) 825-4400				···								<del>7</del>
The books are in care of   MURRAY MARSH, JR.   Telephone number   (9.04) 8.25 - 44.00					- · · · · · · · · · · · · · · · · · · ·	t-subsi	diary controlled gro	onb.	▶ [	Ye	s A	√ No
Part I   Unrelated Trade or Business Income   (a) Income   (b) Expenses   (c) Net								elenhone	number 🕨 (	904	) 82	5-4400
1 a Gross receipts or sales 4,372,402. b Less returns and allowances 2 Cost of goods soil (Schedule A, Ine 7) 3 Gross profits. Subtract line 2 from line to 3 4,372,402. 4 3,372,402. 4 3,372,402. 4 3,372,402. 4 3,372,402. 4 3,372,402. 4 3,372,402. 4 3,372,402. 5 Capital gain net income (attach Schedule D) 4 Net gain (loss) (Form 4797) Part II, line 17) (attach Form 4797) 5 Capital gain net income (attach Schedule D) 5 Net gain (loss) (Form 4797) Part II, line 17) (attach Form 4797) 5 Capital loss deduction for trusts 5 Income (loss) (Form 4797) Part II, line 17) (attach Form 4797) 5 Capital loss deduction for trusts 5 Income (loss) (Form 4797) Part II, line 17) (attach Form 4797) 6 Capital loss deduction for trusts 7 Income (loss) (Form 4797) Part II, line 17) (attach Form 4797) 7 Income (loss) (Form 4797) Part II, line 17) (attach Form 4797) 8 Income (loss) (Form 4797) Part II, line 17) (attach Form 4797) 9 Investment income of a section 501(c)(77) (9), or (17) organization (Schedule G) 9 Depointed exempl activity income (Schedule I) 10 Depoint income (Schedule I) 11 Totals. Common (Schedule II) 12 Totals. Common (Schedule II) 13 Totals. Common (Schedule II) 14 Compensation of officers, directors, and trustees (Schedule K) 15 Salares and wages 16 Repairs and maintenance 17 RECEIVED 18 AUG 2 0 2019 18 Interest (attach schedule) 19 Tayes and maintenance 10 Capital III Deductions (See instructions for limitation rules) 10 Depreciation (attach Form 4582) 11 Less depreciation claimed on Schedule A and elsewhere on return 12 Depletion 13 Aug 2 0 2019 14 4 2 0 94. 15 Salares and wages 16 Repairs and maintenance 17 Combinations (Compensation plans 18 Total Compensation claimed on Schedule A and elsewhere on return 18 Depletion 19 Capital III Deductions (Attach Schedule II) 19 Capital Depreciation (attach Form 4582) 10 Depreciation (attach Form 4582) 11 Capital Depreciation (attach Form 4582) 12 Excess exempl expenses (Schedule II) 13 September (Gross and III) (Attach Adam 1) 14 Compensation of officers, directors, and								Ciopriorio			/ 0 =	
b Less returns and allowances 2 Cost of goods sold (Schedule A, Ine 7) 3 Gross profit. Subtract line 2 from line to 4 (4,372,402	1a	Gross receipts or sale	s .	4,372,402.			······································	-   -	*, ,			
Gross profit. Subtract line 2 from line 10  Gross profit. Subtract line 2 from line 10  Gross profit. Subtract line 2 from line 10  At an (loss) (come draft) APT III, line 17) (attach Form 4797)  Find Income (loss) from partnerships and S corporations (attach statement)  From Income (loss) from partnerships and S corporations (attach statement)  From Income (loss) from partnerships and S corporations (attach statement)  From Income (Schedule 2)  Unrelated debt-Innanced moome (Schedule E)  Unrelated debt-Innanced moome (Schedule E)  Interest, annulies, royalties, and rents from controlled organizations (Sch. F)  Interest income (assection 501(c)7), (9), or (17) organizations (Sch. F)  Interest income (assection 501(c)7), (9), or (17) organizations (Sch. F)  Interest, annulies, royalties, and rents from controlled organizations (Sch. F)  Interest, annulies, royalties, and rents from controlled organizations (Sch. F)  Interest, annulies, royalties, and rents from controlled organizations (Sch. F)  Interest, annulies, royalties, and rents from controlled organizations (Sch. F)  Interest, annulies, royalties, and rents from controlled organizations (Sch. F)  Interest, annulies, royalties, and rents from controlled organizations (Sch. F)  Interest (attach schedule)  Interest			•		c Balance	10	4,372,40	2.	,		, <b>,</b> ,	. (
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Net gam (loss) (Form 4797, Part II, Inne 17) (attach Form 4797)   4b	320	Gross profit. Subtract	line 2 fr	om line 1c		3	4,372,40	)2.	· ·		4,3	72,402.
Capital loss deduction for trusts  This come (loss) from partnerships and S corporations (attach statement)  Rent income (Schedule C)  Rent income (Schedule C)  Unrelated debt-financed income (Schedule E)  Part linerest, annuties, royalties, and reins from controlled organizations (Sch. F)  Interest income of a section 501c(17, 19), or (17) organization (Schedule G)  Exploited exempt activity income (Schedule I)  Control income (Schedule J)  Total. Combine lines 3 through 12  Total. Combine lines 3 through 12  Total. Combine lines 3 through 12  Compensation of officers, directors, and trustees (Schedule K)  Salaries and wages  Recept for contributions, deductions must be directly connected with the jurishatch usiness successed.  Reparts and maintenance  AUG 2 0 2019  Contributions (See instructions for limitation rules)  Part linerest (attach schedule)  Total deductions (attach Form 4562)  Less depreciation (atta						4a			1			
Income (loss) from partnerships and S corporations (attach statement)   S   Comment   Sent income (Schedule C)   Comment   Sent income (Schedule J)   Compensation of officers, directors, and trustees (Schedule K)   Salares and wages   Sent income (Schedule K)   Sent income (See instructions for limitations on deductions)   Compensation of officers, directors, and trustees (Schedule K)   Sent income (See instructions for limitations on deductions)   Compensation of officers, directors, and trustees (Schedule K)   Sent income (Schedule J)   Compensation of officers, directors, and trustees (Schedule K)   Sent income (Schedule J)   Compensation (Schedule J)   Contributions (See instructions for limitation rules)   Compensation (Schedule J)   Contributions (See instructions for limitation rules)   Compensation (Schedule J)   Contributions to deferred compensation plans   Contributions (Schedule J)   Contribution	_			• •	797)	4b	-2,93	37.				<u>-2,937.</u>
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INPS Investment income of a section 501(c)(7), (9), or (17) organization (Schedule 6)  10 Exploited exempt activity income (Schedule 1)  11	$\Box$			•								<del> </del>
Exploited exempt activity income (Schedule I)  Advertising income (Schedule J)  Other income (See instructions) attach schedule)  Total. Combine lines 3 through 12  Compensation of officers, directors, and trustees (Schedule K)  Salaries and wages  Repairs and maintenance  Repairs and maintenance  Charitable contributions (See instructions for limitation rules)  Depreciation (Littach Form 4562)  Depreciation claimed on Schedule A and elsewhere on return  Depreciation claimed on Schedule A and elsewhere on return  Depreciation claimed on Schedule A and elsewhere on return  Depreciation (attach Form 4562)  Excess readjer spenses (Schedule I)  Contributions to deferred compensation plans  Excess readjer spenses (Schedule I)  Excess readjer spenses (Schedule I)  Contributions to deferred compensation plans  Excess readjer spenses (Schedule I)  Excess readjer spenses (Schedule I)  Contributions (Statach schedule)  SEE STATEMENT 2  Total deductions, Add lines 14 through 28  Unrelated business taxable income before net operating loss deduction. Subtract line 31 from line 30  Unrelated business taxable income before specific deduction. Subtract line 31 from line 30  Unrelated business taxable income Subtract line 33 inform line 32. If line 33 is greater than line 32, enter the smaller of zero process.  A 3 1,146,431.  In 11  In 14	-	· · · · · ·			' '					-		
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Total. Combine lines 3 through 12    13   4,369,465.   4,369,465.   4,369,465.	<del>S</del>	,		•				<del>-   -</del>				
Compensation of officers, directors, and trustees (Schedule K)   Compensation of officers, directors, and trustees (Schedule K)   Salaries and wages   Salaries and maintenance   Sal				· ·			4,369,46	55.			4,3	69,465.
Compensation of officers, directors, and trustees (Schedule K)  Salaries and wages  Repairs and maintenance  Bad debts  Interest (attach schedule)  Taxes and licenses  Charitable contributions (See instructions for limitation rules)  Depreciation (attach Form 4562)  Less depreciation claimed on Schedule A and elsewhere on return  Depletion  Contributions to deferred compensation plans  Employee benefit programs  Excess exempt expenses (Schedule I)  Excess readership costs (Schedule J)  Other deductions (attach schedule)  Total deductions. Add lines 14 through 28  Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 30  Specific deduction (Generally \$\$1,000, but see line 33 instructions for exceptions)  Unrelated business taxable income Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zerosis.    AUG 2 0 2019   20					(See instructions fo	r lımıta						,
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Form 990-1		, INC.	·	59-067514	Page 2
		· · · · · · · · · · · · · · · · · · ·			
35	Organizations Taxable as Corporations. See II	·			
	Controlled group members (sections 1561 and	-			
а	Enter your share of the \$50,000, \$25,000, and \$				
	(1) \$ 50,000. (2) \$		70,431.		
b	Enter organization's share of: (1) Additional 5%		11,750.		
	(2) Additional 3% tax (not more than \$100,000	· ————			
C	Income tax on the amount on line 34	SEE S'	PATEMENT 3	3 <b>▶</b> 35c	278,073.
36	Trusts Taxable at Trust Rates. See instruction	s for tax computation. Income tax on the amo	ount on line 34 from		
	Tax rate schedule or Schedule D	(Form 1041)		▶ 36	
37	Proxy tax. See instructions			▶ 37	
38	Alternative minimum tax			_38	
39	Tax on Non-Compliant Facility Income. See in	structions		39	
40	Total. Add lines 37, 38 and 39 to line 35c or 36			44 4	278,073.
Part I	V Tax and Payments				
41a	Foreign tax credit (corporations attach Form 11	18: trusts attach Form 1116)	41a		
b	Other credits (see instructions)	,	41b		
C	General business credit. Attach Form 3800		41c	-	
d	Credit for prior year minimum tax (attach Form	8801 or 8827)	41d		
	Total credits. Add lines 41a through 41d	,	<del></del>	41/8	
42	Subtract line 41e from line 40			42	278,073.
43	Other taxes. Check if from: Form 4255	Form 8611 Form 8697 Form	m 8866 Other	(attach schedule) 43	
44	Total tax. Add lines 42 and 43			4021	278,073.
45 a		<sub>17</sub> 5	MY 45a	356	<u> </u>
	2017 estimated tax payments	"	45b	- 3304	
	Tax deposited with Form 8868		450	11,272.	
	•	ourse (see instructions)	450	11,2,2,	
	Foreign organizations: Tax paid or withheld at s Backup withholding (see instructions)	ource (see instructions)	45e		
		ourma (Attach Form 9041)	451	<del></del> ,	
	Credit for small employer health insurance pren	Form 2439	#51	·	
9	Other credits and payments:				
46		Other Total	► <u>45g</u>		11,628.
46	Total payments. Add lines 45a through 45g	of Farry 2000 in amarked 🔈		2) 4	10,929.
47	Estimated tax penalty (see instructions). Check			2 <del>4 H</del>	277,374.
48	Tax due. If line 46 is less than the total of lines			48	211,314.
49	Overpayment. If line 46 is larger than the total		) .	12 49	· · · · · · · · · · · · · · · · · · ·
Part \	Enter the amount of line 49 you want: Credited	in Activities and Other Informa		efunded 50	
					Van Na
51	At any time during the 2017 calendar year, did				Yes No
	over a financial account (bank, securities, or off		=	;	[
	FinCEN Form 114, Report of Foreign Bank and I	-mancial Accounts. If YES, enter the name of	the foreign country		X
50	here				—   <del>^</del>
52	During the tax year, did the organization receive		or transferor to, a to	oreign trust?	<del>    ↑</del> ,
50	If YES, see instructions for other forms the orga	•			
53	Enter the amount of tax-exempt interest receive	d or accrued during the tax year ▶ \$ ined this return, including accompanying schedules al	and statements, and to the	a best of my knowledge and b	nation it to brus
Sign	correct, and complete. Declaration of preparer (other	than taxpayer) is based on all information of which pr	nd statements, and to the eparer has any knowledg	ie 19	belief, it is due,
Here		10/10/10/100			S discuss this return with
1,0.0	Supplying of officer	Date CFO Title			r shown below (see
	Signature of officer		T = T		s)? X Yes No
	Print/Type preparer's name	Preparer's signature	Date	Check if PTI	N
Paid			00/10/10	self- employed	00706300
Prepa	rer AMY CIMINELLO	AMY CIMINELLO	08/12/19		00796388
Use C		ORAN, PLLC		Firm's EIN ► 3	8-1357951
		IGH ST, SUITE 100		Dh	040 2000
	Firm's address ► COLUMBUS	, OH 43215	· · · · · · · · · · · · · · · · · · ·	Phone no. 614-	
					Form 990-T (2017)

Schedule A - Cost of Goods	Sold. Enter	method of inven	tory v	aluation N/A		<del></del>			
1 Inventory at beginning of year	1		6	Inventory at end of year	r		6		
2 Purchases	2		7	Cost of goods sold. Su		ine 6			
3 Cost of labor	3		7	from line 5. Enter here	and in F	Part I,			
4a Additional section 263A costs			1	line 2		,	7		
(attach schedule)	4a		8	Do the rules of section	263A (\	with respect to		Yes	No
b Other costs (attach schedule)	4b		1	property produced or a	cquired	for resale) apply to			
5 Total Add lines 1 through 4b	5		1	the organization?	,	,			
Schedule C - Rent Income (	From Real	Property and	Per		ease	d With Real Prop	erty)		
(see instructions)				<u> </u>					
1. Description of property									
(1)		·	- ""						
(2)									
(3)		·							
(4)									
	2. Rent receive	ed or accrued				O(a) Dad and an advanta		ted with the recens in	
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%)	centage of than	of rent for p	personal	onal property (if the percentag property exceeds 50% or if ed on profit or income)	ge	3(a) Deductions directly columns 2(a) ar	nd 2(b) (i	attach schedule)	
(1)									
(2)									
(3)									
(4)									
Total	0.	Total			0.	1			
(c) Total income. Add totals of columns here 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)	<b>•</b>		0.
Schedule E - Unrelated Deb		Income (see	ınstru	ictions)					
				2. Gross income from		3. Deductions directly con to debt-finance			
1. Description of debt-fir	nanced property			or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)	
(1)			+				+	·	
(2)			†				+		
(3)			+			·· <del>-</del>	1		
(4)			+				+	<del></del>	
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis allocable to nced property h schedule)		6. Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		8. Allocable deduction column 6 x total of colum 3(a) and 3(b))	ns mns
(1)				%					
(2)			<b>†</b>	%					
(3)				%					
(4)				%					
	<u> </u>					nter here and on page 1, Part I, line 7, column (A)		Enter here and on page 1 Part I, line 7, column (B)	
Totals				•		0			0.
Total dividends-received deductions of	ncluded in columi	n 8			L	<u> </u>	-	<del></del>	0.
		<del>- i.</del>		<del> </del>				Form <b>990-T</b> (2	_

			Exempt (	Controlled Or	ganizatio	ons				
1. Name of controlled organizar	lebi	Employer httfication number		elated income instructions)		at of specified nents made	includ	t of column 4 ed in the contr ation's gross i	rolling	6. Deductions directl connected with incom in column 5
							$\vdash$		_	
			1 -				· <del> </del>			
							1			
			<del></del>				†			
exempt Controlled Organi	zations		<del>_</del>						<u>-</u>	
7. Taxable Income	8. Net unrelated initiated (see instruct		9. Total	of specified payn made	nents	10. Part of column the control gros	ımn 9 tha ling organ is income	ıızatıon's		ductions directly conne Income in column 10
			<u> </u>							
<u> </u>										
						Add colui Enter here and line 8,		1, Part I,	Enter h	d columns 6 and 11 are and on page 1, Par line 8, cotumn (B)
s					<b>•</b>			0.		
nedule G - Investme	ent Income of a	Section	n 501(c)(7	'), (9), or (	17) Org	anization		·		
(see inst	ructions)			1.				г.		<del>,</del>
1. Desc	cription of income			2. Amount of	income	3. Deductions directly connected (ettach schedule)		4. Set-	esides schedule)	5. Total deduct and set-asid (col 3 plus co
										ļ
										<u> </u>
	<u></u>									
								<u></u>		
				Enter here and o Part I, line 9, co		•				Enter here and on p Part I, line 9, colum
ls			<b></b>		0.					
nedule I - Exploited (see instr	•	ty Incom	ne, Other	Than Adv	ertisin	g Income				
Description of exploited activity	2. Gross unrelated business income from	directly with p	expenses y connected production prolated	4. Net incom from unrelated business (co minus colum	trade or lumn 2 n 3) If a	5. Gross inc from activity is not unrela	that ited	attribut	penses table to mn 5	7. Excess exemexpenses (column but not more the
	trade or business		ess income	gain, compute through		business inc	ome			column 4)
					†					
		1		<del> </del>					•	
		+ .		<del>                                     </del>						
	<del> </del>	1		<b>†</b>	t			·-		1
	Enter here and on page 1, Part I, line 10, col (A)	page	nere and on a 1, Part I, 0, col (B)		•		•	:		Enter here an on page 1, Part II, line 26
is 🕨	.  0		0.						•	
hedule J - Advertisi	ng Income (se	e instruction	ons)							
rt I Income From	Periodicals Re	eported o	on a Con	solidated	Basis					
1. Name of periodical	2 Gros advertisii income	ng a	3. Direct divertising costs	or (loss) (c		5. Circula o incom		6 Read		7. Excess readers costs (column 6 m column 5, but not n than column 4)
						L _				
***										•
		1.								
							-			

	\					
Part II	Income Fro	m Periodicals	Reported on	a Separate Basis	(For each periodical lis	ted in Part II, fill in
	columns 2 thro	ugh 7 on a line-by-l	ine 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	0.	0.	-	1		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 27
Totals, 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	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		<b>&gt;</b>	0.

Form 990-T (2017)

# Form 4626 Department of the Treasury

#### **Alternative Minimum Tax - Corporations**

Attach to the corporation's tax return.

► Go to www.irs.gov/Form4626 for instructions and the latest information.

OMB No 1545-0123

Nete: See the instructions for ind out if the corporation is a small corporation exempt from the alternative minimum tax (AMT) under section 55(s).  Taxable income or (loss) before net operating loss deduction  Adjustments and preferences:  Depreciation of post-1986 property  Depreciation of post-1986 property  Depreciation of certified pollution control facilities  Depreciation of certified pollution certif	140	IIII	FLAGLER HOSPITAL, INC.			59-0675143
trom the alternative minimum tax (AMT) under section SS(e):  1 Taxable moome or (loss) before net operating loss deduction 2 Adjustments and preferences: 3 Depresentation of post-1986 property 3 Amoritration of certified politudes control facilities 4 Amoritration of certified politudes control facilities 5 Amoritration of certified politudes control facilities 6 Amoritration of certified politudes control facilities 7 Adjustments and preferences 8 Depletion 7 Tax shelter farm activities (personal service corporations only) 9 Lip of the composition of the co						
2 Adjustments and preferences:  a Depreciation of post-1986 property  b Amortzation of certhela poliubno control facilities  c Amortzation of certhela poliubno control facilities  c Amortzation of certhela poliubno control facilities  d Ecentrol			· · · · · · · · · · · · · · · · · · ·			
2 Adjustments and preferences:  a Depreciation of post-1986 property  b Amortzation of certhela poliubno control facilities  c Amortzation of certhela poliubno control facilities  c Amortzation of certhela poliubno control facilities  d Ecentrol	1		Taxable income or (loss) before net operating loss deduction		<del></del> -	1.145.431.
a Deprezention of const-1686 property b Amortization of certified pollution control facilities c Adjusted gain or loss c 42 c 24 c Adjusted gain are capital construction funds b Capitar and an amortization (Bive Cross, Blue Sheld, and similar type organizations only) c 1 as shelter farm activates (personal service corporations only) c 20 c 1 Passive activates (closely hald corporations and personal service corporations only) c 20 c 20 c 21 c 22 c 22 c 23 c 24 c 24 c 25 c 26 c 26 c 27 c 29 c 20			. ,		···	
b Amortization of certride pollution control facilities c Amortization of circulation expenditures (personal holding companies only) d Amortization of circulation expenditures (personal holding companies only) e Adjusted gain or loss 1 Long-term contracts 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	-		•		28	
c Amortization of mining exploration and development costs d Amortization of circulation expenditures (personal holding companies only) e Adjusted gain or loss 1 Long-term contracts g a		h				
d Anortization of criculation expenditures (personal holding companies only) e Adjusted gain or loss 22 28 c Adjusted gain or loss 1 Long-term contracts 22 29 derhand marine capital construction funds 5 Section 8330(b) deduction (Glise Cross, Blue Sheld, and similar type organizations only) 1 Tax sheller farm activities (personal service corporations only) 2 Passive activities (polisely held corporations and personal service corporations only) 2 Passive activities (polisely held corporations and personal service corporations only) 2 Passive activities (polisely held corporations and personal service corporations only) 2 Passive activities (polisely held corporations and personal service corporations only) 2 Passive activities (polisely held corporations and personal service corporations only) 3 Passive activities (polisely held corporations and personal service corporations only) 3 Passive activities (polisely held corporations and personal service corporations only) 3 Passive activities (polisely held corporations and personal service corporations only) 3 Passive activities (polisely held corporations and personal service corporations only) 3 Passive activities (polisely held corporations and personal service corporations only) 4 Passive activities (polisely held corporations and personal service corporations only) 5 Passive activities (polisely held corporations and personal service corporations only) 6 Passive adjustments and preferences 7 Passive adjustment and preferences 8 Passive and Pa		c	,			
e Adjusted gain or loss f Long-term contracts g Merchant marine capital construction funds h Section 833(b) deduction (Blue Cross, Blue Sheld, and similar type organizations only) i Tax sheller farm activities (personal service corporations only) j Passive activities (closely held corporations and personal service corporations only) k Loss limitations l Depletion m Tax-exempt interest income from specified private activity bonds n Inlangible Griffing costs o Other adjustments and preferences of the adjustments and preferences of the radjustment alternative minimum taxable income (AMTI). Combine lines 1 through 20 Adjusted current earnings (ACB) adjustment: a ACE from line 10 of the ACE worksheet in the instructions b Subtract line 3 from line 42. If line 3 exceeds line 48, enter the difference as a negative amount. See instructions of Enter the excess, rid any, of the corporation's total increases in AMTI from prior year ACE adjustments over its total reductions in AMTI from prior year ACE adjustments over its total reductions in AMTI from prior year ACE adjustments.  If line 4b is positive) e ACE adjustment.  If line 4b is positive)  If line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount.  Combine lines 3 and 4e. If zero or less, stop here; the corporation does not owe any AMT Alternative tax net operating loss deduction. See instructions  Exemption phase-out (if line 7 is \$310,000 or more, skip lines 8 and 8b and enter -0- on line 8c):  Exemption phase-out (if line 7 is \$310,000 or more, skip lines 8 and 8b and enter -0- on line 8c):  Subtract line 8b from \$40,000. It completing this line for a member of a controlled group, see instructions.  Exemption phase-out (if line 7 is \$310,000 or more, skip lines 8 and 8b and enter -0- on line 8c):  Subtract line 8b from \$40,000. It completing this line for a member of a controlled group, see instructions. If zero or less, enter -0-  Multiply line 8a by 25% (0.25)  Exemption, Subtract line 8b from \$40,000. It completing this line fo		ď	• .			
f Long-term contracts g Merchant marine capital construction funds h Section 330(b) deduction (Blue Cross, Blue Shield, and similar type organizations only) i Tax shelter farm activities (closely held corporations and personal service corporations only) k Loss imitations l Depletion Tax-exempt interest income from specified private activity bonds n Intangible drilling costs Other adjustments and preferences Pre-adjustment alternative minimum taxable income (AMTI), Combine lines 1 through 20 Adjusted current earnings (ACE) adjustment: a ACE from line 10 of the ACE worksheet in the instructions Subtract line 3 from line 4a. If line 3 exceeds lane 4a, enter the difference as a negative amount. See instructions Office the excess, if any, of the corporation's total increases in AMTI from prior year ACE adjustments over its total reductions in AMTI from prior year ACE adjustments over its total reductions in AMTI from prior year ACE adjustments over its total reductions in AMTI from prior year ACE adjustments. See instructions. Note: You must enter an amount on line 4d (even if line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount  If line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount  If line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount  If line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount  Alternative minimum taxable incomes. Subtract line 6 from line 5. If the corporation held a residual interest in a REMIC, see instructions  Exemption phase-out (if line 7 is \$310,000 or more, skip lines 8a and 8b and enter -0- on line 8c):  Subtract \$150,000 from line 7. It zero or less, enter -0-  Multiply line 8 by 25% (O.25)  Alternative minimum tax Subtract line 1 from line 10  STMT 4 BLENDED RATE  13 278,073 .  Harrantive minimum tax. Subtract line 11 from line 10  STMT 4 BLENDED RATE  13 278,073 .  14 Alternative minimum tax. Subtract line 11 from line 10  STMT 4 BLENDED RATE  13		e				
g Merchant marine capital construction (Indes 6 h Section 833(b) deduction (Blue Cross, Blue Sheld, and similar type organizations only) 2 i 2 h 2 h 2 i 2 h 2 h 2 i 2 h 2 h 2 i 2 h 2 h		f	· · · ·			
h Section 83(b) deduction (Blue Cross, Blue Shelid, and similar type organizations only)  i Tax shelter farm activities (personal service corporations only)  k Loss limitations  i Depletion  Tax-exempt interest income from specified private activity bonds  in Intangible drilling costs  Other adjustments and preferences  2 Pre-adjustments and preferences  Pre-adjustment alternative minimum taxable income (AMTI). Combine lines 1 through 20  Adjusted current earnings (ACE) adjustment:  ACE from line 10 of the ACE wishsheet in the instructions  b Subtract line 3 from line 4a. If line 3 exceeds line 4a, enter the difference as a negative amount. See instructions  Multiply line 4 by 75% (0.75). Enter the result as a positive amount on line 4d (even if line 4b is zero or more, enter the smaller of line 4c or line 4d as a negative amount  I line 4b is zero or more, enter the smaller of line 4c or line 4d as a negative amount  I line 4b is zero or more, enter the smaller of line 4c or line 4d or		a	•			
i Tax shelter farm activities (personal service corporations only) j Passive activities (loisely held corporations and personal service corporations only) k Loss limitations l Depletion m Tax-exempt interest income from specified private activity bonds n Intangible drilling costs o Other adjustments and preferences Pre-adjustment alternative minimum taxable income (AMTI). Combine lines 1 through 20 Adjusted current earnings (ACE) adjustment: a ACE from line 10 of the ACE workshelet in the instructions Substituting 1 from line 4.1 life in 3 exceeds line 4a, enter the difference as a negative amount. See instructions Left from line 4.1 life in 3 exceeds line 4a, enter the difference as a negative amount. See instructions Left from line 4.1 life as 9 exceeds line 4a, enter the difference as a negative amount. See instructions Left from line 4.1 life as 9 exceeds line 4a, enter the difference as a negative amount. See instructions total increases in AMTI from prior year ACE adjustments. See instructions total increases in AMTI from prior year ACE adjustments. See instructions. Note; You must enter an amount on line 4d (even if line 4 bis postive)  e ACE adjustment.  • If line 4b is sess than zero, enter the smaller of line 4c or line 4d as a negative amount Alternative minimum taxable income. Subtract line 6 from line 5, lif the corporation held a residual interest in a REMIC, see instructions Alternative minimum taxable income. Subtract line 6 from line 5, lif the corporation held a residual interest in a REMIC, see instructions lif zero or less, enter -0- Multiply line 8 by 25% (0.25)  Exemption, Subtract line 8 briom \$40,000. If completing this line for a member of a controlled group, see instructions if zero or less, enter -0- Multiply line 8 by 20% (0.20)  Multiply line 9 by 20% (0.20)  Multiply line 9 by 20% (0.20)  Multiply line 8 and 9 experiment as well as a member of a controlled group, see instructions if zero or less, enter -0- Multiply line 9 by 20% (0.20)  Alternative minimum tax Subtract line 11 from		h	·			
Loss imitations   Depletion		i			2i	
I Depletion  m Tax-exempt interest income from specified private activity bonds n Intangible drilling costs 0 Other adjustments and preferences 2 n 2 n 2 n 2 n 2 n 2 n 2 n 2 n 3 Pre-adjustment alternative minimum taxable income (AMTI). Combine lines 1 through 20 4 n 4 pisted current earnings (ACE) adjustment: a ACE from line 10 of the ACE worksheet in the instructions b Subtract line 3 from line 4a. If line 3 exceeds line 4a, enter the difference as a negative amount. See instructions c Multiply line 4 bb y 75% (0.75). Enter the result as a positive amount of the rith excess, if any, of the corporation's total increases in AMTI from prior year ACE adjustments over its total reductions in AMTI from prior year ACE adjustments. See instructions. Note: You must enter an amount on line 4d (even if line 4b is less than zero, enter the amount from line 4c if line 4b is zero or more, enter the amount from line 4c if line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount from line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount from line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount from line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount from line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount from line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount from line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount from line 4b is less than zero or less, stop here; the corporation held a residual interest in a REMIC, see instructions  8 Exemption phase-out (if line? is \$310,000 or more, skip lines 8 and 8b and enter -0- on line 8c); a Subtract \$150,000 from line 7. If zero or less, enter -0- b Multiply line 8 by 20% (0,025) c Exemption, Subtract line 8 b from \$40,000. If completing this line for a member of a controlled group, see instructions. If zero or less, enter -0- Multiply line		j	Passive activities (closely held corporations and personal service corporations only)		2j	
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Interest in a REMIC, see instructions  Exemption phase-out (if line 7 is \$310,000 or more, skip lines 8a and 8b and enter -0- on line 8c):  a Subtract \$150,000 from line 7. If completing this line for a member of a controlled group, see instructions If zero or less, enter -0-  b Multiply line 8a by 25% (0.25)  c Exemption. Subtract line 8b from \$40,000. If completing this line for a member of a controlled group, see instructions. If zero or less, enter -0-  9 Subtract line 8c from line 7. If zero or less, enter -0-  Multiply line 9 by 20% (0.20)  10 235, 400.  11 Alternative minimum tax foreign tax credit (AMTFTC). See instructions  12 Tentative minimum tax. Subtract line 11 from line 10  STMT 4 BLENDED RATE  13 278, 073.  14 Alternative minimum tax. Subtract line 13 from line 12. If zero or less, enter -0- Enter here and on Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return  14 0.				residual		<del></del>
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Subtract line 8c from line 7. If zero or less, enter -0-  Multiply line 9 by 20% (0.20)  Alternative minimum tax foreign tax credit (AMTFTC). See instructions  Tentative minimum tax. Subtract line 11 from line 10  STMT 4 BLENDED RATE  Regular tax liability before applying all credits except the foreign tax credit  Alternative minimum tax. Subtract line 13 from line 12. If zero or less, enter -0- Enter here and on Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return  9 1,177,002.  10 235,400.  11 259,334.  12 59,334.  13 278,073.		C	Exemption. Subtract line 8b from \$40,000. If completing this line for a member of a controll	ed	·	
Multiply line 9 by 20% (0.20)  Alternative minimum tax foreign tax credit (AMTFTC). See instructions  Tentative minimum tax. Subtract line 11 from line 10  STMT 4 BLENDED RATE  Regular tax liability before applying all credits except the foreign tax credit  Alternative minimum tax. Subtract line 13 from line 12. If zero or less, enter -0- Enter here and on Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return  10  235,400.  11  12  59,334.  13  278,073.			group, see instructions. If zero or less, enter -0-		8c	
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Regular tax liability before applying all credits except the foreign tax credit  Alternative minimum tax. Subtract line 13 from line 12. If zero or less, enter -0- Enter here and on Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return  13 278,073.	11		· · · · · · · · · · · · · · · · · · ·			F0 004
Alternative minimum tax. Subtract line 13 from line 12. If zero or less, enter -0- Enter here and on Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return 14 0.				BLENDED RATE		
Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return					_ 13	2/8,0/3.
Total Tize, concern of the appropriate line of the dependent international and telephone	14					^
		1.6	Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return For Paperwork Reduction Act Notice, see separate instructions		14	Form <b>4626</b> (2017)

**Adjusted Current Earnings (ACE) Worksheet** ► See ACE Worksheet Instructions 1,145,431. 1 Pre-adjustment AMTI. Enter the amount from line 3 of Form 4626 2 ACE depreciation adjustment; 42,094. a AMT depreciation 2a **b** ACE depreciation: (1) Post-1993 property 2b(1) 2b(2) (2) Post-1989, pre-1994 property (3) Pre-1990 MACRS property 2b(3) (4) Pre-1990 original ACRS property 2b(4) (5) Property described in sections 168(f)(1) through (4) 2b(5) (6) Other property 2b(6) (7) Total ACE depreciation. Add lines 2b(1) through 2b(6) 2b(7) 42,094. c ACE depreciation adjustment. Subtract line 2b(7) from line 2a 2¢ 3 Inclusion in ACE of items included in earnings and profits (E&P): a Tax-exempt interest income 3a b Death benefits from life insurance contracts 3b c All other distributions from life insurance contracts (including surrenders) 3с d Inside buildup of undistributed income in life insurance contracts 3d e Other items (see Regulations sections 1.56(g)-1(c)(6)(iii) through (ix) for a partial list) 3f f Total increase to ACE from inclusion in ACE of items included in E&P. Add lines 3a through 3e Disallowance of items not deductible from E&P: a Certain dividends received b Dividends paid on certain preferred stock of public utilities that are deductible under section 247 (as 4b affected by P L 113-295, Div A, section 221(a)(41)(A), Dec 19, 2014, 128 Stat 4043) 4c c Dividends paid to an ESOP that are deductible under section 404(k) d Nonpatronage dividends that are paid and deductible under section 1382(c) 4d e Other items (see Regulations sections 1.56(g)-1(d)(3)(i) and (ii) for a f Total increase to ACE because of disallowance of items not deductible from E&P. Add lines 4a through 4e 4f 5 Other adjustments based on rules for figuring E&P: a Intangible drilling costs **b** Circulation expenditures 5b 5c c Organizational expenditures d LIFO inventory adjustments 5d e Installment sales 5e 5f f Total other E&P adjustments. Combine lines 5a through 5e 6 Disallowance of loss on exchange of debt pools 7 Acquisition expenses of life insurance companies for qualified foreign contracts 7 8 Depletion Basis adjustments in determining gain or loss from sale or exchange of pre-1994 property 9 Adjusted current earnings. Combine lines 1, 2c, 3f, 4f, and 5f through 9. Enter the result here and on line 4a of 1,187,525. Form 4626

FORM 990-T	DECCETEMENT OF	T ODCANTTANTON'S	PRIMARY UNRELATED	STATEMENT 1
FORM 330-1	DESCRIPTION OF	OVOWNITHUM P	LITHWILL ONLING	DIMIDMI I
		BUSINESS ACTIVIT	n <b>v</b>	
		DODINGGO VCIIATI	L <u>L</u>	

#### OUTPATIENT CARE CENTER AND LABORATORY REVENUE

TO FORM 990-T, PAGE 1

FORM 990-T	OTHER DEDUCTIONS	STATEMENT 2
DESCRIPTION		AMOUNT
SUPPLIES PURCHASED SERVICES OTHER OVERHEAD ALLOCATION INSURANCE UTILITIES EQUIPMENT		1,289,862. 484,526. 66,716. 42,607. 15,106. 41,869. 317,762.
TOTAL TO FORM 990-T, PAGE 1, L	INE 28	2,258,448.

FORM	990-T LINE 35C TAX COMPUTATION	······	STATEMENT 3
1.	TAXABLE INCOME	1,145,431	
2.	LESSER OF LINE 1 OR FIRST BRACKET AMOUNT	50,000	
3.	LINE 1 LESS LINE 2	1,095,431	
4.	LESSER OF LINE 3 OR SECOND BRACKET AMOUNT	25,000	
5.	LINE 3 LESS LINE 4	1,070,431	
6.	INCOME SUBJECT TO 34% TAX RATE	1,070,431	
7.	INCOME SUBJECT TO 35% TAX RATE	0	
8.	15 PERCENT OF LINE 2	7,500	
9.	25 PERCENT OF LINE 4	6,250	
10.	34 PERCENT OF LINE 6	363,947	
11.	35 PERCENT OF LINE 7	0	
12.	ADDITIONAL 5% SURTAX	11,750	
13.	ADDITIONAL 3% SURTAX	0	
14.	TOTAL INCOME TAX		389,447
		_	
15.	TAX AT 21% RATE EFFECTIVE AFTER 12/31/2017	240,541	
	DAYS	<del></del>	
16. 17.	TAX PRORATED FOR NUMBER OF DAYS IN 2017 92 TAX PRORATED FOR NUMBER OF DAYS IN 2018 273	98,162 179,911	
18.	TOTAL TAX PRORATED 365		278,073
10.	TOTAL TAX PROPATED 505	=	

## FORM 990-T UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

				Identifying N	וטטווונ
FLAGLER HO	SPITAL, INC.			59-06	75143
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
<ul> <li>становы г с СДТ — веленишим.</li> </ul>	Mark 21 minimilators & minimilators	-0-	ւթուսանը։ Լ <sub>ան</sub> գուսակություն այդ ասգու	Q economic to a summy common	emicrocrifts Anno Comm
01/15/18	69,518.	69,518.			
01/15/18	-356.	69,162.	59	.000109589	447
03/15/18	69,519.	138,681.	16	.000109589	243
03/31/18	0.	138,681.	76	.000136986	1,444
06/15/18	69,518.	208,199.	92	.000136986	2,624
09/15/18	69,518.	277,717.	107	.000136986	4,071
12/31/18	0.	277,717.	46	.000164384	2,100
			•		
				ı	
					<del></del>
······································					
					<del></del>

<sup>\*</sup> Date of estimated tax payment, withholding credit date or installment due date.

712511 04-01-17

### 4562 Form

Internal Revenue Service Name(s) shown on return **Depreciation and Amortization** 

(Including Information on Listed Property) 990-T

Business or activity to which this form relates

► Attach to your tax return.

► Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No 1545-0172

2017

Attachment

59-0675143 FLAGLER HOSPITAL. FORM 990-T PAGE 1 Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I 510,000. 1 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 3 2,030,000. 3 Threshold cost of section 179 property before reduction in limitation 4 4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 Listed property Enter the amount from line 29 7 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 9 Tentative deduction Enter the smaller of line 5 or line 8 10 10 Carryover of disallowed deduction from line 13 of your 2016 Form 4562 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 Section 179 expense deduction Add lines 9 and 10, but don't enter more than line 11 12 ▶ 13 13 Carryover of disallowed deduction to 2018 Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property Instead, use Part V Special Depreciation Allowance and Other Depreciation (Don't include listed property ) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year 14 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Don't include listed property.) (See instructions.) Section A 42,094. 17 MACRS deductions for assets placed in service in tax years beginning before 2017 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section 8 - Assets Placed in Service During 2017 Tax Year Using the General Depreciation System (c) Basis for depreciation (business/investment use only - see instructions) (b) Month and (d) Recovery (a) Classification of property (e) Convention (a) Depreciation deduction 19a 3-year property 5-year property b 7-year property C 10-year property d 15-year property е 20-year property f S/L 25-year property 25 yrs g MM S/I 27 5 yrs h Residential rental property S/L MM 27 5 yrs MM S/L 39 vrs Nonresidential real property t Section C - Assets Placed in Service During 2017 Tax Year Using the Alternative Depreciation System 20 a Class life S/L 12 yrs. S/L b 12-year 40 yrs ММ S/I 40-year Part IV Summary (See instructions) 21 21 Listed property Enter amount from line 28 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 42,094. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

Form 4562 (2017)

For	m 45 <u>62 (2017)</u>	<u>F</u> LA	GLER HC	SPIT	AL,	INC.						<u> 59-</u>	0675	143	Page 2
Pi	art V Listed Proper			ertain oth	ner vehic	les, ce	rtain aircr	aft, ce	rtaın comp	uters, a	nd prope	erty use	d for ent	ertainme	nt,
	recreation, or a	,		isina the	standar	d milea	ge rate o	r dedu	cting leasi	expen	se como	lete or	ılv 24a. 2	24b. colu	mns
	(a) through (c)	of Section A	all of Section	B, and S	Section (	of app	licable	ucuu	oung ious	OAPOIN					
	Section A -	Depreciation	on and Other	Informa	tion (Car	ution:	See the r	nstruc	tions for li	nits for	passeng	er autor	nobiles)		
<u>24a</u>	Do you have evidence to s	support the bu	siness/investme	ent use cla	aimed?	<u></u> `	Yes	No	24b If "Y	es," is t	he evider	nce writ	ten?	Yes	No.
	(a) (b) (c) Type of property (let value first) placed in investm			nt Cost of			(e)		(f)		(g)		(h)		(1)
			Business/ investmen			Basis for depred (business/invesure only)			tment   Necuvery		Method/ Convention		Depreciation deduction		cted on 179
	(list vehicles first) placed iii iiivestifieli service use percenta			ge <sup>O1</sup>	ther basis			period		Convention		deduction			ost
25	Special depreciation allo	owance for q	ualified listed	property	placed i	n servi	ce during	the ta	x year and	l					
	used more than 50% in	a qualified bi	usiness use								25	<u> </u>			
<u>26</u>	Property used more tha	n 50% in a q	ualified busine	ess use						•					
				%									_		
				%											
		L		%								<u> </u>			
<u>27</u>	Property used 50% or le	ss in a qualif	ied business	use											
				%					S/L -						
				%						S/L -					
			<u> </u>	%					:	S/L ·					
28	Add amounts in column	(h), lines 25	through 27 E	nter here	e and on	line 21	, page 1				28	l			
<u>29</u>	Add amounts in column	(i), line 26 E	nter here and	on line	7, page 1								29		
			:	Section I	B - Infor	matior	on Use	of Veh	icles						
Cor	mplete this section for ve	hicles used l	by a sole prop	rietor, pa	artner, or	other	"more tha	ın 5%	owner," o	related	person	lf you p	rovided v	/ehicles	
to y	our employees, first ans	wer the ques	tions in Secti	on C to s	see if you	meet	an except	tion to	completin	g this s	ection fo	r those	vehicles		
								т-							
				(	a)		(b)		(c)		d)	(e)		<b>(f)</b>	
30	Total business/investment miles driven during the		Vehicle		Vehicle		Vehicle		Vehicle		Vehicle		Vehicle		
	year (don't include commuting miles)														
31	Total commuting miles driven during the year									ļ					
32	32 Total other personal (noncommuting) miles														
	driven												<del></del>		
33	3 Total miles driven during the year					}		1							
	Add lines 30 through 32				T		1 .		<del></del>		ī				
34	34 Was the vehicle available for personal use			Yes	No	Yes	No_	Yes	No No	Yes	No	Yes	No	Yes	No
during off-duty hours?								<del> </del>			<del> </del>	ļ	<del> </del>		
35 Was the vehicle used primarily by a more				1	1								1		
than 5% owner or related person?				-	-	<u> </u>	<del></del>				+		<del> </del>		
36 Is another vehicle available for personal				1	-										
_	use?			<del></del>	<u>.                                    </u>		<del></del>			<u> </u>	<u></u>	· -	1		
<b>A</b>			- Questions	•	•									th (	=0/
	swer these questions to o	determine ir y	ou meet an e	xception	i to comp	neung	Section E	o ior ve	anicies use	ed by en	ipioyees	wiio a	rentinc	ne man	<b>37</b> 0
	ners or related persons		omant that a			ol ugo	of volvole	اممی م		mutuna	bullour			Yes	No
31	Do you maintain a writte employees?	an policy stat	oment triat pi	OF HUILD &	person	ai ubb	OI VEITICLE	.s, 11101	aanig coll	uurig	uy your			163	1 1
20	•	an naliau atai	tomont that n	obibite r	orconal	uco of	vobiolos	04000	t commute	na hvv	OUL				<del> </del>
30	Do you maintain a writte	•	•					-			oui				
30	employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners  Do you treat all use of vehicles by employees as personal use?														†
	O Do you provide more than five vehicles to your employees, obtain information from your employees about													†	
40	the use of the vehicles.		•			111011111		you. c	mpioyees	about					
41	•					nonstr	ation lise	2							
41 Do you meet the requirements concerning qualified automobile demonstration use?  Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles															
P	art VI Amortization	0.,00,00,	0,014110 1	30, 0011	Соотра			410 00	770100 101						
(a)				(b)	T	(c)	(C) Amortizable amount		(d) Code section		(e) Amortization period or percentage				
Description of costs Dat			e amortization begins		Amortiz	A fo							(f) mortization or this year		
42	Amortization of costs th	at begins du	ring your 201		ar				_			<u> </u>			
								I							
					1										
43	Amortization of costs th	at began be	fore your 201	7 tax vea	ır							43			
	Total Add amounts in a	_	•			report						44			